WHO/POLIO/21.05

Poliovirus containment

GUIDANCE TO MINIMIZE RISKS FOR FACILITIES COLLECTING, HANDLING OR STORING MATERIALS POTENTIALLY INFECTIOUS FOR POLIOVIRUSES, SECOND EDITION

WEB ANNEX D

FORM 2: PROGRESS REPORTING FORM ON PREPARATIONS FOR POLIOVIRUS CONTAINMENT AND COMPLETION OF PHASE I OF GAPIII

World Health Organization

Poliovirus containment: guidance to minimize risk for facilities collecting, handling or storing materials potentially infectious for polioviruses, second edition. Web Annex D. Form 2: progress reporting form on preparations for poliovirus containment and completion of Phase I of GAPIII

WHO/POLIO/21.05

Suggested citation. Web Annex D. Form 2: progress reporting form on preparations for poliovirus containment and completion of Phase I of GAPIII. In: Poliovirus containment: guidance to minimize risk for facilities collecting, handling or storing materials potentially infectious for polioviruses, second edition. Geneva: World Health Organization; 2021 (WHO/POLIO/21.05). Licence: CC BY-NC-SA 3.0 IGO.

Cataloguing-in-Publication (CIP) data. CIP data are available at http://apps.who.int/iris.

This publication forms part of the WHO guideline entitled *Poliovirus containment: guidance to minimize risk for facilities collecting, handling or storing materials potentially infectious for polioviruses, second edition*. It is being made publicly available for transparency purposes and information, in accordance with the *WHO handbook for guideline development*, 2nd edition (2014).

CONTENTS

ABBREVIATIONS AND ACRONYMS

CC	Certificate of containment
CCS	GAPIII Containment Certification Scheme
CP	Certificate of participation
GAPIII	Global Action Plan III for Poliovirus Containment
GCC	Global Commission for the Certification of the Eradication of Poliomyelitis
ICC	Interim certificate of containment
MoH	Ministry of Health
NAC	National authority for containment
NCC	National Certification Committee for Poliomyelitis Eradication
nOPV	Novel oral polio vaccine
nOPV2	Novel oral polio vaccine type 2
NPCC	National Poliovirus Containment Coordinator
NTF	National Task Force for containment
OPV	Oral polio vaccine
bOPV	Bivalent oral polio vaccine (containing attenuated Sabin poliovirus type 1 and type 3)
mOPV1	Monovalent oral polio vaccine type 1
mOPV2	Monovalent oral polio vaccine type 2
mOPV3	Monovalent oral polio vaccine type 3
OPV1	Oral polio vaccine type 1
OPV2	Oral polio vaccine type 2
OPV3	Oral polio vaccine type 3
tOPV	Trivalent oral polio vaccine (containing attenuated Sabin poliovirus type 1, type 2 and type 3)
PEF	Poliovirus-essential facility
RCC	Regional Certification Commission
S19	A new attenuated poliovirus type 2 strain
VDPV	Vaccine-derived poliovirus
cVDPV2	Circulating vaccine-derived poliovirus type 2
VDPV1	Vaccine-derived poliovirus type 1
VDPV2	Vaccine-derived poliovirus type 2
VDPV3	Vaccine-derived poliovirus type 3
WHO	World Health Organization
WPV	Wild poliovirus
WPV1	Wild poliovirus type 1
WPV2	Wild poliovirus type 2
WPV3	Wild Poliovirus type 3

DECLARATIONS

National Poliovirus Containment Coordinators (NPCCs), National Task Forces for containment (NTFs) or other identified focal points, as appropriate, are expected to complete this form annually and deliver it to the Chair of the National Certification Committee for Poliomyelitis Eradication (NCC) in support of the finalization of national reports.

Details of the person[1] submitting this form to the NCC Chair:

Name:	
Designation:	☐ NPCC ☐ NTF Chair ☐ Other If other, please specify:
Data provided refer to country/territory:	
Email:	
Reporting period:	
Signature:	
Date of submission to the NCC Chair:	

With the publication of the *Poliovirus containment: guidance to minimize risks for facilities collecting, handling or storing materials potentially infectious for polioviruses, second edition* and the declaration of wild poliovirus type 3 (WPV3) eradication[2] of October 2019, the Global Commission for the Certification of the Eradication of Poliomyelitis (GCC) requests:[3]

1. The establishment of a standardized data collection and verification mechanism;
2. That NCC/Regional Certification Commission (RCC) reports clearly indicate where and when activities in Phase I have been completed, based on a standardized data collection and verification mechanism, so that, on the basis of equivalent data quality between regions, the GCC can declare global completion of Phase I;
3. The completion of Phase I for all poliovirus type 2 within one year of its publication (by 10 April 2019);
4. That countries affected by ongoing transmission of circulating vaccine-derived poliovirus type 2 (cVDPV2) repeat their inventories and destroy, transfer or contain poliovirus type 2 materials after the outbreak is declared closed;
5. That RCCs urge countries to complete the identification, destruction, transfer or containment (Phase I of GAPIII) of wild poliovirus type 1 (WPV1) and WPV3 materials by the end of Phase II of GAPIII. Phase II ends with the GCC's declaration of global eradication of poliomyelitis;

[1] The NPCC/NTF Chair or other person.

[2] Global Commission for the Certification of the Eradication of Poliomyelitis. Report from the Twentieth Meeting of the Global Commission for Certification of Poliomyelitis Eradication, Geneva, 17-18 October 2019. Geneva: World Health Organization; 2019 (http://polioeradication.org/wp-content/uploads/2016/07/20th-meeting-of-the-Global-Commission-for-the-Certification-of-Eradication-of-Poliomyelitis-17-18-October-2019.pdf, accessed 9 December 2020).

[3] Global Commission for the Certification of the Eradication of Poliomyelitis. Special meeting of the Global Commission for the Certification of the Eradication of Poliomyelitis on poliovirus containment, Geneva, 23-25 October 2017. Geneva: World Health Organization; 2017 (http://polioeradication.org/wp-content/uploads/2018/03/polio-global-certification-commission-report-2017-10-20180314-en.pdf, accessed 9 December 2020).

6. That countries planning to designate facilities for the retention of WPV1 and WPV3 materials weigh the risks and benefits of having such facilities and the commitments that will be required to comply with the primary (facility), secondary (population immunity) and tertiary (sanitation and hygiene) safeguards;
7. That countries with facilities planning to retain WPV3 enter the GAPIII Containment Certification Scheme (CCS), as soon as possible.

NOTE:[4] A **facility** is defined as any site (e.g. laboratory, repository or vaccine production unit) owned or operated by any level of government, academic institution, corporation, company, partnership, society, association, firm, sole proprietorship or other legal entity.

Details of the NCC Chair:

Name:	
Designation:	NCC Chair
Country:	
Email:	
Reporting period:	
I, the NCC Chair, declare that all sections in this form are completed:	☐ Yes ☐ No If no, please explain:[5]
Signature:	
Date:	

[4] See Containment Certification Scheme to support the WHO Global Action Plan for Poliovirus Containment (GAPIII–CCS). Geneva: World Health Organization; 2017.

[5] For example, data on the retention of oral polio vaccine type 1 (OPV1)/Sabin1, oral polio vaccine type 3 (OPV3)/Sabin3 and bivalent oral polio vaccine (bOPV) will only be collected after the last use of bOPV and monovalent oral polio vaccine type 1 (mOPV1)/ monovalent oral polio vaccine type 3 (mOPV3).

1. National Certification Committee for Poliomyelitis Eradication follow-up on previous Regional Certification Commission recommendations related to poliovirus containment

List of previous RCC recommendations

N°	Previous RCC recommendation(s)[6] related to poliovirus containment in the country/territory	Date of issuance (dd/mm/yyyy)	Follow-up action taken to address RCC recommendation(s)
1.			
2.			
3.			

Please add rows as necessary.

[6] Previous RCC recommendations related to poliovirus containment may be obtained from the NCC Chair.

2. IDENTIFICATION AND SURVEY OF FACILITIES

List of all facilities in the country/territory

A current, exhaustive and comprehensive list of **all** facilities[7] in the country/territory is established and available:		☐ Yes ☐ No ☐ Other If other, please specify:
If **yes**, how many facilities in total are there in the country/territory?		
If **no**:	By when is the comprehensive list of facilities expected to be completed?	Expected date:
	By whom is the comprehensive list of facilities expected to be completed?	

NOTE 1:[8] The GCC set the deadline for completion of Phase I for all PV2 at one year after the publication of the *Poliovirus containment: guidance to minimize risks for facilities collecting, handling or storing materials potentially infectious for polioviruses* (i.e. by 10 April 2019), and for WPV1 and WPV3 before the global declaration of wild poliovirus (WPV) eradication.

NOTE 2:[9] The GCC requested that RCCs urge countries to complete the identification, destruction, transfer or containment (Phase I) of WPV1 and WPV3 materials by the end of Phase II.

NOTE 3:[8] The GCC recommended that at the time of WPV eradication, all facilities retaining WPVs should have a certificate of containment and, if not, have a time-limited interim certificate of containment, with a clear end point for obtaining a certificate of containment agreed with the GCC.

NOTE 4:[10] The certification of WPV eradication should only occur when all WPV materials, in facilities designated for retaining them, are safely and securely contained.

NOTE 5:[2] The GCC declared the eradication of WPV3 in October 2019.

[7] A facility is defined as any site (e.g. laboratory, repository or vaccine production unit) owned or operated by any level of government, academic institution, corporation, company, partnership, society, association, firm, sole proprietorship or other legal entity.

[8] Global Commission for the Certification of the Eradication of Poliomyelitis. Special meeting of the Global Commission for the Certification of the Eradication of Poliomyelitis on poliovirus containment, Geneva, 23-25 October 2017. Geneva: World Health Organization; 2017 (http://polioeradication.org/wp-content/uploads/2018/03/polio-global-certification-commission-report-2017-10-20180314-en.pdf, accessed 9 December 2020).

[9] Previous RCC recommendations related to poliovirus containment may be obtained from the NCC Chair.

[10] Global Commission for the Certification of the Eradication of Poliomyelitis. Report from the Seventeenth Meeting of the Global Commission for the Certification of the Eradication of Poliomyelitis, Geneva, 26-27 February 2018. Geneva: World Health Organization; 2018 (http://polioeradication.org/wp-content/uploads/2018/04/polio-eradication-certification-17th-meeting-global-commission-for-certification-of-poliomyelitis-eradication-20180412.pdf, accessed 9 December 2020).

Facilities surveyed during the current reporting period

Reporting period (dd/mm/yyyy – dd/mm/yyyy):	
FORM 1 (or an equivalent questionnaire) has been supplied to **all** facilities in the country/territory:	☐ Yes ☐ No ☐ Other If other, please specify:
N° of facilities that received FORM 1 (or an equivalent questionnaire):	
N° of complete responses obtained from these facilities:	
N° of facilities that sent in an incomplete response:	
N° of facilities that did not respond:	
Poliovirus types addressed in this reporting period:	☐ Poliovirus type 1 ☐ Poliovirus type 2 ☐ Poliovirus type 3

Facilities that do not retain any poliovirus

A detailed list of facilities that never possessed, destroyed, inactivated or transferred to a poliovirus-essential facility (PEF) their poliovirus infectious or potentially infectious materials, including poliovirus nucleic acid, should be maintained as a national inventory and be made available to the RCC upon request.

N° of facilities that never had any poliovirus infectious or potentially infectious materials:	
N° of facilities that have destroyed, inactivated or transferred to a PEF all their poliovirus infectious or potentially infectious materials (including poliovirus nucleic acid):	
Total n° of facilities that **do not retain** any poliovirus infectious or potentially infectious materials (including poliovirus nucleic acid):	

3. RETENTION OF POLIOVIRUS INFECTIOUS OR POTENTIALLY INFECTIOUS MATERIAL

The retention of WPV/vaccine-derived poliovirus (VDPV) infectious material, WPV/VDPV potentially infectious material (except for poliovirus nucleic acid that must only be declared) or oral polio vaccine (OPV)/novel oral polio vaccine (nOPV)/Sabin infectious material is subject to the approval of the responsible national authority (e.g. MoH) and to the certified implementation of containment requirements following timelines described in GAPIII. National authorities (e.g. MoH) of countries retaining such materials for critical functions must:

1. Approve the retention of poliovirus materials requiring containment, i.e. WPV/VDPV infectious material, WPV/VDPV potentially infectious material, or OPV/nOPV/Sabin infectious material;
2. Designate as PEFs those facilities where such materials are/will be retained;
3. Nominate a national authority for containment (NAC) responsible for the containment certification of designated PEFs against GAPIII, following the CCS; and
4. Notify the NAC of the need to process containment certifications of designated PEFs against GAPIII, following the CCS.

Facilities retaining OPV/nOPV/Sabin potentially infectious material or poliovirus nucleic acid do not require containment but must declare this to their national authorities (e.g. MoH) and are encouraged to follow WHO recommendations for the safe retention and handling of these materials provided in the *Poliovirus containment: guidance to minimize risk for facilities collecting, handling or storing materials potentially infectious for polioviruses, second edition.*

List of facilities retaining WPV/VDPV infectious or potentially infectious materials, and requiring containment

Wild poliovirus type 2 (WPV2) was declared eradicated in September 2015, WPV3 in October 2019. Please provide complete data on the identification of WPV2/vaccine-derived poliovirus type 2 (VDPV2) infectious material and WPV3/vaccine-derived poliovirus type 3 (VDPV3) infectious material and ensure that complete data on the identification and retention of WPV2/VDPV2 potentially infectious material and WPV3/VDPV3 potentially infectious material are provided **as soon as possible**. In countries that experienced VDPV2 circulation and the use of monovalent oral polio vaccine type 2 (mOPV2) for outbreak response purposes after the switch from trivalent oral polio vaccine (tOPV) to bOPV, the collection of data on oral polio vaccine type 2 (OPV2)/novel oral polio vaccine type 2 (nOPV2)/Sabin2 infectious or potentially infectious material will only be completed after the last use of mOPV2.

The collection of data on the identification and retention of WPV1/vaccine-derived poliovirus type 1 (VDPV1) infectious or potentially infectious material and VDPV3 infectious or potentially infectious material has started. Please ensure that complete data for WPV1 infectious or potentially infectious material are provided before the global declaration of WPV eradication. As the use of bOPV and/or mOPV1/mOPV3 will continue beyond the global declaration of WPV eradication, VDPV1/VDPV3 are expected to continue to circulate. For this reason, the collection of data on VDPV1/VDPV3 infectious or potentially infectious material will only be completed after the last use of bOPV and/or mOPV1/mOPV3.

N°	Facility name and address	WPV/VDPV	Type of material
1.		☐ WPV1/VDPV1	☐ infectious ☐ potentially infectious

N°	Facility name and address	WPV/VDPV	Type of material
		☐ WPV2/VDPV2	☐ infectious
			☐ potentially infectious
		☐ WPV3/VDPV3	☐ infectious
			☐ potentially infectious
		☐ WPV/VDPV[11]	☐ infectious
			☐ potentially infectious
2.		☐ WPV1/VDPV1	☐ infectious
			☐ potentially infectious
		☐ WPV2/VDPV2	☐ infectious
			☐ potentially infectious
		☐ WPV3/VDPV3	☐ infectious
			☐ potentially infectious
		☐ WPV/VDPV[12]	☐ infectious
			☐ potentially infectious
3.		☐ WPV1/VDPV1	☐ infectious
			☐ potentially infectious
		☐ WPV2/VDPV2	☐ infectious
			☐ potentially infectious
		☐ WPV3/VDPV3	☐ infectious
			☐ potentially infectious
		☐ WPV/VDPV[12]	☐ infectious
			☐ potentially infectious

Please add rows as needed.

[11] Please use this row if the specific type of PV is not known.

[12] Please use this row if the specific type of PV is not known.

List of facilities retaining OPV2/nOPV2/Sabin2 infectious material and requiring containment

Please provide complete data on the identification and retention of OPV2/nOPV2/Sabin2 infectious material. In countries that experienced VDPV2 circulation and the use of mOPV2 for outbreak response purposes after the switch from tOPV to bOPV, the collection of data on OPV2/nOPV2/Sabin2 infectious material will only be completed after the last use of mOPV2.

N°	Facility name and address	OPV/nOPV/Sabin infectious material
1.		☐ mOPV2
		☐ tOPV
		☐ Sabin2
2.		☐ mOPV2
		☐ tOPV
		☐ Sabin2
3.		☐ mOPV2
		☐ tOPV
		☐ Sabin2

Please add rows as needed.

List of facilities retaining OPV1/Sabin1 or OPV3/Sabin3 infectious material,[13] requiring containment in Phase III of GAPIII

The collection of data on OPV1/Sabin1 and OPV3/Sabin3 infectious material has started. However, as the use of bOPV and/or mOPV1/mOPV3 will continue beyond the global eradication of WPV, OPV1/Sabin1 and OPV3/Sabin3 strains are expected to continue to circulate, and the collection of data on OPV1/Sabin1 and OPV3/Sabin3 infectious material will only be completed after the last use of bOPV and/or mOPV1/mOPV3.

N°	Facility name and address	OPV1/Sabin1 or OPV3/Sabin3 infectious material
1.		☐ mOPV1
		☐ mOPV3
		☐ Sabin1
		☐ Sabin3
		☐ bOPV
2.		☐ mOPV1
		☐ mOPV3
		☐ Sabin1
		☐ Sabin3

[13] In countries using bOPV and/or mOPV1/mOPV3, the collection of these data may only be requested after the last use of these vaccines.

		☐ bOPV
3.		☐ mOPV1
		☐ mOPV3
		☐ Sabin1
		☐ Sabin3
		☐ bOPV

Please add rows as needed.

List of facilities retaining OPV/nOPV/Sabin potentially infectious material or PV nucleic acid

Please ensure that complete data on the identification and retention of OPV2/nOPV2/Sabin2 potentially infectious material are provided **as soon as possible**. In countries that experienced VDPV2 circulation and the use of mOPV2/nOPV, or the renewed use of tOPV for outbreak response purposes after the switch from tOPV to bOPV in April 2016, the collection of data on OPV2/nOPV2/Sabin2 potentially infectious material will only be completed after the last use of mOPV2/nOPV2/tOPV.

In countries that experienced the use of bOPV, and/or VDPV1/VDPV3 circulation and the use of mOPV1/mOPV3 for outbreak response purposes after the switch from tOPV to bOPV, the collection of data on OPV1/Sabin1 and/or OPV3/Sabin3 potentially infectious material will only be completed after the last use of bOPV, mOPV1 and/or mOPV3, respectively.

Poliovirus nucleic acid (extracted from poliovirus or synthesized) can be used to recreate viral particles and is considered WPV/VDPV potentially infectious material but can be handled outside of containment as long as it is not introduced into poliovirus-permissive cells or animals with or without a transfection agent. The retention of poliovirus nucleic acid must be declared to the competent national authorities (e.g. MoH).

N°	Facility name and address	poliovirus potentially infectious material
1.		☐ OPV1/Sabin1
		☐ OPV2/Sabin2
		☐ OPV3/Sabin3
		☐ nOPV2
		☐ New attenuated poliovirus type 2 strain (S19)
		☐ poliovirus nucleic acid
2.		☐ OPV1/Sabin1
		☐ OPV2/Sabin2
		☐ OPV3/Sabin3

		☐ nOPV2
		☐ New attenuated poliovirus type 2 strain (S19)
		☐ poliovirus nucleic acid
3.		☐ OPV1/Sabin1
		☐ OPV2/Sabin2
		☐ OPV3/Sabin3
		☐ nOPV2
		☐ New attenuated poliovirus type 2 strain (S19)
		☐ poliovirus nucleic acid

Please add rows as needed.

4. DESIGNATION OF POLIOVIRUS-ESSENTIAL FACILITIES

The retention of WPV/VDPV infectious material, WPV/VDPV potentially infectious material or OPV/nOPV/Sabin infectious material is subject to the approval of the responsible national authority (e.g. MoH) and to the facility's implementation of containment requirements described in GAPIII, assessed and certified by the NAC and the GCC, following the CCS.

Are there any national plans for the designation of PEFs in the country/territory?	☐ Yes ☐ No ☐ Other If other, please specify:
Does any designated PEF hold a valid certificate of containment (certificate of participation, interim certificate of containment, certificate of containment)?	☐ Certificate of participation ☐ Interim certificate of containment ☐ Certificate of containment
Expected total n° of designated PEFs in the country/territory (for any poliovirus types):	

List of designated PEFs in the country

N°	Facility name and address	Date of designation (dd/mm/yyyy)
1.		
2.		
3.		

Please add rows as needed.

List of certified PEFs in the country

N°	Facility name and address	Date of certification (dd/mm/yyyy)	Certificate obtained
1.			
2.			
3.			

Please add rows as needed.

5. NOMINATION OF THE NATIONAL AUTHORITY FOR CONTAINMENT IN COUNTRIES/AREAS WITH DESIGNATED POLIOVIRUS-ESSENTIAL FACILITIES

Countries retaining or planning to retain polioviruses requiring appropriate containment need to nominate the NAC for the containment assessment and certification of designated PEFs against GAPIII. Please provide the list of NAC members.

	Members (name and email address)	Date of nomination (dd/mm/yyyy)	Membership end date (dd/mm/yyyy)	Participation in WHO GAPIII/CCS training courses (please specify course and date)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

Please add rows as needed.

6. NOTIFICATION OF RELEVANT NATIONAL AUTHORITIES

The NCC of a country retaining polioviruses that require appropriate containment must notify the responsible national authority (e.g. MoH) and, if available, the NAC.

I, the NCC Chair, declare that I have informed the responsible national authority of the retention of poliovirus infectious or potentially infectious material requiring their approval and the nomination of a NAC.	I have informed the responsible national authority: ☐ Yes ☐ No If no, please explain: Please indicate the name, affiliation and email address of the person who was notified: Please indicate when and how the person was informed:
I, the NCC Chair, declare that I have informed the NAC of the retention of poliovirus infectious or potentially infectious material in facilities requiring assessment and certification.	I have informed the NAC: ☐ Yes ☐ No If no, please explain: Please indicate the name and email address of the NAC contact who was notified: Please indicate when and how the person was informed: