

Second Meeting  
Geneva, 6-10 December 2004

Meeting of Experts  
Geneva, 19-30 July 2004

## **REPORT OF THE MEETING OF EXPERTS**

### Introduction

1. The Final Document of the Fifth Review Conference of the States Parties of the Convention on the Prohibition of the Development, Production and Stockpiling of Bacteriological (Biological) and Toxin Weapons and on their Destruction (BWC/CONF.V/17), in the section dealing with Decisions and Recommendations, contained the following decision:

“The Conference decided, by consensus, as follows:

- (a) To hold three annual meetings of the States Parties of one week duration each year commencing in 2003 until the Sixth Review Conference, to be held not later than the end of 2006, to discuss, and promote common understanding and effective action on:
  - i. the adoption of necessary national measures to implement the prohibitions set forth in the Convention, including the enactment of penal legislation;
  - ii. national mechanisms to establish and maintain the security and oversight of pathogenic microorganisms and toxins;
  - iii. enhancing international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease;
  - iv. strengthening and broadening national and international institutional efforts and existing mechanisms for the surveillance, detection, diagnosis and combating of infectious diseases affecting humans, animals, and plants;
  - v. the content, promulgation, and adoption of codes of conduct for scientists.

- (b) All meetings, both of experts and of States Parties, will reach any conclusions or results by consensus.
- (c) Each meeting of the States Parties will be prepared by a two week meeting of experts. The topics for consideration at each annual meeting of States Parties will be as follows: items i and ii will be considered in 2003; items iii and iv in 2004; item v in 2005. The first meeting will be chaired by a representative of the Eastern Group, the second by a representative of the Group of Non-Aligned and Other States, and the third by a representative of the Western Group.
- (d) The meetings of experts will prepare factual reports describing their work.
- (e) The Sixth Review Conference will consider the work of these meetings and decide on any further action.”

2. In accordance with the decision of the Fifth Review Conference, the 2003 Meeting of States Parties was convened in Geneva from 10 to 14 November 2003, and was preceded by a Meeting of Experts held in Geneva from 18 to 29 August 2003. The 2003 Meeting of States Parties approved the nomination by the Group of Non-aligned and Other States of Mr. Peter Goosen of South Africa as Chairman of the Meeting of Experts and Meeting of States Parties in 2004. The 2003 Meeting of States Parties decided that the 2004 Meeting of Experts would be held in Geneva from 19 to 30 July 2004, and that the 2004 Meeting of States Parties would be held in Geneva from 6 to 10 December 2004.<sup>1</sup>

3. By resolution 58/72, adopted without a vote on 8 December 2003, the General Assembly, *inter alia*, requested the United Nations Secretary-General to continue to render the necessary assistance to the depositary Governments of the Convention and to provide such services as may be required for the implementation of the decisions and recommendations of the Review Conferences, including all necessary assistance to the annual meetings of the States Parties and the meetings of experts.

#### Organization of the Meeting of Experts

4. In accordance with the decisions of the Fifth Review Conference and the 2003 Meeting of States Parties, the 2004 Meeting of Experts was convened at the Palais des Nations in Geneva from 19 to 30 July 2004, under the Chairmanship of Mr. Peter Goosen of South Africa.

5. At its first meeting, the Meeting of Experts adopted its agenda (BWC/MSP/2004/MX/1) and programme of work (BWC/MSP/2004/MX/2/Rev.1) as proposed by the Chairman. The Chairman also drew the attention of delegations to three background papers prepared by the Secretariat (BWC/MSP/2004/MX/INF.1, /INF.2 and /INF.3).

6. At the same meeting, following a suggestion by the Chairman, the Meeting of Experts adopted as its rules of procedure, *mutatis mutandis*, the rules of procedure of the Fifth Review Conference, as contained in Annex II of the Final Document of the Review Conference (BWC/CONF.V/17).

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<sup>1</sup> See BWC/MSP/2003/4 (Vol I)

7. Mr. Peter Kolarov, Political Affairs Officer, United Nations Department for Disarmament Affairs, was in charge of the BWC issues in the Department for Disarmament Affairs. Mr. Richard Lennane, Political Affairs Officer, served as Secretary of the Meeting of Experts. Ms. Melissa Hersh and Dr. Piers Millett, Professional Assistants, served in the Secretariat.

#### Participation at the Meeting of Experts

8. Eighty-seven States Parties to the Convention participated in the Meeting of Experts as follows: Albania, Algeria, Argentina, Australia, Austria, Bahrain, Bangladesh, Belarus, Belgium, Bolivia, Bosnia and Herzegovina, Brazil, Bulgaria, Canada, Chile, China, Colombia, Congo, Costa Rica, Croatia, Cuba, Czech Republic, Denmark, El Salvador, Estonia, Ethiopia, Finland, France, Germany, Greece, Guatemala, Holy See, Hungary, Iceland, India, Indonesia, Iran (Islamic Republic of), Iraq, Ireland, Italy, Japan, Kenya, Kuwait, Latvia, Lebanon, Libyan Arab Jamahiriya, Malaysia, Malta, Mauritius, Mexico, Monaco, Morocco, Netherlands, New Zealand, Nicaragua, Nigeria, Norway, Oman, Pakistan, Peru, Philippines, Poland, Portugal, Qatar, Republic of Korea, Romania, Russian Federation, Saudi Arabia, Senegal, Serbia and Montenegro, Singapore, Slovakia, Slovenia, South Africa, Spain, Sri Lanka, Sudan, Sweden, Switzerland, Thailand, Togo, Turkey, Ukraine, United Kingdom of Great Britain and Northern Ireland, United States of America, Venezuela, Viet Nam.

9. In addition, four States that had signed the Convention but had not yet ratified it participated in the Meeting of Experts without taking part in the making of decisions, as provided for in rule 44, paragraph 1 of the rules of procedure: Egypt, Madagascar, Myanmar, United Arab Emirates.

10. Two States, Israel and Kazakhstan, neither Parties nor Signatories to the Convention, participated in the Meeting of Experts as observers, in accordance with rule 44, paragraph 2 (a).

11. The United Nations, including the United Nations Institute for Disarmament Research (UNIDIR), attended the Meeting of Experts in accordance with rule 44, paragraph 3.

12. The Food and Agriculture Organization (FAO), the International Committee of the Red Cross (ICRC), the World Health Organization (WHO) and the World Organization for Animal Health (OIE) were granted observer status to participate in the Meeting of Experts in accordance with rule 44, paragraph 4.

13. Eleven non-governmental organizations and research institutes attended the Meeting of Experts under rule 44, paragraph 5.

14. A list of all participants in the Meeting of Experts is contained in document BWC/MSP/2004/MX/INF.5

#### Work of the Meeting of Experts

15. The Meeting of Experts held two public meetings, on 19 and 30 July respectively, and 17 working sessions between 19 and 30 July 2004. In accordance with the programme of work (BWC/MSP/2004/MX/2/Rev.1), on 19 July the Meeting of Experts heard general statements from 18 States Parties during the first working session, and presentations from the World Health Organization (WHO), the Food and Agriculture Organization (FAO), and the World

Organization for Animal Health (OIE) during the second working session. The period from 20 to 23 July was devoted to consideration of strengthening and broadening national and international institutional efforts and existing mechanisms for the surveillance, detection, diagnosis and combating of infectious diseases affecting humans, animals, and plants (agenda item 5), and the period from 26 to 29 July was devoted to consideration of enhancing international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease (agenda item 6).

16. During its consideration of strengthening and broadening national and international institutional efforts and existing mechanisms for the surveillance, detection, diagnosis and combating of infectious diseases affecting humans, animals, and plants (agenda item 5), the Meeting of Experts heard 15 statements, presentations and interventions from States Parties on general surveillance, detection, diagnosis and combating of infectious diseases; 47 statements, presentations and interventions on surveillance, detection, diagnosis and combating of infectious diseases affecting humans, 28 statements, presentations and interventions on surveillance, detection, diagnosis and combating of infectious diseases affecting animals; and 9 statements, presentations and interventions on surveillance, detection, diagnosis and combating of infectious diseases affecting plants.

17. During its consideration of enhancing international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease (agenda item 6), the Meeting of Experts heard 57 statements, presentations and interventions from States Parties on outbreak response in/for humans; 16 statements, presentations and interventions on outbreak response in/for animals; 5 statements, presentations and interventions on outbreak response in/for plants; and 36 statements, presentations and interventions on investigations.

18. The Chairman, under his own responsibility and initiative, prepared a paper listing considerations, lessons, perspectives, recommendations, conclusions and proposals drawn from the presentations, statements, working papers and interventions made by delegations on the topics under discussion at the Meeting. The Meeting of Experts noted that this paper had no status; that it had not been discussed; that it could not be considered as being complete; that the appearance of any consideration, lesson, perspective, recommendation, conclusion or proposal in the paper did not in any way indicate or imply that States Parties agreed with it; and that it should not necessarily form a basis for future deliberations. The Meeting of Experts noted that it was the Chairman's view that the paper could assist delegations in their preparations for the Meeting of States Parties in December 2004 and in its consideration of how best to "discuss, and promote common understanding and effective action on" the two topics in accordance with the decision of the Fifth Review Conference.

19. The paper prepared by the Chairman is attached as Annex II to this Report.

20. In the course of its work, the Meeting of Experts was able to draw on a number of working papers submitted by States Parties, as well as on statements and presentations made by States Parties which were circulated in the Meeting.

### Documentation

21. A complete list of official documents of the Meeting of Experts, including the working papers submitted by States Parties, is contained in Annex I to this Report. All documents on this list are available on the United Nations Official Document System (ODS), accessible on the internet at [www.ods.unog.ch](http://www.ods.unog.ch).

### Conclusion of the Meeting of Experts

22. At its closing meeting on 30 July 2004, the Meeting of Experts took note of the draft agenda and indicative schedule prepared by the Chairman for the Meeting of States Parties to be held from 6 to 10 December 2004, which are attached to this Report as Annex III. The Meeting of Experts noted that the Chairman would prepare the provisional agenda and programme of work for approval and adoption at the Meeting of States Parties in December 2004.

23. At the same meeting, the Meeting of Experts adopted its Report by consensus, as contained in document BWC/MSP/2004/MX/CRP.1, as orally amended, to be issued as document BWC/MSP/2004/MX/3.

Annex I

LIST OF DOCUMENTS OF THE MEETING OF EXPERTS

Symbol	Title
BWC/MSP/2004/MX/1	Provisional Agenda for the Meeting of Experts
BWC/MSP/2004/MX/2/Rev.1	Revised Provisional Programme of Work for the Meeting of Experts
BWC/MSP/2004/MX/3	Report of the Meeting of Experts
BWC/MSP/2004/MX/INF.1/Summary	Mechanisms being implemented for Disease Surveillance by Intergovernmental Organizations (World Health Organization (WHO), Food and Agricultural Organization (FAO), World Organization for Animal Health / Office International des Epizooties (OIE)) and Significant Mechanisms being Implemented for Disease Surveillance by Non-Governmental Organizations  Background paper prepared by the Secretariat
BWC/MSP/2004/MX/INF.1 [ENGLISH ONLY]	Mechanisms being implemented for Disease Surveillance by Intergovernmental Organizations (World Health Organization (WHO), Food and Agricultural Organization (FAO), World Organization for Animal Health / Office International des Epizooties (OIE)) and Significant Mechanisms being Implemented for Disease Surveillance by Non-Governmental Organizations  Background paper prepared by the Secretariat
BWC/MSP/2004/MX/INF.2/Summary	Mechanisms being Implemented for Response to Outbreaks of Disease by Intergovernmental Organizations (World Health Organization (WHO), Food and Agricultural Organization (FAO), World Organization for Animal Health / Office International des Epizooties (OIE))  Background paper prepared by the Secretariat

BWC/MSP/2004/MX/INF.2  
[ENGLISH ONLY]

Mechanisms being Implemented for Response to Outbreaks of Disease by Intergovernmental Organizations (World Health Organization (WHO), Food and Agricultural Organization (FAO), World Organization for Animal Health / Office International des Epizooties (OIE))

Background paper prepared by the Secretariat

BWC/MSP/2004/MX/INF.2/Amend.1  
[ENGLISH ONLY]

Mechanisms being Implemented for Response to Outbreaks of Disease by Intergovernmental Organizations (World Health Organization (WHO), Food and Agricultural Organization (FAO), World Organization for Animal Health / Office International des Epizooties (OIE))

Background paper prepared by the Secretariat

Amendment

BWC/MSP/2004/MX/INF.3/Summary

Mechanisms Available to States Parties to Investigate the Alleged Use of Biological or Toxin Weapons and to Provide Assistance in Such Cases

Background paper prepared by the Secretariat

BWC/MSP/2004/MX/INF.3  
[ENGLISH ONLY]

Mechanisms Available to States Parties to Investigate the Alleged Use of Biological or Toxin Weapons and to Provide Assistance in Such Cases

Background paper prepared by the Secretariat

BWC/MSP/2004/MX/INF.4  
[ENGLISH ONLY]

List of states parties to the convention on the prohibition of the development, production and stockpiling of bacteriological (biological) and toxin weapons and on their destruction, as at July 2004

Prepared by the Secretariat

BWC/MSP/2004/MX/INF.5  
[ENGLISH/FRENCH/SPANISH  
ONLY]

List of Participants

BWC/MSP/2004/MX/CRP.1  
[ENGLISH ONLY]

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BWC/MSP/2004/MX/3

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BWC/MSP/2004/MX/MISC.1  
[ENGLISH/FRENCH/SPANISH  
ONLY]

BWC/MSP/2004/MX/MISC.2  
[ENGLISH ONLY]

BWC/MSP/2004/MX/MISC.3  
[ENGLISH ONLY]

Provisional List of Participants

Information Submitted by Argentina on National  
and Regional Institutions and Mechanisms for  
Disease Surveillance

Note by the Secretariat

Presentations Submitted by the United States

Note by the Secretariat

The following working papers are available in English only unless otherwise specified.

BWC/MSP/2004/MX/WP.1	From "Farm-to-Fork" - How to Improve Surveillance of the Food Supply Chain  Submitted by Germany
BWC/MSP/2004/MX/WP.2	Electronic Outbreak Reporting System for Public Health Surveillance in Germany  Submitted by Germany
BWC/MSP/2004/MX/WP.3	A Procedure for Differentiating Between the Intentional Release of Biological Warfare Agents and Natural Outbreaks of Disease: Its Use in Analyzing the Tularemia Outbreak in Kosovo in 1999 and 2000  Submitted by Germany
BWC/MSP/2004/MX/WP.4	Rapid Procedures for the Detection of Biological Warfare Agents and Diagnosis of Related Disorders  Submitted by Germany
BWC/MSP/2004/MX/WP.5	Reporting and Surveillance of Diseases in Germany  Submitted by Germany
BWC/MSP/2004/MX/WP.6	Combating Infectious Diseases - The German Way to Improve Preparedness  Submitted by Germany
BWC/MSP/2004/MX/WP.7	Enhancing International Capabilities for Responding to and Mitigating the Effects of Outbreaks of Diseases - How to Overcome Legal Problems  Submitted by Germany

BWC/MSP/2004/MX/WP.8

German Contributions to Mitigating the Effects of Diseases

Submitted by Germany

BWC/MSP/2004/MX/WP.9

Diagnostic Tools and Structures for Detecting Suspicious Outbreaks of Infectious Diseases

Submitted by Germany

BWC/MSP/2004/MX/WP.10

United Nations involvement in investigating the possible use of biological weapons

Submitted by Germany

BWC/MSP/2004/MX/WP.11

International Co-Operation for Disease Surveillance

Submitted by South Africa

BWC/MSP/2004/MX/WP.12

Human Infectious Disease Surveillance

Submitted by South Africa

BWC/MSP/2004/MX/WP.13

Plant Health Surveillance in South Africa

Submitted by South Africa

BWC/MSP/2004/MX/WP.14

Animal Disease Surveillance in South Africa

Submitted by South Africa

BWC/MSP/2004/MX/WP.15

Cases of Alleged Use of Biological or Toxin Weapons or Suspicious Outbreaks of Disease: Enhancing International Capabilities for Responding to, Investigating and Mitigating the Effects

Submitted by South Africa

BWC/MSP/2004/MX/WP.16

Improving International Capabilities for Responding to, Investigating, and Mitigating the Effects of Cases of Alleged Use of Biological or Toxin Weapons or Suspicious Outbreaks of Disease – The Need for Enhanced Co-Operation Between Law Enforcement, Defence, and Public Health Actors

Submitted by Sweden

BWC/MSP/2004/MX/WP.17

A Short Introduction to the Swedish System to Manage Outbreaks of Infectious Diseases Among Humans and Animals

Submitted by Sweden

BWC/MSP/2004/MX/WP.18  
[ENGLISH and CHINESE ONLY]

Surveillance of infectious diseases

Submitted by the Chinese delegation

BWC/MSP/2004/MX/WP.19  
[ENGLISH and CHINESE ONLY]

Enhancing international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of diseases

Submitted by China

BWC/MSP/2004/MX/WP.20

Tools and Technologies for the Surveillance, Detection and Diagnosis of Infectious Diseases and Intoxications

Submitted by the United Kingdom

BWC/MSP/2004/MX/WP.21

Prevention, Investigation and Control of Human Infectious Disease

Submitted by the United Kingdom

BWC/MSP/2004/MX/WP.22

Animal Disease Control in the United Kingdom

Submitted by the United Kingdom

BWC/MSP/2004/MX/WP.23

Plant Pest and Disease Control in the United Kingdom

Submitted by the United Kingdom

BWC/MSP/2004/MX/WP.24	Safety of Food and Water in the United Kingdom  Submitted by the United Kingdom
BWC/MSP/2004/MX/WP.25	Australian Disease Surveillance and Response Systems: Humans  Submitted by Australia
BWC/MSP/2004/MX/WP.26	The Role of the World Health Organisation in Infectious Disease Surveillance: Australian Perspective  Submitted by Australia
BWC/MSP/2004/MX/WP.27	Regional Networks: The Case for Integration and Coordination  Submitted by Australia
BWC/MSP/2004/MX/WP.28	Disease Surveillance in Australia: Animal Diseases  Submitted by Australia
BWC/MSP/2004/MX/WP.29	Improving Regional Surveillance Efforts: Animal Health - Australia's Contribution  Submitted by Australia
BWC/MSP/2004/MX/WP.30	Disease Surveillance in Australia: Plant Diseases  Submitted by Australia
BWC/MSP/2004/MX/WP.31	Mitigation of Intentional Outbreaks of Human Disease  Submitted by Australia
BWC/MSP/2004/MX/WP.32	An Australian Framework for Responses to Unusual Outbreaks of Animal Disease  Submitted by Australia
BWC/MSP/2004/MX/WP.33	PLANTPLAN: Australian Emergency Plant Pest Response Plan  Submitted by Australia

BWC/MSP/2004/MX/WP.34	Detection and Monitoring Survey of Invasive Plant Pests in Japan  Submitted by Japan
BWC/MSP/2004/MX/WP.35	Enhancing capabilities for responding to a natural or deliberate epidemic of infectious diseases in Japan  Submitted by Japan
BWC/MSP/2004/MX/WP.36	Laboratory Clusters: Integrated Networks for Enhanced Response and Consequence Management  Submitted by Canada
BWC/MSP/2004/MX/WP.37	CBRN Consolidated Risk Assessment: A Structured Approach to Prevention, Preparedness and Response Planning and S&T Investments  Submitted by Canada
BWC/MSP/2004/MX/WP.38*	The Canadian Public Health Laboratory Network  Submitted by Canada
BWC/MSP/2004/MX/WP.39	The Urban-Rural Divide: Surveillance and Protection of Communities  Submitted by Canada
BWC/MSP/2004/MX/WP.40	Research on prevention of bioterrorism: Overview of recent developments and actions at European Community level  Submitted by the Netherlands
BWC/MSP/2004/MX/WP.41	Disease Reporting by the Netherlands Armed Forces  Submitted by the Netherlands
BWC/MSP/2004/MX/WP.42	Tasks and role of the European Commission in outbreak investigation, communicable disease surveillance and Health Security  Submitted by the Netherlands

BWC/MSP/2004/MX/WP.43  
[ENGLISH and RUSSIAN ONLY]

Mechanism for implementation of state control  
over dangerous infectious human diseases in the  
Russian Federation

Submitted by the Russian Federation

BWC/MSP/2004/MX/WP.44  
[ENGLISH and RUSSIAN ONLY]

Approaches to Some Elements of the Mechanism  
for Investigation of Cases of Alleged Use of  
Biological Weapons

Submitted by the Russian Federation

BWC/MSP/2004/MX/WP.45  
[ENGLISH and RUSSIAN ONLY]

On the Epizootological Monitoring System in the  
Russian Federation

Submitted by the Russian Federation

BWC/MSP/2004/MX/WP.46  
[SPANISH ONLY]

Consideraciones generales sobre el mecanismo de  
seguimiento adoptado durante la sesión reanudada  
de la quinta conferencia de examen de los estados  
partes en la convención sobre la prohibición del  
desarrollo, la producción y el almacenamiento de  
armas bacteriológicas (biológicas) y tóxicas y  
sobre su destrucción

Presentado por la República de Cuba

BWC/MSP/2004/MX/WP.47

National system of epidemiological surveillance in  
Ukraine

Submitted by Ukraine

BWC/MSP/2004/MX/WP.48

System of delivering information on infectious  
disease incidence and outbreaks of infectious  
diseases in Ukraine

Submitted by Ukraine

BWC/MSP/2004/MX/WP.49

Responding to and mitigating the effects of  
suspicious outbreaks of disease: System of  
organization of specific indication of bacterial  
(biological) means

Submitted by Ukraine

BWC/MSP/2004/MX/WP.50	Prevention of occurrence of infectious diseases due to epizootic and microbiological environmental monitoring  Submitted by Ukraine
BWC/MSP/2004/MX/WP.51/Rev.1	A modelling programme on bio-incidents  Submitted by the United Kingdom
BWC/MSP/2004/MX/WP.52 [ENGLISH and SPANISH ONLY]	Strengthening of the national regulatory activity as a mechanism for the surveillance, detection, diagnosis and combating of infectious diseases affecting humans, animals and plants  Submitted by the Republic of Cuba
BWC/MSP/2004/MX/WP.53	Real-Time Symptom Surveillance – Experience in the United Kingdom Using the “Portable Remote Illness and Symptoms Monitor” (PRISM)  Submitted by the United Kingdom
BWC/MSP/2004/MX/WP.54	Proposals for Strengthening and Broadening National and International Institutional Efforts and Existing Mechanisms for the Surveillance, Detection, Diagnosis and Combating of Infectious Diseases Affecting Humans, Animals and Plants  Submitted by the Islamic Republic of Iran
BWC/MSP/2004/MX/WP.55 [ENGLISH and FRENCH ONLY]	Confidence-building Measures in Addressing Allegations of Use of CBRN Terrorist Agents: Laboratory Networks  Submitted by France
BWC/MSP/2004/MX/WP.56	Enhancing International Capabilities for Responding to, Investigating and Mitigating the Effects of Cases of Alleged Use of Biological or Toxin Weapons or Suspicious Outbreaks of Disease  Submitted by the United Kingdom

BWC/MSP/2004/MX/WP.57

Investigations into Alleged Use of Biological Weapons – Some Considerations Drawn from Experience in the United Kingdom for Sample Handling and Biological Analysis

Submitted by the United Kingdom

BWC/MSP/2004/MX/WP.58

Enhancing international capabilities for mitigating the effects and provision of assistance in cases of alleged use of biological or toxin weapons or outbreaks of diseases

Submitted by the Islamic Republic of Iran

BWC/MSP/2004/MX/WP.59

Existing mechanisms for responding to and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of infectious human diseases in Italy

Submitted by Italy

BWC/MSP/2004/MX/WP.60  
[FRENCH ONLY]

Vers une planification des programmes de lutte contre le risque biologique entre les Etats parties a la convention d'interdiction des armes biologiques

Présenté par la France

BWC/MSP/2004/MX/WP.61

Existing mechanisms for the surveillance, detection and diagnosis of infectious animal diseases in Italy

Submitted by Italy

BWC/MSP/2004/MX/WP.62

Existing mechanisms for the surveillance, detection and diagnosis of infectious human diseases in Italy

Submitted by Italy

BWC/MSP/2004/MX/WP.63

Enhancing national capabilities for responding to and mitigating of effects of bioterrorism and related diseases

Submitted by Italy

BWC/MSP/2004/MX/WP.64  
[FRENCH ONLY]

Renforcement des mécanismes de surveillance des maladies au sein des forces françaises en opération face aux risques biologiques

Présenté par la France

BWC/MSP/2004/MX/WP.65	Animal disease surveillance and response in Thailand  Submitted by Thailand
BWC/MSP/2004/MX/WP.66	Canadian Federal Response to a BW Incident  Submitted by Canada
BWC/MSP/2004/MX/WP.67	Existing mechanisms for responding to and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of infectious animal diseases in Italy  Submitted by Italy
BWC/MSP/2004/MX/WP.68	Investigation  Submitted by the Islamic Republic of Iran
BWC/MSP/2004/MX/WP.69	Definitions of Unusual and Suspicious Outbreaks of Diseases and Alleged Use  Submitted by the Islamic Republic of Iran
BWC/MSP/2004/MX/WP.70	Human Communicable Disease Surveillance with Special Focus on Preparedness and Response for Epidemic Prone Diseases  Submitted by India
BWC/MSP/2004/MX/WP.71	Animal disease surveillance and control in India with special reference to emerging/exotic diseases  Submitted by India
BWC/MSP/2004/MX/WP.72	Means of enhancement of national capabilities for surveillance of, and response to, natural and deliberate outbreaks of human, animal, and plant infectious diseases  Submitted by Poland
BWC/MSP/2004/MX/WP.73	Surveillance and (Early) Detection of Infectious Diseases in Humans in the Netherlands  Submitted by the Netherlands

BWC/MSP/2004/MX/WP.74	Counter terrorism and food safety  Submitted by the Netherlands
BWC/MSP/2004/MX/WP.75	Emergency Management, an Australian Model: Planning for and Managing a Biological Emergency  Submitted by Australia
BWC/MSP/2004/MX/WP.76	Questions related to the strengthening of the capacity to investigate and mitigate alleged use of biological weapons  Submitted by Norway
BWC/MSP/2004/MX/WP.77 [SPANISH ONLY]	Consideraciones sobre el incremento de las capacidades internacionales para responder, investigar y mitigar los efectos en caso de uso alegado de armas biológicas o tóxicas o brotes sospechosos de enfermedades  Presentado por la República de Cuba
BWC/MSP/2004/MX/WP.78	Avian Influenza in Canada 2004  Submitted by Canada
BWC/MSP/2004/MX/WP.79	Impacts of the BSE Incident in Canada  Submitted by Canada
BWC/MSP/2004/MX/WP.80	SARS: A Canadian Perspective on Lessons Learned  Submitted by Canada
BWC/MSP/2004/MX/WP.81	Forensic Investigation of Bioterrorism  Submitted by the Netherlands
BWC/MSP/2004/MX/WP.82	Strengthening Response Capabilities: Mass Casualty Management Through Training and Education - Joint Project Proposal  Submitted by Hungary and Norway

BWC/MSP/2004/MX/WP.83

Challenges of the Second Year of the Follow-up  
Process

Submitted by Hungary

Annex II

CONSIDERATIONS, LESSONS, PERSPECTIVES, RECOMMENDATIONS,  
CONCLUSIONS AND PROPOSALS DRAWN FROM THE PRESENTATIONS,  
STATEMENTS, WORKING PAPERS AND INTERVENTIONS MADE BY DELEGATIONS  
ON THE TOPICS UNDER DISCUSSION AT THE MEETING

The following tables relating to agenda items 5 and 6 respectively were prepared by the Chairman.

**Agenda Item 5**

<b>Delegation</b>	<b>Date, Time / WP</b>	<b>Text</b>
Iran	WP.54	The States Parties to the Convention with the assistance of relevant international institutions should strengthen the existing global networks for disease surveillance and build up their capabilities including national networks in order to respond to disease outbreaks in a timely manner particularly in humanitarian assistance to the States Parties affected by disease outbreaks.
South Africa	20/7, 12.47	States Parties should be encouraged to improve disease surveillance and response capabilities.
South Africa	WP.11	States should be encouraged to improve their disease surveillance capabilities.
Nigeria	21/7, 16.30	Strengthen the capacity to conduct effective surveillance activities.
USA	20/7, 12.55	Improved national and co-operative international disease surveillance is consistent with the object and purpose of the Convention which is the elimination of biological weapons.
USA	20/7, 12.55	Participation in local, national or global disease surveillance systems represents one way of making progress on biological weapons non-proliferation through cooperation and transparency.
USA	20/7, 12.55	Strengthening surveillance should not be automatically associated with increasing the number of health conditions included in the system.
India	20/7, 16.30	Ensure national disease surveillance systems cover the whole of the country.
Australia	WP.28	Animal disease surveillance should rely on existing standards and recommendations wherever possible, rather than 'reinventing the wheel'.
Thailand	23/7, 11.25	(The) possibility of, and opportunity to, broaden (and improve) surveillance activities (includes): increasing appreciation and understanding by both the public and politicians of the effects of animal diseases on human health; increasing appreciation and understanding by both the public and politicians of the economic and social impacts of animal diseases based upon experiences derived from outbreaks of avian influenza, closer cooperation amongst countries E.g. Australia and the Asian regional reference laboratory for Foot-and-Mouth disease, or

		proficiency tests of Leptospirosis, Brucellosis and the USA and offers of training and strengthening national programmes; (and) the provisional offer of assistance by International Organizations, e.g. FAO and OIE.
South Africa	WP.11	The States Parties, acting nationally or collectively, should actively support the WHO, FAO and OIE.
USA	20/7, 12.55	States Parties are urged to support the WHO's efforts to strengthen the global system for disease surveillance.
FAO/OIE	19/7, 16.25	Effective global biosecurity can only be achieved if all OIE and FAO Member Countries conscientiously comply with the standards and guidelines of the OIE, effectively train stakeholders and ensure the availability of adequate human and material veterinary resources.
Russian Federation	19/7, 11.04	It is necessary to separate clearly the spheres of competence and responsibility of the WHO, OIE and FAO and the Convention, as well as clearly define the field of activities where joint efforts are possible according to the mandates of these organizations and the spheres covered by the Convention.
Japan	WP.34	Early detection, made possible by surveillance such as the detection and monitoring... besides other plant quarantine measures such as the port-of-entry inspection of imported plants, is crucial for plant protection bodies to avert invasion of further devastating outbreaks by plant pests.
USA	21/7	Early detection of disease outbreaks is vital to minimize the magnitude and geographic scope of epidemics
South Africa	WP.11	Efforts should be directed towards early detection, diagnosis, outbreak identification and response as well as preparedness, which include the training and allocation of resources.
Australia	WP.26	The importance of speed cannot be over-emphasised and this is clearly an important aspect of the surveillance procedure.
USA	21/7, 12.12	Recommendation – we must be aware of the limitations of outbreak detection.
Canada	WP.36	A multidisciplinary approach is required to address all phases of consequence management and post-incident investigations.
Iran	WP.54	States Parties to the Convention with advanced surveillance systems as well as relevant international institutions should, particularly through providing training courses, assist other State Parties in strengthening their public health manpower capacity and support the use of information technology for the collection and analysis of data on infectious disease.
South Africa	20/7, 12.47	States that are capable of doing so should help others not as capable, to improve disease surveillance and response capabilities.
South Africa	WP.11	States in a position to do so should provide assistance to States Parties that would require such assistance to establish and improve their disease surveillance capabilities.
China	20/7, 15.40	States parties in a position to do so (should) fund/resource improvements in disease surveillance and response in other States Parties less able to do so.
China	20/7, 15.40	Assistance, including: technology, resources and information, should be made available to States Parties in order to strengthen their disease surveillance and response capabilities.

China	WP.18	The international community should promote cooperation in disease surveillance... Competent States Parties should provide assistances to other States Parties in the form of technology exchanges, personnel training, and financial support as well as international or regional seminars, (all of which should be conducted) on the basis of equality, cooperation and mutual respect.
Pakistan	20/7, 16.24	Training, technical expertise and facilities should be provided to developing countries to upgrade their systems to international standards and to maintain the required criteria.
Germany	WP.8	Germany firmly believes the best way to come to grips with outbreaks of new and recurring diseases is (through) international cooperation, for in a world in which economic ties and tourism bring people into ever closer contact, infectious agents travel huge distances at great speed with no regard to state borders and create problems for not just one (State) but for a large number of countries.
Canada	WP.39	Cooperation amongst governments... is something that must be mutually beneficial and reinforced over time.
Iran	WP.54	Relevant international institutions should, within their (fields of) competence assists States Parties to strengthen national and local infectious disease surveillance programs and improve their early notification, control, protection and response capabilities.
Iran	WP.54	Although national authorities are responsible for infectious disease surveillance and response, it is incumbent upon the international health institutions to provide technical and financial support to States Parties, particularly developing countries, aimed at the exchange of experiences and capacity building for surveillance and response.
USA	20/7, 12.55	States Parties are urged to... provide support to the OIE and FAO to improve surveillance of animal and plant diseases and food safety.
China	WP.18	States Parties should promote cooperation with the relevant international organizations.
China	WP.18	International Organizations may provide technological, financial and information assistance and support to those States Parties which have difficulty in implementing the relevant standards and best practices.
Pakistan	20/7, 16.24	(Enhance) cooperation (between) States Parties and IGOs, like WHO, to make better use of their resources and achievements.
China	22/7, 12.20	Strengthen... cooperation with the related IGOs to confront animal disease.
India	22/7, 15.55	Animal disease surveillance and control (could be strengthened with)... help from international laboratories and vaccine banks, and (through the) dissemination of technology.
FAO/OIE	19/7, 16.25	An improvement in the quality and efficiency of Member Countries' Veterinary Services will guarantee vigilance in disease monitoring, surveillance and early warning, early detection, and will ensure a timely and rapid response to any emergency.

South Africa	WP.11	Recent outbreaks of infectious diseases have shown that an outbreak can be contained and suppressed with international support. In this regard, it should be noted that the containment of a disease outbreak at the earliest opportunity and within the smallest geographic area requires the least resources and international efforts should be directed towards early detection, diagnosis, outbreak identification and response.
South Africa	WP.11	Disease outbreaks do not respect international boundaries and may spread extremely rapidly via modern travel methods. These problems can be ameliorated through international assistance and cooperation as well as at the regional level, where regional groupings of countries could develop regional surveillance programmes, possibly laying the foundation for regional response mechanisms.
Iran	WP.54	Regional cooperation on the prevention of illegal trans-boundary transport of domestic animals needs to be enhanced.
Australia	22/7, 11.00	Regional surveillance efforts... must be continued, and where possible expanded, to the mutual benefit of the countries involved.
China	22/7, 12.20	Strengthen... cooperation at a regional level to confront animal disease.
China	22/7, 12.20	Establish regional systems for the joint prevention and control of certain animal diseases.
Australia	WP.29	Assist regional countries to build their capacity to manage animal health, accurately and transparently report their animal health status, and perform risk analysis on animal diseases and pests.
Iran	WP.54	Cooperation between public and private sectors on the implementation of surveillance and the reporting of cases of communicable diseases under surveillance has important impacts and should be encouraged. Participation of medical institutions in the surveillance process should also be improved.
USA	20/7, 12.55	Global disease surveillance and control can only be improved by individual States Parties taking action and (through) international cooperation
USA	20/7, 12.55	(There is a) need to determine what improvements to surveillance systems are intended to accomplished, (such as the) early detection of outbreaks, (to) analyze trends, generate hypotheses (and) reduce (the) global threat posed by biological weapons.
USA	22/7, 12.00	Specific national animal disease surveillance should be prioritised (according to) their impact on productivity; the importance of the affected animal or product; the feasibility of control; the cost of control or surveillance; and the public health implications.
Czech Republic	21/7, 15.48	It is clear that international cooperation in (the) field (of disease surveillance) plays an important role, particularly in the exchange of information on measures taken and the latest events. This may prove very helpful in practice (as it could) lead to a better (level of) awareness by the public who lack experience in this regard.
South Africa	20/7, 12.47	States Parties, nationally and collectively, should be encouraged to support the activities of NGO disease surveillance and response and those State Parties in a position to do so should provide these NGOs with resources.

South Africa	WP.11	The States Parties should nationally and collectively support the efforts of NGOs in the surveillance of and response to disease outbreaks. States Parties who are in a position to do so should provide assistance to such NGOs to improve their activities when required.
Canada	WP.36	The (Canadian) Biological Cluster can serve as a model for international cooperation to support crisis and consequence management of a biological terrorism event
Iran	WP.54	International health institutions are encouraged to establish stocks of drugs, vaccines and diagnostic kits at the WHO Regional Centers for (use in a) rapid response to unexpected events in affected countries as well as (to ensure the effective) management of emergency cases.
WHO	19/7, 15.15	Enhance WHO's surveys of military health programmes for use as potential public health resources.
WHO	19/7, 15.15	(Enhanced) harmonisation with other global players (including WTO, UNHCR, FAO, ICAO, EU, G7, OIE, MSF, IFRC, IATA, IMO, WTA, IFPMA, etc).
South Africa	20/7, 12.47	States Parties, nationally and collectively, should be encouraged to support the activities of WHO, OIE and FAO by developing a standing capacity for disease surveillance and response, starting at the regional level.
South Africa	WP.11	The States Parties should nationally and collectively support the WHO, FAO, OIE and the relevant organisations to establish a standing capacity for epidemiological investigation of disease outbreaks and an immediate response capability.
South Africa	WP.11	The States Parties, acting nationally or collectively, should actively support the WHO, FAO and OIE in the continued development and implementation of programmes for improving health and epidemiological services in individual countries, with a specific allocation for disease surveillance and outbreak response activities.
USA	20/7, 12.55	Improvements can best be accomplished through cooperation with the WHO, OIE and FAO.
China	20/7, 15.40	State parties should support WHO, FAO, and OIE in their activities related to disease surveillance and response in order to maximise their efficiency with their existing resources
China	WP.18	Over the years, intergovernmental organizations such as the WHO, FAO and OIE have done a great deal for disease surveillance. States Parties can further enhance cooperation with these international organizations and make full use of their resources and achievements.
Australia	20/7, 16.03	Infectious disease events are best investigated and verified by the WHO.
Australia	WP.26	WHO is the ideal organization to undertake global surveillance because of its role and responsibilities as the health arm within the United Nations family of international organizations, its responsibilities in compiling the International Health Regulations (IHR) and is coordinating the review process.
Iran	WP.54	States Parties should strengthen the relationship and cooperation between health authorities in charge of human and veterinary disease surveillance.

USA	22/7, 15.30	Recent global events reinforce the need for increased partnerships between human and animal health... Integration of human and animal surveillance requires a multidisciplinary approach.
USA	20/7, 12.55	(There is a) need (for) better integration of (surveillance of) animal and plant diseases.
UK	22/7, 10.25	Animal disease control (should include a) well coordinated response capable of being scaled up.
Australia	WP.28	The animal industries (should) have a large role in policy formulation and implementation.
Iran	WP.54	(The) deployment of well-trained expert teams, for Rapid Health Assessments in emergency situations, and epidemiological investigations, for a rapid and timely response to outbreaks, should be supported by the relevant international institutions.
South Africa	WP.11	Recent outbreaks of infectious diseases have shown that outbreaks can be contained and suppressed with international support. In this regard, it should be noted that the containment of a disease outbreak at the earliest opportunity and within the smallest geographic area requires the least resources, and international efforts should be directed towards early detection, diagnosis, outbreak identification and response.
Australia	20/7, 16.03	Regional networks could be enhanced through further coordination and integration, which would enhance transparency and speed and could also be pursued through the WHO.
India	20/7, 16.30	Enhance bilateral and international collaboration for disease surveillance and response to address cross-border disease events.
Australia	WP.27	An integrated regionally based surveillance network, including a laboratory sub-network and experts on call, would be of great benefit and should be encouraged.
Australia	WP.29	Expand the network of collaborating agencies in the region.
Netherlands	WP.42	It is essential in a space (such as the EU) that appropriate arrangements be put in place to ensure: action at source be undertaken to stem the spread of disease and environmental contamination; mutual assistance be provided for diagnosis and management of cases; access to special laboratory services and expertise for epidemiological investigations be secured; and public health responses be put into effect... as well as good coordination and interoperability of preparedness and response plans.
Germany	WP.8	An appropriate response to these challenges (the spread of known and the appearance of new infectious diseases) must in our view include a coordinated national and international strategy to identify early on, and take effective action to control, outbreaks of disease and pandemics in particular.
Iran	WP.54	An appropriate organizational structure should be established and priority needs to be given to allocating the required funds for surveillance and response.
Iran	WP.54	Priority should be given to the management, availability and access to medicine, drugs, vaccines and rapid diagnostic kits for emergency cases at the national level (to facilitate a) prompt response to usual and unusual outbreaks of infectious diseases.

USA	21/7, 11.35	Countries should define the objectives for their integrated systems, the partners that need to be connected and the functions to be supported (i.e. the "requirements").
UK	22/7, 10.25	Recovery (from animal disease) requires the cooperation of all (of the) involved authorities and operational parties.
UK	23/7, 10.10	Plant pest and disease control... key elements (include) organisation (with) clear responsibilities, (a) well coordinated response capable of being scaled up (and) review procedures after (an) outbreak.
Sweden	WP.17	If the resources at county level are insufficient or if the outbreak involves several counties, national coordination is needed.
Australia	WP.27	Virtual networks have a role to play in responding to outbreaks, especially those of unknown aetiology, and such an arrangement can be built on existing networks quickly and effectively.
USA	20/7, 12.55	Systems must be sustainable both politically and technologically over time (and should consider) disease-based and syndromic disease reporting, (be) used regularly, (and rely on) incentives and not penalties for reporting.
UK	21/7, 15.35	Real-Time Symptom Surveillance... (has) benefits (including the) early detection of deliberate and natural disease outbreaks (but represents a) large scale task involving multiple agencies.
Nigeria	21/7, 16.30	Increase the involvement of clinicians in surveillance systems.
Nigeria	21/7, 16.30	Strengthen the involvement of laboratory personnel in epidemiological surveillance.
Canada	WP.36	Broad departmental participation in laboratory clusters ensures that federal laboratory resources are available in most provinces and regions... This facilitates access to specialised facilities and expertise and can minimise transportation of sample requirements.
Canada	WP.36	Develop a laboratory cluster (taking into account) the problems associated with a geographically dispersed population, transportation of samples, and the need for urgent access to federal expertise to support a local response.
Germany	WP.1	Close collaboration of... institutions, public authorities and the industry is essential (for disease surveillance).
Canada	WP.36	Establishing proactive arrangements to sustain crisis phase operations will improve capability and surge capacity.
Canada	WP.39	Cooperation amongst practitioners and communities in medical and public health matters is something that must be mutually beneficial and reinforced over time.
Nigeria	21/7, 16.30	Emphasise community participation to detect and respond to public health problems.
Canada	21/7, 17.00 WP.39	Ensure that rural areas receive the same measure of protection and surveillance (as urban areas).
UK	22/7, 10.25	Animal disease control (should include) well established and rehearsed contingency plans.
UK	23/7, 10.10	Plant pest and disease control... key elements (include a) well prepared and rehearsed contingency plan.

New Zealand	22/7, 16.10	Encourage industry operators to develop specific response plans for their businesses.
New Zealand	22/7, 16.10	Encourage industry operators to develop... arrangements... to maintain the capability to mount an effective response to outbreaks and technical experts, to provide expert technical advice on preparedness and response matters as required.
Iran	WP.54	(The) technological exchange of information amongst States Parties to the Convention should be urged for the peaceful use of genetic engineering, prevention, diagnosis and treatment of diseases caused by microbial and other biological agents or toxins, in particular for infectious diseases, and for other relevant fields of the biosciences and biotechnology.
Iran	WP.54	States Parties to the Convention are encouraged to share their experiences with each other on infectious disease surveillance.
China	WP.18	States Parties should: maintain, strengthen and improve the notification mechanism for disease outbreaks and disease prevention and control measures; (and) enhance consultation, coordination and information-sharing with each other. By promoting technological cooperation and personnel exchanges, States Parties can share experiences in disease prevention and control and relevant research results.
USA	22/7, 12.00	What is important is the issue of transparency. Each country should make the mechanics of its surveillance system known to its neighbours and trading partners. Such transparency builds confidence, facilitates mutual risk analysis, and will promote investment and trade in the future.
China	22/7, 12.20	Strengthen communication at a regional level to confront animal disease.
USA	20/7, 12.55	Systems must be sustainable both politically and technologically over time (and should consider), international data sharing balanced against country sovereignty.
Germany	21/7, 10.55	(The benefits of an) electronic reporting system for outbreaks of infectious disease... (include the ability to deal with and produce) large numbers of reports, standardised description of outbreaks, a minimal additional work load for health departments... and (they are) appropriate for continuous collection of large numbers of outbreaks for international surveillance systems.
UK	WP.20	Due to the potentially vast amounts of information generated and required in these processes, the tools of bioinformatics are of increasing importance.
Netherlands	WP.42	It is essential in a space (such as the EU) that appropriate arrangements be put in place to ensure prompt and secure notification and exchange of information... This in turn requires sharing of knowledge and good practice, laboratory facilities, equipment and products, experts and intervention personnel across the Member States of the EU.
Netherlands	WP.42	(There is a) need to identify relevant experts in the EU and list them in a directory to be shared by the authorities of the Member States.
Iran	WP.54	The WHO, FAO and OIE could play a facilitating role in the exchange of information on infectious disease surveillance amongst State Parties.

China	22/7, 12.20	Strengthen communication with the related IGOs to confront animal disease.
WHO	19/7, 15.15	Global alert and response operations (are) required
Canada	21/7, 17.00	Differing experiences may allow for a useful exchange of ideas in... (relation to) the urban-rural divide.
Pakistan	20/7, 16.24	Awareness programmes on biosafety and biosecurity should be initiated at various levels.
Iran	WP.54	Some countries are still using manual systems for data collection, reporting, analyzing, feedback and dissemination. Reporting data through appropriate electronic systems would facilitate the integration of surveillance activities especially if the system is user-friendly and does not use multiple or different data sets that result in an extra workload or subsequent abandonment. Each State Party could try to establish computerized systems for information management (similar to the) Geographic Information System (GIS).
Iran	WP.54	Information sharing between domestic health departments and the relevant international institutions through national health authorities has to be encouraged (in such a way as to) minimise the administrative implications.
Iran	WP.54	The lack of systematic data exchange amongst laboratories at the national level causes many problems for countries. Therefore the establishment or promotion of national laboratory networking should be enhanced.
USA	21/7, 16.45	The laboratory response network formula for success (includes) secure communications (and) rapid response and reporting.
Germany	WP.2	Develop a system (for electronic outbreak reporting) to allow standardised, up-to-date and easily retrievable epidemiological data management of outbreaks on all administrative levels... The (German) system could serve as a blue print for a multinational outbreak reporting system.
Nigeria	21/7, 16.30	Improve the flow of surveillance information between and within levels of health systems.
UK	WP.20	Essential to the achievement of these objectives (effective disease surveillance, detection and diagnosis) is the availability of a reliable data-handling tool.
UK	WP.20	Effective surveillance systems must be continuous, real-time and should generate alerts to provide the earliest indications of illness.
USA	21/7, 12.12	Recommendation - if high quality data already exists, or can be cheaply obtained, it is not expensive to implement a syndromic surveillance system.
USA	21/7, 12.12	Recommendation - use existing analysis and statistical algorithms for appropriate data sources.

Australia	21/7, 12.34	Surveillance is fundamental to the prevention and control of all communicable diseases. The process for reviewing and strengthening surveillance systems (could include): enhanced surveillance schemes that collate detailed data about risk factors; surveillance of syndromes and specific diseases by community doctors and less common diseases by specialist medical practitioners; surveillance of laboratory evidence of viral illness; detection of threats by surveillance for infections (in) sentinel animals; characterisation of specific organisms that are a public health threat; and measures of implementation such as vaccination to prevent infection.
USA	21/7, 11.35	Strategic decisions should be made regarding the development of specific tools or software at the national level, where it is either inefficient or technically difficult for local participants to build their own.
Nigeria	21/7, 16.30	Integrate multiple surveillance systems so that forms, personnel and resources can be used more effectively.
Nigeria	21/7, 16.30	Improve the use of information for decision-making.
USA	21/7, 17.55	Communication and coordination systems (could be enhanced by addressing) gaps identified by training exercises (as well as) training facilities systems integration.
USA	21/7, 17.55	System integration could be enhanced through training exercises.
UK	23/7, 10.10	Plant pest and disease control... key elements (include) effective intelligence and surveillance to inform risk assessment and policy.
FAO/OIE	22/7, 16.25	The importance of healthy animals for food production and public health needs to be brought to the attention and prioritisation at the Ministry level so that a long term commitment to this public good is achieved.
India	22/7, 15.55	Animal disease surveillance and control (could be strengthened by a) national campaign on emergency diseases.
South Africa	WP.14	Information dissemination to farmers and communities is... important for the recognition of clinical diseases and the early notification of disease outbreaks.
Iran	WP.54	Public awareness of health program and surveillance should be strengthened, in particular in local communities.
Iran	WP.54	In dealing with epidemics of emerging infectious diseases States Parties to the Convention could consider the instructions of the WHO, based on the principles of International Health Regulation (IHR).
Australia	WP.26	The revised IHR, once adopted, would provide a fundamental tool to support the WHO's disease surveillance activities. Moreover, the revised IHR would provide a mechanism for delivering greater transparency through greater disease reporting to the international community and provide a basis for developing national measures.
India	22/7, 15.55	Animal disease surveillance and control (could be strengthened by the) harmonization of test methodologies, (and the) enactment of statutes and the provision of directives.

USA	20/7, 12.55	Systems must be sustainable both politically and technologically over time (and should) enjoy a mandate of official authority.
China	20/7, 15.40	States parties should consider developing standards or best practices for disease surveillance.
USA	21/7, 16.45	(The) laboratory response network formula for success (includes a) unified operational plan, standardise protocols and tests and oversight, and quality laboratory results.
South Africa	WP.14	Procedures should be in place for the rapid proper transport of samples to the laboratory and the onwards dispatch of samples to national, regional or world-reference laboratories.
FAO/OIE	19/7, 16.25	The OIE standards designed to control disease and to prevent the introduction of pathogens should be used as a basis for the harmonisation of legislation. Comprehensive livestock sector development, which includes production, health and policy, are hallmarks of the FAO Animal Production and Health Division as mandated by the Ministries of the member countries.
FAO/OIE	19/7, 16.25	OIE and FAO Member Countries should comply with the OIE guidelines, standards and recommendations and EMPRES principles relating to surveillance and prompt notification of diseases, including zoonoses, of domestic livestock and wild animals.
FAO/OIE	19/7, 16.25	Many countries share a common concern about the natural occurrence or deliberate misuse of biological pathogens that could affect public health, food and animal production. Existing methods of disease prevention and containment, regulations, international guidelines and standards are being extended at both national and international levels to improve the ability of countries to prevent, manage and recover from natural, accidental or deliberate introduction of animal diseases. In this regard there are, at present, substantial differences amongst countries in the perception of the national threat from the deliberate use of pathogenic biological agents.
Australia	WP.29	National standards have been able to draw on international standards for conducting important risk assessments, implementing import policies and procedures, and for developing strategies for preparedness, prevention and response to endemic and exotic animal diseases.
China	WP.18	States Parties can discuss and formulate standard and best practices for disease surveillance in accordance with their national situation and on the basis of the relevant standards of the intergovernmental organizations.
USA	21/7, 11.35	Countries should identify the standards that will be used to support interoperability, ideally international standards for data and system architecture.
USA	21/7, 11.35	Funding awards should specify that standards will be used in systems developed or modified using the funding.
USA	21/7, 11.35	Implement an independent process to certify interoperability functions for systems developed by private sector or state partners.

China	WP.18	With regard to disease surveillance mechanisms, laws and regulations are the foundation, personnel and institutions are the basis, finances and technologies are the guarantee. Taking into consideration specific national situations, States Parties may establish their own operational and effective disease surveillance mechanisms to strengthen their response capabilities to outbreaks of infectious disease.
UK	22/7, 10.25	The main requirements for effective animal disease control (include predetermined) responsibilities, a legal framework, intelligence and surveillance (capabilities), contingency plans, a suitable response including diagnostic mechanisms and recovery (planning).
UK	23/7, 10.10	Plant pest and disease control... key elements (include) (a) legal framework.
New Zealand	22/7, 16.10	Encourage industry operators to develop specific response plans for their business.
Pakistan	20/7, 16.24	Biosafety and biosecurity standards should be formulated by each country, taking into account the best practices.
Germany	WP.7	Establishing a proper legal basis for the use of non-licensed drugs and vaccines in emergency situations will avoid the need for lengthy discussions on the legal status of drugs and vaccines offered for help during, as well as after, international relief operations
Iran	WP.54	Vigilance of physicians and other health care providers are important factors in the surveillance and control of infectious diseases and they are in the best possible position to observe and report usual and unusual illnesses, syndromes and diseases that require regular and continuous training.
USA	21/7, 17.55	Training reinforces and improves (disease surveillance) capabilities (including) clinical and veterinary, epidemiology and public health, laboratory diagnostics and outbreak detection.
South Africa	WP.14	Veterinarians (both state and private), as well as auxiliary animal health personnel, should be adequately trained in the clinical recognition of diseases and in the procedures for the collection and dispatching of samples
Germany	WP.1	It is necessary to... train the attending physicians.
Australia	WP.27	The laboratory network will need to be in a constant state of readiness, possibly requiring regular exercises with colleagues in other laboratories.
USA	21/7, 16.45	The laboratory response network formula for success (includes) trained laboratorians.
Iran	WP.54	Specially designated laboratories have an essential role in disease surveillance and most epidemiological surveillance systems require well-equipped laboratories for confirmation. In order to serve both the routine confirmation of clinical syndromes and rapid confirmation of the causative agent of outbreaks, upgrading laboratories and capacity building should be taken into consideration.
India	20/7, 16.30	Continue efforts to strengthen laboratory capabilities.
Nigeria	21/7, 16.30	Improve laboratory capacity to identify pathogens and monitor sensitivity.

USA	21/7, 16.45	The laboratory response network formula for success (includes) molecular diagnostics, rapid response and reporting, rapid response and reporting, safe secure laboratories, (and) coverage for human, animal, food and environmental specimens.
Pakistan	20/7, 16.24	Risk assessments should be carried out in all respects for pathogenic microorganisms.
UK	23/7, 10.10	Plant pest and disease control... key elements (include a) diagnostic capability.
UK	WP.20	Before a test can be accepted for routine diagnostic use it must demonstrate repeatability, reproducibility, accuracy, precision, sensitivity and specificity. A suitable panel of samples, including a reference standard must be available to test these attributes.
FAO/OIE	19/7, 16.25	The OIE guidelines relating to the biosecurity of laboratories, based on expertise provided from researchers in human and animal health, are recommended for the safe management of biological agents used in those laboratories.
Iran	WP.54	The regional reference laboratories, with due consideration of the important role of national laboratories involved in surveillance of infectious diseases, should provide technical support for capacity building.
Australia	20/7, 16.03	(There is a) necessity for a good global and regional laboratory capability to support disease surveillance and response activities.
Australia	WP.27	Before initiating a (regional) laboratory network there are two prerequisites that must be satisfied. First of all it will be necessary to collate a list of all laboratories with the requisite levels of expertise ... Then, there must be solid regional commitment to effect ongoing resources for building capacity and supporting the network.
Iran	WP.54	The application of biotechnology and scientific research and development, for the prevention, surveillance, detection, diagnosis and treatment of diseases caused by microbial and other biological agents or toxin, in particular infectious diseases, should be available to States Parties on a non-discriminatory basis.
South Africa	WP.11	The States Parties, acting nationally or collectively, should actively support the WHO, FAO and OIE in the continued development and implementation of: programmes that are aimed at regional initiatives for the development of, and research into, speedy, effective and reliable disease surveillance and outbreak response activities; and programmes that are aimed at international initiatives for the development of, and research into, speedy, effective and reliable disease surveillance and outbreak response activities.
South Africa	WP.11	Scientific knowledge and understanding of disease agents and infectious processes are far from complete and continual research is required to keep pace with the natural bio-aggression of microorganisms.
India	20/7, 16.30	Develop additional capabilities to ensure early detection and response to epidemic emergencies.
UK	21/7, 15.35	Real-Time Symptom Surveillance (requires) further investment and research to realise (its) potential benefits.

UK	22/7, 10.25	Animal disease control (should include) effective surveillance and recognition of the unusual.
India	22/7, 15.55	Animal disease surveillance and control (could be strengthened through the) adoption of biotechnological tools.
Germany	WP.1	It is necessary to... develop faster and (more) specific analytical methods.
India	20/7, 16.30	Develop additional national rapid response capabilities.

### Agenda Item 6

Delegation	Date, Time / WP	Text
USA	26/7, 10.13	Effective investigation of any suspected BW event, whether through national, international, cooperative, or other means is essential for promoting international peace and security.
USA	26/7, 10.18	It is important to promote a wide understanding that there are systems capable of detecting suspicious outbreaks of disease and of investigating incidents of alleged BW use.
USA	26/7, 10.20	Resorting to the UN Security Council under Article VI, convening a formal consultative meeting under procedures developed to implement Article V, and conducting international investigations authorised by the UN Secretary-General... all three of these mechanisms remain viable and... revisions to their scope or procedures are neither necessary nor appropriate.
Russian Federation	WP.44	It is obviously necessary to use the potential of the UN Security Council for investigating alleged use of biological weapons.
France	26/7, 16.18	Need (for) coordination (of a global plan to fight against biological risk which would includes) effective and common synergy between all BWC members and an overview of research programmes and their implementation.
Sweden	WP.16	Better coordination between different actors in different countries is needed to reach good and fast surveillance and control.
Netherlands	27/7, 15.35	Scientific research remains essential and requires sustained efforts because: (of ) threats from unexpected or unexplored risks; the pace of scientific progress in clandestine laboratories cannot be objectively measured; the access of terrorist groups to training, expertise, source material and equipment is difficult to map; (and) the validity of risk inventories, priority ranking and risk assessment is time-limited.
Nigeria	28/7, 10.40	Pay close attention to zoonotic and emerging diseases and potential threat agents.
Norway	28/7, 11.55	Any cooperation on primary notification... (or a) call for international assistance and response must be based on national mechanisms.
Norway	28/7, 11.55	Capacity must be developed within existing national structures.
USA	28/7, 12.03	Focus on prevention and control of disease outbreaks (as a) terrorist origin of (an) outbreak may not be clear (and the) preparations for naturally-occurring outbreaks is similar to preparations for bioterror attacks.
USA	28/7, 12.03	Include food-borne pathogens (in thinking as) there is a precedent for bioterrorist use of food contamination.
USA	28/7, 16.35	International cooperation is critical, in balance with (the) need to address national security concerns.
UK	29/7, 10.30	Sampling and analysis are potentially important tools in investigations into alleged use of BW.
Netherlands	WP.74	International attention (on this issue should include) food virology

		(including an) assessment of (the) real contribution (which) viral food pathology (could make).
Netherlands	WP.74	The delay in reporting and the... underreporting of food borne infections and intoxications inhibits a quick rapid response.
India	WP.70	Surveillance is the key to early detection of disease outbreaks and for rapid and effective response.
India	WP.70	An effective and efficient disease surveillance system is crucial for detecting cases of alleged use of biological weapons or suspicious outbreaks of diseases.
Germany	29/7	It is time to go back to past decisions about investigations made by the BWC prior to the protocol negotiations
Germany	29/7	Political questions relating to investigations should be dealt with at the Review Conference, as (the Meeting of Experts)... should only look at technical measures.
Iran	29/7	An effective, universally accepted, mechanism for investigations should be achieved through negotiations
Brazil	29/7	A common understanding should be promoted on the role of experts in operating Article VI on a case by case basis and accordance (with) the Convention
Sweden	WP.16	With the increased perceived threat from (the) intentional release of pathogenic microorganisms, additional aspects of the management of these outbreaks will have to be taken into account. Among them is the need for broader competence which covers both the epidemiological side of an outbreak, as well as the need for some type of forensic knowledge with the main objectives of tracing the perpetrator.
Sweden	WP.16	It is important to remember that handling an allegation of use of (a) biological agents and the investigation that goes with it has two components (disease control and forensic investigation). (They) have to work both in parallel and (along) different tracks and at the same time (they should) be integrated to achieve a maximal output. It is highly likely that the first signs of an intentional release (will be) recognised by the public health / animal health authorities. This means that disease control will be dealt with before a forensic investigation but it is of vital importance that both partners have knowledge about each others' missions and cooperate so that an optimal result is achieved.
Sweden	WP.16	The involvement of additional actors is needed in managing an intentional release.
China	WP.19	The legitimate and equitable rights of the investigated State Party (under the terms of the Convention) could be protected (and) the wasting of investigation resources and unnecessary losses to the investigated State Party (should be) avoided.
Russian Federation	WP.44	It would be logical for a State Party to have powers to request an investigation only in its own territory.
Australia	WP.32	(There is a) need for a whole-of-government effort to manage significant outbreaks of animal disease.

Japan	26/7, 10.30	Enhancing capabilities for responding to a natural or deliberate epidemic of disease affecting humans... (could include): promoting enactment of domestic legislation; strengthening medical and public health structures related to initial response, enhancement of response capabilities and strengthening of collaboration between concerned organizations; countermeasures including point-of-entry inspections; (and) cooperation with international organizations and other countries.
USA	26/7, 10.48	(The) essential pillars of... prevention and protection (include): demonstrating political and financial support for non-proliferation and threat reduction programmes translates into proactive prevention; (and) assessing (the) vulnerability of and protecting critical infrastructure.
USA	26/7, 10.48	(The) essential pillars of... surveillance and detection (include): early warning (including) detection and reporting systems to rapidly recognise and characterise dispersal of biological agents; (and) enhancing deterrence by improving attribution capabilities and improving capabilities to perform forensic analysis.
USA	26/7, 10.48	(The) essential pillars of... response and recovery (include): plans for mass casualty care and risk communication; accelerated development of countermeasures; (and) strategies, guidelines and plans for decontamination of persons, equipment, and facilities.
Australia	26/7, 11.10	(The) six principles of emergency management (include): organisation; command and control; coordination of support; information management; timely action; (and an) effective emergency (disaster) management plan.
USA	26/7, 10.48	(The) essential pillars of... threat awareness and assessment (include): improving our ability to collect, analyse and disseminate information; ensuring an integrated and focused effort to anticipate and response to emerging threats; (and) vulnerability assessments.
Canada	26/7, 11.53	The system (for response could include) prevention (including) screening against entry of additional cases, national and international surveillance and travel advice, control and containment; isolation and quarantine; surveillance and investigation including laboratory testing, national emergency stockpiling system, guidelines for treatment and management; issue management and risk communication (for) intra / inter-governmental and other sector involvement; (and) international collaboration.
Canada	26/7, 12.06	Outbreak control (can include) human resources, evidence based decision making, blood safety and border issues, and quarantine/isolation/contact tracing.
Canada	26/7, 12.13	Infection control (can include) identifying critical control points, optimising efficiency, changing approaches to infection control, changing attitudes and behaviours, (and) strengthening nosocomial and syndromic surveillance systems.

Canada	26/7, 12.15	(A) cross-governmental response to health issues (can include) federal (responses including workplace health, drug approval, transport, missions abroad, income support for individuals and businesses, customs and immigration and national defence); federal / provincial / territorial (responses including) new partnerships in disease control (clinical medicine and public health, public health and law enforcement), research and international cooperation (including information exchanges, travel advisories, and laboratory networks).
France	26/7, 12.33	Addressing allegations of (the) use of CBRN... agents (could include) building a laboratory network (both nationally and internationally), (the) transfer of technologies and protocols; training and accreditation (both internal and external); laboratory validation (both internal and external), (and) sample transport (including) international reference laboratories.
China	26/7, 15.10	Countries should make an effort to enhance outbreak response capabilities, including: the formulation of national laws and regulations; the improvement of supervision of law enforcement in public health; the setting up of effective organizations and agencies for disease surveillance and control and command; the development of contingency plans; increasing clinical personnel and input (resources) for emergency response; strengthening epidemiological / etiological research; increasing financial input and medicine stockpiles; and increasing awareness of biosafety and medical issues, including within the general public, and encouraging public participation in response activities.
France	26/7, 16.18	A possible framework for a common partnership (for a global plan to fight biological risk includes) preparedness, crisis management and rehabilitation. Preparedness (should include) development of detection tools; development of prophylactic means (and) therapeutic means and immunotherapy; and (the) development of animal models for toxicological and pharmaceutical studies. Crisis management (should include) stockpiles of drugs and vaccines; stocks of environmental detection kits (and) stocks of diagnostic detection ticks. Rehabilitation (should include) development of detection tools for circumscription of contamination (and the) development of new means of decontamination.
France	26/7, 16.18	Strengthen the global epidemiological network
Thailand	26/7, 17.10	Preparedness for BWC response... (could include the) study, analysis and updating of the situation of biological and chemical weapons for the promotion (of a) rapid response; strengthening surveillance and responses for the early detection of a BCW outbreaks; development of standard operating procedures for surveillance and response; development (of) guidelines for the supply and allocation of necessary resources; capacity building (for) a response unit / team; development of risk communication and management guidelines; demonstration (rehearsal) and exercises of the response plans (and) national and international research and collaboration.

Netherlands	27/7, 10.20	(The) objectives (of outbreak response could include for) threat awareness and command and control arrangements: (a) mechanism for information exchange, consultation (and) coordination; (for) surveillance and detection: (a) capability for inventorying, detection and identification: (for) response and recovery: medicine stocks and health service databases and an arrangement for the provision of medicines, specialists, other medical goods and infrastructure; (and for) prevention and protection: (the) interdiction of agent movement and critical infrastructure protection, including legislation, rules and guidance and coordination of the... response... (and) links with third countries and international organizations.
Netherlands	27/7, 10.28	Current priorities (for outbreak response, include the) development of a unified preparedness and response capability through general emergency plans and unified command and control centres; risk and crisis communication and management; incident investigation and environmental sampling, including protocols and detection; health resources and mutual assistance, including minimal requirements; exercises and emergency plan evaluation; and public health intelligence and threat monitoring and assessment in liaison with security and law enforcement services.
USA	27/7, 15.57	Develop critical public health infrastructure and core capabilities to ensure communities and states can detect and control infectious diseases.
USA	27/7, 15.57	Enhance capabilities for early disease detection and control, receipt and delivery of antibiotics and vaccines, (and the) strengthening of laboratory systems.
USA	27/7, 16.00	One way to (prepare public health responses to alleged use or suspicious outbreaks) includes the development of work plans (which could include) documentation indicating achievement of critical benchmarks; brief proposals for other objectives (including a) plan for approach, measurable milestones, (and) estimated budget; actionable, well-defined and achievable objectives; (and) measurable outcomes that (are indicative of) enhanced preparedness and a capacity to respond.
USA	27/7, 16.03	Examples of priority benchmarks (to help prepare public health responses to alleged use or suspicious outbreaks include): designation (of) senior public health official to serve as Executive Director(s) of bioterrorism programmes; Advisory Committee including (a) broad range of representatives (from both the public and private sectors); plans for the dissemination of health information; plans for the receipt and delivery of material from national pharmaceutical stockpiles; the evaluation of disease reports on a 24/7 basis; accessing training needs; (and) ensuring (the existence of) working relationships and communication among all laboratory levels.
Russian Federation	28/7, 10.58	Relevant materials of the Ad Hoc Group of the BWC States Parties( for example the Chapter on investigations of the draft BWC verification Protocol) could be used as a basis for the development of specific technical procedures for carrying out investigations.

Russian Federation	WP.44	(The) consideration and adoption of necessary measures related to unusual outbreaks of infectious diseases is the prerogative of national authorities. Besides national authorities, the investigation of unusual outbreaks of diseases can be carried out with the participation of international organizations (WHO, FAO, OIE, etc.).
USA	28/7, 11.04	Investigations should be timely and accurate; comprehensive and objective; epidemiologically sound; grounded in bioforensic analysis; support findings of fact and legal determinations; (and) closely coordinate efforts.
Russian Federation	WP.44	To launch an investigation of (the) alleged use of biological weapons it is important for the complaint to contain reliable information without which the investigation could not take place.
USA	28/7, 11.15	(Develop nationally): global biosafety standards; recognized attribution standards / benchmarks; systems to certify laboratory and laboratory staff expertise; establish investigation / collection protocols; strengthen global surveillance; build national epidemiological investigative teams; (and) build universal pathogen databases.
USA	28/7, 12.03	Community support (is one way of) dealing with secondary effects of disease and quarantine.
USA	28/7, 16.35	Enhanced public health infrastructure prepares us whether events are naturally occurring or intentional.
China	28/7, 17.10	If any State Party to the Convention has concerns about suspicious outbreaks of disease and asks the Security Council for an investigation, it should provide valid evidence and detailed data to prove that the relevant outbreak of disease is not natural but directly linked to activities prohibited under the Convention. In addition, before launching the investigation there should be adequate coordination and communication among (States Parties) so as to establish the facts.
Australia	WP.75	The Australian Manual on Emergency Management could serve as a model for other States Parties looking to incorporate biological weapons preparedness and response into existing emergency management programmes.
Netherlands	WP.74	International early warning systems such as RASFF/ INFOSAN (could) be scrutinized.
Netherlands	WP.74	Add accessibility as a CCP in HACCP system; and inspect and enforce this.
Netherlands	WP.74	Food Counter Terrorism calls for an integrated approach in which the following aspects are simultaneously addressed: recognition; detection; outbreak response; (and) prevention.
Iran	WP.68	The most effective universally acceptable investigation mechanism could only be established on the basis of a multilaterally negotiated legally binding instrument based on the Convention.
Russian Federation	WP.44	Implementation of the provisions on investigations will be most efficient only if the other elements of a verification mechanism for the Convention on the Prohibition of Biological Weapons are established. In this context, we reaffirm our position as to the necessity of comprehensively tackling this problem by establishing a control mechanism for the BWC.

Iran	WP.68	The (Secretary-General's) investigation mechanism is not appropriate (for use under the Convention) since it (was established) on the basis of the international political and security environment of the 1980s, when the Chemical Weapons Convention had not been finalized nor entered into force and the Ad Hoc Group negotiation for a Protocol strengthening the implementation of the Convention had not come into being. The text of these guidelines and technical procedures for an investigation has not been negotiated by States Parties to the Convention and therefore do not fully reflect their legitimate and immediate concerns.
Germany	29/7	(Questions over the) role of IGOs (include): are they qualified for investigations? Is this the job of Member States? It should be noted that IGOs rely on Member States to provide their capabilities (for investigations).
Cuba	29/7	States Parties should: create an adequate national medical system that can response efficiently to outbreaks of disease; contribute to the training of necessary human resources to fight outbreaks of disease; transfer technologies that contribute to the improvement of national capacities of diagnosis and investigation of outbreaks of disease; and support academic and scientific exchange between national experts dealing with biological security.
Cuba	29/7	The work of WHO, FAO, OIE etc., however important, should not be mixed up with work being done within the Convention
Brazil	29/7	The mechanisms in the Chemical Weapons Convention on how to deal with non-member States of the OPCW could be usefully studied for the Convention.
Brazil	29/7	WHO and other relevant IGOs should keep to their mandate of giving assistance in surveillance and response to States that ask for it, and not be given a role in investigations.
South Africa	WP.15	International organizations such as the WHO, OIE and FAO who are usually involved in coordinating the provision of aid to response to disease outbreaks would probably be involved in these actions (outbreak response) without regard to cause and they should continue to play the primary coordinating role under such circumstances.
Sweden	WP.16	An international structure, not coupled to ordinary (existing) national resources, that has the capacity to support the already existing national operational structures, preferably with expertise within the field of biological weapons, epidemiology, public health and legal matters, would therefore be of vital importance.
Sweden	WP.16	Problems that need to be solved (include): the format for the coordination between different national and international actors needs defining; the possibility of using national expertise in international teams investigating events in other countries; (and) the disposition of national experts in any international organisational structure with the authorisation to work in a requesting country.

China	WP.19	On the detection of a suspicious outbreak of disease, one State Party should: share relevant information with (the) others, determine the causes and control the disease in a timely and expeditious manner. If the outbreak of disease exceeds the State Party's control capability, it should request relevant assistances from World Health Organization or other international organizations. Moreover, according to the confidence building measures stipulated in the Convention, the occurrence of suspicious outbreaks of infectious disease should be reported to relevant bodies of the United Nations in a timely manner.
Australia	WP.31	A first step in establishing effective emergency or disaster management arrangements is to identify natural and human-made hazards which may affect the community or nation. Identified hazards must be evaluated in a structured way and appropriate responses developed, implemented, tested and reviewed. Hazard analysis will involved measuring or estimating the likelihood of an event taking place and the possible consequences of each event. Once hazard analysis programs have been put in place, arrangements to deal with the more likely - or high consequence threats can be designed using... broad principles.
Australia	WP.31	Effective emergency (disaster) management must be supported by an organisation and organisational framework in which to operate. This is required to establish functional responsibilities for prevention, preparedness, response and recovery. Prevention and recovery will be the responsibility of many government departments, each having a small role. It is necessary to set up standing interdepartmental arrangements for co-ordination of effort. Preparedness and response activities are usually more homogeneous, although the need for interdepartmental and inter-agency arrangements to support planning, control, co-ordination and resource management is just as important. The emergency (disaster) management organisation should be established in legislation and interdepartmental plans.
Australia	WP.32	A whole-of-government approach in partnership with industry is essential for emergency disease preparedness, response and recovery measures following an outbreak. This approach must include exhaustive pre-planning, with clearly defined organisational roles and responsibilities and tasks allocated to teams with the appropriate skills.
Canada	WP.37	To develop sound biological counter-terrorism prevention, preparedness, and response mechanism, new models to systematically analyse the risk of bio-terrorism and assess the key knowledge and scientific gaps must be developed and employed. This systematic approach can be both the basis for the development of national programmes but equally importantly, given the international dimensions of the problem and the likely requirements for international cooperation to manage the consequence of many BW attacks, the basis for developing international collaborative programmes as well.
USA	26/7, 10.15	In situations where countries lack sufficient expertise or resources to conduct an effective national investigation, assistance could be sought from other countries or international organizations.

China	26/7, 15.10	International cooperation for surveillance and response is indispensable. (This should include) strengthen cooperation, information exchange and the sharing of results. Countries in a position to do so, should provide assistance to others... SPs should strengthen cooperation with IGOs to make best use of (their) resources.
China	26/7, 15.10	IGOs (could) formulate guiding principles for (a) mechanism for cooperation (including) technical information and support especially for developing countries.
France	26/7, 16.18	Consolidation (of) international cooperation and criminalisation against trafficking and fraudulent use of pathogens and toxins (is desirable and represents a step) towards international traceability and cooperation in order to fight against the fraudulent use of pathogens.
France	26/7, 16.18	Develop and strengthen epidemiological networks and global alert systems under the aegis of WHO, OIE, FAO.
Iran	26/7, 17.57	(It is) essential (for) mitigating the effects of the alleged use (of biological weapons) or suspicious outbreaks of disease that: States Parties advanced in biotechnology and biosafety, to the fullest degree possible, transfer materials, equipment and biological information, as well as capabilities for the detection and protection against such agents, to developing States Parties; each States Party possessing the capability to do so, identify medical veterinary or other forms of assistance and provide training, national and international rapid response teams as well as detection capabilities to other States Parties; resources are made available through bilateral and multilateral assistance agreements conducted in advance; that the United Nations and the relevant IGOs (WHO, FAO OIE), with due consideration to their standing mandates, have a coordination role in the provision of assistance; and States Parties, when requested to provide assistance, provide timely emergency assistance and that requests are considered and a response be provided.
Norway	28/7, 11.55	A virtual network for cooperation between laboratories already exists, but suffers problems related to the international transport of sample materials. This constitutes a veritable, but unnecessary obstacle against efficient cooperation and should be addressed as a priority topic.
Norway	28/7, 11.55	Intergovernmental organizations that contribute to preparedness (highlight) the primacy of national emergency response procedures... (They suggest) cooperation between states and with inter-governmental organizations should start (by) addressing national preparedness, both technical (diagnostic and medical) and organizational (disaster management).
USA	28/7, 12.03	Medical surge capacity requires advance planning.
China	28/7, 17.10	The relevant international organizations, such as the WHO, OIE, FAO, should fulfil their obligations in strict compliance with their Charters and relevant Resolutions. They have no right to carry out investigation of the alleged use of biological weapons or suspicious outbreaks of disease. However, they can provide technological assistance to the latter when requested.

Brazil	29/7	States Parties should consider international cooperation in accordance with Article X.
South Africa	WP.15	It is proposed that a State Party should directly request other States Parties and relevant international organizations, such as the WHO, OIE and FAO, to render assistance. In this regard States Parties should support the response capabilities of the WHO, OIE and FAO.
Iran	WP.58	The States Parties could coordinate procedures for assistance in order to ensure the provision of timely emergency assistance. A request for assistance should be promptly considered and an appropriate response should be provided. In this context, pending consideration of a decision by the United Nations Security Council, timely emergency assistance could be provided by States Parties and/or appropriate International Organizations, upon request.
Iran	WP.58	In the event of a case of the alleged use of biological agents or (a suspicious) outbreak of diseases, the United Nations, with the help of appropriate intergovernmental organizations, such as World Health Organization (WHO), Office of International des Epizootic (OIE) and Food and Agriculture Organization (FAO) with due consideration for their statutory mandate, could play a coordinating role in providing humanitarian emergency assistance.
Iran	WP.58	States Parties are urged to provide assistance bilaterally and/or multilaterally through relevant agreements concluded in advance with other States Parties, concerning emergency assistance in cases of outbreak of diseases.
Iran	WP.58	States Parties, advanced in biotechnology and biosafety, should be urged to facilitate the fullest possible transfer of equipment, material and scientific and technological information concerning (both) means of detection and protection against bacteriological (biological) and toxin weapons to developing States Parties.
Iran	WP.58	Each State Party, in a position to do so, should identify possible types of medical, veterinary or other assistance available and to the extent possible, provide or contribute to the training and operation of national and/or international rapid response teams for emergency medical assistance, as well as, (the) necessary materials and equipment, especially for detection
South Africa	WP.15	In order to enhance international capabilities to investigate such incidents, a State Party should directly request other States Parties for support in handling the outbreak as well as conducting an investigation before the involvement of the United Nations Security Council
Sweden	WP.16	The establishment of an independent international support team would be desirable so that the consequences of an alleged use could be handled in an expedient manner... an independent international team would add a higher degree of credibility to any result coming out of the extensive investigation if the results are questioned.
Sweden	WP.16	The missing part today is primarily a lack of structures to integrate the different areas (of) an investigation.

China	WP.19	States Parties in a position to do so may, under the request of disease affected States Parties, provide financial and technological assistance to the latter. Relevant international organizations can also give full play of their manpower and technological (capabilities).
Germany	26/7	Establishing a mechanism for the import, stockpiling and use of non-licensed drugs side-steps legal requirements for emergency or disaster relief and could be conducted by any country.
China	26/7, 15.10	Develop national measures for disease surveillance and response, in line with national requirements.
Romania	27/7, 15.30	Develop (outbreak response) cooperation between county public departments.
USA	27/7, 15.57	Coordinate medical and public health preparedness with other efforts at the community, State and Federal levels.
Canada	WP.66	Command and control are vital elements of any operation.
Canada	WP.66	To confront the worst-case scenario of a successful attack, adequate measures must be in place to deal with the occurrence, to investigate the nature of the incident, and if possible, to discover those responsible.
Sweden	WP.16	Better coordination between different actors in different countries is needed to reach good (effective) and fast surveillance and control.
Sweden	WP.16	Once what could be defined as a suspicious event has been identified, cooperation between the authorities responsible for human and veterinary epidemiology and forensic investigations is needed to verify if the outbreak is natural or man-made.
Australia	WP.31	Prior to an emergency or disaster, the responsibility for overall control of the situation and for the command of each organisational element involved will need to be clearly specified in either legislation or the emergency (disaster) plan.
Australia	WP.31	The authority and responsibility for assembling resources to support any counter-disaster operation will need to be specified in the (emergency) disaster plan.
Australia	WP.31	If responses are to be timely, activation of plans should be independent of declarations of states of emergency or disaster. Authority to activate part or all of the plan should be vested in an appropriate authority, preferably the designated controller.
France	WP.55	The aim is to (accomplish): the setting up of an international network of competent laboratories; the transfer of technologies and protocols helping to disseminate capacities globally; the training of persons competent to address allegations; the institution of laboratories' validation methods (and the consideration of the) transport of contaminated samples.
Canada	26/7, 11.51	Amend medical history recording procedures to incorporate questions over whether there has been contact with others that have travelled recently.
Canada	26/7, 12.18	Risk perception (and) risk communication (can consider): vulnerability to travel advisories; public health recommendations; clear communication of epidemiological situation; and control measures essential to show control over situation.

Canada	26/7, 12.20	(There is a) critical role (for) communications in consequence management
France	26/7, 12.51	Incorporate (a discussion of) the ownership of samples into any (consideration of) the development of a laboratory network to address chemical, biological, radiological or nuclear agents.
Japan	27/7, 10.50	When there is an outbreak it is most important to keep the public and press informed.
Romania	27/7, 15.30	Develop communication between central institutions (involved in outbreak response).
Netherlands	27/7, 15.42	Achieving interoperability and integrated systems for information and communication (is desirable).
USA	27/7, 15.57	Develop effective risk communication and an information dissemination strategy to address community needs.
USA	28/7, 12.03	Public information can build public trust and cooperation during emergencies.
USA	28/7, 12.03	Community support (is one way of) dealing with (the) secondary effects of disease and quarantine.
Netherlands	WP.74	Stimulate (a greater) public perception of food borne infections and intoxications (including through) the use of notifications.
Netherlands	WP.74	Improvement of notifications and case / food analysis is an imperative.
Netherlands	WP.74	Intensify risk communication.
Netherlands	WP.74	The existing systems of reporting outbreaks of food borne infections and intoxications is relatively insensitive (regarding) epidemics such as those caused by intentional (or) terrorist activities.
Sweden	WP.16	Improved systems / communication could alert public health and agriculture officials as to the existence of a potential bio-attack earlier than (just) waiting for a report of a suspicious cluster of similar clinical cases from traditional surveillance systems.
China	WP.19	If any State Party to the Convention has concerns about a suspicious outbreak of disease and requests an investigation by the United Nations Security Council, it should provide valid evidence and detailed data to prove that the relevant outbreak of disease is directly linked to activities prohibited under the Convention rather than just (being) a natural outbreaks. In addition, States Parties to the Convention should have (had) adequate coordination and communication amongst themselves to iron out the facts before launching an investigation.
Australia	WP.31	Effective management of information is essential to deal successfully with emergencies and disasters. Communication networks will be needed between organisations and agencies to ensure that preparedness measures and response operations can be properly coordinated. There is also a requirement for community information, which covers prevention, preparedness, response and recovery. People must be aware of hazards they face and how to avoid them, or reduce their effects. They need to be aware of emergency/disaster management arrangements in their local area and when a threat emerges they must be warned of it and advised what to do prior to and post-impact.

France	WP.55	It is necessary... to have a national and international network for the dissemination of knowledge, technologies and protocols, aimed at building the necessary national capacities whose results (can be) accepted by all.
Germany	26/7, 16.10	Publish consensus standards for building quarantine wards (including a) definition of minimal requirements for personnel, material and logistic competence (and) treatment and care of patients with highly contagious diseases (including) guidelines / recommendations for clinical diagnosis, therapy and the prevention of nosocomial transmissions (and) study planning (e.g. vaccines).
France	26/7, 16.18	Harmonise national, regional and international response plans, in particular for interoperability, in connection with WHO, OIE, FAO and according to (their) policies.
Nigeria	28/7, 10.40	Develop a Code of Conduct for scientists and other professionals handling biological materials.
USA	28/7, 11.16	Investigations must reflect the best scientific protocols.
USA	28/7, 11.16	Investigations must incorporate the best investigative methods.
USA	28/7, 11.16	Investigations must include the best law enforcement practices.
USA	28/7, 11.16	Investigations must exhibit objectivity and accuracy.
Iran	WP.69	Any international measure to enhancing capabilities in combating alleged use (of a biological weapon or a) suspicious outbreak of diseases has to be based on internationally recognized definitions.
Brazil	29/7	The term 'suspicious outbreaks' should be defined under the Convention.
China	WP.19	Strengthen national legislation and put in place (or implement) a strict legal system (to enforce it).
China	WP.19	Train professionals and (invest) more resources so as to provide adequate manpower and material resources.
China	WP.19	Enhance the construction of public health infrastructure and improve disease surveillance, prevention and control systems.
China	WP.19	Step up scientific research efforts to enhance capacity (including in) disease surveillance and prevention.
China	WP.19	Enhance public awareness of self-protection and prevention against disease.
Australia	WP.31	To be effective it (an effective emergency / disaster plan) must be written, simple, properly disseminated and regularly tested and revised.
France	WP.55	Devise and apply accreditation standards for network laboratories. This further requires establishing a real or virtual agency empowered to issue that accreditation.
France	WP.55	(Laboratory) accreditation will not be considered unless laboratory staff are thoroughly technically trained (from equipment use to maintenance, as well as in regulatory areas and in interpreting results).

France	WP.55	Validation techniques must be provided for, to maintain the competencies introduced. (These could include): internal validation by providing secure positive markers and regular testing of techniques and protocols; external validation through random quality control (testing) of samples by identified international laboratories.
France	WP.55	IATA standards for the transport of biological samples are currently in force. However, chemical, biological, radiological and nuclear hazards have a special risk value and refusals of transport are to be expected. It is essential to analyse what conditions (would need) to be introduced to ensure that (the) transport of such samples is accepted.
Germany	WP.4	While several technical platforms and methods are in principle available for (the detection of biological warfare agents and diagnosis of related disorders), more work is required to establish with greater certitude how to apply these procedures to biological warfare agents and disorders.
Netherlands	27/7, 15.35	Bio-security is activity-oriented (task specific), but where possible should allow extrapolation of results to other fields.
USA	27/7, 15.57	Lead a national bioscience research and development effort (for) civilian biodefence.
USA	28/7, 12.03	New technologies can improve outbreak emergency response.
UK	29/7, 10.30	(There are) techniques and methodologies available / under development for (the) analysis of biological warfare agents in complex samples (but it is necessary to) recognise (the) limitations (and) develop methodologies to minimise these (including the) development (of) full validated analytical procedures (and the) training and accreditation of staff.
USA	26/7, 15.21	Make use of basic microbiological techniques for the rapid detection of biological warfare agents (because it): determines (the) viability of (a) threat (which could prove) critical for public health decisions; (facilitates) epidemiological mapping; (facilitates) forensic analysis; (and involves) limited technological requirements and (so is) cost effective
Nigeria	28/7, 10.40	Enforcement of restrictions on access to biological materials.
USA	28/7, 12.03	Bioforensics can help distinguish terrorist attacks from other causes of outbreaks.
USA	28/7, 16.35	The assessment of laboratory capacity and the improvement of linkages amongst laboratories is needed.
Netherlands	WP.74	International collaboration on laboratory assays and the exchange of methodologies (is desirable and should be undertaken) without competition.

UK	29/7, 10.30	Considerations for investigations into (the) alleged use of biological warfare... (include): that sample screening methods must provide protection for analysts handling unknown chemical, biological or radiological materials whilst maintaining the sample's forensic integrity (such as mechanisms to) maintain chemical, biological or radiological agents, maintain fingerprints, (and) maintain DNA evidence; that all analysts and screening must be carried out in the appropriate biological containment laboratories; (that such processes are suitable for use) on the battlefield and can be used in relation to bioterrorism; that biological mass spectrometry has great promise for the detection of agents; that it is necessary to differentiate between different strains of agents, as some would appear naturally and may appear through contamination; that large amounts of certain agents (can be found) in, for example, soil and would appear to indicate use; (and that) the environment (is taken into account) in the case of environmental samples, e.g. is the site near a vaccine facility?
UK	29/7, 10.30	(Consideration of) sampling and analysis (should include)... sample types; handling, screening and accurate and reliable analysis; (and) appropriate and safe facilities and equipment.
Sweden	WP.16	A high level of reliability in testing complex samples has to be accomplished. One way to achieve this is through the establishment of a network of test-laboratories among which the responsibility is shared.
Australia	WP.31	Great care must be taken when using laboratory services to ensure that the problem is correctly diagnosed and not compounded. Sample collection must be done strictly in accordance with guidelines; a chain of custody must be established; labelling, (and) handling and shipment (transport) rules must be implemented rigorously. It is imperative that rules and regulations covering these matters are developed and incorporated into emergency plans.
France	WP.55	It is vital to have a national laboratory network making it possible to address the risk comprehensively.
France	WP.55	Samples should be transported rapidly to laboratories for confirmation.
France	WP.55	The need to develop a network of laboratories dedicated to chemical, biological, radiological and nuclear threats is obvious, but there is no structure to host them.
France	WP.55	There is a need to formulate the conditions for setting up a network (of laboratories dedicated to chemical, biological, radiological and nuclear threats) whose existence is necessary and which is scientifically feasible and without posing major difficulties.
Sweden	WP.16	With the increase in the perception of the level of threat posed by the intentional release of pathogenic microorganisms, additional aspects of the management of these outbreaks will have to be taken into account. Among them is the need for broader competence covering both the epidemiological as well as the forensic sides of an outbreak.
USA	27/7, 15.57	Train public health (personnel) and (establish a) workforce for bioterrorism preparedness and response.

USA	27/7, 15.57	Ensure community and regional health care systems are prepared for the medical and psychological needs of victims as well as the 'worried-well'.
Netherlands	WP.74	International exercises and ring tests for food borne infections and intoxications (are desirable).
Canada	WP.66	Training for a chemical, biological, radiological or nuclear incident is important.
South Africa	WP.15	In order to enhance international capabilities to investigate such incidents, efforts by law enforcement agencies to improve their capabilities to investigate incidents of terrorism with biological agents or toxins should be supported.
China	WP.19	Relevant international organizations and States Parties may hold workshops and seminars to explore how to mitigate and avoid the negative consequences of an outbreak of disease.
Australia	WP.31	It is important responsible authorities act on lessons learnt... (from the) examination of chemical, biological or radiological incidents.
Iran	WP.68	The (Secretary-General's) investigation mechanism is not appropriate (for use under the Convention) since it (was established) on the basis of the international political and security environment of the 1980s, when the Chemical Weapons Convention had not been finalized nor entered into force and the Ad Hoc Group negotiation for a Protocol strengthening the implementation of the Convention had not come into being. The text of these guidelines and technical procedures for an investigation has not been negotiated by States Parties to the Convention and therefore do not fully reflect their legitimate and immediate concerns.
Iran	28/7, 11.48	The United Nations Secretary-General's investigative mechanism is not suitable as it was developed during the 1980's and was not negotiated by the States Parties to the Convention.
China	28/7, 17.10	(The Secretary-General investigative mechanism) only deals with the alleged use of biological and chemical weapons and has its legal basis from the 1925 Geneva Protocol. The mechanism was not created for the purpose investigating compliance with the Convention. Therefore, it will be incomprehensive to use this mechanism as the verification mechanism for the Convention.
China	28/7, 17.10	(The Secretary-General investigative mechanism) was drafted by 6 experts... from US, UK, France, USSR, Egypt and Bulgaria. There were no experts from Asia or Latin America. It is self evident whether or not the formation of this expert group enjoyed representiveness and geographical equality. Therefore, it is thus worth considering the necessity of discussing and agreeing upon an investigation procedure by all United Nations Member States.
Iran	28/7, 11.50	An investigative mechanism (should be) part of a multilateral, negotiated, legally binding instrument based upon the Convention.

South Africa	WP.15	In order to enhance international capabilities to investigate such incidents, the Secretary-General should be requested to review the existing procedures contained in the Secretary-General's report (A/44/561) on Chemical and Bacteriological (Biological) Weapons dated 4 October 1989 and endorsed by the General Assembly on 4 December 1990 (A/Res/45/57). The report of the Secretary-General on such a review can then be provided to States Parties for their consideration, (and) expert consultants can be utilised for such a review.
USA	26/7, 10.15	States Parties could make a national contribution to the existing (Secretary-General investigative) mechanism by updating their contributions for the list of qualified experts and laboratories.
Germany	WP.10	(In respect of the Secretary-General's mechanism) it seems high time to update the lists of experts and laboratories as well as to assess the procedures and guidelines in light of recent technological developments.
Germany	WP.10	(In respect of the Secretary-General's investigative mechanism) special attention should be paid to the recommendations: that Member States may designate qualified experts to be placed on lists, which should be periodically updated; that Member States should make available to the designated experts any equipment necessary for the investigation; (and) that Member States may designate laboratories to be placed on lists, which should be periodically updated.
UK	WP.56	Recent experiences and technical developments (could be used)... to update the existing alleged use investigation system under the auspices of the United Nations Secretary-General... Appropriate changes could be incorporated in revised guidelines.
Germany	29/7	The changes in political environment since the adoption of the Secretary-General's investigative mechanism does not mean the context is not valid.
China	28/7, 17.20	United Nations Member States who are also States Parties to the Convention (could) explore the possibility of establishing a brand new investigation mechanism by reviewing the Secretary-General investigation mechanism, taking into consideration current developments and relevant requirements of the Convention, and drawing upon the Protocol negotiated results on investigation procedures, as well as feasible experiences of the... United Nations Expert Report.
China	28/7, 17.10	(The Secretary-General's) mechanism required the Member States of the United Nations to provide, on a voluntary basis, lists of qualified experts and a laboratory capable of conducting investigations. Specific requirements should be codified to ensure the representiveness and geographic equality amongst experts as well as laboratories.

Germany	WP.10	(In respect of the Secretary-General's investigative mechanism) special attention should be paid to the recommendations: that expert consultants chosen by the Secretary-General on the basis of their personal abilities should assist him in a consultative capacity where competence is required; (and) that expert consultants should assist the Secretary-General in organising the composition of teams of qualified experts, preparing programmes for calibration of equipment, evaluating the qualification of laboratories as well as periodically updating the procedures and methods for determining whether chemical, biological or toxin weapons use has occurred.
UK	WP.56	The list of designated personnel must be kept up to date to ensure not only that there is a wide range of relevant scientific and technical expertise available, but also that sufficient numbers of experts could be deployed at relatively short notice. States Parties might begin to identify the types of expertise that would be required, as a basis for a request from the United Nations Secretary General for a new round of nominations, if required. The report of the States Parties meeting should encourage Member States to up-date, or to make as appropriate, their nominations to the United Nations Secretary-General
South Africa	WP.15	The Secretary-General should formally request States Parties to nominate <u>Qualified Experts using the guidelines provided.</u>
South Africa	WP.15	The list of areas of expertise of Experts should be reviewed
South Africa	28/7, 15.52	Include law enforcement experts on the list of experts (in the Secretary-General mechanism)
South Africa	WP.15	The list of laboratory specialisations in Appendix V (of the Secretary-General's investigative mechanism) and the information to be provided by States in designation of analytical laboratories should be reviewed.
South Africa	WP.15	The existing requirements for, and functions of, laboratories concentrate on analysis for chemical agents with very little reference to biological analyses. This section needs to be reviewed. The following issues should also be considered: development of a list of the types of analytical laboratories required; the Secretary-General may terminate the designation of a laboratory on the request of the nominating State Party or if such a laboratory falls below the required proficiency standards; in order to ensure the security and confidentiality of samples of being analysed, the Secretary-General should enter into specific agreements with designated laboratories as soon as possible after the designation of each laboratory.

UK	WP.56	A much wider range of laboratories would be needed to support a comprehensive biological warfare analytical capability covering bacteria, viruses, toxins and fungi that affect humans, animals and plants. It is worth considering whether criteria for the designation and certification of biological laboratories, including proficiency standards and procedures, could be developed by experts appointed by the United Nations Secretary-General. We should also consider security and confidentiality requirements for information held in such a system. All such developments could represent a significant strengthening of the existing rudimentary system.
Germany	29/7	In reference to the Secretary-General's investigative mechanism, it is necessary not just to have procedures but also to have insights into these procedures. It is necessary to see that procedures and technologies are updated: lists of experts should include the names of experts and an evaluation of their expertise; and laboratories should be listed and evaluated. This process should be similar to the Organization for the Prohibition of Chemical Weapons' system for laboratories.
UK	WP.56	There would at some stage be a need for a system of regular exercises in which designated experts and laboratories were tested in realistic training environments.
Germany	WP.10	(In respect of the Secretary-General's investigative mechanism) special attention should be paid to the recommendations: that Member States may designate relevant specialised training courses available to qualified experts; that the abilities and expertise of the qualified experts may be evaluated by the Secretary-General with the assistance of the expert consultants; (and) that designating laboratories may be called upon by the Secretary-General to participate in inter-laboratory calibration studies so as to establish their validity and accuracy.
UK	WP.56	Any (Secretary-General's investigative mechanism) list (of information to be provided in support of a request for an investigation) should be illustrative, but some standard approaches may be helpful. The types of information that appears in the Report's Appendix I could be reviewed and amplified where necessary to include a more specific reference to epidemiological information and any initial diagnoses by the Member State.
South Africa	WP.15	The members of the investigation team should, unless authorized by the Secretary-General, be prohibited at all times from communicating directly or indirectly on any matter related to the investigation with any person or institution other than the members of the investigation team or the Secretary-General.
South Africa	WP.15	The receiving State Party (under the Secretary-General's investigative mechanism) should provide or arrange for the amenities necessary for the (investigation) team such as transport, communications, interpretation, working space, lodging, meals and emergency medical care.

South Africa	WP.15	The Secretary-General supported by other States Parties should provide equipment that the receiving State Party cannot provide. The receiving State Party should communicate with the Secretary-General prior to the investigation to determine who would supply the equipment required.
South Africa	WP.15	The requirement that equipment for use during the response/investigations (under the Secretary-General's investigative mechanism) be provided by the State Party receiving an investigation should be emphasised.
South Africa	WP.15	The list of equipment in Appendix III (Secretary-General's investigative mechanism) should be updated.
UK	WP.56	(The Secretary -General's investigative mechanism) itemises equipment required for investigations... the Organization for the Prohibition of Chemical Weapons has developed an equipment list for its inspections, some of which would be relevant to a BW investigation. We might compare specifications and packing arrangements to see what could be transposed to the United Nations Secretary-General system.
South Africa	WP.15	Financial issues such as indications of responsibilities for funding of an investigation should be considered (under the Secretary-General's investigative mechanism).
UK	WP.56	An ability to move an investigation team at short notice to potentially remote and inaccessible areas is a key factor in any effective investigation of alleged use... One option would be for the various organisations / systems (Organization for the Prohibition of Chemical Weapons and Provisional Technical Secretariat of the Comprehensive Test Ban Treaty) to pool efforts in a joint approach to this problem.
South Africa	WP.15	The members of the investigation team should, unless authorized by the Secretary-General, be prohibited at all times from communicating directly or indirectly on any matter related to the investigation with any person or institution other than the members of the investigation team or the Secretary-General.
UK	WP.56	Physical examination of victims, including the collection of biomedical samples... must be a feature of any meaningful investigation. So too must a review of medical records, as recognised by the 1989 Report. Post-mortems and the collection, and analysis of pathological samples will be necessary.
South Africa	WP.15	The model interview questionnaire in Appendix IX (of the Secretary-General's investigative mechanism) concentrates on chemical incidents and should be updated to provide for biological and toxin incidents as well.

UK	WP.56	Interviews are one of the most important techniques in any investigation. The authors of the 1989 Report prepared a model questionnaire limited to eyewitnesses or victims of any alleged attack. Other possible interviewees could be relevant, for example, national health, medical, veterinary or phytosanitary officials. A revision of procedures should consider this. The model questionnaire might also be re-examined since many of its questions are more appropriate to an alleged chemical warfare rather than biological warfare attack. New questions might include the location of the victim at the time of the suspected attack and a description of the symptoms.
UK	WP.56	Access to national epidemiological information would also play an important part in ensuring any investigation's effectiveness... any revised procedures should explicitly state that one of the tasks for any investigation team would be to request access to relevant background documentation covering human, animal and plant disease outbreaks and any epidemiological enquires carried out by national bodies.
South Africa	WP.15	Appendices VII and VIII (of the Secretary-General's investigative mechanism) describe sampling procedures (which) provide primarily for sampling after a chemical weapons incident. They should be reviewed with a view to provide for sampling after biological or toxins weapons incidents.
South Africa	WP.15	Measures to ensure the safety and security of samples should be included (in the Secretary-General's investigative mechanism).
South Africa	WP.15	Procedures to ensure the chain of custody of samples (in the Secretary-General's investigative mechanism) should be reviewed. The experience developed in the Organization for the Prohibition of Chemical Weapons could be utilised in this effort.
UK	WP.57	Sampling and analysis have been identified as potentially important tools in investigations into the alleged use of biological weapons, for example, under the auspices of the United Nations Secretary-General. Experience... suggests that careful consideration needs to be given to the types of samples that may be taken, and the challenges they may pose to timely handling, screening and accurate and reliable analysis, and to the facilities and equipment in which such activities are undertaken.
UK	WP.56	It would also be worth considering the extent to which field analysis could be employed. Identification of analytical techniques and equipment (and Standard Operating Procedures for their use) that could be readily used in a mobile laboratory would be worthwhile... it will probably be necessary for Member States to make one or more such laboratories available.
UK	WP.57	The development of fully validated analytical procedures, and the training and accreditation of analysts, are important considerations in any efforts to strengthen the United Nations Secretary-General's system for investigations into alleged use.
South Africa	WP.15	Laboratories should report the results of their analysis upon completion thereof to the Secretary-General, who should include it in the final report.

Germany	WP.10	(In respect of the Secretary-General's investigative mechanism) special attention should be paid to the recommendation that the Secretary-General should report periodically to Member States on the Status and degree of completion of standing preparatory measures
South Africa	WP.15	The investigation report (of the Secretary-General's investigative mechanism) should be made available to the receiving State Party, Secretary-General and any other State Party that may be involved.
South Africa	WP.15	A final report (from the Secretary-General's investigative mechanism) should be transmitted to the Secretary-General upon completion thereof.
South Africa	WP.15	The Secretary-General should submit the report (from the Secretary-General's investigative mechanism) to the United Nations Security Council for consideration.

Annex III

DRAFT AGENDA FOR THE MEETING OF STATES PARTIES,  
GENEVA, 6-10 DECEMBER 2004

1. Opening of Meeting
2. Adoption of Agenda
3. Adoption of Programme of Work
4. General debate/discussion
5. To discuss, and promote common understanding and effective action on strengthening and broadening national and international institutional efforts and existing mechanisms for the surveillance, detection, diagnosis and combating of infectious diseases affecting humans, animals, and plants
6. To discuss, and promote common understanding and effective action on enhancing international capabilities for responding to, investigating and mitigating the effects of cases of alleged use of biological or toxin weapons or suspicious outbreaks of disease
7. Arrangements for the Meeting of Experts and Meeting of States Parties in 2005
8. Adoption of Report
9. Closing of Meeting

INDICATIVE SCHEDULE FOR THE MEETING OF STATES PARTIES,  
GENEVA, 6-10 DECEMBER 2004

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
<b>AM</b>	<ul style="list-style-type: none"> <li>• Opening</li> <li>• General Debate</li> </ul>	<ul style="list-style-type: none"> <li>• NGOs (Informal Consultations)</li> </ul>	<ul style="list-style-type: none"> <li>• Topic 1</li> </ul>	<ul style="list-style-type: none"> <li>• Topic 2</li> </ul>	<ul style="list-style-type: none"> <li>• 2005 meetings</li> <li>• Consider Report</li> </ul>
<b>LUNCH</b>					
<b>PM</b>	<ul style="list-style-type: none"> <li>• General Debate Cont.</li> <li>• IGO present</li> </ul>	<ul style="list-style-type: none"> <li>• Topic 1</li> </ul>	<ul style="list-style-type: none"> <li>• Topic 1</li> <li>• Topic 2</li> </ul>	<ul style="list-style-type: none"> <li>• Topic 2</li> </ul>	<ul style="list-style-type: none"> <li>• Consider Report</li> <li>• Adopt Report</li> </ul>