

Poland

This document is a compilation of all questions, justifications, and sources used to determine the 2021 Global Health Security Index scores for Poland. For a category and indicator-level summary, please see the Country Profile for Poland.

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Category 1: Preventing the emergence or release of pathogens with potential for international concern

1.1 ANTIMICROBIAL RESISTANCE (AMR)

1.1.1 AMR surveillance, detection, and reporting

1.1.1a

Is there a national AMR plan for the surveillance, detection, and reporting of priority AMR pathogens?

Yes, there is evidence of an AMR plan, and it covers surveillance, detection, and reporting = 2, Yes, there is evidence of an AMR plan, but there is insufficient evidence that it covers surveillance, detection, and reporting = 1, No evidence of an AMR plan = 0

Current Year Score: 2

Poland has a national AMR plan for the surveillance, detection and reporting of priority AMR pathogens in Poland. Poland implemented the National Antimicrobial Resistance Program (Narodowy Program Ochrony Antybiotyków; NPOA) by including legal provisions in article 48 (point 1) of the Act of 27 August 2004 on the Public Funding of Healthcare. [1] The NPOA is an intersectoral coordinating mechanism and it addresses directly the Council Recommendation of 15 November 2001 on the prudent use of antimicrobial agents in human medicine. This document, which provides the guidelines on the current 2016–2020 NPOA's functioning, includes detailed instructions concerning its composition, activity and goals. These include, but are not limited to: educating the general population and healthcare professionals (prevention); monitoring antibiotics consumption (surveillance); monitoring AMR pathogen infections both in and outside of hospitals (detection); coordinating the implementation of antibacterial policies in Polish hospitals (control); collecting data on antibiotic resistance and sharing antibacterial infection-related data with the European Centre for Disease Prevention and Control (reporting). [1,4] Based on information provided by the Health Minister in a response to an interpellation dated 26 April 2018, the NPOA Programme has since 2004 implemented a number of local and national initiatives aimed at raising antimicrobial resistance-related awareness among the general population and healthcare professionals. [2] The NPOA is the only such programme in Poland and it has to date been coordinated by the Clinical Microbiology and Disease Prevention Department of the Polish National Medicine Institute (Narodowy Instytut Leków). The Health Ministry allocates a budget to the NPOA Programme each year. [2, 3, 4] There is, however, currently no evidence that the National Antimicrobial Resistance Program is to be extended beyond the end of 2020 [1, 6].

[1] Polish Ministry of Digitalization. 2020. "2016-2020 National Antimicrobial Resistance Programme" ("Narodowy Program Ochrony Antybiotyków"). [<https://www.gov.pl/web/zdrowie/narodowy-program-ochrony-antybiotykow-na-lata-2016-2020>]. Accessed 04 October 2020.

[2] Polish Parliament. 2018. "Response to the interpellation number 19352". ("Odpowiedz na interpelacje nr 19352"). [<http://www.sejm.gov.pl/sejm8.nsf/InterpelacjaTresc.xsp?key=49C33ECB>]. Accessed on 04 October 2020.

[3] National Antimicrobial Resistance Programme (Narodowy Program Ochrony Antybiotyków). 2020. "Bases for creating the programme". ("Podstawy utworzenia programu"). [<http://antybiotyki.edu.pl/program/podstawy-utworzenia-programu/>]. Accessed on 04 October 2020.

[4] National Antimicrobial Resistance Programme (Narodowy Program Ochrony Antybiotyków). 2020. "National Antimicrobial Resistance Programme 2016-2020". ("Narodowy program ochrony antybiotyków na lata 2016-2020"). [<http://www.antybiotyki.edu.pl>]. Accessed on 04 October 2020.

[5] The Polish Health Ministry. 2020. [<https://www.gov.pl/web/zdrowie/>]. Accessed on 05 October 2020.

1.1.1b

Is there a national laboratory/laboratory system which tests for priority AMR pathogens?

All 7 + 1 priority pathogens = 2 , Yes, but not all 7+1 pathogens = 1 , No = 0

Current Year Score: 1

There is public evidence that Poland has a national laboratory that can test for some priority AMR pathogens. Samples of the following bacteria are collected from over 40 laboratories and over 50 hospitals in Poland and tested for drug-resistant strains by the Clinical Microbiology and Epidemiology Department within the framework of the NPOA Programme: *Klebsiella pneumoniae*, *Enterococcus faecalis*, *Enterococcus faecium*, *Escherichia coli*, *Proteus* spp., *Staphylococcus aureus*, *Streptococcus pneumoniae*, *Pseudomonas aeruginosa*, *Acinetobacter baumannii*. [1, 2] No evidence was found that *salmonella* spp., *shigella* spp, *neisseria gonorrhoeae* and *mycobacterium tuberculosis* are included in these efforts, however. Furthermore, none of these four pathogens are included in the “critical pathogens” list of priority AMR pathogens included in the Health Minister’s Resolution number 294 of 23 December 2011, which orders all hospitals to compile and submit to the Chief Sanitary Inspectorate data on cases of AMR pathogens encountered in treated patients. [2] The websites of the Ministry for Environment, the Ministry for Health, the Ministry for Agriculture contain no evidence that these four pathogens are tested for. [3, 4, 5]

[1] Polish National Program for Protection of Antibiotics. (Narodowy program ochrony antybiotyków). 2020. "Subdivisions and tasks". ("Podzespolo i zadania"). [<http://antybiotyki.edu.pl/program/podzespolo-i-zadania/>]. Accessed on 05 October 2020.

[2] Polish Parliament. 2020. “Health Minister’s Resolution number 294 of 23 December 2011 on the list of critical pathogens...”. (Rozporzadzenie Ministra Zdrowia z dnia 23 grudnia 2011 r. w sprawie listy czynnikow alarmowych, rejestrów zakazen szpitalnych i czynnikow alarmowych oraz raportów o biezacej sytuacji epidemiologicznej szpitala). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20112941741>]. Accessed on 05 October 2020.

[3] Polish Ministry of Environment. 2020. [<https://www.gov.pl/web/srodowisko>]. Accessed on 05 October 2020.

[4] The Polish Health Ministry. 2020. [<https://www.gov.pl/web/zdrowie/>]. Accessed on 05 October 2020.

[5] The Polish Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 05 October 2020.

1.1.1c

Does the government conduct environmental detection or surveillance activities (e.g., in soil, waterways) for antimicrobial residues or AMR organisms?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the Polish government conducts ongoing environmental monitoring for antimicrobial residues or AMR organisms. The websites of the Ministry of Environment, the Ministry of Health, the Ministry of Agriculture and Rural Development contain no relevant information. [1, 2, 3] As per article 155a (point 2) of the 2001 Water Law and article 26 (point 1) of the Environmental Protection Act of 27 April 2001, the monitoring of the quality and contamination of waterways and soil in Poland falls under the jurisdiction of the Regional Inspectorates of Environmental Protection, which report to the Chief Inspectorate of Environmental Protection (GIOS), which is supervised by the Ministry of Health. [4] The GIOS has since 1991 implemented numerous National Environment Monitoring Programmes aiming at assessing the current state of the environment in Poland, which includes regular soil, land and water surveys and measurements, but no programs on AMR. [5]

- [1] The Ministry of Environment. 2020. [<https://www.gov.pl/web/srodowisko>]. Accessed on 05 October 2020.
- [2] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 05 October 2020.
- [3] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 05 October 2020.
- [4] Chief Inspectorate of Environmental Protection (Główny Inspektorat Ochrony Środowiska). “State of the environment/Monitoring of waters” (Stan środowiska/Monitoring wód). [<http://www.gios.gov.pl/pl/stan-srodowiska/monitoring-wod>]. Accessed on 05 October 2020.
- [5] Chief Inspectorate of Environmental Protection. 2015. 2016-2020 National Environment Monitoring Programme. (Program Państwowego Monitoring Środowiska na lata 2016-2020. [http://www.gios.gov.pl/images/dokumenty/pms/pms/PPMS_2016-2020.pdf]. Accessed on 05 October 2020.

1.1.2 Antimicrobial control

1.1.2a

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for humans?

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

Current Year Score: 1

In Poland most antibiotics for human use require a prescription, and there is no evidence of gaps in enforcement, but some less common antibiotics require no prescription. The 2001 Pharmaceutical Law sets out the legal framework for the registering, sale and distribution of medicinal products, including antibiotics. Said law breaks medicinal products into several categories (including an over-the-counter category and several categories of drugs that can only be obtained with a prescription). [1] This law does not specifically mention antibiotics, but each drug is tested and categorized by the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products (URPL), which then decides whether a given drug should be prescription-only or not, based on the criteria provided in the Health Minister’s Decree of 14 November 2008 on Criteria for Categorising Medicinal Products. The URPL provides an online database, which can be searched with multiple search terms, including the name of the active substance used in a specific drug. In order to ascertain whether the given drug (antibiotic or not) requires prescription, one needs to use the URPL’s search engine to find out whether the active substance used in the given antibiotic requires prescription. [2, 3] Based on information from the European Centre for Disease Prevention and Control (ECDC)’s 2018 Annual Epidemiological Report for antimicrobial consumption, the most commonly used antibiotics for systemic use in Poland are: penicillins; cephalosporins and other beta-lactams; tetracyclines; macrolides, lincosamides and streptogramins; quinolones; sulfonamides and trimethoprim. [4] According to the URPL’s online database, prescriptions are required for all of these active substances. [5] However, as noted by experts of the Polish National Program for Protection of Antibiotics, Poland is one of few European countries where a number of (less common) antibiotics, such as furazolidone, can be purchased without a prescription. [6, 7]

- [1] Polish Parliament. 2001. “Act of 6 September 2001 – Pharmaceutical Law”. (Ustawa z dnia 6 września 2001 r. Prawo farmaceutyczne.). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20011261381/U/D20011381Lj.pdf>]. Accessed on 05 October 2020.
- [2] Polish Parliament. 2018. “Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products”. (“Ustawa z dnia 18 marca 2011 r. o Urzędzie Rejestracji Produktów Leczniczych, Wyrobów Medycznych i Produktów Biobójczych”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20110820451>]. Accessed on 05 October 2020.
- [3] Ministry of Health. 2008. Health Minister’s Decree of 14 November 2008 on Criteria for Categorising Medicinal Products. (Rozporządzenie Ministra Zdrowia z dnia 14 listopada 2008 r. w sprawie kryteriów zaliczenia produktu leczniczego do poszczególnych kategorii dostępności). [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082061292>]. Accessed on 05 October 2020.

05 October 2020.

[4] European Centre for Disease Prevention and Control. November 2017. "Antimicrobial consumption - Annual Epidemiological Report for 2018". [<https://www.ecdc.europa.eu/en/publications-data/surveillance-antimicrobial-consumption-europe-2018>]. Accessed on 05 October 2020.

[5] Office for Registration of Medicinal Products, Medical Devices and Biocidal Products (Urząd Rejestracji Produktów Leczniczych, Wyrobów Medycznych i Produktów Biobójczych). "Register of Medicinal Products". ("Rejestr Produktów Leczniczych"). [<http://www.urpl.gov.pl/pl/produkty-lecznicze/zagadnienia-rejestracyjne/rejestr-produkt%C3%B3w-leczniczych>]. Accessed on 05 October 2020.

[6] Rynek Zdrowia. 2013. "Experts: Antibiotics should only be available with a prescription". ("Eksperti: antybiotyki powinny być dostępne wyłącznie na receptę"). [<http://www.rynekzdrowia.pl/Farmacja/Eksperti-antybiotyki-powinny-byc-dostepne-wylacznie-na-recepte,135747,6.html>]. Accessed on 05 October 2020.

[7] Polish National Program for Protection of Antibiotics. (Narodowy Program Ochrony Antybiotyków). 2019. European Antibiotics Knowledge Day: Responsible use of antibiotics. ("Europejski Dzień Wiedzy o Antybiotykach: odpowiedzialne stosowanie antybiotyków"). [<http://www.antybiotyki.edu.pl/edwa/zobacz-odp-stosowanie-pacjent.php>]. Accessed on 05 October 2020.

1.1.2b

Is there national legislation or regulation in place requiring prescriptions for antibiotic use for animals?

Yes = 2 , Yes, but there is evidence of gaps in enforcement = 1 , No = 0

Current Year Score: 1

In Poland most antibiotics for animal use require a prescription, and there is no evidence of gaps in enforcement, but some less common antibiotics require no prescription. The 2001 Pharmaceutical Law, which covers both human and veterinary medicine, establishes the legal framework for registering, selling and distributing medicinal products, including antibiotics. Said law breaks medicinal products into several categories (including an over-the-counter category and several categories of drugs that can only be obtained with a prescription). [1] This law does not specifically mention antibiotics, but each drug is tested and categorized by the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products (URPL), which then decides whether a given drug should be prescription-only or not, based on the criteria provided in the Health Minister's Decree of 14 November 2008 on Criteria for Categorising Medicinal Products. [2] The Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products confirms in articles 4 and 5 that the URPL is responsible for both human and animal medicine. [2]

The URPL provides an online database, which can be searched with multiple search terms, including the name of the active substance used in a specific drug. In order to ascertain whether the given drug (antibiotic or not) requires prescription, one needs to use the URPL's search engine to find out whether the active substance used in the given antibiotic requires prescription. [2, 3] Based on information from the European Centre for Disease Prevention and Control (ECDC)'s 2018 Annual Epidemiological Report for antimicrobial consumption, the most commonly used antibiotics for systemic use in Poland are: penicillins; cephalosporins and other beta-lactams; tetracyclines; macrolides, lincosamides and streptogramins; quinolones; sulfonamides and trimethoprim. [4] According to the URPL's online database, prescriptions are required for all of these active substances. [5] However, as noted by experts of the Polish National Program for Protection of Antibiotics, Poland is one of few European countries where a number of (less common) antibiotics, such as furaginum, can be purchased without a prescription. [6, 7].

In October 2018, a campaign "Ratujmy Nasze Antybiotyki" (Save Our Antibiotics) against antibiotic use for farm animals, which had been initiated by three non-governmental organizations, was approved by the European Parliament, leading to an introduction of a new law prohibiting the overuse of antibiotics in farming on healthy animals to be implemented from 2022

[8].

[1] Polish Parliament. 2001. "Act of 6 September 2001 – Pharmaceutical Law". (Ustawa z dnia 6 wrzesnia 2001 r. Prawo farmaceutyczne.). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20011261381/U/D20011381Lj.pdf>]. Accessed on 06 December 2020.

[2] Polish Parliament. 2018. "Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products". ("Ustawa z dnia 18 marca 2011 r. o Urzędzie Rejestracji Produktów Leczniczych, Wyrobów Medycznych i Produktów Biobójczych"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20110820451>]. Accessed on 06 December 2020.

[3] Ministry of Health. 2008. Health Minister's Decree of 14 November 2008 on Criteria for Categorising Medicinal Products. (Rozporządzenie Ministra Zdrowia z dnia 14 listopada 2008 r. w sprawie kryteriów zaliczenia produktu leczniczego do poszczególnych kategorii dostępności). [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082061292>]. Accessed on 05 October 2020.

[4] European Centre for Disease Prevention and Control. November 2017. "Antimicrobial consumption - Annual Epidemiological Report for 2018". [<https://www.ecdc.europa.eu/en/publications-data/surveillance-antimicrobial-consumption-europe-2018>]. Accessed on 05 October 2020.

[5] Office for Registration of Medicinal Products, Medical Devices and Biocidal Products (Urząd Rejestracji Produktów Leczniczych, Wyrobów Medycznych i Produktów Biobójczych). "Register of Medicinal Products". ("Rejestr Produktów Leczniczych"). [<http://www.urpl.gov.pl/pl/produkty-lecznicze/zagadnienia-rejestracyjne/rejestr-produkt%C3%B3w-leczniczych>]. Accessed on 05 October 2020.

[6] Rynek Zdrowia. 2013. "Experts: Antibiotics should only be available with a prescription". ("Eksperti: antybiotyki powinny być dostępne wyłącznie na receptę"). [<http://www.rynekzdrowia.pl/Farmacja/Eksperti-antybiotyki-powinny-byc-dostepne-wylacznie-na-recepte,135747,6.html>]. Accessed on 05 October 2020.

[7] Polish National Program for Protection of Antibiotics. (Narodowy Program Ochrony Antybiotyków). 2019. European Antibiotics Knowledge Day: Responsible use of antibiotics. ("Europejski Dzień Wiedzy o Antybiotykach: odpowiedzialne stosowanie antybiotyków"). [<http://www.antybiotyki.edu.pl/edwa/zobacz-odp-stosowanie-pacjent.php>]. Accessed on 05 October 2020.

[8] CIWF Polska. 2018. "Ratujmy Nasze Antybiotyki" ("Save Our Antibiotics"). [<https://www.ciwf.pl/nasze-sukcesy/podsumowanie-2018/>]. Accessed on 06 October 2020.

1.2 ZOOBOTIC DISEASE

1.2.1 National planning for zoonotic diseases/pathogens

1.2.1a

Is there national legislation, plans, or equivalent strategy documents on zoonotic disease?

Yes = 1, No = 0

Current Year Score: 1

There is a national programme on zoonotic diseases in Poland. In August 2018, the Council of Ministers passed a resolution implementing the fourth edition of the programme "Animals and Public Health Protection", to be implemented in years 2019–2023. The programme is supervised by the Ministry of Agriculture and Rural Development, and it is implemented by the National Veterinary Research Institute in Puławy. [1] Zoonotic diseases included in this program include, but are not limited to, rabies, influenza virus, bacillus anthracis, francisella tularensis, salmonella, listeria, verotoxic escherichia coli, thermotolerant campylobacter, foot-and-mouth disease, Schmallenberg virus and West Nile virus in wild birds. The presence of tuberculosis, paratuberculosis, pathogens causing Q fever and chlamydia, as well as parasites such as trichinella,

Echinococcus tapeworms, and Toxoplasma, Cryptosporidium and Giardia protozoa that are pathogenic to animals and humans will be assessed [2]. In addition, compared to the previous edition of the program, the group of tasks in 2019–2023 program includes three new topics related to bovine tuberculosis and mycobacteriosis in free-living animals, listeria monocytogenes in smoked fish and bacteria from the salmonella, listeria, campylobacter and E. coli groups in raw milk. [2]

[1] Website of the Polish prime minister, premier.gov.pl. 2018. Resolution on the establishment of a multi-annual program “Protection of animal health and public health”. (Uchwała w sprawie ustanowienia programu wieloletniego „Ochrona zdrowia zwierząt i zdrowia publicznego”). [<https://www.premier.gov.pl/wydarzenia/decyzje-rzadu/uchwala-w-sprawie-ustanowienia-programu-wieloletniego-ochrona-zdrowia-1.html>]. Accessed on 10 October 2020.

[2] Ministry of Agriculture and Rural Development. 2020. Draft resolution of the Council of Ministers on establishing a multi-annual program "Animal health and public health protection" for the years 2019-2023 (Projekt uchwały Rady Ministrów w sprawie ustanowienia programu wieloletniego „Ochrona zdrowia zwierząt i zdrowia publicznego” na lata 2019–2023) [<https://www.gov.pl/web/rolnictwo/projekt-uchwaly-rady-ministrow-w-sprawie-ustanowienia-programu-wieloletniego-ochrona-zdrowia-zwierzat-i-zdrowia-publicznego-na-lata-20192023>]. Accessed 15 October 2020.

1.2.1b

Is there national legislation, plans or equivalent strategy document(s) which includes measures for risk identification and reduction for zoonotic disease spillover events from animals to humans?

Yes = 1 , No = 0

Current Year Score: 0

While there is a national strategy that includes measures for risk identification of zoonotic disease spillover events from animals to humans, it does not address risk reduction. The national program “Animals and Public Health Protection” for 2019–2023 aims to monitor the presence of prohibited substances in food of animal origin and in animal feed, to evaluate the occurrence of zoonoses and assess the state of infectious diseases in breeding and free-living animals [1]. Moreover, the Minister of Health's 2013 Ordinance on Reports of Suspected or Diagnosed Infection, Infectious Disease or Death Due to Infection or Infectious Disease highlights the procedures for reporting zoonotic diseases such as brucellosis, foot-and-mouth disease, anthrax, rabies, tuberculosis, listeriosis, congenital toxoplasmosis, salmonellosis and West Nile virus, as per the Minister of Agriculture and Rural Development's 2003 Ordinance on the List of Zoonoses, Procedures for their Monitoring and Procedures in the Event of Disease Outbreaks or Detection of Biological Pathogens [2] [3]. The Act of 11 March 2004 on the Protection of Animal Health and Combating Infectious Animal Diseases outlines risk minimisation for zoonotic diseases, but does not mention specific measures addressing spillover of zoonotic diseases from animals to humans [4]. The websites of Ministry of Health and Ministry of Agriculture and Rural Development contain no further evidence of risk reduction for zoonoses. [5,6]

[1] Ministry of Agriculture and Rural Development. 2020. Draft resolution of the Council of Ministers on establishing a multi-annual program "Animal health and public health protection" for the years 2019-2023 (Projekt uchwały Rady Ministrów w sprawie ustanowienia programu wieloletniego „Ochrona zdrowia zwierząt i zdrowia publicznego” na lata 2019–2023) [<https://www.gov.pl/web/rolnictwo/projekt-uchwaly-rady-ministrow-w-sprawie-ustanowienia-programu-wieloletniego-ochrona-zdrowia-zwierzat-i-zdrowia-publicznego-na-lata-20192023>]. Accessed 15 October 2020.

[2] Polish Parliament. 2013. Ordinance of the Minister of Health of 10 July 2013 on reporting of suspected or diagnosed infection, infectious disease or death due to infection or infectious disease (Rozporządzenie Ministra Zdrowia z dnia 10 lipca 2013 r. w sprawie zgłoszeń podejrzenia lub rozpoznania zakażenia, choroby zakaźnej lub zgonu z powodu zakażenia lub choroby zakaźnej”) [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20130000848>]. Accessed 15 October 2020.

[3] Polish Parliament. 2003. Ordinance of the Minister of Agriculture and Rural Development of 27 August 2003 on the list of zoonoses, procedures for their monitoring and procedures in the event of diseases or detection of biological pathogens

("Rozporządzenie Ministra Rolnictwa i Rozwoju Wsi z dnia 27 sierpnia 2003 r. w sprawie wykazu zoonoz, procedur ich monitorowania oraz sposobów postępowania w przypadku wystąpienia chorób lub wykrycia biologicznych czynników chorobotwórczych") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20031661617>]. Accessed 15 October 2020.

[4] Polish Parliament. 2004. Act of 11 March 2004 on the protection of animal health and combating infectious animal diseases ("Ustawa z dnia 11 marca 2004 r. o ochronie zdrowia zwierząt oraz zwalczaniu chorób zakaźnych zwierząt") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040690625>] Accessed 15 October 2020.

[5] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>] Accessed on 04 December 2020.

[6] Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>] Accessed on 04 December 2020.

1.2.1c

Is there national legislation, plans, or guidelines that account for the surveillance and control of multiple zoonotic pathogens of public health concern?

Yes = 1, No = 0

Current Year Score: 1

There are national laws regulating the surveillance and control of multiple zoonotic pathogens of public health concern. The Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals (APAHCIDA), as well as the Act of 29 January 2004 on Veterinary Inspection, regulate the monitoring and control of food of animal origin, aimed at safeguarding public health and animal health. [1, 2] In accordance with the legislation, all animal owners and other people who professionally deal with animals must immediately report to the local veterinarian, local mayor or local veterinary inspectorate each case of animal death and suspected case of an infectious zoonotic disease. The entity to which such cases are reported is obliged to immediately take a number of actions to contain the threat (such as quarantine, an investigation to determine what other animals and humans had been in contact with the infected animal, lab tests to determine the animal's condition). [1] The Chief Veterinary Inspectorate and the State Sanitary Inspectorate are responsible for the surveillance and prevention of zoonotic diseases. [1, 3] As per article 54 of the APAHCIDA, district, regional and national veterinary inspectorates "prepare and update action plans for the combating of certain infectious diseases of animal origin to address a potential epidemic outbreak", while the Chief Veterinary Inspectorate is responsible for national surveillance programs, which aim at, among other things, "detecting" cases of infectious diseases of animal origin, and "combating" such diseases. [1] Laboratory data collected during zoonotic investigations carried out within the framework of one such program (the 2014-2018 edition of the "Animal and Public Health Protection") were used to implement new zoonotic disease prevention programs as well as new vaccines. [4] The zoonotic pathogens included in the APAHCIDA are, as per Annex 5: brucellosis, campylobacteriosis, echinococcosis, listeriosis, trichinellosis, tuberculosis caused by *Mycobacterium bovis*, Vercherotoxic *Escherichia coli*, and salmonellosis. [1]

[1] Polish Parliament. 2004. Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals. (Ustawa z dnia 11 marca 2004 r. o ochronie zdrowia zwierząt oraz zwalczaniu chorób zakaźnych zwierząt). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040690625>]. Accessed on 13 October 2020.

[2] Polish Parliament. 2004. Act of 29 January 2004 on Veterinary Inspection. (Ustawa z dnia 29 stycznia 2004 r. o Inspekcji Weterynaryjnej). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040330287>]. Accessed on 13 October 2020.

[3] Chief Veterinary Inspectorate. (Główny Inspektorat Weterynarii). Veterinary Inspection's Organisation (Organizacja Inspekcji Weterynaryjnej). [<https://www.wetgiw.gov.pl/inspekcja-weterynaryjna/organizacja-inspekcji-weterynaryjnej>]. Accessed on 13 October 2020.

[4] Ministry of Agriculture and Rural Development. May 2015. 2014-2018 Multi-annual program "Animal health and public health protection". (Program wieloletni na lata 2014-2018 „Ochrona zdrowia zwierząt i zdrowia publicznego”).

[<https://www.premier.gov.pl/wydarzenia/decyzje-rzadu/uchwala-w-sprawie-ustanowienia-programu-wieloletniego-ochrona->

zdrowia-0.html]. Accessed on 13 October 2020.

1.2.1d

Is there a department, agency, or similar unit dedicated to zoonotic disease that functions across ministries?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence of an interdepartmental unit that coordinates zoonotic disease prevention or surveillance in Poland. The websites of the Ministry of Agriculture and Rural Development and the Ministry of Health have been reviewed and found to contain no relevant information. [1, 2] As per the Act of 29 January 2004 on Veterinary Inspection and the Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals, the functions of monitoring, combating and preventing the spread of zoonotic diseases are carried out by the Chief Veterinary Inspectorate, which is subordinate to the Ministry of Agriculture and Rural Development. [3, 4]

[1] Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 13 October 2020.

[2] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 13 October 2020.

[3] Polish Parliament. 2004. Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals. (Ustawa z dnia 11 marca 2004 r. o ochronie zdrowia zwierząt oraz zwalczaniu chorób zakaźnych zwierząt). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040690625>]. Accessed on 13 October 2020.

[4] Polish Parliament. 2004. Act of 29 January 2004 on Veterinary Inspection. (Ustawa z dnia 29 stycznia 2004 r. o Inspekcji Weterynaryjnej). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040330287>]. Accessed on 13 October 2020.

1.2.2 Surveillance systems for zoonotic diseases/pathogens

1.2.2a

Does the country have a national mechanism (either voluntary or mandatory) for owners of livestock to conduct and report on disease surveillance to a central government agency?

Yes = 1 , No = 0

Current Year Score: 1

There is a national mechanism in Poland for owners of livestock to conduct and report on disease surveillance to a central government agency. As per article 42 onwards of the Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals, all animal owners are obliged to report to the local veterinary inspectorates any cases of disease, suspected disease or death of their animals, and the local veterinary inspectorates are obliged to analyse each reported case, including testing the carcass or animal for presence of infectious disease, and report collected evidence farther up the chain. Data collected from district and regional veterinary inspectorates (and veterinarians and mayors, in rare cases) are eventually submitted to the Chief Veterinary Inspectorate, which takes submitted data into account when preparing a holistic plan for the surveillance and prevention of zoonotic epidemics. [1] The Act of 11 March 2004 does not specify the exact method of communication between animal owners and the veterinary inspectorates. [1] As per the Act of 29 January 2004 on Veterinary Inspection and the Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals, the functions of monitoring, combating and preventing the spread of zoonotic diseases are carried out chiefly by the Chief Veterinary Inspectorate, subordinated to the Ministry of Agriculture and Rural Development. [1, 2]

[1] Polish Parliament. 2004. Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals. (Ustawa z dnia 11 marca 2004 r. o ochronie zdrowia zwierząt oraz zwalczaniu chorób zakaźnych zwierząt).

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040690625>]. Accessed on 13 October 2020.

[2] Polish Parliament. 2004. Act of 29 January 2004 on the Veterinary Inspection. (Ustawa z dnia 29 stycznia 2004 r. o Inspekcji Weterynaryjnej). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040330287>]. Accessed on 13 October 2020.

1.2.2b

Is there legislation and/or regulations that safeguard the confidentiality of information generated through surveillance activities for animals (for owners)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of laws or guidelines that safeguard the confidentiality of livestock owner information generated through surveillance activities for animals in Poland. The websites of the Ministry of Agriculture and Rural Development, the Ministry of Health, and the Chief Veterinary Inspectorate contain no relevant information. [1, 2, 3] As per article 5 of the European Union's General Data Protection Regulation 2016/679 (GDPR) and Poland's Act of 10 May 2018 on Personal Data Protection, the confidentiality of personal data of all Poles must be safeguarded, but it does not specifically mention livestock owners or the protection of personal data relating to property. [4, 5] Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals imposes on livestock owners the obligation to report cases of livestock disease either directly to the nearest District Veterinary Inspectorate, or indirectly through a local veterinarian or mayor. [6]

[1] Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 13 October 2020.

[2] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 13 October 2020.

[3] Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [<https://gis.gov.pl/>]. Accessed on 13 October 2020.

[4] EUR-Lex. 2018. "EU general data protection regulation 2016/679 (GDPR)". [<https://eur-lex.europa.eu/legal-content/PL/TXT/?uri=celex%3A32016R0679>]. Accessed on 13 October 2020.

[5] Polish Parliament. 2018. "Act of 10 May 2018 on personal data protection". ("Ustawa z dnia 10 maja 2018 r. o ochronie danych osobowych"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20180001000>]. Accessed on 13 October 2020.

[6] Polish Parliament. 2004. Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals. (Ustawa z dnia 11 marca 2004 r. o ochronie zdrowia zwierząt oraz zwalczaniu chorób zakaźnych zwierząt).

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040690625>]. Accessed on 13 October 2020.

1.2.2c

Does the country conduct surveillance of zoonotic disease in wildlife (e.g., wild animals, insects, other disease vectors)?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Poland conducts surveillance of zoonotic disease in wildlife. The websites of the Ministry of Agriculture and Rural Development and the Ministry of Health contain no relevant information. [1, 2] None of the relevant legal provisions, including the Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals, the Act of 29 January 2004 on Veterinary Inspection, and the Act of 21 August 1997 on Animal Protection (which defines the term "wild animals" and all the other categories of animals referred to in all Polish legislation) mention anything

about monitoring wild animals for zoonotic diseases. [3, 4, 5]

[1] Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 14 October 2020.

[2] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 14 October 2020.

[3] Polish Parliament. 2004. Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals. (Ustawa z dnia 11 marca 2004 r. o ochronie zdrowia zwierząt oraz zwalczaniu chorób zakaźnych zwierząt).

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040690625>]. Accessed on 14 October 2020.

[4] Polish Parliament. 2004. Act of 29 January 2004 on Veterinary Inspection. (Ustawa z dnia 29 stycznia 2004 r. o Inspekcji Weterynaryjnej). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040330287>]. Accessed on 14 October 2020.

[5] Polish Parliament. 1997. "Act of 21 August 1997 on animal protection". ("Ustawa z dnia 21 sierpnia 1997 r. o ochronie zwierząt"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU19971110724>]. Accessed on 14 October 2020.

1.2.3 International reporting of animal disease outbreaks

1.2.3a

Has the country submitted a report to OIE on the incidence of human cases of zoonotic disease for the last calendar year?

Yes = 1, No = 0

Current Year Score: 0

2019

OIE WAHIS database

1.2.4 Animal health workforce

1.2.4a

Number of veterinarians per 100,000 people

Input number

Current Year Score: 3.93

2018

OIE WAHIS database

1.2.4b

Number of veterinary para-professionals per 100,000 people

Input number

Current Year Score: -

No data available

OIE WAHIS database

1.2.5 Private sector and zoonotic

1.2.5a

Does the national plan on zoonotic disease or other legislation, regulations, or plans include mechanisms for working with the private sector in controlling or responding to zoonoses?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that the national plan or the national legislation on zoonotic disease in Poland include mechanisms for working with the private sector in controlling or responding to zoonoses. No such provisions are provided within the relevant national laws (including the Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals and the Act of 29 January 2004 on Veterinary Inspection). [1, 2] No relevant evidence was found on the websites of the Ministry of Health, the Ministry of Agriculture and Rural Development or the Ministry of Environment. [3, 4, 5] As per the Task no. 44 contained within the 2018 Draft Resolution on the establishment of a multi-annual program “Protection of animal health and public health”, the Ministry of Agriculture and Rural Development plans to start cooperation with private laboratories as regards the preparation and submission of bacteria samples, but only in relation to the occurrence of bacteria resistance to chemotherapeutic pathogens in the pig population. The cooperation with the Veterinary Inspectorate is highlighted more frequently. [6]

[1] Polish Parliament. 2004. Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals. (Ustawa z dnia 11 marca 2004 r. o ochronie zdrowia zwierząt oraz zwalczaniu chorób zakaźnych zwierząt). [http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040690625]. Accessed on 14 October 2020.

[2] Polish Parliament. 2004. Act of 29 January 2004 on Veterinary Inspection. (Ustawa z dnia 29 stycznia 2004 r. o Inspekcji Weterynaryjnej). [http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040330287]. Accessed on 14 October 2020.

[3] Ministry of Health. 2020. [https://www.gov.pl/web/zdrowie]. Accessed on 14 October 2020.

[4] Ministry of Agriculture and Rural Development. 2020. [https://www.gov.pl/web/rolnictwo]. Accessed on 14 October 2020.

[5] Ministry of Environment. 2020. [https://www.gov.pl/web/srodowisko]. Accessed on 14 October 2020.

[6] Website of the Polish prime minister, premier.gov.pl. 2018. Resolution on the establishment of a multi-annual program “Protection of animal health and public health”. (Uchwała w sprawie ustanowienia programu wieloletniego „Ochrona zdrowia zwierząt i zdrowia publicznego”). [https://www.premier.gov.pl/wydarzenia/decyzje-rzadu/uchwala-w-sprawie-ustanowienia-programu-wieloletniego-ochrona-zdrowia-1.html]. Accessed on 04 December 2020. The valid version of the Resolution does not appear to be available for the general public access, but here is a draft of the Resolution provided on the Ministry of Agriculture and Rural Development’s website: https://www.gov.pl/web/rolnictwo/projekt-uchwaly-rady-ministrow-w-sprawie-ustanowienia-programu-wieloletniego-ochrona-zdrowia-zwierzat-i-zdrowia-publicznego-na-lata-20192023

1.3 BIOSECURITY

1.3.1 Whole-of- government biosecurity systems

1.3.1a

Does the country have in place a record, updated within the past five years, of the facilities in which especially dangerous pathogens and toxins are stored or processed, including details on inventories and inventory management systems of those facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of a record of facilities handling especially dangerous pathogens and toxins in Poland. The websites of the Polish Accreditation Centre (which grants laboratories accreditations), the regional sanitary inspectorates, the National Chamber of Laboratory Professionals, and the Chief Veterinary Inspectorate, as well as the Ministry of Health, the Ministry of National Defence, and the Ministry of Agriculture and Rural Development contain no indication of a record of facilities which store and process especially dangerous pathogens. [1, 2, 3, 4, 5, 6, 7] However, according to a number of recent media reports, as well as the websites of the Military Institute of Hygiene and Epidemiology and the Centre for the Diagnostics and Combating of Biological Threats, Poland has no biosafety level 4 laboratories, but has several biosafety level 3 laboratories (including two in Warsaw, one in Pulawy, one in Gdansk and one in Krakow) where especially dangerous pathogens are stored and processed. [8, 9, 10, 11, 12, 13] Although Poland submits Confidence Building Measures almost every year, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [14] The VERTIC BWC Legislation Database contains no additional evidence [15].

[1] Polish Accreditation Centre (Polskie Centrum Akredytacji). 2020. "Research laboratories". ("Laboratoria badawcze").

[<https://www.pca.gov.pl/akredytowane-podmioty/akredytacje-aktywne/laboratoria-badawcze/>]. Accessed on 15 October 2020.

[2] National Regional Sanitary Inspectorate in Bydgoszcz (Państwowy Wojewódzki Inspektor Sanitarny w Bydgoszczy). 2020.

[<https://pwisbydgoszcz.pl/pl/zdrowie/woda/wykaz-laboratoriow-zewnetrznych-wykonujacych-badania-wody-do-spozycia/>]. Accessed on 15 October 2020.

[3] National Chamber of Laboratory Professionals (Krajowa Izba Diagnostów Laboratoryjnych). 2020. "List of laboratories".

("Lista laboratoriów"). [<http://kidl.org.pl/index.php?page=lista-laboratoriow>]. Accessed on 15 October 2020.

[4] Chief Veterinary Inspectorate (Główny Inspektorat Weterynarii). "Registries and lists of laboratories". ("Rejestry i wykazy laboratoriów i pracowni laboratoryjnych"). [<https://www.wetgiw.gov.pl/nadzor-weterynaryjny/rejestry-i-wykazy-pracowni-laboratoriow>]. Accessed on 15 October 2020.

[5] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 15 October 2020.

[6] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 15 October 2020.

[7] The Ministry of National Defence. 2018. [<https://www.gov.pl/web/obrona-narodowa>]. Accessed on 15 October 2020.

[8] Gdansk University. 2017. "Construction of a new Biotechnology Institute building". ("Budowa nowego budynku Instytutu Biotechnologii").

[https://biotech.ug.edu.pl/wydzial/projekty/aparaturowe_i_inwestycyjne/budowa_nowego_budynku_instytutu_biotechnologii]. Accessed on 15 October 2020

[9] RMF. 2017. "Dangerous pathogens researched in the cleanest place in Krakow". ("Grozne patogeny badane w najczystszy miejscu Krakowa"). [<https://www.rmf24.pl/tylko-w-rmf24/niesamowite-miejsce/news-grozne-patogeny-badane-w-najczystszy-miejscu-krakowa,nld,2350778>]. Accessed on 15 October 2020.

[10] Tech.wp.pl. 2016. "Most secured place in Poland". ("Najlepiej zabezpieczone miejsce w Polsce").

[<https://tech.wp.pl/najlepiej-zabezpieczone-miejsce-w-polsce-wstep-do-niego-maja-nieliczni-6034841037103745a>]. Accessed on 15 October 2020.

[11] Biotechnologia. 2016. "BSL-3 laboratories". ("Laboratoria klasy BSL-3").

[<https://biotechnologia.pl/biotechnologia/laboratoria-klasy-bsl-3,15910?month=5&year=2018>]. Accessed on 15 October 2020.

[12] Military Institute of Hygiene and Epidemiology (Wojskowy Instytut Higieny i Epidemiologii). 2020. "About us". ("O nas").

[<http://www.wihe.waw.pl/wihe/o-nas>]. Accessed on 15 October 2020.

[13] Centre for the Diagnostics and Combating of Biological Threats (Osrodek Diagnostyki i Zwalczania Zagrożeń

Biologicznych). 2020. "bacteriophages". ("Bakteriofagi"). [<http://www.wihe.pulawy.pl/pl/pracownie/bakteriofagi/>]. Accessed on 15 October 2020.

[14] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>].

Accessed 15 October 2020.

[15] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 12 November 2020.

1.3.1b

Does the country have in place legislation and/or regulations related to biosecurity which address requirements such as physical containment, operation practices, failure reporting systems, and/or cybersecurity of facilities in which especially dangerous pathogens and toxins are stored or processed?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Poland has legislation related to biosecurity regarding the operational requirements of facilities in which especially dangerous pathogens and toxins are stored or processed. The websites of the Ministry of Health, the Ministry of Environment and the Ministry of National Defence contain no relevant content. [1, 2, 3] There are no relevant provisions in the Act of 26 April 2007 on Crisis Management. [4] Existing legislation, including the Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans and the Act of 15 April 2011 on Health Care Activity, do contain provisions on procedures to monitor, control and prevent infectious diseases from spreading, procedures on how to handle patients with reported infectious diseases, as well as procedures on how the Ministry of Health may audit and enforce biosafety regulations in research laboratories, whether standalone or incorporated into public hospitals, but they do not provide any specific provisions relating to facilities in which especially dangerous pathogens are stored. [5, 6] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [7] In January 2020 the minister of agriculture issued an ordinance that refers to "bioasekuracja" ("biosecurity") in its title, but this ordinance relates to sanitary measures when hunting wild game, rather than to laboratories working with dangerous pathogens. [8] The VERTIC BWC Legislation Database contains no additional evidence [9].

[1] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 15 October 2020.

[2] The Ministry of Environment. 2020. [<https://www.gov.pl/web/srodowisko>]. Accessed on 15 October 2020.

[3] The Ministry of National Defence. 2020. [<https://www.gov.pl/web/obrona-narodowa>]. Accessed on 15 October 2020.

[4] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarzadzaniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 15 October 2020.

[5] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi).

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 15 October 2020.

[6] Polish Parliament. October 2018. Act of 15 April 2011 on health care activity. (Ustawa z dnia 15 kwietnia 2011 r. o działalności leczniczej). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20111120654/U/D20110654Lj.pdf>]. Accessed on 15 October 2020.

[7] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed 15 October 2020.

[8] Polish Parliament. 2020. Ordinance of the Minister of Agriculture and Rural Development of January 30, 2020 on the principles of biosecurity that should be followed during hunting or sanitary shooting and when performing activities related to the management of wild game animals ("Rozporządzenie Ministra Rolnictwa i Rozwoju Wsi z dnia 30 stycznia 2020 r. w sprawie zasad bioasekuracji, jakie powinny być przestrzegane podczas polowania lub odstrzału sanitarnego oraz przy wykonywaniu czynności związanych z zagospodarowaniem zwierzęcia łownego z gatunku dzik") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20200000160>] Accessed 17 October 2020.

[9] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc->

legislation-database/] Accessed on 12 November 2020.

1.3.1c

Is there an established agency (or agencies) responsible for the enforcement of biosecurity legislation and regulations?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence that Poland has an agency responsible for the enforcement of biosecurity regulations in facilities that store especially dangerous pathogens. The websites of the Ministry of Health, the Ministry of Environment and the Ministry of National Defence have no relevant content. [1, 2, 3] There are no relevant provisions in the Act of 26 April 2007 on Crisis Management. [4] Existing legislation, including the Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans and the Act of 15 April 2011 on Health Care Activity, do contain provisions on procedures to monitor, control and prevent infectious diseases from spreading, procedures on how to handle patients with reported infectious diseases, as well as procedures on how the Ministry of Health may audit and enforce biosafety regulations in research laboratories, whether standalone or incorporated into public hospitals, but they do not provide any specific provisions relating to facilities in which especially dangerous pathogens are stored. [5, 6] The Act of 15 January 2016 on Changes in the Law on Genetically Modified Organisms and Other Legal Acts has established a commission on genetically modified organisms (GMOs), which is described as including a biosecurity expert, but this law and the commission are solely focused on GMOs. [7] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [8] The VERTIC BWC Legislation Database contains no additional evidence [9].

[1] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 15 October 2020.

[2] The Ministry of Environment. 2020. [<https://www.gov.pl/web/srodowisko>]. Accessed on 15 October 2020.

[3] The Ministry of National Defence. 2020. [<https://www.gov.pl/web/obrona-narodowa>]. Accessed on 15 October 2020.

[4] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarzadzaniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 15 October 2020.

[5] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakazen i chorób zakaznych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 15 October 2020.

[6] Polish Parliament. 2011. Act of 15 April 2011 on health care activity. (Ustawa z dnia 15 kwietnia 2011 r. o dzialo?alno?ci leczniczej). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20111120654/U/D20110654Lj.pdf>]. Accessed on 15 October 2020.

[7] Polish Parliament. 2016. Act of 15 January 2016 on changes in the law on genetically modified organisms and other legal acts. (Ustawa z dnia 15 stycznia 2016 r. o zmianie ustawy o organizmach genetycznie zmodyfikowanych oraz niektórych innych ustaw). [http://orka.sejm.gov.pl/proc7.nsf/ustawy/2394_u.htm]. Accessed on 15 October 2020.

[8] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed 15 October 2020.

[9] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 12 November 2020.

1.3.1d

Is there public evidence that shows that the country has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that Poland has taken action to consolidate its inventories of especially dangerous pathogens and toxins into a minimum number of facilities. The websites of the Ministry of Health, the Ministry of Environment, the Ministry of Agriculture and Rural Development, and the Ministry of National Defence contain no relevant content. [1, 2, 3, 4] There are no relevant provisions in the Act of 26 April 2007 on Crisis Management. [5] As per article 30 of the Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans, all hospitals in Poland are required to keep a record of various infectious pathogens and toxins, but no focus is placed on inventories of especially dangerous pathogens. [6] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [7] The VERTIC BWC Legislation Database contains no additional evidence [8].

[1] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 15 October 2020.

[2] The Ministry of Environment. 2020. [<https://www.gov.pl/web/srodowisko>]. Accessed on 15 October 2020.

[3] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 15 October 2020.

[3] The Ministry of National Defence. 2020. [<https://www.gov.pl/web/obrona-narodowa>]. Accessed on 15 October 2020.

[5] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarzadzaniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 15 October 2020.

[6] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakazen i chorób zakaznych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 15 October 2020.

[7] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed 15 October 2020.

[8] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 12 November 2020.

1.3.1e

Is there public evidence of in-country capacity to conduct Polymerase Chain Reaction (PCR) based diagnostic testing for anthrax and/or Ebola, which would preclude culturing a live pathogen?

Yes = 1, No = 0

Current Year Score: 1

There is public evidence of in-country capacity in Poland to conduct polymerase chain reaction (PCR) diagnostic testing for anthrax and Ebola without culturing a live pathogen. The National Public Health Institute's Virology Laboratory runs Ebola viral tests with PCR method under biosafety level 4 (BSL-4) conditions, which is the highest level of biosafety precautions. [1, 2] The Military Institute of Hygiene and Epidemiology runs PCR diagnostic testing for Ebola [3]. A 2017 scientific study presents the results of successful PCR testing on the anthrax virus, undertaken by the National Research Institute in Puławy, which is one of the main reference research centres in Poland, subordinated to the Ministry of Agriculture and Rural Development. [4]

[1] Vetpol. 2014. "Progress in detecting and combating the Ebola virus". ("Postep w rozpoznawaniu i zwalczaniu choroby Ebola"). [<http://www.vetpol.org.pl/dmdocuments/ZW-2014-10-03.pdf>]. Accessed on 15 October 2020.

[2] District Sanitary Station in Zawiercie (Powiatowa Stacja Sanitarno-Epidemiologiczna w Zawierciu). (date unknown). Ebola virus diagnostic tests. (Badania diagnostyczne w kierunku zakazen wirusem Ebola). [http://www.psse-zawiercie.internetdsl.pl/pages/aktualnosci/news_55/06_badanie_ebola.pdf]. Accessed on 15 October 2020.

[3] Military Institute of Hygiene and Epidemiology (Wojskowy Instytut Higieny i Epidemiologii). [http://www.wihe.waw.pl/zaklady/odizzb/pracownia/wirusologia]. Accessed on 15 October 2020.

[4] Scientific Conference 90th anniversary of the Polish Society of Microbiologists. (Konferencja Naukowa 90 lat Polskiego Towarzystwa Mikrobiologów, PTM wczoraj – dziś – jutro). November 2017. [https://www.microbiology.pl/wp-content/uploads/2017/11/calosc_net.pdf]. Accessed on 15 October 2020.

1.3.2 Biosecurity training and practices

1.3.2a

Does the country require biosecurity training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of a standardized approach to biosecurity training in Poland. The websites of the Ministry of Health, the Ministry of the Environment, the Ministry of Defense, the Chief Sanitary Inspectorate, the National Institute of Public Health and the National Institute of Hygiene contain no relevant information. [1, 2, 3, 4, 5] There are no relevant provisions in the Act of 26 April 2007 on Crisis Management. [6]. The Act of 27 July 2001 on Laboratory Diagnostics and the Ordinance of the Minister of Health of 23 March 2006 on Quality Standards for Medical Diagnostic and Microbiological Laboratories do not contain provisions on a common curriculum relating to biosecurity training. [7,8]. In a section on requirements for laboratory diagnosticians, the Act of 27 July 2001 on Laboratory Diagnostics does not explicitly highlight biosecurity training. [7]. The Ordinance of the Minister of Health of 24 July 2017 on the Continuous Training of Laboratory Diagnosticians does not explicitly outline a common curriculum on biosecurity training. [9] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [10]. The VERTIC BWC Legislation Database contains no additional evidence. [11]

[1] Polish Health Ministry. 2020. [https://www.gov.pl/web/zdrowie]. Accessed on 15 October 2020.

[2] Polish Ministry of Environment. 2020. [https://www.gov.pl/web/srodowisko/]. Accessed on 15 October 2020.

[3] Ministry of National Defence. 2020. [https://www.gov.pl/web/obrona-narodowa]. Accessed on 15 October 2020.

[4] Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [https://gis.gov.pl/]. Accessed on 15 October 2020.

[5] National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny). 2020. [https://www.pzh.gov.pl/]. Accessed on 15 October 2020.

[6] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzaniu kryzysowym. [http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590]. Accessed on 15 October 2020.

[7] Polish Parliament. 2001. Act of 27 July 2001 on laboratory diagnostics. ("Ustawa z dnia 27 lipca 2001 r. o diagnostyce laboratoryjnej") [https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20011001083] Accessed on 15 November 2020.

[8] Polish Parliament. 2006. Ordinance of the Minister of Health of 23 March 2006 on quality standards for medical diagnostic and microbiological laboratories ("Rozporządzenie Ministra Zdrowia z dnia 23 marca 2006 r. w sprawie standardów jakości dla medycznych laboratoriów diagnostycznych i mikrobiologicznych").

[http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20060610435] Accessed on 15 November 2020.

[9] Wolters Kluwer. 2017. Regulation of the Minister of Health of 24 July 2017 on the continuous training of laboratory diagnosticians. ("Rozporządzenie Ministra Zdrowia z dnia 24 lipca 2017 r. w sprawie ciągłego szkolenia diagnostów laboratoryjnych") [https://sip.lex.pl/akty-prawne/dzu-dziennik-ustaw/ciagle-szkolenie-diagnostow-laboratoryjnych-18623850] Accessed on 15 November 2020.

[10] United Nations Office at Geneva. Confidence Building Measures. Poland. [https://bwc-ecbm.unog.ch/state/poland].

Accessed on 15 October 2020.

[11] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 15 November 2020.

1.3.3 Personnel vetting: regulating access to sensitive locations

1.3.3a

Do regulations or licensing conditions specify that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential are subject to the following checks: drug testing, background checks, and psychological or mental fitness checks?

Personnel are subject to all three of these checks = 3, Personnel are subject to two of these checks = 2, Personnel are subject to one of these checks = 1, Personnel are not subject to any of these checks = 0

Current Year Score: 0

There is no evidence that security and other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential in Poland are subject to drug testing, background checks, or psychological/mental fitness checks. Article 9 of the Laboratory Diagnostics Act of 27 July 2001 stipulates that employees of diagnostics laboratories must, among other requirements, present a certificate certifying that they are mentally fit for their position, and article 7 of the same act stipulates that the candidate for a position as a laboratory diagnostician must "have full legal capacity". [1] Article 2 of the Act stipulates that the activities of a diagnostics laboratory include laboratory and microbiological laboratory tests for prophylactic, diagnostic and therapeutic or sanitary-epidemiological purposes, but there is no evidence that the act applies to other types of facility that work with especially dangerous pathogens, toxins, or biological materials with pandemic potential. [1] There is no evidence of requirements applicable to other personnel with access to especially dangerous pathogens, toxins, or biological materials with pandemic potential in documents published by any of the major Polish diagnostics laboratory regulatory agencies, such as the Polish Association of Laboratory Diagnostics, the Center for Diagnostics Laboratory Research Quality, or the National Chamber of Diagnostics Laboratory Professionals [2, 3, 4]. No such evidence has been found on the websites of the Ministries of Health, Defence, and Agriculture, or those of the Chief Sanitary Inspectorate or the National Institute of Public Health [6, 7, 8, 9, 10]. The Health Minister's Decree of 22 April 2005 on Harmful Biological Factors in the Work Environment and Health Protection of Workers Professionally Exposed to These Factors provides detailed guidelines on how employers should secure the health of workers exposed to dangerous biological materials, including toxins, viruses and fungi, but it contains no provisions relating to vetting checks to be carried out on personnel employed. [5] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [11]

[1] Polish Parliament. September 2001. Laboratory Diagnostics Act of 27 July 2001. (Ustawa z dnia 27 lipca 2001 r. o diagnostyce laboratoryjnej). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20011001083/U/D20011083Lj.pdf>]. Accessed on 16 October 2020.

[2] Polish Association of Laboratory Diagnostics. (Polskie Towarzystwo Diagnostyki Laboratoryjnej). [<http://www.ptdl.pl/>]. Accessed on 16 October 2020.

[3] Centre for Diagnostics Laboratory Research Quality. (Centralny Ośrodek Badań Jakości w Diagnostyce Laboratoryjnej). [<http://www.cobjwdl.lodz.pl/>]. Accessed on 16 October 2020.

[4] National Chamber of Diagnostics Laboratory Professionals. (Krajowa Izba Diagnostów Laboratoryjnych).

[<http://www.kidl.org.pl/>]. Accessed on 16 October 2020. 5] Polish Parliament. 2005. Health Minister's Decree of 22 April 2005 on harmful biological factors in the work environment and health protection of workers professionally exposed to these factors. (Rozporządzenie Ministra Zdrowia z dnia 22 kwietnia 2005 r. w sprawie szkodliwych czynników biologicznych dla zdrowia w środowisku). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20050810716/O/D20050716.pdf>]. Accessed

on 16 October 2020.

[6] The Polish Health Ministry. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 16 October 2020.

[7] Ministry of National Defence. 2020. [<http://mon.gov.pl/>]. Accessed on 16 October 2020.

[8] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 16 October 2020

[9] Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [<https://gis.gov.pl/>]. Accessed on 16 October 2020.

[10] National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny). 2020. [<https://www.pzh.gov.pl/>]. Accessed on 16 October 2020.

[11] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed on 16 October 2020.

1.3.4 Transportation security

1.3.4a

Does the country have publicly available information on national regulations on the safe and secure transport of infectious substances (specifically including Categories A and B)?

Yes = 1, No = 0

Current Year Score: 1

There is publicly available information on national regulations on the safe and secure transport of infectious substances (Categories A and B). The legal basis for the transport of dangerous goods in Poland is the European Agreement Concerning the International Carriage of Dangerous Goods by Road (ADR), which covers infectious substances, which has implemented in Poland, and which explicitly covers categories A and B. [1, 2] Relevant national legislation includes the Act of 19 August 2011 on the Transport of Dangerous Goods, the Act of 1 July 2005 on the Procurement, Storage and Transplant of Cells, Tissues and Organs, and Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans, all of which cover transport of "active infectious substances", but none of these mention categories A and B. [3, 4, 5, 6] Detailed requirements for the national transport of biological materials, including infectious substances, are provided by the Health Minister's Decree of 23 March 2006 on Quality Standards for Medical Diagnostics and Microbiology Laboratories, which stipulates, among other things, that material for laboratory testing should be transported and delivered to the laboratory by authorized persons in sealed tubes or containers, in a closed collective packaging, and labelled as "infectious material", and that it should be transported in such conditions so as not to change the material's properties. [7] However, this decree does not mention categories A or B. [7] No further relevant information is available on the websites of the Ministries of Health, Defence, and Agriculture, the Chief Sanitary Inspectorate, or the National Institute of Public Health [8, 9, 10, 11, 12]. Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [13] The VERTIC BWC Legislation Database contains no additional evidence [14].

[1] Polish Parliament. 2018. "European Agreement concerning the International Carriage of Dangerous Goods by Road". ("Umowa europejska dotycząca międzynarodowego przewozu drogowego towarów niebezpiecznych (ADR), sporządzona w Genewie dnia 30 września 1957 r."). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU19750350189>]. Accessed on 17 October 2020.

[2] United Nations (UN). 2016. European Agreement concerning the International Carriage of Dangerous Goods by Road. Applicable as from 1 January 2017.

[https://www.unece.org/fileadmin/DAM/trans/danger/publi/adr/adr2017/ADR2017e_web.pdf]. Accessed on 17 October 2020.

[3] Polish Parliament. 2015. Reply to interpellation number 34385. (Odpowiedz na interpelacje nr 34385).

- [<http://www.sejm.gov.pl/Sejm7.nsf/InterpelacjaTresc.xsp?key=1D099699>]. Accessed on 17 October 2020.
- [4] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 17 October 2020.
- [5] Polish Parliament. 2011. Act of 19 August 2011 on the transport of dangerous goods. (Ustawa z dnia 19 sierpnia 2011 r. o przewozie towarów niebezpiecznych). [http://orka.sejm.gov.pl/proc6.nsf/ustawy/4167_u.htm]. Accessed on 17 October 2020.
- [6] Polish Parliament. 2011. Act of 1 July 2005 on the procurement, storage and transplantation of cells, tissues and organs. (Ustawa z dnia 1 lipca 2005 r. o pobieraniu, przechowywaniu i przeszczepianiu komórek, tkanek i narządów). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20051691411/T/D20051411L.pdf>]. Accessed on 17 October 2020.
- [7] Polish Parliament. 2006. Health Minister's Decree of 23 March 2006 on quality standards for medical diagnostics and microbiology laboratories. (Rozporządzenie Ministra Zdrowia z dnia 23 marca 2006 r. w sprawie standardów jakości dla medycznych laboratoriów diagnostycznych i mikrobiologicznych). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20060610435>]. Accessed on 17 October 2020.
- [8] The Polish Health Ministry. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 17 October 2020.
- [9] Ministry of National Defence. 2020. [<https://www.gov.pl/web/obrona-narodowa>]. Accessed on 17 October 2020.
- [10] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 17 October 2020.
- [11] Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2018. [<https://gis.gov.pl/>]. Accessed on 17 October 2020.
- [12] National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny). 2018. [<https://www.pzh.gov.pl/>]. Accessed on 17 October 2020.
- [13] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed 17 October 2020.
- [14] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 12 November 2020.

1.3.5 Cross-border transfer and end-user screening

1.3.5a

Is there legislation and/or regulations in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins, and pathogens with pandemic potential?

Yes = 1, No = 0

Current Year Score: 1

Poland has a regulation in place to oversee the cross-border transfer and end-user screening of especially dangerous pathogens. The international transport of biological material, including especially dangerous pathogens and toxins, is regulated in Poland by regulations provided by the International Air Transport Association (IATA) and by the European Agreement Concerning the International Carriage of Dangerous Goods by Road (ADR). [1] Poland is also bound by the European Union's Regulation No 428/2009 Setting up a Community Regime for the Control of Exports, Transfer, Brokering and Transit of Dual-Use Items. According to this regulation, export authorization is subject to identification of the end-user and intended use. [2] The regulation states that dual-use items, including biological agents, may not be exported when the exporter is informed by member state authorities that they are intended for the production of weapons of mass destruction, or for military use more broadly where the destination country is subject to an arms embargo imposed by the Organization for Security and Co-operation in Europe (OSCE) or United Nations Security Council. [2] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain

information on this matter. [3] The VERTIC BWC Legislation Database contains no additional evidence [4].

[1] Polish Parliament. 2015. Reply to interpellation number 34385. (Odpowiedz na interpelacje nr 34385). [<http://www.sejm.gov.pl/Sejm7.nsf/InterpelacjaTresc.xsp?key=1D099699>]. Accessed on 17 October 2020.

[2] Council Regulation (EC) No 428/2009 of 5 May 2009 setting up a Community regime for the control of exports, transfer, brokering and transit of dual-use items. EUR-Lex. [<https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex:32009R0428>]. Accessed on 17 October 2020.

[3] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed on 17 October 2020.

[4] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 12 November 2020.

1.4 BIOSAFETY

1.4.1 Whole-of-government biosafety systems

1.4.1a

Does the country have in place national biosafety legislation and/or regulations?

Yes = 1, No = 0

Current Year Score: 1

Poland has in place national biosafety regulations. The Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans devotes its 20th article to the biosafety of employees exposed to the presence of infectious biological substances, including relevant vaccination obligations and working environment safety requirements. [1] Further, the Health Minister's Decree of 22 April 2005 on Harmful Biological Factors in the Work Environment and Health Protection of Workers Professionally Exposed to These Factors provides detailed guidelines on how employers should secure the health of workers exposed to dangerous biological materials, including toxins, viruses and fungi. It also regulates safety levels based on a list of agents and toxins, establishing special employee safety rules and measures. [2] According to these regulations, employers are obliged to assess the potential risks, taking into consideration the classification of hazardous biological substances, as well as the type, duration and extent to which employees are likely to be exposed to the hazardous biological substance. Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [3]

In addition, in January 2020 the minister of agriculture issued an ordinance that refers to "bioasekuracja" (translatable as "biosecurity" or "biosafety") in its title, but this ordinance relates to sanitary measures for hunters of wild game, rather than to laboratories working with dangerous pathogens. [4]

[1] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 17 October 2020.

[2] Polish Parliament. 2005. Health Minister's Decree of 22 April 2005 on harmful biological factors in the work environment and health protection of workers professionally exposed to these factors. (Rozporządzenie Ministra Zdrowia z dnia 22 kwietnia 2005 r. w sprawie szkodliwych czynników biologicznych dla zdrowia w środowisku). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20050810716/O/D20050716.pdf>]. Accessed on 17 October 2020.

[3] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed 17 October 2020.

[4] Polish Parliament. 2020. Ordinance of the Minister of Agriculture and Rural Development of January 30, 2020 on the principles of biosecurity that should be followed during hunting or sanitary shooting and when performing activities related to the management of wild game animals ("Rozporządzenie Ministra Rolnictwa i Rozwoju Wsi z dnia 30 stycznia 2020 r. w sprawie zasad bioasekuracji, jakie powinny być przestrzegane podczas polowania lub odstrzału sanitarnego oraz przy wykonywaniu czynności związanych z zagospodarowaniem zwierzęcia łownego z gatunku dzik") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU2020000160>] Accessed 17 October 2020.

1.4.1b

Is there an established agency responsible for the enforcement of biosafety legislation and regulations?

Yes = 1 , No = 0

Current Year Score: 1

Poland has an agency responsible for the enforcement of biosafety regulations. As per article 5 of the Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans, compliance with biosafety regulations in force in Poland is supervised by the respective district and regional sanitary inspectorates, as well as the Chief Sanitary Inspectorate, subject to the health ministry. [1] In addition, articles. 118–122 of the Act of 15 April 2011 on Healthcare Activity provide the health ministry with the authority to conduct audits in public healthcare institutions (including laboratories as units operating within public hospitals). The ministry may appoint voivodes (executive leaders of top-level Polish administrative regions), national medical consultants as well as any units subject to the ministry (including especially sanitary and veterinary inspectorates and affiliated sub-units) to conduct such audits . [2] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [3]

[1] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 17 October 2020.

[2] Polish Parliament. October 2018. Act of 15 April 2011 on health care activity. (Ustawa z dnia 15 kwietnia 2011 r. o działalności leczniczej). [<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20111120654/U/D20110654Lj.pdf>]. Accessed on 17 October 2020.

[3] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed on 17 October 2020.

1.4.2 Biosafety training and practices

1.4.2a

Does the country require biosafety training, using a standardized, required approach, such as through a common curriculum or a train-the-trainer program, for personnel working in facilities housing or working with especially dangerous pathogens, toxins, or biological materials with pandemic potential?

Yes = 1 , No = 0

Current Year Score: 0

There is insufficient evidence that Poland requires biosafety training using a standardized mandatory approach for staff working with especially dangerous pathogens. The Ordinance of the Minister of Health of 22 April 2005 on Harmful Biological Agents for Health in the Work Environment and Protection of the Health of Workers Professionally Exposed to These Factors accounts for safety protocols for working with harmful biological agents, including employee training. Article 7, point 12

stipulates that the employer must provide regular training on potential health hazards caused by biological agents, preventive procedures, sanitary requirements and equipment and its usage for individual and mass safety, safety protocol in the case of an accident or outbreak and such training should occur with the frequency required by the Ordinance of the Minister of Economy and Labor of 27 July 2004 on Training in the Field of Health and Safety at Work [1] The Ordinance of the Minister of Economy and Labor of 27 July 2004 on Training in the Field of Health and Safety at Work outlines requirements for frequency and type of training required, highlighting details such as number of hours of training required, for different categories of workers, including those exposed to dangers and factors harmful to health [2] There is no further evidence available from the country's Confidence Building Measures (CBM) reports to the UNOG. [3]

[1] Polish Parliament. 2005. Ordinance of the Minister of Health of 22 April 2005 on harmful biological agents for health in the work environment and protection of the health of workers professionally exposed to these factors ("Rozporządzenie Ministra Zdrowia z dnia 22 kwietnia 2005 r. w sprawie szkodliwych czynników biologicznych dla zdrowia w środowisku pracy oraz ochrony zdrowia pracowników zawodowo narażonych na te czynniki") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=wdu20050810716>] Accessed on 15 November 2020.

[2] Polish Parliament. 2004. The Ordinance of the Minister of Economy and Labor of 27 July 2004 on training in the field of health and safety at work ("Rozporządzenie Ministra Gospodarki i Pracy z dnia 27 lipca 2004 r. w sprawie szkolenia w dziedzinie bezpieczeństwa i higieny pracy") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20041801860>] Accessed on 15 November 2020.

[3] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed on 17 October 2020.

1.5 DUAL-USE RESEARCH AND CULTURE OF RESPONSIBLE SCIENCE

1.5.1 Oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research

1.5.1a

Is there publicly available evidence that the country has conducted an assessment to determine whether ongoing research is occurring on especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1, No = 0

Current Year Score: 0

There is no publicly available evidence that Poland has conducted an assessment to determine whether ongoing dual-use research is occurring. The production, import/export and transit of dual-use products are highly regulated. The relevant European Union (EU) legal provisions regulating this issue is the Council Regulation (EC) No 428/2009 of 5 May 2009 Setting up a Community Regime for the Control of Exports, Transfer, Brokering and Transit of Dual-Use Items, including its Annex I, which provides a comprehensive list of products considered as dual-use, which includes pathogens. [1] At the national level, dual-use research is regulated by the ministry responsible for the economy (currently the Ministry of Entrepreneurship and Technology). [2] The Ministry's Department of Trade in Sensitive Goods and Technical Safety is tasked with dual-use research oversight. [3] The Act of 29 November 2000 does stipulate that entities dealing with dual-use products and technology are required to submit annual activity reports to the regulatory body (the Department of Trade in Sensitive Goods and Technical Safety), but no public evidence was found either on the website of the Ministry of Entrepreneurship and Technology or on the Department of Trade in Sensitive Goods and Technical Safety suggesting that an assessment has been conducted to determine whether dual-use research is occurring. [4, 5] No Polish or international media reports or other documentation suggest that such as assessment has recently taken place. The Ministries of Health, Defence, and Agriculture, the Chief Sanitary Inspectorate and the National Institute of Public Health have no relevant information. [6, 7, 8, 9, 10] Although

Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [11] The VERTIC BWC Legislation Database contains no additional evidence [12].

[1] EURLex. 2018. "Council Regulation (EC) No 428/2009 of 5 May 2009 setting up a Community regime for the control of exports, transfer, brokering and transit of dual-use items". [<https://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1399888895034&uri=CELEX:02009R0428-20120615>]. Accessed on 18 October 2020

[2] Polish Parliament. 2000. "Act of 29 November 2000 on foreign trade in goods, technologies and services of strategic importance for state security, as well as for maintaining international peace and security". ("Ustawa z dnia 29 listopada 2000 r. o obrocie z zagranicą towarami, technologiami i usługami o znaczeniu strategicznym dla bezpieczeństwa państwa, a także dla utrzymania międzynarodowego pokoju i bezpieczeństwa"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20001191250>]. Accessed on 18 October 2020.

[3] The Ministry of Entrepreneurship and Technology. 2020. "Permits for dual-use product trade". ("Zezwolenia na obrót produktami podwójnego zastosowania"). [<https://www.mpit.gov.pl/strony/zadania/wspolpraca-miedzynarodowa/jak-uzyskac-zezwolenie-na-obrot-produktami-podwojnego-zastosowania/>]. Accessed on 18 October 2020.

[4] The Ministry of Entrepreneurship and Technology. 2020. "The Department of Trade in Sensitive Goods and Technical Safety". ("Departament Obrotu Towarami Wrażliwymi i Bezpieczeństwa Technicznego"). [<https://www.mpit.gov.pl/strony/ministerstwo/departament-obrotu-towarami-wrazliwymi-i-bezpieczenstwa-technicznego/>]. Accessed on 18 October 2020.

[5] The Ministry of Entrepreneurship and Technology. 2020. [<https://www.gov.pl/web/rozwoj-praca-technologie/>]. Accessed on 18 October 2020.

[6] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 18 October 2020.

[7] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 18 October 2020.

[8] The Ministry of National Defence. 2020. [<https://www.gov.pl/web/obrona-narodowa>]. Accessed on 18 October 2020.

[9] The Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [<https://www.gov.pl/web/gis>]. Accessed on 18 October 2020.

[10] The National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny). 2020. [<https://www.pzh.gov.pl/>]. Accessed on 18 October 2020.

[11] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed 18 October 2020.

[12] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 15 November 2020.

1.5.1b

Is there legislation and/or regulation requiring oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence of a national policy requiring oversight of dual use research in Poland. The production, import, export and transit of dual-use products are highly regulated. The relevant European Union (EU) legal provision regulating this issue is the Council Regulation (EC) No 428/2009 of 5 May 2009 Setting up a Community Regime for the Control of Exports, Transfer, Brokering and Transit of Dual-Use Items, including its Annex I, which provides a comprehensive list of products considered as dual-use, which includes pathogens. [1] At the national level, the Act of 29 November 2000 on Foreign Trade in Goods, Technologies and Services of Strategic Importance for State Security and for Maintaining International Peace and

Security sets out how entities dealing with dual-use products are to register and report their activity. The Act states that the ministry responsible for the economy (currently the Ministry of Entrepreneurship and Technology) regulates dual-use activity. [2] The sub-unit of the Ministry of Entrepreneurship and Technology responsible for the registration, authorization and supervision of dual-use activity is called the Department of Trade in Sensitive Goods and Technical Safety, and this body also has the authority to issue authorizations and conduct audits in entities engaged in dual-use research. [3] The Ordinance of the Minister of Health of 23 December 2011 on the List of Priority Pathogens, Registers of Hospital Infections and Priority Pathogens and Reports on the Current Epidemiological Situation lists priority pathogens and reporting epidemiological threats in hospitals, but does not outline guidelines for their research or any other dual-use research. [4] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [5] The VERTIC BWC Legislation Database contains no additional evidence. [6].

[1] EURLex. 2018. "Council Regulation (EC) No 428/2009 of 5 May 2009 setting up a Community regime for the control of exports, transfer, brokering and transit of dual-use items". [<https://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1399888895034&uri=CELEX:02009R0428-20120615>]. Accessed on 18 October 2020.

[2] Polish Parliament. 200. "Act of 29 November 2000 on foreign trade in goods, technologies and services of strategic importance for state security, as well as for maintaining international peace and security". ("Ustawa z dnia 29 listopada 2000 r. o obrocie z zagranicą towarami, technologiami i usługami o znaczeniu strategicznym dla bezpieczeństwa państwa, a także dla utrzymania międzynarodowego pokoju i bezpieczeństwa").

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20001191250>]. Accessed on 18 October 2020.

[3] The Ministry of Entrepreneurship and Technology. 2020. "Permits for dual-use product trade". ("Zezwolenia na obrót produktami podwójnego zastosowania"). [<https://www.mpit.gov.pl/strony/zadania/wspolpraca-miedzynarodowa/jak-uzyskac-zezwolenie-na-obrot-produktami-podwojnego-zastosowania/>]. Accessed on 18 October 2020.

[4] Polish Parliament. 2011. Ordinance of the Minister of Health of 23 December 2011. on the list of priority pathogens, registers of hospital infections and priority pathogens and reports on the current epidemiological situation of the hospital ("Rozporządzenie Ministra Zdrowia z dnia 23 grudnia 2011 r. w sprawie listy czynników alarmowych, rejestrów zakażeń szpitalnych i czynników alarmowych oraz raportów o bieżącej sytuacji epidemiologicznej szpitala")

[<http://isap.sejm.gov.pl/isap.nsf/download.xsp/WDU20112941741/O/D20111741.pdf>] Accessed on 15 November 2020.

[5] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed 18 October 2020.

[6] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 15 November 2020.

1.5.1c

Is there an agency responsible for oversight of research with especially dangerous pathogens, toxins, pathogens with pandemic potential and/or other dual-use research?

Yes = 1, No = 0

Current Year Score: 0

There is insufficient evidence of an agency responsible for oversight of dual-use research in Poland. At the national level, the Act of 29 November 2000 on Foreign Trade in Goods, Technologies and Services of Strategic Importance for State Security and for Maintaining International Peace and Security sets out how entities dealing with dual-use products are to register and report their activity. The Act states that the ministry responsible for the economy (currently the Ministry of Entrepreneurship and Technology) regulates dual-use activity, but it does not specifically mention dual-use research. [1] The sub-unit of the Ministry of Entrepreneurship and Technology responsible for the registration, authorization and supervision of dual-use activity is called the Department of Trade in Sensitive Goods and Technical Safety, and this body also has the authority to issue authorizations and conduct audits in entities engaged in dual-use research. [2] The Ministries of Health, Defence, and

Agriculture, the Chief Sanitary Inspectorate and the National Institute of Public Health have no relevant information. [3,4,5,6,7] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [8] The VERTIC BWC Legislation Database contains no additional evidence. [9]

[1] Polish Parliament. 2018. "Act of 29 November 2000 on foreign trade in goods, technologies and services of strategic importance for state security, as well as for maintaining international peace and security". ("Ustawa z dnia 29 listopada 2000 r. o obrocie z zagranic? towarami, technologiami i us?ugami o znaczeniu strategicznym dla bezpiecze?stwa pa?stwa, a tak?e dla utrzymania mi?dzynarodowego pokoju i bezpiecze?stwa").

[http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20001191250]. Accessed on 18 October 2020.

[2] Ministry of Entrepreneurship and Technology. 2018. "Permits for dual-use product trade". ("Zezwolenia na obrót produktami podwójnego zastosowania"). [https://www.mpit.gov.pl/strony/zadania/wspolpraca-miedzynarodowa/jak-uzyskac-zezwolenie-na-obrot-produktami-podwojnego-zastosowania/]. Accessed on 18 October 2020.

[3] The Ministry of Health. 2020. [https://www.gov.pl/web/zdrowie]. Accessed on 18 October 2020.

[4] The Ministry of Agriculture and Rural Development. 2020. [https://www.gov.pl/web/rolnictwo]. Accessed on 18 October 2020.

[5] The Ministry of National Defence. 2020. [https://www.gov.pl/web/obrona-narodowa]. Accessed on 18 October 2020.

[6] The Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [https://www.gov.pl/web/gis]. Accessed on 18 October 2020.

[7] The National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny). 2020. [https://www.pzh.gov.pl/]. Accessed on 18 October 2020.

[8] United Nations Office at Geneva. Confidence Building Measures. Poland. [https://bwc-ecbm.unog.ch/state/poland]. Accessed 18 October 2020

[9] VERTIC. BWC Legislation Database. 2020. [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/] Accessed on 15 November 2020.

1.5.2 Screening guidance for providers of genetic material

1.5.2a

Is there legislation and/or regulation requiring the screening of synthesized DNA (deoxyribonucleic acid) against lists of known pathogens and toxins before it is sold?

Yes = 1, No = 0

Current Year Score: 0

There is no public evidence of national legislation, regulation, policy, or other guidance requiring the screening of synthesized DNA before it is sold in Poland. As per article 6 of the Act of 15 January 2016 Amending the Law on Genetically Modified Organisms and Other Legal Acts – which applies to genetically modified microorganisms, including viruses and viroids as well as recombinant DNA, as well as other types of genetically modified organism (GMO) – entities planning to sell a GMO are required to carry out a risk assessment analysis of each product separately, and to indicate relevant countermeasures to be applied to prevent any potential risks before its market entry. [1] The risk assessment must be repeated regularly. However, there is no mention in the legislation that the entity responsible for the registering of GMO actually reads the genetic code of the organism to be marketed before it authorizes market entry. [1, 2] There is no evidence of such a requirement on the websites of the Ministries of Health, Defence, Agriculture, or Infrastructure, the Chief Sanitary Inspectorate or the National Institute of Public Health. [3, 4, 5, 6, 7, 8] Although Poland submits Confidence Building Measures on an annual basis, access to the reports is restricted to the public, and it is unknown if they contain information on this matter. [9] The VERTIC BWC

Legislation Database contains no additional evidence. [10]

- [1] Polish Parliament. 2016. Act of 15 January 2016 amending the law on genetically modified organisms and other legal acts. (Ustawa z dnia 15 stycznia 2015 r. o zmianie ustawy o organizmach genetycznie zmodyfikowanych oraz niektórych innych ustaw). [http://orka.sejm.gov.pl/proc7.nsf/ustawy/2394_u.htm]. Accessed on 18 October 2020.
- [2] Polish Parliament. 2015. "The Minister of Environment's Decree of 27 October 2015 on the application form for issuing a permit to market a GMO product". ("Rozporządzenie Ministra Środowiska z dnia 27 października 2015 r. w sprawie wzoru wniosku o wydanie zezwolenia na wprowadzenie do obrotu produktu GMO"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20150001820>]. Accessed on 18 October 2020.
- [3] The Polish Health Ministry. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 18 October 2020.
- [4] Ministry of National Defence. 2020. [<https://www.gov.pl/web/obrona-narodowa>]. Accessed on 18 October 2020.
- [5] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 18 October 2020.
- [6] Polish Ministry of Infrastructure. 2020. [<https://www.gov.pl/web/infrastruktura>]. Accessed on 18 October 2020.
- [7] The Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [<https://www.gov.pl/web/gis>]. Accessed on 18 October 2020.
- [8] The National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny). 2020. [<https://www.pzh.gov.pl/>]. Accessed on 18 October 2020.
- [9] United Nations Office at Geneva. Confidence Building Measures. Poland. [<https://bwc-ecbm.unog.ch/state/poland>]. Accessed on 18 October 2020.
- [10] VERTIC. BWC Legislation Database. 2020. [<https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/>] Accessed on 12 November 2020.

1.6 IMMUNIZATION

1.6.1 Vaccination rates

1.6.1a

Immunization rate (measles/MCV2)

Immunization rate (measles/MCV2), 95% or greater = 2, 80-94.9% = 1, Less than 80%, or no data = 0

Current Year Score: 1

2019

World Health Organization

1.6.1b

Are official foot-and-mouth disease (FMD) vaccination figures for livestock publicly available through the OIE database?

Yes = 1, No = 0

Current Year Score: 1

2020

OIE WAHIS database

Category 2: Early detection and reporting for epidemics of potential international concern

2.1 LABORATORY SYSTEMS STRENGTH AND QUALITY

2.1.1 Laboratory testing for detection of priority diseases

2.1.1a

Does the national laboratory system have the capacity to conduct diagnostic tests for at least 5 of the 10 WHO-defined core tests?

Evidence they can conduct 5 of the 10 core tests and these tests are named = 2, Evidence they can conduct 5 of the 10 core tests and the tests are not named = 1, No evidence they can conduct 5 of the 10 core tests = 0

Current Year Score: 2

There is evidence that Poland can conduct five of the core tests defined by the World Health Organization (WHO). The diagnostics tests for human viruses are conducted in laboratories that operate under the auspices of the Polish National Public Health Institute as national health institutes. [1] The influenza virus is tested at the Influenza Research Institute (Zakład Badania Wirusów Grypy, Krajowy Ośrodek ds. Grypy) using real-time polymerase chain reaction (PCR) tests. [2] The National Salmonella Centre conducts diagnostic laboratory tests including bacteriophage typing for *Salmonella enteritidis*. [3] The National Centre for Eradication of Poliomyelitis (Krajowy Ośrodek ds. diagnostyki zakażeń poliovirusami), accredited by the WHO, conducts tests for poliovirus, but it is not clear what method they use. [4] Serological screening tests for HIV in humans are conducted in at least 21 laboratories in Poland, including in laboratories operating under the auspices of regional sanitary inspectorates. [5] Microbiological diagnostic tests for mycobacterium tuberculosis are conducted in the Lesser Poland Central Diagnostics Laboratory of Tuberculosis (Małopolskie Centralne Laboratorium Diagnostyki Prętka Gruźlicy). [6] There is evidence that the National Institute of Public Health - National Institute of Hygiene offers malaria testing through microscopic examination of blood for *Plasmodium* spp.; thick drop + thin smear and also rapid cassette test for malaria (as prescribed by the WHO). [7] [8] There is no publicly available evidence that Poland has defined the four country-specific tests or that it conducts any more WHO-prescribed tests with the required method. The websites of the Ministry of Health, the Ministry of Agriculture and Rural Development, and the Ministry of Environment and Chief Sanitary Inspectorate contain no further relevant information. [9,10,11,12]

[1] National Public Health Institute – National Hygiene Institute. “About Medical Diagnostics Laboratories”. (“O Medycznych Laboratoriach Diagnostycznych”). [<http://bip.pzh.gov.pl/public/?id=146796#>]. Accessed on 18 October 2020.

[2] Influenza Research Institute (Zakład Badania Wirusów Grypy, Krajowy Ośrodek ds. Grypy). 2018. “Guidelines for preparing medical institutions in case of an influenza pandemic.” (“Wytyczne do przygotowania placówek medycznych na wypadek wystąpienia pandemii grypy”). [<https://gis.gov.pl/wp-content/uploads/2018/07/Wytyczne-do-planu-pandemicznego-grypy-NIZP-PZH.pdf>]. Accessed on 18 October 2020.

[3] The National Salmonella Centre. “Diagnostics Tests” (Badania usługowe). [<http://salmonella.gumed.edu.pl/salmonella-badania.php>]. Accessed on 18 October 2020.

[4] The Warsaw Regional Sanitary Inspectorate. [<http://wsse.waw.pl/nadzory/oddzial-nadzoru-epidemiologii/sekcja-zwalczania-chorob-zakaznych>]. Accessed on 18 October 2020.

[5] Miłosz Parczewski, Kazimierz Madalinski, Magdalena Leszczyszyn-Pynka, Anna Boron-Kaczmarek. 2010. Evaluation of quality of HIV diagnostic procedures in Poland. (Ocena Jakości Procedur Diagnostycznych Związanych z Zakażeniem HIV w Polsce). [<http://www.przegl Epidemiol.pzh.gov.pl/ocena-jakosci-procedur-diagnostycznych-zwiazanych-z-zakazeniem-hiv-w-polsce?lang=pl1>]. Accessed on 18 October 2020.

- [6] The Lesser Poland Central Diagnostics Laboratory of Tuberculosis. (Malopolskie Centralne Laboratorium Diagnostyki Pratkia Gruzlicy). [<http://www.szpitaljp2.krakow.pl/MALOPOLSKIE-CENTRALNE-LABORATORIUM-DIAGNOSTYKI-PRATKA-GRUZLICY.131.0.html>]. Accessed on 18 October 2020.
- [7] The National Institute of Public Health - National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Panstwowy Zaklad Higieny). 2020. Microscopic examination of blood for Plasmodium spp.; thick drop + thin smear ("Malaria – badanie mikroskopowe krwi w kierunku Plasmodium spp.; gruba kropla + cienki rozmaz") [<https://www.pzh.gov.pl/malaria-badanie-mikroskopowe-krwi-w-kierunku-plasmodium-spp-gruba-kropla-cienki-rozmaz/>]. Accessed on 15 November 2020.
- [8] The National Institute of Public Health - National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Panstwowy Zaklad Higieny). 2020. Rapid cassette test for malaria ("Malaria – szybki test kasetowy") [<https://www.pzh.gov.pl/malaria-szybki-test-kasetowy/>]. Accessed on 15 November 2020.
- [9] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 18 October 2020.
- [10] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo/>]. Accessed on 18 October 2020.
- [11] The Ministry of Environment. 2020. [<https://www.gov.pl/web/srodowisko>]. Accessed on 18 October 2020.
- [12] The Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [<https://www.gov.pl/web/gis>]. Accessed on 18 October 2020.

2.1.1b

Is there a national plan, strategy or similar document for conducting testing during a public health emergency, which includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing?

Yes, there is evidence of a plan, and it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 2, Yes, there is evidence of a plan, but there is insufficient evidence that it includes considerations for testing for novel pathogens, scaling capacity, and defining goals for testing = 1, No evidence of a plan = 0

Current Year Score: 1

While there is no evidence of a plan for conducting testing during a public health emergency that includes considerations for testing for novel pathogens, there is some evidence of a national strategy for testing and combatting COVID-19. In the Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans and the Act of 14 March 1985 on the State Sanitary Inspectorate, the State Sanitary Inspectorate is designated as exercising epidemiological supervision over infectious diseases. [1] [2] The former outlines the procedures for dealing with infectious diseases, specifying 59 types, but it does not include specific provisions for testing for novel pathogens [1]. In 2009, Poland adopted the Polish Pandemic Plan, which had been prepared by the National Influenza Pandemic Committee [3]. The Polish Pandemic Plan does not appear to be publicly available, including on the websites of the Ministry of Health and the National Sanitary Institute. [4] [5] In the Guidelines for the Preparation of Medical Facilities for Pandemic Influenza, the National Public Health Institute outlines differences between seasonal influenza and pandemic influenza. Among other things, it highlights the need to use RT-PCR test when the patient has severe disease respiratory system, and states that doctors should report any suspected cases of highly pathogenic influenza to the units managing influenza surveillance in Poland as soon as possible and follow the guidelines. [3] A "Sentinel" virological and epidemiological surveillance system exists in Poland, which requires local general practitioners to send throat and nose swabs from patients suspected of having influenza to test for infection caused by the flu virus in WSSE laboratories. Many WSSE laboratories also perform tests for influenza-like viruses, e.g. RSV, AdV, PIV-1, PIV-2, PIV-3, CoV, RV and hMPV. [6] The National Security Strategy of the Republic of Poland 2020 highlights the intention to "develop the capabilities of the healthcare system and public administration structures to combat epidemic threats, especially highly infectious and particularly dangerous diseases" and to "build the ability to quickly detect epidemic threats, as well as analyze and forecast their spread in real time", but it does not propose any concrete steps, nor suggests testing approaches. [7] The National Crisis Management Plan 2020 contains provisions for epidemic threats, but does not include provisions on testing during a public health emergency. [7] For COVID-19, the Polish government created Strategy 3.0' in

autumn 2020, a document that outlines the main approaches to systematic testing and treatment strategies for COVID-19. It outlines the testing approaches such as expanding drive-through swab points, introducing pulse oximetry for patients isolating at home, and increasing the number of available isolation units and hospital beds for patients diagnosed with the virus. [8]

[1] Polish Parliament. 2008. Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi)

[<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>] Accessed on 19 October 2020

[2] Polish Parliament. 1985. Act of March 14, 1985 on the State Sanitary Inspection ("Ustawa z dnia 14 marca 1985 r. o Państwowej Inspekcji Sanitarnej") <http://isap.sejm.gov.pl/isap.nsf/download.xsp/WDU20061220851/U/D20060851Lj.pdf>

Accessed on 19 October 2020.

[3] The Influenza Research Institute (Zakład Badania Wirusów Grypy, Krajowy Ośrodek ds. Grypy). 2018. Guidelines for the preparation of medical facilities for a pandemic influenza ("Wytyczne do przygotowania placówek medycznych na wypadek wystąpienia pandemii grypy") [<https://gis.gov.pl/wp-content/uploads/2018/07/Wytyczne-do-planu-pandemicznego-grypy-NIZP-PZH.pdf>] Accessed on 19 October 2020.

[4] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>] Accessed on 19 October 2020.

[5] Main Sanitary Inspectorate. 2020 [<https://www.gov.pl/web/gis>] Accessed on 19 October 2020.

[6] SENTINEL. 2014. An integrated epidemiological and virological surveillance system over influenza ("zintegrowany system nadzoru epidemiologicznego i wirusologicznego nad grypą")

[https://sentinel.pzh.gov.pl/artykuly/podglad.php?id_artykulu=29] Accessed on 19 October 2020

[7] Polish President. 2020. National Security Strategy of the Republic of Poland ("Strategia Bezpieczeństwa Narodowego Rzeczypospolitej Polskiej") [https://www.bbn.gov.pl/ftp/dokumenty/Strategia_Bezpieczenstwa_Narodowego_RP_2020.pdf]

Accessed on 19 October 2020.

[8] Ministry of Health. 2020. Strategy to combat the COVID-19 pandemic ("Strategia walki z pandemią COVID-19").

[<https://www.gov.pl/web/zdrowie/strategia-walki-z-pandemia-covid19>]. Accessed on 03 May 2021.

2.1.2 Laboratory quality systems

2.1.2a

Is there a national laboratory that serves as a reference facility which is accredited (e.g., International Organization for Standardization [ISO] 15189:2003, U.S. Clinical Laboratory Improvement Amendments [CLIA])?

Yes = 1, No = 0

Current Year Score: 1

Poland has national reference facilities that are accredited. All national reference laboratories have accreditations issued by the Polish Accreditation Centre (the official Polish accreditation body), as per requirements included in the Act of 25 August 2006 on Food Safety. [1, 2] As such, and being subject to the Polish National Public Health Institute, all of the national reference laboratories, which conduct the core tests defined by the World Health Organization (WHO), have accreditations issued by the Polish Accreditation Centre (the official Polish accreditation body; a laboratory may only gain the status of a national reference laboratory if properly accredited by this entity). [3] Accreditation certificates differ from laboratory to laboratory. For example, the Influenza Research Institute's laboratory which tests for the influenza virus using real-time polymerase chain reaction (PCR) technique has an AB 509 Accreditation Certificate of Testing Laboratory issued by the Polish Accreditation Centre, which certifies that the Laboratory is duly equipped to run diagnostic tests for these bacteria in accordance with the PB-02/LEI/D norm ("The determination by a PCR method of the genetic material of viruses causing respiratory tract infection"). [4] Another example is the National Centre for Eradication of Poliomyelitis, which is accredited

not only by the Polish Accreditation Centre, but also by the WHO. [5]

[1] Polish Parliament. 2013. "Announcement of the Minister of Agriculture and Rural Development of November 27, 2013 regarding the publication of a uniform text of the regulation of the Minister of Agriculture and Rural Development regarding national reference laboratories". ("Obwieszczenie Ministra Rolnictwa i Rozwoju Wsi z dnia 27 listopada 2013 r. w sprawie ogłoszenia jednolitego tekstu rozporządzenia Ministra Rolnictwa i Rozwoju Wsi w sprawie krajowych laboratoriów referencyjnych"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20140000256>]. Accessed on 19 October 2020.

[2] Polish Parliament. 2012. "Minister of Health's Decree of 19 June 2012 on the list of reference laboratories". ("Rozporządzenie Ministra Zdrowia z dnia 19 czerwca 2012 r. w sprawie wykazu laboratoriów referencyjnych"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20120000728>]. Accessed on 19 October 2020.

[3] The Polish National Public Health Institute. (Narodowy Instytut Zdrowia Publicznego). 2020. [https://www.pca.gov.pl/download/data/rep-files/userfiles/_public/dokumenty_pca/dokumenty_do_opiniowania/dab-13_p3_wyd_1.pdf]. Accessed on 19 October 2020.

[4] The Polish National Public Health Institute. (Narodowy Instytut Zdrowia Publicznego). 2020. "Scope of accreditation of the research laboratory number AB 509. ("Zakres Akredytacji Laboratorium Badawczego nr AB 509)". [<http://www.pca.gov.pl/akredytowane-podmioty/akredytacje-aktywne/laboratoria-badawcze/AB%20509,plik.html>]. Accessed on 19 October 2020.

[5] The Warsaw Regional Sanitary Inspectorate. [<http://wsse.waw.pl/nadzory/oddzial-nadzoru-epidemiologii/sekcja-zwalczania-chorob-zakaznych>]. Accessed on 19 October 2020.

2.1.2b

Is there a national laboratory that serves as a reference facility which is subject to external quality assurance review?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that Polish national reference laboratories are subject to external quality assurance (EQA) reviews. Following the recommendations of the European Union, the National Medicines Institute performs the tasks of the National Medicines Control Laboratory (OMCL). The National Medicines Institute has introduced a quality management system compliant with the European Union's PN-EN ISO / IEC 17025: 2005 standard, which requires an external audit as a final stage to obtain the accreditation, but there is no evidence of further EQA. [1] There is no mention of EQA on the websites of any of the national reference laboratories that conduct the core tests defined by the World Health Organization (the Influenza Research Institute, the National Salmonella Centre, the Warsaw Regional Sanitary Inspectorate, the Lesser Poland Central Diagnostics Laboratory of Tuberculosis, or the Epidemiology Unit in Szczecin). [2,3,4,5,6] Similarly, there is no evidence of EQA reviews on the websites of the Ministry of Health or the Ministry of Agriculture and Rural Development. [7,8]

[1] National Medicines Institute. 2020. Akredytacje ("Accreditations") [<http://www.nil.gov.pl/badania/akredytacje/>] Accessed on 15 November 2020.

[2] The Influenza Research Institute (Zakład Badania Wirusów Grypy, Krajowy Ośrodek ds. Grypy). 2018. "Guidelines for preparing medical institutions in case of an influenza pandemic." ("Wytyczne do przygotowania placówek medycznych na wypadek wystąpienia pandemii grypy"). [<https://gis.gov.pl/wp-content/uploads/2018/07/Wytyczne-do-planu-pandemicznego-grypy-NIZP-PZH.pdf>]. Accessed on 19 October 2020.

[3] The National Salmonella Centre. "Diagnostics Tests" (Badania usługowe). [<http://salmonella.gumed.edu.pl/salmonella-badania.php>]. Accessed on 19 October 2020.

[4] The Warsaw Regional Sanitary Inspectorate. [<http://wsse.waw.pl/nadzory/oddzial-nadzoru-epidemiologii/sekcja-zwalczania-chorob-zakaznych>]. Accessed on 19 October 2020.

- [5] The Lesser Poland Central Diagnostics Laboratory of Tuberculosis. (Malopolskie Centralne Laboratorium Diagnostyki Pratkia Gruzlicy). [<http://www.szpitaljp2.krakow.pl/>]. Accessed on 19 October 2020.
- [6] The Epidemiology Unit in Szczecin of the Szczecin Regional Sanitary Inspectorate. (Oddzial Laboratoryjny w Szczecinie, Laboratorium Epidemiologii). [<http://wsse.szczecin.pl/>]. Accessed on 19 October 2020.
- [7] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 19 October 2020.
- [8] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 19 October 2020.

2.2 LABORATORY SUPPLY CHAINS

2.2.1 Specimen referral and transport system

2.2.1a

Is there a nationwide specimen transport system?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of a nationwide specimen transport system in Poland. National legislation regulating the transport of biological material for laboratory tests contain no evidence of such a system. Specifically, the Minister of Health's Act of 9 October 2008 on the Requirements to be Met by a Quality Assurance System in Tissue and Cell Banks contains provisions mandating basic conditions to be met while transporting a specimen, but otherwise states that the entities carrying out the tests are to formulate their own transport guidelines, find a provider of specimen transportation, and agree the specific terms of specimen transport with their preferred subcontractors. [1, 2] In May 2020, the National Health Institute introduced guidelines for transporting SARS-CoV-2 specimens. [3] There is no evidence of a relevant transport system on the websites of the Ministry of Health, the Ministry of Agriculture and Rural Development, the World Health Organization, the Chief Sanitary Inspectorate, or the Chief Veterinary Inspectorate. [4,5,6,7,8] As per numerous examples found in the public domain, respective district and regional sanitary inspectorates provide their own specimen transport guidelines for specific samples to be delivered to their laboratories. [9,10,11] There are numerous private companies operating in Poland, which offer comprehensive specimen storage and transport solutions. Such companies are used by laboratories as subcontractors for specimen transport. It is unclear, however, how these fit into a nationwide system. [12,13,14]

[1] Polish Parliament. 2015. Reply to interpellation number 34385. (Odpowiedz na interpelacje nr 34385).

[<http://www.sejm.gov.pl/Sejm7.nsf/InterpelacjaTresc.xsp?key=1D099699>]. Accessed on 19 October 2020.

[2] Polish Parliament. 2008. "Minister of Health's Act of 9 October 2008 on the requirements to be met by a quality assurance system in tissue and cell banks". ("Rozporz?dzenie Ministra Zdrowia z dnia 9 pa?dziernika 2008 r. w sprawie wymaga?, jakie powinien spelniac system zapewnienia jakosci w bankach tkanek i kom?rek").

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20081901169>]. Accessed on 19 October 2020.

[3] National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Panstwowy Zaklad Higieny). 2020. Requirements for the collection and transport of material for RT-PCR testing for respiratory system infections caused by coronaviruses (SARS; MERS; SARS-CoV-2).("Wymagania dotycz?ce pobrania i transportu materia?u do bada? metod? RT-PCR w kierunku zaka?e? uk?adu oddechowego powodowanych przez koronawirusy (SARS; MERS; SARS-CoV-2).") [<https://www.pzh.gov.pl/wp-content/uploads/2020/05/Wymagania-dotycz%C4%85ce-materia%C5%82u-do-bada%C5%84-SARS-CoV-2.pdf>] Accessed on 15 November 2020

[4] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 19 October 2020.

[5] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 19 October 2020.

- [6] The World Health Organisation. 2020. "Monitoring Global Progress On Addressing Antimicrobial Resistance (AMR)". [<http://www.who.int/antimicrobial-resistance/publications/Analysis-report-of-AMR-country-se/en/>]. Accessed on 19 October 2020.
- [7] The Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [<https://www.gov.pl/web/gis>]. Accessed on 19 October 2020..
- [8] The Chief Veterinary Inspectorate. 2020. [<https://www.wetgiw.gov.pl/>]. Accessed on 19 October 2020
- [9] Krakow Regional Sanitary Inspectorate (Wojewódzka Stacja Sanitarno-Epidemiologiczna w Krakowie). February 2018. "Guidelines on taking, storing and transporting test samples". ("Wytyczne dotycz?ce pobierania, transportu i przechowywania próbek do bada?"). [<http://wsse.krakow.pl/page/wp-content/uploads/2018/02/Wytyczne-dot.-pobierania-transportu-i-przechowywania-probek-do-badan-z-zakresu-mikrobiologii-klinicznej.pdf>]. Accessed on 19 October 2020.
- [10] The District Sanitary Inspectorate in Gdynia (Powiatowa Stacja Sanitarno-Epidemiologiczna w Gdyni). June 2015. "General rules for taking and transporting microbiological materials for testing". ("Ogólne zasady pobierania i transportu materiału do badan mikrobiologicznych") [http://psse.gdynia.pl/wp-content/uploads/2015/06/Zal6_Zasady-pobierania-materia%C5%82u-do-bada%C5%84.pdf]. Accessed on 19 October 2020.
- [11] The Regional sanitary Inspectorate in Szczecin. 2018. "Transport of biological materials". ("Transport materiałów biologicznych"). [<http://wsse.szczecin.pl/wp-content/uploads/2019/07/Transport-materia%C5%82%C3%B3w-biologicznych.pdf>]. Accessed on 19 October 2020.
- [12] Jars.pl. [<https://www.jars.pl/pobieranie-probek>]. Accessed on 19 October 2020.
- [13] Bionovo. [<https://www.bionovo.pl/p/system-do-przechowywania-i-transportu-probek-probowki-o-poj-12-ml-i-statywyna-96-probek-brand/>]. Accessed on 19 October 2020.
- [14] Transmarket Lider Poczty Pneumatycznej. [http://poczta-pneumatyczna.com.pl/zas_tra]. Accessed on 19 October 2020.

2.2.2 Laboratory cooperation and coordination

2.2.2a

Is there a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale-up testing during an outbreak?

Yes = 2 , Yes, but there is evidence of gaps in implementation = 1 , No = 0

Current Year Score: 0

There is no evidence of a plan in place to rapidly authorize or license laboratories to supplement the capacity of the national public health laboratory system to scale up testing during an outbreak. The Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans does not provide provisions for scaling up testing in the event of a pandemic. According to article 46, the voivode (head of regional government) is responsible for introducing state of epidemic threat or state of epidemic in the area and for making a plan for epidemic. [1] The Epidemic Outbreak Action Plans for all voivodeships (administrative regions) have been updated in 2020 as a response to the COVID-19 pandemic. None of the 16 plans have provisions for providing rapid authorization or licencing to laboratories to scale up testing. They outline a list of hospitals and other medical facilities that might be used for treatment and isolation of patients during an outbreak. [2] The Act of April 15, 2011 on Medical Activity, the Act of 27 July 2001 on Laboratory Diagnostics and the Act of 30 August 1991 on Healthcare Institutions also have no provisions for rapid licencing of laboratories in the event of an outbreak. [3] [4] [5] According to article 8 of the Act of 27 July 2001 on Laboratory Diagnostics, the National Chamber of Laboratory Diagnosticians is obliged to keeps a list of laboratory diagnosticians [4]. The National Chamber of Laboratory Diagnosticians also makes decisions on adding laboratories onto the Laboratory Registry led by the Chamber, but it does not include provisions for emergency registration of laboratories during an outbreak. [6] [7] More recently, the Ordinance of the Minister of Health of 20 March 2020 on the Declaration of an Epidemic in the Territory of the Republic of Poland considers no provisions for scaling up testing. [6] There is no relevant information on the websites of the Ministry of Health or the Main

Sanitary Inspectorate. [9] [10]

[1] Polish Parliament. 2008. The Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>] Accessed on 21 October 2020.

[2] The National Chamber of Laboratory Diagnosticians. 2020. Action plans in the event of an epidemic in the Republic of Poland ("Plany działania na wypadek wystąpienia epidemii na terenie RP") [<https://kidl.org.pl/news/view?id=896>] Accessed on 21 October 2020.

[3] Polish Parliament. 2011. Act of April 15, 2011 on medical activity ("Ustawa z dnia 15 kwietnia 2011 r. o działalności leczniczej") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20111120654>] Accessed on 21 October 2020.

[4] Polish Parliament. 2001. Act of 27 July 2001 on laboratory diagnostics ("Ustawa z dnia 27 lipca 2001 r. o diagnostyce laboratoryjnej") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20011001083>] Accessed on 21 October 2020.

[5] Polish Parliament. 1991. Act of August 30, 1991 on health care institutions ("Ustawa z dnia 30 sierpnia 1991 r. o zakładach opieki zdrowotnej") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU19910910408>] Accessed on 21 October 2020.

[6] National Chamber of Laboratory Diagnostician. 2020. Entry in the register - National Chamber of Laboratory Diagnosticians ("Wpis do ewidencji - Krajowa Izba Diagnostów Laboratoryjnych") [<https://kidl.org.pl/page/view?id=162>] Accessed on 21 October 2020.

[7] System OpenLEX. 2020. Keeping records of diagnostic laboratories ("Prowadzenie ewidencji laboratoriów diagnostycznych") [<https://sip.lex.pl/procedury/prowadzenie-ewidencji-laboratoriow-diagnostycznych-1610618269>] Accessed on 21 October 2020.

[8] Polish Parliament. 2020. Ordinance of the Minister of Health of 20 March 2020 on the declaration of an epidemic in the territory of the Republic of Poland ("Rozporządzenie Ministra Zdrowia z dnia 20 marca 2020 r. w sprawie ogłoszenia na obszarze Rzeczypospolitej Polskiej stanu epidemii") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20200000491>] Accessed on 21 October 2020.

[9] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>] Accessed on 21 October 2020.

[10] Main Sanitary Inspectorate. 2020. [<https://www.gov.pl/web/gis>] Accessed on 21 October 2020.

2.3 REAL-TIME SURVEILLANCE AND REPORTING

2.3.1 Indicator and event-based surveillance and reporting systems

2.3.1a

Is there evidence that the country is conducting ongoing event-based surveillance and analysis for infectious disease?

Yes, there is evidence of ongoing event-based surveillance and evidence that the data is being analyzed on a daily basis = 2,
Yes, there is evidence of ongoing event-based surveillance, but no evidence that the data are being analyzed on a daily basis = 1, No = 0

Current Year Score: 0

There is no evidence that Poland is conducting ongoing event-based surveillance and analysis for infectious disease. There is no evidence of event-based surveillance in the Act of 26 April 2007 on Crisis Management, which identifies the competent authorities in matters of crisis management (including ongoing monitoring), their tasks and the principles of financing crisis management units, or on the websites of the Governmental Security Center (Rządowe Centrum Bezpieczeństwa, RCB), Poland's emergency operations centre, or the Ministries of Health, Agriculture, Defence, or those of the Chief Sanitary Inspectorate and the National Institute of Public Health. [1, 4, 5, 6, 7, 8, 9] Poland's emergency operations centre is the RCB,

according to the act on crisis management. The RCB coordinates crisis planning between all national public bodies (including ministries), and voivodes (regional governments), and incorporates body- and voivode-level crisis management plans into the National Crisis Management Plan. [1] As per the Act, RCB is the national body responsible for surveillance and monitoring (of weather, water levels, spillage of hazardous biological material, cases of transmittable diseases, etc.), maintaining 24/7 readiness. It also receives daily, weekly and monthly activity reports from its counterparts at lower administrative levels. Said reports are derived from indicator-based surveillance systems, which routinely collect data on particular threats (including diseases) and are not event-based. [1, 2, 3]

[1] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzaniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 22 October 2020.

[2] The Konin municipality. November 2014. "Crisis management/population protection/basic information". ("Zarządzanie kryzysowe/ochrona ludności/podstawowe informacje").

[http://www.konin.pl/files/dokumenty/zarzadzanie_kryzysowe_ochrona_ludnosci/2014.11.17_zk_podstawowe_informacje.pdf]. Accessed on 22 October 2020.

[3] Zbigniew Dziemianko. 2009. "Legal bases for crisis management". ("Podstawy prawne zarządzania kryzysowego").

[http://bazhum.muzhp.pl/media/files/Przegląd_Naukowo_Metodyczny_Edukacja_dla_Bezpieczeństwa/Przegląd_Naukowo_Metodyczny_Edukacja_dla_Bezpieczeństwa-r2009-t-n1/Przegląd_Naukowo_Metodyczny_Edukacja_dla_Bezpieczeństwa-r2009-t-n1-s95-112/Przegląd_Naukowo_Metodyczny_Edukacja_dla_Bezpieczeństwa-r2009-t-n1-s95-112.pdf]. Accessed on 22 October 2020.

[4] Governmental Security Center. 2020. [<https://rcb.gov.pl>] Accessed on 22 October 2020.

[5] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 22 October 2020.

[6] The Ministry of Agriculture and Rural Development. 2020. [<https://www.gov.pl/web/rolnictwo>]. Accessed on 22 October 2020.

[7] The Ministry of National Defence. 2020. [<https://www.gov.pl/web/obrona-narodowa>]. Accessed on 22 October 2020.

[8] The Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [<https://www.gov.pl/web/gis>]. Accessed on 22 October 2020.

[9] The National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny). 2020. [<https://www.pzh.gov.pl/>]. Accessed on 22 October 2020.

2.3.1b

Is there publicly available evidence that the country reported a potential public health emergency of international concern (PHEIC) to the WHO within the last two years?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that Poland has reported a potential public health emergency of international concern (PHEIC) to the World Health Organization (WHO) within the past two years. Neither the Ministry of Health nor the Chief Sanitary Inspection reports having notified the WHO about a PHEIC within the past two years, including about COVID-19. [1, 2] Similarly, the WHO does not provide any reports that Poland has sent a notification about a potential PHEIC in the past two years; no such reports have been posted on the organization's Disease Outbreak News page since a 2003 report concerning a SARS outbreak. [3, 4, 5, 6]

[1] The Ministry of Health. 2020. "World Health Organisation". ("Światowa Organizacja Zdrowia").

[<https://www.gov.pl/web/zdrowie/swiatowa-organizacja-zdrowia-who/>]. Accessed on 22 October 2020.

[2] The Chief Sanitary Inspectorate. 2020. [<https://gis.gov.pl/>]. Accessed on 22 October 2020.

[3] The World Health Organisation (WHO). 2020. "Poland". [<http://www.who.int/countries/pol/en/>]. Accessed on 22 October

2020.

[4] The World Health Organisation (WHO). 2020. "The Weekly Epidemiological Record (WER)".

[<http://www.who.int/wer/en/>]. Accessed on 22 October 2020.

[5] The World Health Organization. 2020. "Disease Outbreak News: Poland".

[<https://www.who.int/csr/don/archive/country/pol/en/>]. Accessed on 22 October 2020.

[6] The World Health Organization. 2020. "Poland: News".

[https://www.euro.who.int/en/countries/poland/news/news/news?root_node_selection=75377] Accessed on 22 October 2020

2.3.2 Interoperable, interconnected, electronic real-time reporting systems

2.3.2a

Does the government operate an electronic reporting surveillance system at both the national and the sub-national level?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that Poland has an electronic reporting surveillance system at both the national and sub-national level. As per local media reports from 2016, as well as numerous reports published by the district and regional sanitary inspectorates, Polish sanitary inspectorates began to introduce an electronic reporting surveillance system called EpiBaza for sharing data relating to infectious diseases in 2016. [1, 2] EpiBaza, run by the Ministry of Digitalization and coordinated by the National Public Health Institute - National Hygiene Institute, is a centralized data filing system allowing sanitary inspectorates at local, regional and national levels to upload data on infectious diseases, including detailed descriptions of cases of infectious diseases. [1, 2, 3, 4] The EpiBaza system sources and centralizes surveillance data from other national and regional databases and registries under the National Institute of Public Health. [5] The EpiBaza system is fully operational since July 2019. [6] There is no evidence of any other such systems on the websites of the Ministry of Health and the National Public Health Institute - National Institute of Hygiene. [7,8]

[1] Nadmorski24. July 2016. "There will be better oversight over infectious diseases". ("Bedzie lepszy nadzór nad chorobami zakaźnymi"). [<https://www.nadmorski24.pl/aktualnosci/28685-bedzie-lepszy-nadzor-nad-chorobami-zakaznymi>]. Accessed on 22 October 2020.

[2] Serwis ZOZ. 2020. [<https://serwiszoz.pl/jakoscscanepid/co-ulatwi-elektroniczny-monitoring-zakazen-3230.html>]. Accessed on 22 October 2020.

[3] Public Information Bulletin (Biuletyn Informacji Publicznych). 2020.

[http://bip.pzh.gov.pl/public/get_file_contents.php?id=388956]. Accessed on 22 October 2020.

[4] Regional Veterinary Inspectorate in Krosno (Wojewódzki Inspektorat Weterynarii w Krosnie). 2007.

[<http://krosno.wiw.gov.pl/44/system-informatyczny-zchzz-w-wojewodztwie-podkarpackim.html>]. Accessed on 22 October 2020.

[6] National Institute of Public Health (Narodowy Instytut Zdrowia Publicznego). 2020. "About EpiBaza" ("O EpiBazie").

[<https://www.pzh.gov.pl/projekt-epibaza/o-epibazie/>]. Accessed 22 October 2020.

[6] National Institute of Public Health - National Institute of Hygiene. 2020. EpiBaza. [<https://epibaza.pzh.gov.pl/>] Accessed on 22 October 2020.

[7] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 22 October 2020.

[8] The National Institute of Public Health and National Institute of Hygiene (Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny). 2020. [<https://www.pzh.gov.pl/>]. Accessed on 22 October 2020.

2.3.2b

Does the electronic reporting surveillance system collect ongoing or real-time laboratory data?

Yes = 1, No = 0

Current Year Score: 1

Poland's electronic reporting surveillance system (EpiBaza) collects ongoing, real-time laboratory data. The EpiBaza integrates data from existing information technology systems in the National Public Health Institute. It also enables the collection of real-time data, as hospital and laboratory staff enter data directly into the system. [1] The data shared via the system are instantly uploaded onto the server and made available to all authorized parties. [1, 2]

[1] National Institute of Public Health (Narodowy Instytut Zdrowia Publicznego). 2018. "Epibaza".

[<https://www.pzh.gov.pl/projekt-epibaza/system-udostepniania-danych-epibaza/>]. Accessed on 22 October 2020.

[2] National Institute of Public Health (Narodowy Instytut Zdrowia Publicznego). 2020. "About EpiBaza" ("O EpiBazie").

[<https://www.pzh.gov.pl/projekt-epibaza/o-epibazie/>]. Accessed 22 October 2020.

2.4 SURVEILLANCE DATA ACCESSIBILITY AND TRANSPARENCY

2.4.1 Coverage and use of electronic health records

2.4.1a

Are electronic health records commonly in use?

Electronic health records are commonly in use = 2, Electronic health records are not commonly in use, but there is evidence they are used = 1, No evidence electronic health records are in use = 0

Current Year Score: 2

There is evidence that electronic health records (EHRs) are commonly in use in Poland. According to the Regulation of the Minister of Health of 6 April 2020 on the Types, Scope and Templates of Medical Documentation and the Method of its Processing, from 15 April 2020 all entities performing medical activities must use EHRs. [1,2,3]. According to the Act of 28 April 2011 on the Information System in Healthcare, all prescriptions and referrals have to be in electronic version from 8 January 2020, with further changes to other aspects including laboratory tests results and description of diagnostic tests being transferred into electronic versions too [4]. Based on the Act of 20 July 2018 on Amending the Law on IT System in Healthcare, all Polish healthcare institutions are required to use EHRs starting from 1 January 2019. [5]. A free mobile application created by the Ministry of Health called Online Patient Account (Internetowe Konto Pacjenta) is in mainstream use in the Polish health system and it recorded almost 2.5 million users as of June 2020 [6] [7]. The central medical filing system that will be used to process medical documents is called the P1 Platform, and it is supervised by the Polish Centre of IT Systems in Health Care (CSIOZ), subordinated to the Ministry of Health. [8,9]. CSIOZ also introduced Instructions for the Application of the Polish National Implementation of the HL7 CDA to facilitate the use of the standard and ensure the uniform implementation in information systems used in Poland of HL7 CDA for the needs of electronic medical documents processed on the P1 Platform [10]. Even though the implementation of the P1 Platform is not fully complete, the Ministry of Health forecasts completion by 31 December 2021 [11].

[1] Polish Parliament. 2020. Regulation of the Minister of Health of 6 April 2020 on the types, scope and templates of medical documentation and the method of its processing ("Rozporządzenie Ministra zdrowia z dnia 6 kwietnia 2020 r. w sprawie rodzajów, zakresu i wzorów dokumentacji medycznej oraz sposobu jej przetwarzania")

[<https://dziennikustaw.gov.pl/D2020000066601.pdf>] Accessed on 22 October 2020.

[2] Proste to RODO. 2020. The new regulation on the types, scope and templates of medical records and the method of their

processing ("Nowe rozporządzenie w sprawie rodzajów, zakresu i wzorów dokumentacji medycznej oraz sposobu jej przetwarzania") [<https://prostetorodo.pl/2020/04/07/nowe-rozporzadzenie-w-sprawie-rodzajow-zakresu-i-wzorow-dokumentacji-medycznej-oraz-sposobu-jej-przetwarzania/>] Accessed on 22 October 2020.

[3] Proste to RODO. 2020. Obligation to create Electronic Medical Records ("Obowiązek tworzenia Elektronicznej Dokumentacji Medycznej") [<https://prostetorodo.pl/2020/04/14/obowiazek-tworzenia-elektronicznej-dokumentacji-medycznej/>] Accessed on 22 October 2020.

[4] Polish Parliament. 2011. Act of 28 April 2011 on the information system in health care ("Ustawa z dnia 28 kwietnia 2011 r. o systemie informacji w ochronie zdrowia") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=wdu20111130657>] Accessed on 22 October 2020.

[5] Polish Parliament. 2018. Act of 20 July 2018 on amending the law on IT system in health care. (Ustawa z dnia 20 lipca 2018 r. o zmianie ustawy o systemie informacji w ochronie zdrowia). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20180001515>]. Accessed on 22 October 2020.

[6] The Ministry of Health. 2020. Online Patient Account. ("Internetowe Konto Pacjenta") [<https://pacjent.gov.pl/internetowe-konto-pacjenta>] Accessed on 22 October 2020.

[7] Cowzdrowiu.pl. 2020. Almost 2.5 million Poles logged into the Online Patient Account ("Prawie 2,5 mln Polaków zalogowało się na Internetowe Konto Pacjenta") [<https://cowzdrowiu.pl/aktualnosci/post/prawie-25-mln-polakow-zalogowalo-sie-na-internetowe-konto-pacjenta>] Accessed on 22 October 2020.

[8] Polish Centre of IT Systems in Health Care; Centrum Systemów Informacyjnych Ochrony Zdrowia. 2018. "Rules for creation of medical documentation in electronic form". [<https://www.csioz.gov.pl/HL7ENG/pl-cda-html-en-US/>]. Accessed on 22 October 2020.

[9] The Ministry of Health. 2020. "Electronic Medical Documentation". ("Elektroniczna Dokumentacja Medyczna"). [<http://www.bip.mz.gov.pl/ogloszenia/reguly-tworzenia-elektronicznej-dokumentacji-medycznej/>]. Accessed on 22 October 2020.

[10] Centrum e-Zdrowia. 2020. Electronic Medical Records. ("Elektroniczna Dokumentacja Medyczna") [<https://cez.gov.pl/edm/>] Accessed on 22 October 2020.

[11] Central Information Technology Center. 2020. P1 - Electronic Platform for Collection, Analysis and Sharing of Digital Resources on Medical Events ("P1 - Elektroniczna Platforma Gromadzenia, Analizy i Udostępniania Zasobów Cyfrowych o Zdarzeniach Medycznych") [<https://www.gov.pl/web/popcwsparcie/p1-elektroniczna-platforma-gromadzenia-analizy-i-udostepniania-zasobow-cyfrowych-o-zdarzeniach-medycznych>] Accessed on 22 October 2020.

2.4.1b

Does the national public health system have access to electronic health records of individuals in their country?

Yes = 1 , No = 0

Current Year Score: 1

The national public health system in Poland has access to electronic health records of individuals. In Poland, the national public health service is called National Health Fund (Narodowy Fundusz Zdrowia, NFZ) [1]. Based on the Act of 20 July 2018 on Amending the Law on IT System in Healthcare, all Polish healthcare institutions are required to use the central national electronic filing system, the P1 Platform, starting from 1 January 2019. [2] Article 24 of the Act of 6 November 2008 on Patients' Rights and the Patients' Rights Ombudsman stipulates that "doctors, nurses and midwives are authorized to obtain and process data contained in medical records", while article 26 states that "the entity providing health services also makes medical documentation available to: public authorities, the National Health Fund, bodies of the self-government of medical professions and national and provincial consultants, to the extent necessary for these entities to perform their tasks, in particular control and supervision" [3]. The Regulation of the Minister of Health of 6 April 2020 on the Types, Scope and Templates of Medical Documentation and the Method of its Processing stipulates that the individuals mentioned in article 24

of the Act of 6 November 2008 on Patients' Rights and the Patients' Rights Ombudsman can have access to those records. [4]

[1] National Health Fund. 2020. [<https://www.nfz.gov.pl/>] Accessed on 22 October 2020.

[2] Polish Parliament. 2018. Act of 20 July 2018 on amending the law on IT system in health care. (Ustawa z dnia 20 lipca 2018 r. o zmianie ustawy o systemie informacji w ochronie zdrowia).

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20180001515>]. Accessed on 22 October 2020.

[3] Polish Parliament. 2020. Act of November 6, 2008 on patient's rights and the Patient's Rights Ombudsman ("Ustawa z dnia 6 listopada 2008 r. o prawach pacjenta i Rzeczniku Praw Pacjenta")

[<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20090520417>] Accessed on 22 October 2020.

[4] Polish Parliament. 2020. Regulation of the Minister of Health of 6 April 2020 on the types, scope and templates of medical documentation and the method of its processing ("Rozporządzenie Ministra zdrowia z dnia 6 kwietnia 2020 r. w sprawie rodzajów, zakresu i wzorów dokumentacji medycznej oraz sposobu jej przetwarzania")

[<https://dziennikustaw.gov.pl/D2020000066601.pdf>] Accessed on 22 October 2020.

2.4.1c

Are there data standards to ensure data is comparable (e.g., ISO standards)?

Yes = 1, No = 0

Current Year Score: 1

There are data standards to ensure data comparability in Poland's electronic health system. The newly formed central electronic medical documentation system, P1 Platform, and all of its sub-units, have been created in compliance with the Polish National Implementation of HL7 CDA medical electronic filing system standards. [1, 2] HL7 stands for Health Level Seven International (HL7), an American National Standards Institute (ANSI)-accredited standards developing organization dedicated to providing a comprehensive framework and related standards for the exchange, integration, sharing, and retrieval of electronic health information that supports clinical practice and the management, delivery and evaluation of health services. [3]

[1] Polish Centre of IT Systems in Health Care; Centrum Systemów Informatycznych Ochrony Zdrowia. 2020. "Rules for creation of medical documentation in electronic form". [<https://www.csioz.gov.pl/HL7ENG/pl-cda-html-en-US/>]. Accessed on 22 October 2020.

[2] Ministry of Health. 2020. "Electronic Medical Documentation". ("Elektroniczna Dokumentacja Medyczna").

[<http://www.bip.mz.gov.pl/ogloszenia/reguly-tworzenia-elektronicznej-dokumentacji-medycznej/>]. Accessed on 22 October 2020.

[3] HL7. 2018. "About HL7". [<http://www.hl7.org/about/index.cfm?ref=nav>]. Accessed on 22 October 2020.

[4] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 22 October 2020.

[5] The Ministry of Digitalisation. 2020. [<https://www.gov.pl/web/cyfryzacja>]. Accessed on 22 October 2020.

[6] The National Institute of Public Health (Narodowy Instytut Zdrowia Publicznego). 2020. [<https://www.pzh.gov.pl/>]. Accessed on 22 October 2020.

2.4.2 Data integration between human, animal, and environmental health sectors

2.4.2a

Is there evidence of established mechanisms at the relevant ministries responsible for animal, human, and wildlife surveillance to share data (e.g., through mosquito surveillance, brucellosis surveillance)?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence of operational mechanisms at the relevant ministries responsible for animal, human and wildlife surveillance to share data. As per numerous media reports from 2016, as well as numerous reports published by the district and regional sanitary inspectorates, the National Institute of Public Health (specifically its Epidemic Department) has created an electronic reporting surveillance system for data relating to infectious diseases. The system, called the EpiBaza Project, allows local and regional sanitary and veterinary inspectorates to upload surveillance data (including epidemic status reports) on infectious diseases onto the server. The EpiBaza system is used by both the veterinary and the sanitary inspectorates in Poland for the reporting of surveillance data on infectious diseases, and collects ongoing, real-time laboratory data [1]. That data are available for review to all Polish ministries and their respective sub-units as well as to private businesses for better epidemiological oversight and crisis management planning. [2,3] The EpiBaza system is fully operational since July 2019. [4]

[1] National Institute of Public Health (Narodowy Instytut Zdrowia Publicznego). 2018. "EpiBaza".

[<https://www.pzh.gov.pl/projekt-epibaza/system-udostepniania-danych-epibaza/>]. Accessed on 22 October 2020.

[2] Anna Strezynska, Minister of Digitalization. February 2017.

[<http://orka2.sejm.gov.pl/INT8.nsf/klucz/283B83FF/%24FILE/z01982-o1.pdf>]. Accessed on 22 October 2020

[3] Public Information Biuletyn (Biuletyn Informacji Publicznych). 2016.

[http://bip.pzh.gov.pl/public/get_file_contents.php?id=388956]. Accessed on 22 October 2020.

[4] National Institute of Public Health (Narodowy Instytut Zdrowia Publicznego). 2020. "About EpiBaza" ("O EpiBazie"). Accessed on 04 December 2020.

2.4.3 Transparency of surveillance data

2.4.3a

Does the country make de-identified health surveillance data on infectious diseases publicly available via reports (or other format) on government websites (such as the Ministry of Health, Ministry of Agriculture, or similar)?

Yes = 1 , No = 0

Current Year Score: 0

There is evidence of Poland publishing de-identified health surveillance data, but not on a weekly basis. The Polish National Public Health Institute publishes fortnightly (national figures) and annual (detailed regional figures included) reports on the epidemic status in Poland. [1] The data in fortnightly status reports are broken down per infectious disease concerned, and the data in annual reports are broken down according to a number of criteria, including number of cases per region and per disease. The reports include de-identified records, cases of notifiable communicable diseases recorded during the current period in Poland and other issues relevant for Poland's epidemic status. Both biweekly and annual reports contain data on, among others, cholera, typhoid, botulism, salmonella, shigella, E. coli, clostridium difficile, staphylococcus, rota virus-related, anthrax, listeriosis, and malaria. [1]

[1] National Public Health Institute (Narodowy Instytut Zdrowia Publicznego). Laboratory for Monitoring and Analysis of the Epidemiological Situation (Pracownia Monitorowania i Analizy Sytuacji Epidemiologicznej).

[http://wwwold.pzh.gov.pl/oldpage/epimeld/index_p.html]. Accessed on 22 October 2020.

2.4.3b

Does the country make de-identified COVID-19 surveillance data (including details such as daily case count, mortality rate, etc) available via daily reports (or other formats) on government websites (such as the Ministry of Health, or similar)?

Yes = 1 , No = 0

Current Year Score: 1

Poland makes de-identified COVID-19 surveillance data available via daily reports. On its website, the Ministry of Health publishes updates on daily infection rates, as well as the total infection count across the country [1]. The data and statistics are available for the whole country, and are also disaggregated by each voivodeship (administrative region). They include daily and total infections and deaths. The Ministry of Health also shares the daily updates on COVID-19 cases in Poland via its official Twitter account, which include the number of people currently in quarantine, the number of available hospital beds and life support machines and number of people under epidemiological surveillance. [2] The Ministry of Health also keeps updated its page on the number of COVID-19 tests conducted nationwide and the local and national restrictions, as well as any governmental announcements relating to the pandemic. [3] [4]

[1] Ministry of Health. 2020. The map of Covid-19 Infections. ("Mapa zakazen koronawirusem")

[<https://www.gov.pl/web/koronawirus/wykaz-zarazen-koronawirusem-sars-cov-2>] Accessed on 22 October 2020.

[2] Ministry of Health Twitter account. 2020. [https://twitter.com/MZ_GOV_PL] Accessed on 22 October 2020.

[3] Ministry of Health. 2020. The number of conducted tests. ("Liczba wykonanych testów")

[<https://www.gov.pl/web/zdrowie/liczba-wykonanych-testow>] Accessed on 22 October 2020.

[4] Ministry of Health. 2020. Coronavirus ("Koronawirus") [<https://www.gov.pl/web/koronawirus>] Accessed on 22 October 2020.

2.4.4 Ethical considerations during surveillance

2.4.4a

Is there legislation and/or regulations that safeguard the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities?

Yes = 1 , No = 0

Current Year Score: 1

There are laws safeguarding the confidentiality of identifiable patient health information in Poland. Poland has a legal act in force that is solely devoted to patients' rights, including patients' right to the confidentiality of their personal medical information. Art. 23 of the Act of 6 November 2008 on Patients' Rights and the Patients' Ombudsman stipulates that all data contained in a patient's medical record, including on health condition and rendered medical services, are subject to protection and confidentiality. [1] In addition, article 39 of the Act of 28 April 2011 on IT System in Healthcare indicates that the body responsible for the processing and coordination of medical IT systems in Poland (the Polish Centre of IT Systems in Healthcare), subordinated to the health minister, has the obligation to secure data stored in IT systems. [2] In addition, the confidentiality of identifiable health information for individuals is safeguarded by the European Union's General Data Protection Regulation, which came into force in May 2018. [3]

[1] Polish Parliament. 2008. Act of 6 November 2008 on patient's rights and the Patient's Ombudsman. (Ustawa z dnia 6 listopada 2008 r. o prawach pacjenta i Rzeczniku Praw Pacjenta).

[<http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU20090520417/U/D20090417Lj.pdf>]. Accessed on 22 October 2020.

[2] Polish Parliament. 2011. Act of 28 April 2011 on IT system in health care. (Ustawa z dnia 28 kwietnia 2011 r. o systemie informacji w ochronie zdrowia. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20111130657>]). Accessed on 22

October 2020.

[3] Official Journal of the European Union. 27 April 2016. "REGULATION (EU) 2016/679 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation)". [<https://eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=CELEX:32016R0679&from=EN>]. Accessed on 22 October 2020.

2.4.4b

Is there legislation and/or regulations safeguarding the confidentiality of identifiable health information for individuals, such as that generated through health surveillance activities, include mention of protections from cyber attacks (e.g., ransomware)?

Yes = 1 , No = 0

Current Year Score: 1

Polish laws safeguarding the confidentiality of identifiable health information for individuals include mention of protections from cyber-attacks. Article 7 of the Act of 28 April 2011 on IT System in Healthcare indicates that the body responsible for the processing and coordination of medical IT systems in Poland (the Polish Centre of IT Systems in Healthcare), subordinated to the health minister, has the obligation to secure data stored in IT systems. [1] Annex 1 to the Act of 5 July 2018 on the National Cybersecurity System lists manufacturers, importers and distributors of active substances, as defined by the 2001 Pharmaceutical Law, as well as healthcare providers and healthcare IT system management units as "key service operators" (although there is no list of key service operators from the medical and pharmaceutical sectors), which are required to monitor, store and share data on suspected or actual instances of cybersecurity threats. [2, 3] In addition, the confidentiality of identifiable health information for individuals is safeguarded by the European Union's General Data Protection Regulation (GDPR), which came into force in May 2018. GDPR contains stipulations around network and information security, including a requirement that data held by state authorities must be overseen by a dedicated data protection officer who is proficient in dealing with cyber-attacks and a requirement to inform all affected individuals within 72 hours of discovering a data breach. [4]

[1] Polish Parliament. 2011. Act of 28 April 2011 on IT system in health care. (Ustawa z dnia 28 kwietnia 2011 r. o systemie informacji w ochronie zdrowia. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20111130657>]. Accessed on 22 October 2020.

[2] Ministry of Digitalization. September 2018. List of key service operators. "Wykaz uslug kluczowych". [<https://www.gov.pl/web/cyfryzacja/wykaz-uslug-kluczowych>] Accessed on 22 October 2020.

[3] Polish Parliament. 2018. Act of 5 July 2018 on national cybersecurity system (Ustawa z dnia 5 lipca 2018 r. o krajowym systemie cyberbezpieczenstwa). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20180001560>]. Accessed on 22 October 2020.

[4] Official Journal of the European Union. 27 April 2016. "REGULATION (EU) 2016/679 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation)". [<https://eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=CELEX:32016R0679&from=EN>]. Accessed on 22 October 2020.

2.4.5 International data sharing

2.4.5a

Has the government made a commitment via public statements, legislation and/or a cooperative agreement to share surveillance data during a public health emergency with other countries in the region?

Yes, commitments have been made to share data for more than one disease = 2, Yes, commitments have been made to share data only for one disease = 1, No = 0

Current Year Score: 2

Poland has committed to sharing surveillance data with other countries in the region during a public health emergency for more than one disease. As a member of the European Union (EU), Poland shares surveillance data during a public health emergency with other countries in the region for more than one disease. All EU and European Economic Area countries are part of the European Centre for Disease Prevention and Control's Early Warning and Response System (EWRS). [1] The EWRS is a platform aiming to "allow exchange of information on risk assessment and risk management for more timely, efficient and coordinated public health action". The EWRS is used for notifications on outbreaks, exchanging information and decisions about the coordination of measures among members. Over the years, it has contributed to response to health crises related to severe acute respiratory syndrome (SARS), ebola, avian influenza in humans and other communicable diseases. [1] Article 9 of Chapter IV of the European Union (EU) Decision on Serious Cross-Border Threats to Health notes that the European Commission "shall make available to the national competent authorities through the EWRS any information that may be useful for coordinating the response [...] including information related to serious cross-border threats to health and public health measures related to serious cross-border threats to health transmitted through rapid alert and information systems established under other provisions of Union law or the Euratom Treaty." [2] The Polish National Public Health Institute publishes fortnightly (national figures) and annual (detailed regional figures included) reports on the epidemic status in Poland, which include cases notified to ECDPC. [3]

[1] European Centre for Disease Prevention and Control. "Early Warning and Response System (EWRS)." [https://ecdc.europa.eu/en/early-warning-and-response-system-ewrs]. Accessed on 22 October 2020.

[2] Decision No 1082/2013/EU of the European Parliament and of the Council of 22 October 2013 on Serious Cross-Border Threats to Health and Repealing Decision No 2119/98/EC. Official Journal of the European Union. [https://ec.europa.eu/health/sites/health/files/preparedness_response/docs/decision_serious_crossborder_threats_22102013_en.pdf]. Accessed on 22 October 2020.

[3] National Public Health Institute (Narodowy Instytut Zdrowia Publicznego). 2020. Laboratory for Monitoring and Analysis of the Epidemiological Situation (Pracownia Monitorowania i Analizy Sytuacji Epidemiologicznej). [http://wwwold.pzh.gov.pl/oldpage/epimeld/index_p.html]. Accessed on 22 October 2020.

2.5 CASE-BASED INVESTIGATION

2.5.1 Case investigation and contact tracing

2.5.1a

Is there a national system in place to provide support at the sub-national level (e.g. training, metrics standardization and/or financial resources) to conduct contact tracing in the event of a public health emergency?

Yes, there is evidence that the national government supports sub-national systems to prepare for future public health emergencies = 2, Yes, there is evidence that the national government supports sub-national systems, but only in response to active public health emergencies = 1, No = 0

Current Year Score: 0

There is no evidence of a national system in place to provide support at the sub-national level to conduct contact tracing in the event of an active or future public health emergency in Poland. The Act of 26 April 2007 on Crisis Management, which has been modified by the Announcement of the Marshal of the Sejm of the Republic of Poland of 8 October 2020 on the Publication of a Uniform Text of the Act on Crisis Management, includes the healthcare system in "critical infrastructure" and

outlines procedures for supporting it during public crises. According to article 16 of this act, voivodeship (sub-national) crisis management centers should be established, but it does not mention any support to be provided to conduct contact tracing in the event of a public health emergency [1]. The Act of 2 March 2020 on Special Solutions Related to the Prevention, Counteraction and Combating COVID-19, Other Infectious Diseases and Emergencies Caused by Them adds article 49a to the Act of 8 September 2006 on the State Medical Rescue, which states that the voivode (head of regional government) "may include an additional agreement for the financing tasks of medical rescue teams and sanitary transport related to securing selected places or performing activities beyond the tasks specified in the plan". [2] It is not mentioned whether the "activities beyond the tasks specified in the plan" could include contact tracing. The Act of 2 March 2020 also includes provisions for "healthy people who have been in contact with people suffering from infectious diseases are subject to compulsory quarantine or epidemiological supervision", but does not outline how these are traced. [2] Both Act of 27 August 2009 on Public Finances and the Act of 29 October 2010 on Strategic Reserves contain provisions for occurrence of epidemic as per amendments introduced in March 2020, but do not specify supporting contact tracing at the sub-national level. [2,3,4] The National Crisis Management Plan does not include provisions for conducting contact tracing at the sub-national level during a public health emergency. [5,6] The websites of the Ministry of Health and Chief Sanitary Inspectorate contain no relevant information. [7,8]

[1] Polish Parliament. 2020. Announcement of the Marshal of the Sejm of the Republic of Poland of October 8, 2020 on the publication of a uniform text of the Act on crisis management ("Obwieszczenie Marszałka Sejmu Rzeczypospolitej Polskiej z dnia 8 października 2020 r. w sprawie ogłoszenia jednolitego tekstu ustawy o zarządzaniu kryzysowym")

[<http://isap.sejm.gov.pl/isap.nsf/download.xsp/WDU20070890590/U/D20070590Lj.pdf>] Accessed on 23 October 2020.

[2] Polish Parliament. 2020. Act of March 2, 2020 on special solutions related to the prevention, counteraction and combating COVID-19, other infectious diseases and emergencies caused by them ("Ustawa z dnia 2 marca 2020 r. o szczególnych rozwiązaniach związanych z zapobieganiem, przeciwdziałaniem i zwalczaniem COVID-19, innych chorób zakaźnych oraz wywołanych nimi sytuacji kryzysowych")

[<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20200000374>]. Accessed on 23 October 2020.

[3] Polish Parliament. 2009. Act of August 27, 2009 on public finances. ("Ustawa z dnia 27 sierpnia 2009 r. o finansach publicznych") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20091571240>] Accessed on 23 October 2020.

[4] Polish Parliament. 2010. Act of October 29, 2010 on strategic reserves ("Ustawa z dnia 29 października 2010 r. o rezerwach strategicznych") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20102291496>] Accessed on 23 October 2020.

[5] National Crisis Management Centre (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2020, Część A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf/>]. Accessed on 23 October 2020.

[6] National Crisis Management Centre (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2019, Część B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 23 October 2020.

[7] The Polish Health Ministry. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 23 October 2020.

[8] The Chief Sanitary Inspectorate (Główny Inspektorat Sanitarny). 2020. [<https://www.gov.pl/web/gis>]. Accessed on 23 October 2020.

2.5.1b

Does the country provide wraparound services to enable infected people and their contacts to self-isolate or quarantine as recommended, particularly economic support (paycheck, job security) and medical attention?

Yes, both economic support and medical attention are provided = 2, Yes, but only economic support or medical attention is provided = 1, No = 0

Current Year Score: 1

While Poland provides some financial support to enable infected people and their contacts to self-isolate or quarantine as recommended, there is insufficient evidence of medical wraparound services beyond measures specific to COVID-19. Article 33 of the Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans states that when people are required to isolate or quarantine, regional governments should provide "conditions for isolation or quarantine by providing appropriate premises and equipment", but this law provides no further detail. [1] The Labor Code, adopted 26 June 1974, includes provisions in article 92 for financial support during the period of temporary inability to work "for the time the employee is unable to work due to illness or isolation due to an infectious disease". [2] Article 6 of the Act of 25 June 1999 on Cash Benefits from Social Insurance in the Event of Sickness and Maternity stipulates that "the sickness benefit is paid to an insured person who has become unable to work due to illness during the period of sickness insurance, or as a result of submitting to the quarantine obligation referred to in the regulations on preventing and combating infections and infectious diseases in humans" [3] Government websites attest that, during the COVID-19 pandemic, people required to self-isolate are entitled to remuneration. [4, 5, 6, 8, 9] In relation to medical attention, the Patient Rights Ombudsman set out a list of contacts for support to organizations including those offering psychological assistance to people in a crisis related to quarantine or COVID-19 treatment, including a number for a COVID-19 hotline. [9] Individuals in compulsory isolation will receive a text message on the seventh day, prompting contact with a primary care physician during days 8–10. [9] If, during a self-isolation at home, COVID-19 symptoms occur, the primary care physician makes a decision on extending the quarantine period. In the case of hospital quarantine, the doctor decides on the conclusion of that period. [10] There is also a service called "Teleporada", where individuals in quarantine can obtain medical information if their health condition deteriorates. [11] However, there is no evidence that medical wraparound services are available for people required to isolate for other infectious diseases, including on the website of the Ministry of Health. [12]

[1] Polish Parliament. 2020. The Act of 5 December 2008 on preventing and combating human infections and infectious diseases. ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi") [<http://isap.sejm.gov.pl/isap.nsf/download.xsp/WDU20082341570/U/D20081570Lj.pdf>] Accessed on 23 October 2020.

[2] Polish Parliament. 1974. The Act of June 26, 1974, Labor Code. ("Ustawa z dnia 26 czerwca 1974 r. Kodeks pracy.") [<http://isap.sejm.gov.pl/isap.nsf/download.xsp/WDU19740240141/U/D19740141Lj.pdf>] Accessed on 19 November 2020.

[3] Polish Parliament. 1999. Act of 25 June 1999 on cash benefits from social insurance in the event of sickness and maternity ("Ustawa z dnia 25 czerwca 1999 r. o świadczeniach pieniężnych z ubezpieczenia społecznego w razie choroby i macierzyństwa") [<http://isap.sejm.gov.pl/isap.nsf/download.xsp/WDU19990600636/U/D19990636Lj.pdf>] Accessed on 19 November 2020.

[4] Website of the Republic of Poland. 2020. Information about entitlement to benefits due to quarantine or isolation ("Informacja o uprawnieniach do świadczeń z powodu poddania się kwarantannie lub izolacji") [<https://www.gov.pl/web/koronawirus/informacja-o-uprawnieniach-do-swiadczen-z-powodu-poddania-sie-kwarantannie-lub-izolacji>] Accessed on 23 October 2020.

[5] Website of the Republic of Poland. 2020. Sickness benefits for persons subject to compulsory quarantine after crossing the border ("Świadczenia chorobowe dla osób objętych obowiązkową kwarantanną po przekroczeniu granicy") [<https://www.gov.pl/web/koronawirus/swiadczenia-chorobowe-dla-osob-objetych-obowiazkowa-kwarantanna-po-przekroczeniu-granicy>] Accessed on 23 October 2020.

[6] Social Insurance Institution (Zakład Ubezpieczeń Społecznych - ZUS). 2020. Sickness benefits for people under compulsory quarantine ("Świadczenia chorobowe dla osób objętych obowiązkową kwarantanną") [<https://www.zus.pl/o-zus/aktualnosci/-/publisher/aktualnosc/1/swiadczenia-chorobowe-dla-osob-objetych-obowiazkowa-kwarantanna-po-przekroczeniu-granicy/2556004>] Accessed on 23 October 2020.

[7] Social Insurance Institution (Zakład Ubezpieczeń Społecznych - ZUS). 2020. ZUS will obtain data on quarantine and isolation for the payment of sickness benefits. ("ZUS będzie pozyskiwać dane o kwarantannie i izolacji do wypłaty świadczeń chorobowych") [<https://www.zus.pl/o-zus/aktualnosci/-/publisher/aktualnosc/1/zus-bedzie-pozyskiwac-dane-o>

kwarantannie-i-izolacji-do-wyplaty-swiadczen-chorobowych/3631029] Accessed on 23 October 2020.

[8] Chief Sanitary Inspectorate. 2020. The rules of quarantine and isolation in force from September 2, 2020. ("Zasady odbywania kwarantanny i izolacji obowiązujące od 2 września 2020 r.") [https://www.gov.pl/web/gis/zasady-odbywania-kwarantanny-i-izolacji-obowiazujace-od-2-wrzesnia-2020-r] Accessed on 23 October 2020.

[9] Patient Rights Ombudsman. 2020. Coronavirus: Support for those in a quarantine or treatment crisis ("Koronawirus: Wsparcie dla osób w kryzysie związanym z kwarantanną lub leczeniem") [https://www.gov.pl/web/rpp/koronawirus-wsparcie-dla-osob-w-kryzysie-zwiazanym-z-kwarantanna-lub-leczeniem] Accessed on 23 October 2020.

[10] Website of the Republic of Poland. 2020. Current rules and restrictions. ("Aktualne zasady i ograniczenia") [https://www.gov.pl/web/koronawirus/aktualne-zasady-i-ograniczenia] Accessed on 23 October 2020.

[11] Ministry of Health. 2020. Teleporada. [https://pacjent.gov.pl/teleporada] Accessed on 23 October 2020.

[12] Ministry of Health. 2020. [https://www.gov.pl/web/zdrowie]. Accessed on 23 October 2020.

2.5.1c

Does the country make de-identified data on contact tracing efforts for COVID-19 (including the percentage of new cases from identified contacts) available via daily reports (or other format) on government websites (such as the Ministry of Health, or similar)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Poland makes de-identified data on contact tracing efforts for COVID-19 available. The official Ministry of Health website publishes daily updates on COVID-19 infection rates, as well as the total infection count across the country, and the Ministry of Health also uses Twitter to post daily updates on COVID-19 cases, but neither of these mention contract tracing. [1] [2] There is an official governmental mobile application for COVID-19 contract tracing called "ProteGO safe", but it is anonymous and serves the purpose of informing Polish citizens who have been in contact with a person with positive COVID-19 diagnosis and instructing on the next steps. [3]

[1] Ministry of Health. 2020. The map of Covid-19 Infections. ("Mapa zakazen koronawirusem")

[https://www.gov.pl/web/koronawirus/wykaz-zarazen-koronawirusem-sars-cov-2] Accessed on 22 October 2020.

[2] Ministry of Health Twitter account. 2020. [https://twitter.com/MZ_GOV_PL] Accessed on 22 October 2020.

[3] Ministry of Health. 2020. ProteGO Safe ("ProteGO Safe"). [https://www.gov.pl/web/protegosafe] Accessed on 22 October 2020.

2.5.2 Point of entry management

2.5.2a

Is there a joint plan or cooperative agreement between the public health system and border control authorities to identify suspected and potential cases in international travelers and trace and quarantine their contacts in the event of a public health emergency?

Yes, plan(s)/agreement(s) are in place to prepare for future public health emergencies = 2, Yes, but plan(s)/agreement(s) are in place only in response to active public health emergencies = 1, No = 0

Current Year Score: 0

There is insufficient evidence of a cooperative agreement between the public health system and border control authorities to monitor suspected and potential cases for international travelers in response to an active or future public health emergency.

As per article 5 of Act of 14 March 1985 on the State Sanitary Inspection, the State Sanitary Inspection has a duty of planning and organizing sanitary protection of state borders. [1] There are a number of border sanitary and epidemiological stations led by state border sanitary inspectors, who can take immediate action in a situation of a threat to public health caused by a particularly dangerous and highly contagious diseases. [1,2] In article 32b of the Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans, it is stated that the state border sanitary inspector has the right to inform the Chief Sanitary Inspectorate in the event of a risk of spreading an infection or an infectious disease that may pose a threat to public health, but it does not single out international travelers [3]. In article 33 of that act, it is stated that the state border sanitary inspector can impose obligations on a "on a person infected or suffering from an infectious disease or a person suspected of being infected or having an infectious disease, or a person who has had contact with a source of a biological pathogen", which are outlined in article 5 and include epidemiological surveillance. [3] The goals of Chief Sanitary Inspectorate for the the State Sanitary Inspection for 2020 is "surveillance of the sanitary state of border crossings of the Republic of Poland" and "cooperation with border sanitary and epidemiological stations for monitoring situations in the scope of public health threat on the borders" [4].

[1] Polish Parliament. 1985. Act of March 14, 1985 on the State Sanitary Inspection ("Ustawa z dnia 14 marca 1985 r. o Państwa i Stowowej Inspekcji Sanitarnej") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU19850120049>] Accessed pm 24 October 2020.

[2] Polish Parliament. 2002. Regulation of the Minister of Health of 19 July 2002 on the list of border sanitary and epidemiological stations. ("Rozporządzenie Ministra Zdrowia z dnia 19 lipca 2002 r. w sprawie wykazu granicznych stacji sanitarno-epidemiologicznych.") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20021331124>] Accessed on 24 October 2020.

[3]. Polish Parliament. 2008. The Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>] Accessed on 24 October 2020.

[4] Chief Sanitary Inspectorate. 2019. Guidelines of the Chief Sanitary Inspector of September 26, 2019 for the planning and operation of the State Sanitary Inspection in 2020. ("Wytyczne Głównego Inspektora Sanitarnego z dnia 26 września 2019 roku do planowania i działania Państwa i Stowowej Inspekcji Sanitarnej w 2020 roku") [<https://gis.gov.pl/wp-content/uploads/2018/04/Wytyczne-GIS-do-dzia%C5%82alno%C5%9bci-PIS-w-2020-1.pdf>] Accessed on 24 October 2020.

2.6 EPIDEMIOLOGY WORKFORCE

2.6.1 Applied epidemiology training program, such as the field epidemiology training program, for public health professionals and veterinarians (e.g., Field Epidemiology Training Program [FETP] and Field Epidemiology Training Program for Veterinarians [FETPV])

2.6.1a

Does the country meet one of the following criteria?

- Applied epidemiology training program (such as FETP) is available in country
- Resources are provided by the government to send citizens to another country to participate in applied epidemiology training programs (such as FETP)

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

Current Year Score: 1

There are applied epidemiology training programs in Poland, and resources are provided by the government to send citizens to applied epidemiology training programs abroad. Poland offers epidemiology training programs as a member of the European Programme for Intervention Epidemiology Training (EPIET). The National Institute of Public Health - National Institute of Hygiene is a member of European Centre for Disease Prevention and Control and an acknowledged EPIET training site. [1, 2] Polish citizens are also eligible for funded EPIET training abroad. [2]

[1] Training Programs in Epidemiology and Public Health Interventions Network. 2018. European Programme for Intervention Epidemiology Training (EPIET) and the European Programme for Public Health Microbiology Training (EUPHEM).

[<https://www.tephinet.org/training-programs/european-programme-for-intervention-epidemiology-training-epiet-and-the-european>]. Accessed on 22 October 2020.

[2] European Centre for Disease Prevention and Control. 2018. [<https://ecdc.europa.eu/en/narodowy-institut-zdrowia-publicznego-panstwowy-zaklad-higieny-pzh-epiet>]. Accessed on 22 October 2020.

2.6.1b

Are the available field epidemiology training programs explicitly inclusive of animal health professionals or is there a specific animal health field epidemiology training program offered (such as FETPV)?

Yes = 1 , No = 0

Current Year Score: 1

The field epidemiology training programs in Poland are explicitly inclusive of animal health professionals. Polish animal health professionals can participate in the EPIET program, which is explicitly inclusive of animal health professionals [1]. There is no evidence that the European Centre for Disease Prevention and Control-sponsored field epidemiology training within Poland covers animal health [2, 7]. The training offered by Poland's National Institute of Public Health as part of the EPIET/EUPHEM programme focuses only on communicable diseases in humans, as evidenced by training schedules available on its website, although veterinarians can participate [2]. Field epidemiology is also included on postgraduate veterinary training syllabi in Poland. The main institution offering such courses is the Post-Graduate Veterinary Training Centre (Weterynaryjne Centrum Kształcenia Podyplomowego), which operates within the frames of the State Veterinary Institute - National Research Institute in Pulawy. [3] The offered training is, however, theoretical and not practical or field-based. Examples of courses (seminars and laboratory training) offered by the Centre in 2020 include: brucellosis diagnostics - serological tests (laboratory training); study of pork, wild boar, horse and nutria meat by means of collective sample digestion using the magnetic mixing method; salmonella isolation from animal samples; and serological identification of salmonella strains (laboratory training). [3]

[1] European Centre for Disease Prevention and Control. "Call for ECDC Fellowship Programme (EPIET and EUPHEM paths)". [<https://ecdc.europa.eu/en/about-us/work-us/call-ecdc-fellowship-programme-epiet-and-euphem-paths>]. Accessed 23 October 2020.

[2] European Centre for Disease Prevention and Control. "Narodowy Instytut Zdrowia Publicznego - Państwowy Zakład Higieny (PZH)". [<https://ecdc.europa.eu/en/narodowy-institut-zdrowia-publicznego-panstwowy-zaklad-higieny-pzh-epiet>]. Accessed on 23 October 2020.

[3] The Post-Graduate Veterinary Training Centre. (Weterynaryjne Centrum Kształcenia Podyplomowego). 2020. "Schedule" ("Harmonogram"). [http://www.piwet.pulawy.pl/wckp/index_a.php?strona=harmonogram2020]. Accessed on 23 October 2020.

[4] Regional Veterinary Inspectorate in Białystok (Wojewódzki Inspektorat Weterynarii w Białymstoku). 2020. [<http://www.bialystok.wiw.gov.pl/news.html>]. Accessed on 23 October 2020.

[5] Chief Veterinary Inspectorate (Główny Inspektorat Weterynarii.) 2020. [<https://www.wetgiw.gov.pl/nadzor-weterynaryjny/diagnostyka-laboratoryjna>]. Accessed on 23 October 2020.

[6] Lesser Poland Veterinary Chamber (Malopolska Izba Lekarsko-Weterynaryjna). 2020. [<https://www.milw.pl/>]. Accessed on

23 October 2020.

[7] Chief Veterinary Chamber (Krajowa Izba Lekarsko-Weterynaryjna). 2020.

[<http://www.vetpol.org.pl/harmonogram/month.calendar/2018/11/14/->]. Accessed on 23 October 2020.

[8] State Veterinary Institute - National Research Institute in Pulawy (Panstwowy Instytut Weterynaryjny - Panstwowy Instytut Badawczy w Pulawach). 2020. [<http://www.piwet.pulawy.pl/>]. Accessed on 23 October 2020.

[9] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 23 October 2020.

2.6.2 Epidemiology workforce capacity

2.6.2a

Is there public evidence that the country has at least 1 trained field epidemiologist per 200,000 people?

Yes = 1, No = 0

Current Year Score: 0

2020

Completed JEE assessments; Economist Impact analyst qualitative assessment based on official national sources, which vary by country

Category 3: Rapid response to and mitigation of the spread of an epidemic

3.1 EMERGENCY PREPAREDNESS AND RESPONSE PLANNING

3.1.1 National public health emergency preparedness and response plan

3.1.1a

Does the country have an overarching national public health emergency response plan in place which addresses planning for multiple communicable diseases with epidemic or pandemic potential?

Evidence that there is a plan in place, and the plan is publicly available = 2, Evidence that the plan is in place, but the plan is not publicly available OR, Disease-specific plans are in place, but there is no evidence of an overarching plan = 1, No evidence that such a plan or plans are in place = 0

Current Year Score: 2

Poland has an overarching national public health emergency response plan in place, which addresses planning for multiple communicable diseases with pandemic potential. Part A of the most recent National Crisis Management Plan (adopted in 2018, updated in 2020) discusses epidemics as a potential threat to national security and defines them as “the occurrence in a given area of infections or infectious diseases in a number clearly higher than in the previous period or the occurrence of infections or infectious diseases so far not present”. [1] This document does not list the diseases by name, however, only specifically mentioning influenza. Part B of the plan provides a detailed description of events that ought to be regularly monitored to prevent epidemics, including the “monitoring of infections and infectious diseases, related deaths and related suspected cases”, and contains guidelines on actions to be undertaken following an outbreak. [2] This part of the plan does not list diseases by name either, but does refer to the Act of 5 December 2008 on Preventing and Combating Infections and

Infectious Diseases in Humans. [2] This act relates to an overarching national strategy for monitoring, preventing and dealing with infectious diseases and outbreaks linked to infectious diseases, listing 59 specific diseases by name. [3] Poland also has a 2009 document called the Polish Pandemic Plan, which outlines a response plan for influenza pandemics. [4]

[1] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan Part A. (Krajowy Plan Zarzadzania Kryzysowego – czesc A) [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf>]. Accessed on 23 October 2020.

[2] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan Part B. (Krajowy Plan Zarzadzania Kryzysowego – czesc B). [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>]. Accessed on 23 October 2020.

[3] Polish Parliament. 2008. Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>] Accessed on 15 November 2020.

[4] WHO. 2020. Polish Pandemic Plan. [<https://extranet.who.int/sph/influenza-plan-poland>] Accessed on 15 November 2020.

3.1.1b

If an overarching plan is in place, has it been updated in the last 3 years?

Yes = 1 , No /no plan in place= 0

Current Year Score: 1

Poland's overarching national public health emergency response plan has been updated within the past 3 years. On 8 January 2018, the Council of Ministers adopted the current version of the National Crisis Management Plan (Krajowy Plan Zarzadzania Kryzysowego), Poland's national public health emergency response plan, which addresses planning for multiple communicable diseases with pandemic potential. [1] There were additional updates to Part A adopted by the Council of Ministers in April 2020, and other changes introduced to Part B in 2019. [2,3] The Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans has undergone several revisions in 2020, as a result of the coronavirus pandemic. [4]

[1] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. "Update of the National Crisis Management Plan." ("Aktualizacja krajowego planu zarzadzania kryzysowego") [<https://rcb.gov.pl/aktualizacja-krajowego-planu-zarzadzania-kryzysowego-2/>]. Accessed on 23 October 2020.

[2] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarzadzania Kryzysowego, Aktualizacja 2020, Czesc A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf>]. Accessed on 23 October 2020.

[3] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarzadzania Kryzysowego, Aktualizacja 2019, Czesc B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 23 October 2020.

[4] Polish Parliament. 2008. Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>] Accessed on 15 November 2020

3.1.1c

If an overarching plan is in place, does it include considerations for pediatric and/or other vulnerable populations?

Yes = 1 , No /no plan in place= 0

Current Year Score: 0

There is no explicit mention of how pediatric or other vulnerable populations are to be treated within the Polish national public health emergency response plans. There is no mention of pediatric or other vulnerable populations in the National Crisis Management Plan (Krajowy Plan Zarządzania Kryzysowego), which was adopted in 2018 and updated in 2020, or in the Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans. [1, 2, 3] There is no evidence of such considerations on the website of the Ministry of Health. [4]

[1] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2020, Część A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf/>]. Accessed on 23 October 2020.

[2] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2019, Część B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 23 October 2020.

[3] Polish Parliament. 2008. Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>] Accessed on 15 November 2020

[4] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 23 October 2020.

3.1.1d

Does the country have a publicly available plan in place specifically for pandemic influenza preparedness that has been updated since 2009?

Yes = 1, No = 0

Current Year Score: 0

2020

WHO Strategic Partnership for IHR and Health Security (SPH)

3.1.2 Private sector involvement in response planning

3.1.2a

Does the country have a specific mechanism(s) for engaging with the private sector to assist with outbreak emergency preparedness and response?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of a mechanism in Poland for engaging with the private sector to assist with outbreak emergency preparedness and response. [1, 2] Private citizens as well as private companies (including companies that operate diagnostic laboratories, for example) are required to report cases of infectious diseases to the local and regional sanitary inspectorates and veterinary inspectorates, but other than that there is no mention of any cooperation agreement or strategy plan for cooperation between the authorities (including the central and regional and local governments and sanitary and veterinary inspectorates) and the private sector in outbreak emergency preparedness or response. The website of the Governmental Security Center, the Act of 26 April 2007 on Crisis Management, the Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals, the Act of 29 January 2004 on Veterinary Inspection and the Act of 5

December 2008 on preventing and combating infections and infectious diseases in humans as well as the websites of the Ministry of Health contain no evidence of relevant mechanisms. [3, 4, 5, 6, 7]

- [1] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarzadzania Kryzysowego, Aktualizacja 2020, Czesc A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf/>]. Accessed on 23 October 2020.
- [2] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarzadzania Kryzysowego, Aktualizacja 2019, Czesc B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 23 October 2020.
- [3] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarzadzaniu kryzysowym.) [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 23 October 2020.
- [4] Polish Parliament. 2004. Act of 11 March 2004 on the Protection of Animal Health and Control of Infectious Diseases of Animals. (Ustawa z dnia 11 marca 2004 r. o ochronie zdrowia zwierzat oraz zwalczaniu chorób zakaznych zwierzat). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040690625>]. Accessed on 23 October 2020.
- [5] Polish Parliament). 2004. Act of 29 January 2004 on Veterinary Inspection. (Ustawa z dnia 29 stycznia 2004 r. o Inspekcji Weterynaryjnej). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040330287>]. Accessed on 23 October 2020.
- [6] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakazen i chorób zakaznych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 23 October 2020.
- [7] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 23 October 2020.

3.1.3 Non-pharmaceutical interventions planning

3.1.3a

Does the country have a policy, plan and/or guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic?

Yes, a policy, plan and/or guidelines are in place for more than one disease= 2, Yes, but the policy, plan and/or guidelines exist only for one disease = 1, No = 0

Current Year Score: 2

Poland has a policy in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic, and it covers more than one disease. Article 3 of the Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans stipulates that in the event of a danger of an infection or an infectious disease other than those mentioned in the list referred to in paragraph 1.1, the health minister may announce by decree an infection or an infectious disease and, if known, a biological pathogen causing it, and if necessary, a specific procedure for healthcare providers and people exposed to infection or disease for a specified period in the decree. [1] Article 5 of the act states that persons residing in Poland are obligated to duties including sanitary-epidemiological tests, epidemiological supervision, quarantine, isolation, domestic isolation and halting work that exposes the risk of transmission of the infectious disease. Article 11 states that managers of medical entities and other persons providing healthcare services are obliged to take actions to prevent the spread of infections and infectious diseases, including the use of individual and collective protection measures to prevent the transfer of biological pathogens to others. [1] Article 33 stipulates that in order to prevent the spread of infections or infectious diseases, the local state sanitary inspector or the state border sanitary inspector may prohibit access to contaminated rooms; order decontamination, disinsection or deratization of real estate or premises; order decontamination or destruction of items; prohibit the use of water suspected of being contaminated with biological pathogens; prohibit eating food suspected of contamination, and, if necessary, order its examination, decontamination, destruction or use for other purposes. Article 34 stipulates that to prevent the spread of infections and infectious diseases,

persons suffering from an infectious disease or persons suspected of suffering from an infectious disease may be subject to compulsory hospitalization, isolation or isolation at home. Article 46 states that during an epidemic special measures can be introduced, including NPIs such as temporary restrictions on specific modes of transport, temporary limitation of the functioning of certain institutions or workplaces and prohibition of organizing shows and other gatherings of people. Article 48a introduces a fine of up to PLN 30,000 (USD 8,000) for violation of any of these rules. [1] However, the act does not specify specific criteria for the introduction of different NPIs. [1] The COVID-19 pandemic prompted the introduction of the Act of 2 March 2020 on Special Solutions Related to the Prevention, Counteraction and Combating COVID-19, Other Infectious Diseases and Emergencies Caused by Them, which introduced many of the NPIs listed in the Act on Preventing and Combating Infections and Infectious Diseases in Humans. [2].

[1] Polish Parliament. 2008. The Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>] Accessed on 24 November 2020.

[2] Polish Parliament. 2020. Act of March 2, 2020 on special solutions related to the prevention, counteraction and combating COVID-19, other infectious diseases and emergencies caused by them ("Ustawa z dnia 2 marca 2020 r. o szczególnych rozwiązaniach związanych z zapobieganiem, przeciwdziałaniem i zwalczaniem COVID-19, innych chorób zakaźnych oraz wywołanych nimi sytuacji kryzysowych") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20200000374>]. Accessed on 23 October 2020.

3.2 EXERCISING RESPONSE PLANS

3.2.1 Activating response plans

3.2.1a

Does the country meet one of the following criteria?

- Is there evidence that the country has activated their national emergency response plan for an infectious disease outbreak in the past year?
- Is there evidence that the country has completed a national-level biological threat-focused exercise (either with WHO or separately) in the past year?

Needs to meet at least one of the criteria to be scored a 1 on this measure. , Yes for both = 1 , Yes for one = 1 , No for both = 0

Current Year Score: 1

In the past year, Poland has activated its national emergency response plan for an infectious disease outbreak, but there is no evidence that Poland has completed a national-level biological threat-focused exercise. As a response to the outbreak of COVID-19, on 2 March 2020, Poland adopted the Act on Special Solutions Related to the Prevention, Prevention and Combating of COVID-19, Other Infectious Diseases and Emergencies Caused by Them, in accordance with the Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans. [1] This law introduced rules and procedure for taking anti-epidemic and preventive measures in order to combat the COVID-19 pandemic, and outlined numerous specific measures, including temporary limits on certain types of business activity, an obligation to submit to quarantine, a prohibition on leaving a quarantine facility without permission, and social distancing requirements. [1] Furthermore, on 14 March 2020 the health minister issued a decree introducing "a state of epidemic threat" in Poland, based on article 46 of the Act on Preventing and Combating Infections and Infectious Diseases in Humans [2] [3] In both May and October 2020, the government has considered introducing a state of emergency, but to date no state of emergency has been declared. [4] According to the World Health Organization's extranet, Poland has not held any national-level biological threat-focused exercises in the past year, nor does it have any scheduled for 2020/2021. [5] The websites of the World Health

Organization,, Ministry of Health, Ministry of National Defence and Government Security Center do not contain any evidence of such an exercise. [6,7,8,9]

[1] Polish Parliament. 2020. The Act of March 2, 2020 on special solutions related to the prevention, prevention and combating of COVID-19, other infectious diseases and emergencies caused by them ("Ustawa z dnia 2 marca 2020 r. o szczególnych rozwiązaniach związanych z zapobieganiem, przeciwdziałaniem i zwalczaniem COVID-19, innych chorób zakaźnych oraz wywołanych nimi sytuacji kryzysowych")

[<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20200000374>] Accessed on 24 November 2020.

[2] Polish Government. 2020. We will introduce an epidemic emergency from today ("Od dziś wprowadzimy stan zagrożenia epidemicznego"). [<https://www.gov.pl/web/koronawirus/od-dzis-wprowadzimy-stan-zagrozenia-epidemicznego>] Accessed on 26 November 2020.

[3] Polish Parliament. 2020. Ordinance of the Minister of Health of 13 March 2020 on the declaration of an epidemic threat in the territory of the Republic of Poland ("Rozporządzenie Ministra Zdrowia z dnia 13 marca 2020 r. w sprawie ogłoszenia na obszarze Rzeczypospolitej Polskiej stanu zagrożenia epidemicznego")

[<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20200000433>] Accessed on 26 November 2020.

[4] WirtualnaPolska. 2020. Coronavirus in Poland. A state of emergency - what would its introduction mean? ("Koronawirus w Polsce. Stan wyjątkowy - co by oznaczało jego wprowadzenie?")

[<https://www.wp.pl/?s=https%3A%2F%2Ftech.wp.pl%2Fkoronawirus-w-polsce-stan-wyjatkowy-co-by-oznaczało-jego-wprowadzenie-6562734521022976a&src01=f1e45&c=336>] Accessed on 26 November 2020.

[5] World Health Organization. 2020. "Simulation Exercise". [<https://extranet.who.int/sph/simulation-exercise>] Accessed on 23 October 2020.

[6] World Health Organization. 2020. "Strategic Partnership for International Health Regulations (2005) and Health Security (SPH)/Country/Poland." [<https://extranet.who.int/sph/country/poland>]. Accessed on 23 October 2020.

[7] Ministry of Health. 2020 [<https://www.gov.pl/web/zdrowie>] Accessed on 23 October 2020.

[8] Ministry of National Defence. 2020 [<https://www.gov.pl/web/obrona-narodowa>] Accessed on 23 October 2020.

[9] Government Security Center. 2020 [<https://rcb.gov.pl/>] Accessed on 23 October 2020.

3.2.1b

Is there evidence that the country in the past year has identified a list of gaps and best practices in response (either through an infectious disease response or a biological-threat focused exercise) and developed a plan to improve response capabilities?

Yes, the country has developed and published a plan to improve response capacity = 2 , Yes, the country has developed a plan to improve response capacity, but has not published the plan = 1 , No = 0

Current Year Score: 0

There is no evidence that Poland has identified a list of gaps and best practices in response to an infectious disease and developed a plan to improve response capabilities. At the start of the global COVID-19 outbreak, Poland's parliament introduced the Act of 2 March 2020 on Special Solutions Related to the Prevention, Counteraction and Combating of COVID-19, Other Infectious Diseases and Emergencies Caused by Them. The Act is a response plan to an outbreak of an infectious disease, but it is not a plan addressing a list of gaps and best practices in response to such an outbreak. It outlines principles and procedures for preventing and combating COVID-19, including the principles and procedure for taking anti-epidemic and preventive measures in order to neutralize the sources of infection and cut the pathways of this infectious disease. It also introduces changes to acts the Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans, including changes to article 46b to introduce new best practices in the event of an outbreak of a new infectious disease like COVID-19, such as restrictions and orders that include, but are not limited to, temporary limitation of certain scopes of business activity, an obligation to submit to quarantine, prohibition from leaving a quarantine facility, and orders

for a specific method of movement [1]. However, there is no evidence in the public domain that Poland has in the past year identified a list of gaps and best practices in response through either an after-action review or a biological threat-focused IHR exercise with the World Health Organization (WHO) and developed a plan to improve response capabilities. No such exercise has been noted on the website of the Governmental Security Center, the WHO or the Ministry of Health. [2,3,4,5,6]

[1] Polish Parliament. 2020. Act of March 2, 2020 on special solutions related to the prevention, counteraction and combating COVID-19, other infectious diseases and emergencies caused by them ("Ustawa z dnia 2 marca 2020 r. o szczególnych rozwiązaniach związanych z zapobieganiem, przeciwdziałaniem i zwalczaniem COVID-19, innych chorób zakaźnych oraz wywołanych nimi sytuacji kryzysowych")

[https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20200000374]. Accessed on 23 October 2020.

[2] Government Security Center. 2020 [https://rcb.gov.pl/] Accessed on 23 October 2020.

[3] World Health Organisation. 2020. "After action review activities" [https://extranet.who.int/sph/after-action-review]. Accessed on 23 October 2020.

[4] World Health Organisation. 2020. "Simulation Exercise" [https://extranet.who.int/sph/simulation-exercise]. Accessed on 23 October 2020.

[5] World Health Organisation. 2020. "Strategic Partnership for International Health Regulations (2005) and Health Security (SPH)/Country/Poland. [https://extranet.who.int/sph/country/poland]. Accessed on 23 October 2020.

[6] Ministry of Health. 2020 [https://www.gov.pl/web/zdrowie] Accessed on 23 October 2020.

3.2.2 Private sector engagement in exercises

3.2.2a

Is there evidence that the country in the past year has undergone a national-level biological threat-focused exercise that has included private sector representatives?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Poland has completed a national-level biological threat-focused exercise in the past year that has included private sector representatives. According to the World Health Organization's extranet, Poland did not hold any national-level biological threat-focused exercises in the past year, nor has it any scheduled for 2020/2021. [1] The websites of the World Health Organization, Ministry of Health, Ministry of National Defence and Government Security Center contain no evidence of such an exercise. [2,3,4,5]

[1] World Health Organisation. 2020. "Simulation Exercise". [https://extranet.who.int/sph/simulation-exercise] Accessed on 23 October 2020.

[2] World Health Organisation. 2020. "Strategic Partnership for International Health Regulations (2005) and Health Security (SPH)/Country/Poland. [https://extranet.who.int/sph/country/poland]. Accessed on 23 October 2020.

[3] Ministry of Health. 2020 [https://www.gov.pl/web/zdrowie] Accessed on 23 October 2020.

[4] Ministry of National Defence. 2020 [https://www.gov.pl/web/obrona-narodowa] Accessed on 23 October 2020.

[5] Government Security Center. 2020 [https://rcb.gov.pl/] Accessed on 23 October 2020.

3.3 EMERGENCY RESPONSE OPERATION

3.3.1 Emergency response operation

3.3.1a

Does the country have in place an Emergency Operations Center (EOC)?

Yes = 1 , No = 0

Current Year Score: 1

Poland has in place an emergency operations center (EOC). Crisis management in Poland is regulated by several dozen legal acts. The most important of these is the Act of 26 April 2007 on Crisis Management, which identifies the competent authorities in matters of crisis management (including ongoing monitoring), their tasks and the principles of financing crisis management units; it also defines the basic terms such as crisis management or a critical event. The act creates an EOC called the National Crisis Management Centre (Rzadowe Centrum Bezpieczenstwa), which oversees crisis management in all kinds of disaster events, including, but not limited to, epidemics. [1, 2]

[1] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarzadzaniu kryzysowym.) [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 25 October 2020.

[2] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarzadzania Kryzysowego, Aktualizacja 2020, Czesc A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf/>]. Accessed on 25 October 2020.

3.3.1b

Is the Emergency Operations Center (EOC) required to conduct a drill for a public health emergency scenario at least once per year or is there evidence that they conduct a drill at least once per year?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence that the emergency operations center (EOC) is required to conduct a drill at least once per year or that it conducts a drill annually. According to the core legal act on crisis management in Poland, the Act of 26 April 2007 on Crisis Management, Poland's EOC is the Governmental Security Center (Rzadowe Centrum Bezpieczenstwa, RCB). [1] The RCB oversees crisis management in all kinds of disaster events, including, but not limited to, epidemics. [1] The RCB coordinates crisis planning between all national public bodies (including ministries), and voivodes (regional governments), and incorporates body- and voivode-level crisis management plans into the National Crisis Management Plan. [1] As per the Act, the RCB is the national body responsible for surveillance and monitoring (of weather, water levels, spillage of hazardous biological material, cases of transmittable diseases, etc.), maintaining 24/7 readiness. It also receives daily, weekly and monthly activity reports from its counterparts at lower administration levels. [1] The act stipulates that the RCB conduct drills, but does not indicate a frequency with which those drills are to be conducted. [1] National media outlets as well as the websites of the RCB, the Prime Minister, the Ministry of Health, the Ministry of National Defence and the Ministry of Internal Affairs and Administration have been reviewed contain no relevant information. [2, 3, 4, 5, 6]

[1] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarzadzaniu kryzysowym.) [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 25 October 2020

[2] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarzadzania Kryzysowego, Aktualizacja 2020, Czesc A). [<https://rcb.gov.pl/wp->

content/uploads/KPZK-cz.-A-2020-1-1.pdf/]. Accessed on 25 October 2020.

[3] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. [https://rcb.gov.pl]. Accessed on 25 October 2020.

[4] Ministry of Internal Affairs and Administration. 2020. "Security". ("Bezpieczenstwo"). [https://www.gov.pl/web/mswia/]. Accessed on 25 October 2020.

[5] Ministry of National Defence. 2020. "Recent news". ("Aktualnosci"). [https://www.gov.pl/web/obrona-narodowa/]. Accessed on 25 October 2020.

[6] Ministry of Health. 2020. [https://www.gov.pl/web/zdrowie]. Accessed on 25 October 2020.

3.3.1c

Is there public evidence to show that the Emergency Operations Center (EOC) has conducted within the last year a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence in the public domain that the emergency operations centre can conduct, or has conducted within the last year, a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario. According to the core legal act on crisis management in Poland, the Act of 26 April 2007 on crisis management, Poland's EOC is the Governmental Security Center (Rzadowe Centrum Bezpieczenstwa, RCB). [1] The RCB oversees crisis management in all kinds of disaster events, including, but not limited to, epidemics. [1] The RCB coordinates crisis planning between all national public bodies (including ministries), and voivodes (regional governments), and incorporates body- and voivode-level crisis management plans into the National Crisis Management Plan. [1] As per the act, RCB is the national body responsible for surveillance and monitoring (of weather, water levels, spillage of hazardous biological material, cases of transmittable diseases, etc.), maintaining 24/7 readiness. It also receives daily, weekly and monthly activity reports from its counterparts at lower administration levels. [1] The act stipulates that the RCB conduct drills, but does not indicate a frequency with which those drills are to be conducted. [1] National media outlets as well as the websites of the RCB, the Prime Minister, the Ministry of Health, the Ministry of National Defence and the Ministry of Internal Affairs and Administration contain no further relevant information. [2, 3, 4, 5, 6]

[1] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarzadzaniu kryzysowym.) [http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590]. Accessed on 25 October 2020

[2] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarzadzania Kryzysowego, Aktualizacja 2020, Czesc A). [https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf/]. Accessed on 25 October 2020.

[3] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. [https://rcb.gov.pl]. Accessed on 25 October 2020.

[4] Ministry of Internal Affairs and Administration. 2020. "Security". ("Bezpieczenstwo"). [https://www.gov.pl/web/mswia/]. Accessed on 25 October 2020.

[5] Ministry of National Defence. 2020. "Recent news". ("Aktualnosci"). [https://www.gov.pl/web/obrona-narodowa/]. Accessed on 25 October 2020.

[6] Ministry of Health. 2020. [https://www.gov.pl/web/zdrowie]. Accessed on 25 October 2020.

3.4 LINKING PUBLIC HEALTH AND SECURITY AUTHORITIES

3.4.1 Public health and security authorities are linked for rapid response during a biological event

3.4.1a

Does the country meet one of the following criteria?

- Is there public evidence that public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event (i.e., bioterrorism attack)?
- Are there publicly available standard operating procedures, guidelines, memorandums of understanding (MOUs), or other agreements between the public health and security authorities to respond to a potential deliberate biological event (i.e., bioterrorism attack)?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 1

There are guidelines for cooperation between Poland's public health and security authorities to respond to a potential deliberate biological event but there is no public evidence that public health and national security authorities have carried out an exercise to respond to a potential deliberate biological event. Poland's Act of 26 April 2007 on Crisis Management regulates cooperation between public health authorities and other authorities, including security authorities, in emergencies, including deliberate biological events. [1] The act does not specifically mention deliberate biological attacks, but as per the National Crisis Management Plan, an epidemic may involve an act of bioterrorism. In case such an event takes place (whether suspected or actual), article 5 of the act requires all Polish administrative units (voivodeships, powiats and communes) to include in their critical management plans detailed methods of cooperation and communication between the various authorities involved in a critical event. [1, 2, 3, 4] Once an epidemic threat is confirmed, article 5 requires public health authorities to inform the police force and the fire brigade, and to report the case to the sanitary inspectorate. The sanitary inspectorate informs the crisis management center, which is activated and which coordinates information flow between the various authorities affected by the critical event. [1, 2] The websites of the Governmental Security Center, the Ministry of Internal Affairs and Administration, the Ministry of National Defence and the World Health Organization, as well as the World Organisation for Animal Health contain no evidence of a joint exercise by public health and national security authorities. [5, 6, 7, 8]

[1] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzaniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 25 October 2020.

[2] Katarzyna Czuba, Magdalena Mazurkiewicz, Kamil Kaminski, Filip Rózewski, Dorota Skrajnowska, Andrzej Tokarz. 2011. „Bioterrorism – threat, procedures to follow, legal framework”. “BIOTERRORYZM – ZAGROZENIE, ZASADY POSTEPOWANIA, REGULACJE PRAWNE”. [<http://biuletynfarmacji.wum.edu.pl/1102Czuba/Czuba.html>]. Accessed on 125 October 2020.

[3] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2020, Czesć A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf/>]. Accessed on 25 October 2020.

[4] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2019, Czesć B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 25 October 2020.

[5] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. [<https://rcb.gov.pl/>]. Accessed on 25 October 2020.

[6] Ministry of Internal Affairs and Administration. 2020. “Security”. (“Bezpieczeństwo”). [<https://www.gov.pl/web/mswia>]. Accessed on 25 October 2020.

[7] The Polish Health Ministry. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 25 October 2020.

[8] Ministry of National Defence. 2020. "Recent news". ("Aktualnosci"). [<https://www.gov.pl/web/obrona-narodowa/aktualnosci5>]. Accessed on 25 October 2020.

3.5 RISK COMMUNICATIONS

3.5.1 Public communication

3.5.1b

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) outline how messages will reach populations and sectors with different communications needs (eg different languages, location within the country, media reach)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Poland's crisis management strategy guidelines outline how messages will reach populations and sectors with different communications needs during a national public health emergency. As per article 21 of Act of 26 April 2007 on Crisis Management, the operator of the public telecommunications network nearest to the location of an emergency event is obliged to send, free-of-charge, text messages to mobile phones of all users located within the range of the event, communicating the event, but neither the Act, nor the regional crisis management plans specify how messages will reach populations and sectors with different communications needs. [1,2] The Crisis Communication Book, published by the Governmental Security Center (Poland's emergency operations center) notes that in both crisis communication and risk communication entities responsible for communication would be well advised to arrange foreign language translators in their crisis management centers for the duration of an event or crisis, and to take into account the different communication resources used by the target group (these may include social media, telephones and traditional media), but the document makes no explicit mention of communication during a national public health emergency. [3] There is also a system of SMS notification of the public of high likelihood of an immediate threat to life or health in a significant area, but it covers a wide range of emergency situations and is not limited to public health crises. [4]. There is no further relevant information on the websites of the Governmental Security Center, the Ministry of Internal Affairs, the Ministry of National Defense, or the Ministry of Health. [5,6,7,8]

[1] Pomeranian Regional Office, Department of Security and Crisis Management. (Pomorski Urząd Wojewódzki, Wydział Bezpieczeństwa i Zarządzania Kryzysowego). 2017. "Pomeranian Voivodship Crisis Management Plan". ("Plan Zarządzania Kryzysowego Województwa Pomorskiego").

[<http://www.gdansk.uw.gov.pl/attachments/article/1545/Plan%20G%C5%82%C3%B3wny%20z%20Planu%20Zarz%C4%85dzania%20Kryzysowego%20Wojew%C3%B3dztwa%20Pomorskiego.pdf>]. Accessed on 25 October 2020.

[2] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzaniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]). Accessed on 25 October 2020.

[3] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2017. "2017 Crisis Communication Book". ("Księga Komunikacji Kryzysowej 2017"). [https://rcb.gov.pl/wp-content/uploads/KKK_2017_sklad_pk2-1.pdf]. Accessed on 25 October 2020.

[4] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. #ALERTRCB [<https://rcb.gov.pl/alertrcb/>]. Accessed on 25 October 2020.

[5] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. [<https://rcb.gov.pl/>]. Accessed on 25 October 2020

[6] The Ministry of Internal Affairs and Administration. 2020. [<https://www.gov.pl/web/mswia>]. Accessed on 25 October

2020.

[7] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 25 October 2020.

[8] The Ministry of National Defence. 2020. "Recent news". ("Aktualnosci"). [<https://www.gov.pl/web/obrona-narodowa/aktualnosci5>]. Accessed on 25 October 2020.

3.5.1 Risk communication planning

3.5.1a

Does the country have in place, either in the national public health emergency response plan or in other legislation, regulation, or strategy documents, a section detailing a risk communication plan that is specifically intended for use during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence of a risk communication plan designed specifically for use during a public health emergency being in place in Poland. Based on the Act of 26 April 2007 on Crisis Management, detailed guidelines and procedures on risk and crisis communication are contained within Part B of the Polish National Crisis Management Plan. The communication guidelines apply to all emergencies, including public health emergencies. [1,2] Each crisis situation, in accordance with the National Crisis Management Plan, is assigned a leading institution (the body competent for the type of crisis situation) which, due to the substantive scope, specificity of action and experience, supervises the management of a given crisis situation, including the coordination of information policy [1] In the previous sections the plan outlines the leading institution responsible for main communication during the crisis. It highlights certain rules on how the information should be passed onto the public such as collaboration with the media and debunking rumours and fake news. [1] In addition, in 2017 the Governmental Security Center, which is Poland's emergency operations center, published the Crisis Communication Book, which contains further detailed recommendations for crisis and risk communication, but it does not detail a risk communication plan specifically for use during a public health emergency. [3] Article 44 of the Act of 5 December 2008 on Preventing and Combating Infections and Infectious Diseases in Humans stipulates that regional governments should devise action plans in the event of an epidemic, and should make these plans public. Article 46 of that act stipulates that "the state of epidemic threat or the state of epidemic in the voivodeship [administrative region] or part of it is announced and dismissed by the voivode [head of regional government]", but it does not highlight a detailed plan for risk communication with the public. [4] The Act of 2 March 2020 on Special Solutions Related to Prevention, Preventing and Combating COVID-19, Other Infectious Diseases and Emergencies Caused by Them does not contain provisions for a detailed risk communication plan. [5] There is also a system of SMS notification of the public of high likelihood of an immediate threat to life or health in a significant area, which covers a wide range of emergency situations and is not limited to public health crises. [6]

[1] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2019, Czesć B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 25 October 2020.

[2] Polish Parliament. 2007. Act of April 26, 2007 on crisis management. ("Ustawa z dnia 26 kwietnia 2007 r. o zarządzaniu kryzysowym") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>] Accessed on 25 October 2020.

[3] Governmental Security Center. (Rządowe Centrum Bezpieczeństwa). 2017. "2017 Crisis Communication Book". ("Księga Komunikacji Kryzysowej 2017"). [https://rcb.gov.pl/wp-content/uploads/KKK_2017_sklad_pk2-1.pdf]. Accessed on 25 October 2020.

[4] Polish Parliament. 2008. The Act of 5 December 2008 on preventing and combating infections and infectious diseases in humans ("Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>] Accessed on 25 October 2020.

[5] Polish Parliament. 2020. The Act of March 2, 2020 on special solutions related to the prevention, prevention and

combating of COVID-19, other infectious diseases and emergencies caused by them ("Ustawa z dnia 2 marca 2020 r. o szczególnych rozwiązaniach związanych z zapobieganiem, przeciwdziałaniem i zwalczaniem COVID-19, innych chorób zakaźnych oraz wywołanych nimi sytuacji kryzysowych")

[<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20200000374>] Accessed on 25 October 2020.

[6] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. #ALERTRCB [<https://rcb.gov.pl/alertrcb/>] Accessed on 25 October 2020.

3.5.1c

Does the risk communication plan (or other legislation, regulation or strategy document used to guide national public health response) designate a specific position within the government to serve as the primary spokesperson to the public during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that Poland has a risk communication plan designating a specific position within the government to serve as the primary spokesperson to the public during a public emergency. Based on the Act of 26 April 2007 on Crisis Management, detailed guidelines and procedures on risk and crisis communication are contained within Part B of the Polish National Crisis Management Plan. [1,2,3,4] Each crisis situation, in accordance with the National Crisis Management Plan, is assigned a leading institution (the body competent for the type of crisis situation) which, due to the substantive scope, specificity of action and experience, supervises the management of a given crisis situation, including the coordination of information policy. [1] For public health emergencies, the leading institution is the Ministry of Health. [1,2,3] Part B of the National Crisis Management plan states that a press spokesman or head of an organizational unit is responsible for social communication is responsible for coordinating communication with the public through the media. [1] There is no further relevant information on the website of the Ministry of Health, the Governmental Security Center, the Ministry of Internal Affairs, or the Ministry of National Defense. [4, 5, 6, 7]

[1] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2019, Czesć B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 25 October 2020.

[2] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2020, Czesć A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf>]. Accessed on 25 October 2020.

[3] Polish Parliament. 2007. Act of April 26, 2007 on crisis management. ("Ustawa z dnia 26 kwietnia 2007 r. o zarządzaniu kryzysowym") [<http://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>] Accessed on 25 October 2020.

[4] Governmental Security Center. (Rządowe Centrum Bezpieczeństwa). 2017. "2017 Crisis Communication Book". ("Księga Komunikacji Kryzysowej 2017"). [https://rcb.gov.pl/wp-content/uploads/KKK_2017_sklad_pk2-1.pdf]. Accessed on 25 October 2020.

[5] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 25 October 2020.

[6] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. [<https://rcb.gov.pl/>] Accessed on 25 October 2020

[7] Ministry of Internal Affairs and Administration. 2020. [<https://www.gov.pl/web/mswia>]. Accessed on 25 October 2020.

[8] Ministry of National Defense. 2020. [<https://www.gov.pl/web/obrona-narodowa/>]. Accessed on 25 October 2020.

3.5.2 Public communication

3.5.2a

In the past year, is there evidence that the public health system has actively shared messages via online media platforms (e.g. social media, website) to inform the public about ongoing public health concerns and/or dispel rumors, misinformation or disinformation?

Public health system regularly shares information on health concerns = 2, Public health system shares information only during active emergencies, but does not regularly utilize online media platforms = 1, Public health system does not regularly utilize online media platforms, either during emergencies or otherwise = 0

Current Year Score: 2

In the past year, Poland's public health system has actively shared messages via online media platforms to inform the public about ongoing public health concerns and to dispel disinformation. The Ministry of Health runs a special website created specifically for the COVID-19 pandemic, which includes a page titled "We're fighting against fake news", which addresses fake news currently in circulation. [1] Furthermore, a Ministry of Health has a website called Pacjent.gov.pl, which has a regularly updated page titled "Coronavirus: what we know", dedicated to sharing facts on the coronavirus. [2] Poland's Ministry of Health also uses various online communication channels to communicate with the public: Youtube, LinkedIn, Twitter and Facebook. [3] Twitter and Facebook have been used regularly throughout the year to inform the public about COVID-19 updates and dispel rumours, misinformation and disinformation. [4,5]. On both Twitter and Facebook, the Ministry of Health provides regular updates such as "Daily report on #coronavirus". There is evidence that the Health Ministry has used both platforms to alert the public of fake news [6,7]. The main online source of coronavirus questions and answers, actual statistics, news and rules and restrictions can be found on the official Ministry of Health's website named "Coronavirus: information and recommendation". [8] There is also evidence that the Ministry of Health uses its Twitter and Facebook accounts to inform the public about other ongoing public health concerns, such as a campaign against excessive consumption of sugar. [9] [10] The ministry has a section on its official government website titled "Updates", which is regularly updated with news on a wide range of topics. [11]

[1] Ministry of Health. 2020. We're fighting against fake news ("Walczymy z fałszywymi informacjami")[<https://www.gov.pl/web/koronawirus/walczymy-z-falszywymi-informacjami>] Accessed on 26 October 2020.

[2] Ministry of Health. 2020. Coronavirus: What we know. ("Koronawirus: co o nim wiemy") [<https://pacjent.gov.pl/aktualnosc/koronawirus-co-o-nim-wiemy>] Accessed on 26 October 2020.

[3] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>] Accessed on 26 October 2020.

[4] Twitter. 2020. Ministry of Health of Poland official profile ("Oficjalny profil Ministerstwa Zdrowia"). [https://twitter.com/MZ_GOV_PL] Accessed on 26 October 2020.

[5] Facebook. 2020. Ministry of Health of Poland official profile ("Oficjalny profil Ministerstwa Zdrowia") [<https://www.facebook.com/MZGOVPL>] Accessed on 26 October 2020.

[6] Twitter. 2020. Ministry of Health of Poland official profile ("Oficjalny profil Ministerstwa Zdrowia"). [https://twitter.com/mz_gov_pl/status/1239567098566901760?lang=en] Accessed on 26 October 2020.

[7] Facebook. 2020. Ministry of Health of Poland official profile ("Oficjalny profil Ministerstwa Zdrowia") [<https://www.facebook.com/135889759813803/posts/2739779012758185/>] Accessed on 26 October 2020.

[8] Ministry of Health. 2020. Coronavirus: information and recommendations. ("Koronawirus: informacje i zalecenia") [<https://www.gov.pl/web/koronawirus>] Accessed on 26 October 2020.

[9] Twitter. 2020. Ministry of Health of Poland official profile ("Oficjalny profil Ministerstwa Zdrowia"). [https://twitter.com/MZ_GOV_PL/status/1208688629226229763/photo/1] Accessed on 24 November 2020.

[10] Facebook. 2020. Ministry of Health of Poland official profile ("Oficjalny profil Ministerstwa Zdrowia") [<https://www.facebook.com/135889759813803/photos/a.1950402485029179/2644968488905905/?type=3>] Accessed on 24 November 2020.

[11] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie/wiadomosci>] Accessed on 24 November 2020.

3.5.2b

Is there evidence that senior leaders (president or ministers) have shared misinformation or disinformation on infectious diseases in the past two years?

No = 1, Yes = 0

Current Year Score: 0

There is evidence of Poland's senior leaders sharing misinformation or disinformation on infectious diseases in the past two years. Polish fact-checking website Fakenews.pl has analysed at least two instances where Mateusz Morawiecki, the Polish prime minister, shared fake news. [1, 2] Firstly, in a speech on 27 March 2020, Morawiecki claimed that the European Union (EU) had "not yet given a cent to fight the coronavirus". In reality, the day before, on 26 March, at its plenary session, the EU had redirected EUR 37 billion (USD 44 billion) of its funds to purchase medical equipment and deal with the socio-economic impact of the crisis caused by the coronavirus epidemic, of which Poland received EUR 7.4 billion (USD 8.8 billion). [1] Secondly, in July 2020 Morawiecki claimed that coronavirus was "in retreat" and encouraged people (especially the elderly) to participate in elections. [2] In reality, there was no clear downtrend in coronavirus cases in Poland at the time. [2]

[1] Fakenews.pl. 2020. Morawiecki: "The European Union did not give a cent to fight the coronavirus." It's not true ("Morawiecki: „Unia Europejska nie dała eurocenta na walkę z koronawirusem”. To nieprawda")

[<https://fakenews.pl/polityka/morawiecki-unia-europejska-nie-dala-eurocenta-na-walke-z-koronawirusem-to-nieprawda/>] Accessed on 26 October 2020.

[2] Fakenews.pl. 2020. Morawiecki: "coronavirus in retreat". We check the prime minister's words. ("Morawiecki: „koronawirus w odwrocie”. Sprawdzamy słowa premiera.") [<https://fakenews.pl/polityka/morawiecki-koronawirus-w-odwrocie-sprawdzamy-slowa-premiera/>] Accessed on 26 October 2020.

3.6 ACCESS TO COMMUNICATIONS INFRASTRUCTURE

3.6.1 Internet users

3.6.1a

Percentage of households with Internet

Input number

Current Year Score: 84.52

2019

International Telecommunication Union (ITU)

3.6.2 Mobile subscribers

3.6.2a

Mobile-cellular telephone subscriptions per 100 inhabitants

Input number

Current Year Score: 137.96

2019

International Telecommunication Union (ITU)

3.6.3 Female access to a mobile phone

3.6.3a

Percentage point gap between males and females whose home has access to a mobile phone

Input number

Current Year Score: 0

2019

Gallup; Economist Impact calculation

3.6.4 Female access to the Internet

3.6.4a

Percentage point gap between males and females whose home has access to the Internet

Input number

Current Year Score: 6.0

2019

Gallup; Economist Impact calculation

3.7 TRADE AND TRAVEL RESTRICTIONS

3.7.1 Trade restrictions

3.7.1a

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of medical goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak?

Yes = 0, No = 1

Current Year Score: 0

There is evidence that Poland, in the past year, has issued a restriction, without international/bilateral support, on the export/import of medical goods (e.g. medicines, oxygen, medical supplies, PPE) due to an infectious disease outbreak. On 14 March 2020, in light of the pandemic, the European Union (EU), of which Poland is a member, adopted Regulation 2020/402, under which special authorization was required to export personal protective equipment (masks, gloves, goggles, face shields and overalls) out of the EU. [1] On 23 April 2020 this was superseded by a new regulation, numbered 2020/568, under which authorization was required to export personal protective equipment out of the EU, except to Albania, Andorra, Bosnia, the Faroe Islands, Gibraltar, Iceland, Kosovo, Liechtenstein, Montenegro, Norway, North Macedonia, San Marino, Serbia and Switzerland. [2] Further, the World Trade Organisation's "COVID-19: Measures affecting trade in goods" list also notes the "Announcement of the Minister of Health, regarding the list of medicinal products, foodstuffs for particular nutritional uses

and medical devices threatened by lack of availability on the territory of Poland. Measure last time updated by: ANNOUNCEMENT OF THE MINISTER OF HEALTH of 11 March 2021 regarding the list of medicinal products, foodstuffs for particular nutritional uses and medical devices threatened by lack of availability on the territory of the Republic of Poland". [3]

[1] European Commission. Commission Implementing Regulation (EU) 2020/402 of 14 March 2020. "Making the exportation of certain products subject to the production of an export authorisation." [<https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32020R0402>]. Accessed 7 August 2020.

[2] European Commission. Commission Implementing Regulation (EU) 2020/568 of 23 April 2020. "Making the exportation of certain products subject to the production of an export authorisation." [<https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32020R0568>]. Accessed 7 August 2020.

[3] World Trade Organisation. June 4, 2021. "COVID-19: Measures affecting trade in goods". [https://www.wto.org/english/tratop_e/covid19_e/trade_related_goods_measure_e.htm] Accessed June 24, 2021.

3.7.1b

In the past year, has the country issued a restriction, without international/bilateral support, on the export/import of non-medical goods (e.g. food, textiles, etc) due to an infectious disease outbreak?

Yes = 0, No = 1

Current Year Score: 1

There is no evidence that, in the past year, Poland has implemented a ban without international or bilateral support on non-medical goods due to an infectious disease outbreak. Due to the coronavirus outbreak, the Polish government initially closed its borders to foreigners in March 2020, but cargo transport remained unaffected. [1] Poland followed European Union guidelines on import and export restrictions during the COVID-19 outbreak [2,3]. The Central Statistical Office announced that the borders for trade were open during the COVID-19 outbreak. [4] The websites of the Ministry of Health, Ministry of Agriculture and the Ministry of Foreign Affairs provided no additional evidence. [5,6,7]

[1] The Official Website of the Republic of Poland. 2020. We are closing borders against the coronavirus ("Zamykamy granice przed koronawirusem") [<https://www.gov.pl/web/koronawirus/zamykamy-granice-przed-koronawirusem>] Accessed on 26 October 2020.

[2] Tax Service. 2020. Covid-19. [<https://www.podatki.gov.pl/clo/covid-19-clo/>] Accessed on 26 October 2020.

[3] KPMG. 2020. Poland: Government and institution measures in response to COVID-19. [<https://home.kpmg/xx/en/home/insights/2020/04/poland-government-and-institution-measures-in-response-to-covid.html>] Accessed on 26 October 2020.

[4] Business Insider. 2020. GUS: PLN 3.5 billion foreign trade surplus ("GUS: 3,5 mld zł nadwyżki w handlu zagranicznym"). [<https://businessinsider.com.pl/finanse/handel/handel-zagraniczny-polski-i-kwartal-2020-dane-gus/hcwe8z6#:~:text=GUS%3A%203%2C5%20mld%20z%C5%82%20nadwy%C5%BCki%20w%20handlu%20zagranicznym&text=Dodano%2C%20%20obroty%20towarowe%20handlu,spad%C5%82%20o%200%2C4%20proc.>] Accessed on 26 October 2020.

[5] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>] Accessed on 24 November 2020.

[6] Ministry of Agriculture. 2020. [<https://www.gov.pl/web/rolnictwo>] Accessed on 24 November 2020.

[7] Ministry of Foreign Affairs. 2020. [<https://www.gov.pl/web/dyplomacja>] Accessed on 24 November 2020.

3.7.2 Travel restrictions

3.7.2a

In the past year, has the country implemented a ban, without international/bilateral support, on travelers arriving from a specific country or countries due to an infectious disease outbreak?

Yes = 0 , No = 1

Current Year Score: 0

In the past year, Poland has implemented bans on travellers arriving from specific countries, without international or bilateral support, due to an infectious disease outbreak. Due to the COVID-19 outbreak, Poland banned entry into the country for all people without Polish citizenship from 15 March 2020 until 13 June 2020, when it allowed entry to citizens and residents of other European Union (EU) countries [1, 2, 3]. In addition, on 17 March 2020 the 27 member states of the EU decided to ban entry into the EU from all other countries (except for EU citizens, British citizens and people who live in the EU or the United Kingdom) [4]. Since then the EU ban has been periodically reviewed, and entry has been allowed from certain countries. [5, 6]

[1] The Official Website of the Republic of Poland. 2020. We are closing borders against the coronavirus ("Zamykamy granice przed koronawirusem") [<https://www.gov.pl/web/koronawirus/zamykamy-granice-przed-koronawirusem>] Accessed on 26 October 2020.

[2] The Official Website of the Republic of Poland. 2020. Information for travellers ("Informacje dla podróżujących") [<https://www.gov.pl/web/koronawirus/informacje-dla-podrozujacych>] Accessed on 26 October 2020.

[3] Headquarters of the border guard. 2020. Outbreak of coronavirus - rules of entry and stay on the territory of the Republic of Poland/ [<https://www.strazgraniczna.pl/pl/cudzoziemcy/covid-epidemia-koronawi/8578,Outbreak-of-coronavirus-rules-of-entry-and-stay-on-the-territory-of-the-Republic.html>] Accessed on 26 October 2020.

[4] Deutsche Welle. 18 March 2020. "EU closes borders to foreigners to halt coronavirus spread: What to know." [<https://www.dw.com/en/eu-closes-borders-to-foreigners-to-halt-coronavirus-spread-what-to-know/a-52824499>]. Accessed on 26 October 2020.

[5] Deutsche Welle. 30 June 2020. "EU agrees to reopen borders to 14 countries, extends travel ban for US tourists." [<https://www.dw.com/en/eu-agrees-to-reopen-borders-to-14-countries-extends-travel-ban-for-us-tourists/a-53986435>]. Accessed on 26 October 2020.

[6] European Commission, 2020. Travel during the coronavirus pandemic. [https://ec.europa.eu/info/live-work-travel-eu/health/coronavirus-response/travel-during-coronavirus-pandemic_en] Accessed on 26 October 2020.

Category 4: Sufficient and robust health sector to treat the sick and protect health workers

4.1 HEALTH CAPACITY IN CLINICS, HOSPITALS, AND COMMUNITY CARE CENTERS

4.1.1 Available human resources for the broader healthcare system

4.1.1a

Doctors per 100,000 people

Input number

Current Year Score: 237.88

2017

WHO; national sources

4.1.1b

Nurses and midwives per 100,000 people

Input number

Current Year Score: 689.26

2018

WHO; national sources

4.1.1c

Does the country have a health workforce strategy in place (which has been updated in the past five years) to identify fields where there is an insufficient workforce and strategies to address these shortcomings?

Yes = 1 , No = 0

Current Year Score: 0

Poland has health workforce strategies in place to identify and address workforce shortcomings, but they have not been updated in the past 5 years. Poland has a number of valid national plans to identify and address workforce insufficiencies, including the National Strategic Framework / Policy Paper for Public Healthcare for the Period 2014–2020, published in July 2015, the Long-Term National Development Plan 2030 – Human Resources Development, published in October 2010, and Poland 2030: Development Challenges, published in 2009. [1, 2, 3] Each of these documents provides statistics on the public healthcare workforce and identifies and addresses shortcomings in public healthcare staff. [1, 2, 3] There are also local development strategies containing sections on public healthcare workforce shortcomings, such as the Kielecki Commune Development Strategy by 2020, updated in February 2017, but these appear to apply only at the local level. [4] There are also regional development strategies containing sections on public healthcare workforce shortcomings, including the Kraków Development Strategy 2030 (Strategia Rozwoju Krakowa 2030) published in June 2016, but these apply only at the regional

level. [5] There is no further relevant information on the websites of the Governmental Security Center, the Ministry of Internal Affairs and Administration, the Ministry of National Defence, the Ministry of Family, Labour and Social Policy and the Ministry of Health. [6, 7, 8, 9, 10].

- [1] The Ministry of Health. July 2015. “National Strategic Framework / Policy Paper for public health care for years 2014–2020”. (“Krajowe ramy strategiczne / Policy paper dla ochrony zdrowia na lata 2014–2020”). [http://www.zdrowie.gov.pl/uploads/pub/pages/page_846/text_images/Krajowe%20ramy%20strategiczne%20www.pdf]. Accessed on 26 October 2020.
- [2] Lower Silesian Pedagogical Library in Wrocław (Dolnośląska Biblioteka Pedagogiczna we Wrocławiu). October 2010. “Long-term National Development Plan 2030 – Human Resources Development”. (“Długookresowa Strategia Rozwoju Kraju 2030 – rozwój kapitału ludzkiego”). [https://www.dbp.wroc.pl/biblioteki/wroclaw/images/Biblioteki/DBP-Wroclaw/WSIPO/Dugookresowa_Strategia_Rozwoju_Kraju_2030_-_Rozwj_Kapitau_Spocznego.pdf]. Accessed on 26 October 2020.
- [3] Chancellery of the Prime Minister. (Kancelaria Prezesa Rady Ministrów). 2009. “Poland 2030: Development Challenges”. (“Polska 2030: Wyzwania rozwojowe”). [http://kigeit.org.pl/FTP/PRCIP/Literatura/001_PL_2030_wyzwania_rozwojowe.pdf]. Accessed on 26 October 2020.
- [4] The Kielce Municipality. (Starostwo Powiatowe w Kielcach). February 2017. “Kielecki Commune Development Strategy by 2020”. (“Strategia rozwoju Powiatu Kieleckiego do 2020 r.”). [https://www.powiat.kielce.pl/powiat/strategia_rozwoju_powiatu_kieleckiego_do_2020.html]. Accessed on 26 October 2020.
- [5] The Krakow Municipality. (Miasto Kraków). June 2016 “Kraków Development Strategy 2030”. (“Strategia Rozwoju Krakowa 2030”). [<http://krakow.pl/zalacznik/259487>]. Accessed on 26 October 2020.
- [6] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. [<https://rcb.gov.pl>]. Accessed on 26 October 2020.
- [7] The Ministry of Internal Affairs and Administration. 2020. [<https://www.gov.pl/web/mswia>]. Accessed on 26 October 2020.
- [8] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 26 October 2020.
- [9] The Ministry of Family, Labour and Social Policy. (Ministerstwo Rodziny, Pracy i Polityki Społecznej). 2020. [<https://www.gov.pl/web/rodzina>]. Accessed on 26 October 2020.
- [10] The Ministry of National Defence. 2020. “Recent news”. (“Aktualności”). [<https://www.gov.pl/web/obrona-narodowa/aktualnosc5>]. Accessed on 26 October 2020.

4.1.2 Facilities capacity

4.1.2a

Hospital beds per 100,000 people

Input number

Current Year Score: 654

2018

WHO/World Bank; national sources

4.1.2b

Does the country have the capacity to isolate patients with highly communicable diseases in a biocontainment patient care unit and/or patient isolation room/unit located within the country?

Yes = 1, No = 0

Current Year Score: 1

There is evidence that Poland has at least one facility with the capacity to isolate patients with highly communicable diseases. According to a 2015 interview with Poland's national infectious disease consultant, Andrzej Horban, the Warsaw Regional Infectious Disease Hospital has the capacity to isolate patients with highly infectious diseases such as tuberculosis, ebola or malaria. [1] This is confirmed by the hospital's website, as well as that of the Ministry of Health. [2, 3] The Ministry of Health website reports that the hospital's isolation wards are equipped to guarantee full safety to medical staff, featuring decontamination cabins, vacuum pressure filter systems, special locking systems, and sterilizers. [3] As per article 14 of the Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans, all healthcare units in Poland are required to "implement and ensure the functioning of a system for preventing and combating infections, including providing conditions of isolation of patients with infectious or contagious disease and patients particularly susceptible to nosocomial infections". [4] Detailed requirements as to the layout and devices that must be provided in an isolation unit are set out in article 21.1 of the Health Minister's Decree of 26 June 2012 on Detailed Requirements to be Complied with by the Premises and Equipment of the Entity Performing Medical Activity, which outlines that, for example, infectious disease hospitals need to have at least 3 isolation wards. [5] As prompted by the COVID-19 outbreak, the Ministry of Health has implemented new strategies to combat the disease, including a new three-tier plan for hospitals, which includes isolation guidelines. [6] Neither the Ministry of Health website nor the websites of any of Poland's largest hospitals provide any evidence that such isolation capacity actually exists in facilities other than the Warsaw Regional Infectious Disease Hospital, however. [7,8,9,10,11]

[1] Rzeczpospolita daily. 2015. "Professor Andrzej Horban: You no longer have to run from Ebola". ("Prof. Andrzej Horban: Juz nie trzeba uciekac przed ebola"). [<https://www.rp.pl/artykul/1176363-Prof--Andrzej-Horban--Juz-nie-trzeba-uciekac-przed-ebola.html>]. Accessed on 26 October 2020.

[2] Warsaw Regional Infectious Disease Hospital. 2019. "Activities of the Hospital". ("DZIALALNOSC SZPITALA"). [<http://zakazny.pl/dzialalnosc-szpitala/>]. Accessed on 26 October 2020.

[3] The Ministry of Health. 2015. "Almost 800 thousand zloty for the modernisation of the isolation units at the Warsaw Regional Infectious Disease Hospital". ("Blisko 800 tys. zl na zmodernizowanie izolatoriÅ3w WojewÅ3dzkiego Szpitala Zakaznego w Warszawie"). [<http://www.archiwum.mz.gov.pl/aktualnosci/blisko-800-tys-zl-przeznaczone-na-zmodernizowanie-izolatoriow-wojewodzkiego-szpitala-zakaznego-w-warszawie/>]. Accessed on 26 October 2020.

[4] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakazen i chorÅ3b zakaznych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 26 October 2020.

[5] Polish Parliament. 2012. "Health Minister's Decree of 26 June 2012 on detailed requirements to be complied with by the premises and equipment of the entity performing the medical activity". ("Rozporzadzenie Ministra Zdrowia z dnia 26 czerwca 2012 r. w sprawie szczegÅ3lowych wymagan, jakim powinny odpowiadac pomieszczenia i urzadzenia podmiotu wykonujacego dzialalnosc lecznicza"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20120000739>]. Accessed on 26 October 2020.

[6] Ministry of Health. 2020. Fall strategy to combat the coronavirus epidemic. ("Jesienna strategia walki z epidemiÅ3... koronawirusa"). [<https://www.gov.pl/web/zdrowie/jesienna-strategia-walki-z-epidemia-koronawirusa>] Accessed on 26 October 2020.

[7] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 26 October 2020.

[8] University Hospital Krakow. 2020. [<http://www.su.krakow.pl>]. Accessed 26 October 2020.

[9] Professor K. Gibinski University Clinical Centre Katowice. 2020. [<https://www.uck.katowice.pl>]. Accessed 26 October 2020.

[10] 10th Military Research Hospital and Polyclinic Bydgoszcz. 2020. [<http://www.10wsk.mil.pl/en/>]. Accessed 26 October 2020.

[11] MSWiA Central Clinical Hospital Warsaw. 2020. [<https://cskmswia.pl>]. Accessed on 26 October 2020.

4.1.2c

Does the country meet one of the following criteria?

- Is there evidence that the country has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years?

- Is there evidence that the country has developed, updated or tested a plan to expand isolation capacity in response to an infectious disease outbreak in the past two years?

Yes = 1, No = 0

Current Year Score: 0

In the past two years, there is no evidence that Poland has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak, or that it has developed, updated or tested a plan to expand isolation capacity. There is no such evidence on the websites of the Ministry of Health or any of Poland's largest hospitals. [1, 2, 3, 4, 5]

[1] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 26 October 2020.

[2] University Hospital Krakow. 2020. [<http://www.su.krakow.pl>]. Accessed 26 October 2020.

[3] Professor K. Gibinski University Clinical Centre Katowice. 2020. [<https://www.uck.katowice.pl>]. Accessed 26 October 2020.

[4] 10th Military Research Hospital and Polyclinic Bydgoszcz. 2020. [<http://www.10wsk.mil.pl/en/>]. Accessed 26 October 2020.

[5] MSWiA Central Clinical Hospital Warsaw. 2020. [<https://cskmswia.pl>]. Accessed on 26 October 2020.

4.2 SUPPLY CHAIN FOR HEALTH SYSTEM AND HEALTHCARE WORKERS

4.2.1 Routine health care and laboratory system supply

4.2.1a

Is there a national procurement protocol in place which can be utilized by the Ministries of Health and Agriculture for the acquisition of laboratory supplies (e.g. equipment, reagents and media) and medical supplies (e.g. equipment, PPE) for routine needs?

Yes for both laboratory and medical supply needs = 2, Yes, but only for one = 1, No = 0

Current Year Score: 2

There is a national procurement protocol in place in Poland, which can be utilized by the ministries responsible for health and agriculture for the acquisition of laboratory needs and medical supplies. As per several national laws, all Polish ministries establish their own internal units responsible for the procurement of necessary goods and services. [1, 2, 3] As per the Decree of 16 June 2010 on the Ministry of Health's Public Procurement Department, the Ministry of Health has implemented its own internal organizational unit called the Public Procurement Department, which is responsible for the procurement of goods and services for the Ministry of Health and its sub-units (including the procurement of laboratory goods). [4] The Decree includes "organizing public procurement procedures for the supply of goods, including medical devices and medicinal products" in its scope of activity [4]. All public entities financed from public funds, including diagnostic laboratories, are

required to follow the procedural guidelines outlined in the Public Procurement Law when organising a public tender, including for the acquisition of laboratory equipment. Examples of equipment procurement for publicly funded laboratories through the public procurement procedure include the acquisition of laboratory equipment by the Regional Environment Protection Inspectorate in Poznań, the Department of Veterinary Hygiene in Warsaw, and the Regional Sanitary Inspectorate in Rzeszów. [5, 6, 7] As for the Ministry of Agriculture and Rural Development, the ministry does have its own internal department responsible for public procurement (the Public Procurement Department, which is an organisational sub-unit of the ministry's Director General's Office), but the laboratories operating within the National Veterinary Research Institute in Puławy which fall under the jurisdiction of the Ministry of Agriculture and Rural Development use the Institute's own internal Department of Public Procurement and Supply of the National Veterinary Research Institute in Puławy for public lab equipment tenders. [8]

[1] Polish Parliament. 2004. "Act of 29 January 2004 on Public Procurement" („ustawa z dnia 29 stycznia 2004 r. Prawo zamówień publicznych”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040190177>]. Accessed on 27 October 2020

[2] Polish Parliament. 2009. Act of 27 August 2009 on public finances (ustawa z dnia 27 sierpnia 2009 r. o finansach publicznych. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20091571240>]. Accessed on 27 October 2020

[3] Polish Parliament. 1996. Act of 8 August 1996 on the Ministers' Council (ustawa z dnia 8 sierpnia 1996 r. o Radzie Ministrów). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU19961060492>]. Accessed on 27 October 2020

[4] Infor.pl. 2010. Decree of 16 June 2010 on the Ministry of Health's Public Procurement Department (Zarządzenie Ministra Zdrowia z dnia 16 czerwca 2010 r. w sprawie Zakładu Zamówień Publicznych przy Ministrze Zdrowia).

[<https://www.infor.pl/akt-prawny/U04.2010.008.0000052,zarzadzenie-ministra-zdrowia-w-sprawie-zakladu-zamowien-publicznych-przy-ministrze-zdrowia.html>]. Accessed on 27 October 2020

[5] Regional Environment Protection Inspectorate in Poznań (Wojewódzki Inspektorat Ochrony Środowiska w Poznaniu). August 2007. "Supply of laboratory equipment to the Regional Environment Protection Inspectorate in Poznań and Delegations in Kalisz, Leszno and Pila". ("Dostawa sprzętu laboratoryjnego do Wojewódzkiego Inspektoratu Ochrony Środowiska w Poznaniu i Delegatur w Kaliszu, Lesznie i Pile"). [<http://poznan.wios.gov.pl/przetargi/200713/specyfikacja.pdf>]. Accessed on 27 October 2020

[6] Regional Veterinary Inspectorate in Siedlce (Wojewódzki Inspektorat Weterynarii w Siedlcach). "Supply of laboratory equipment for the Department of Veterinary Hygiene in Warsaw". ("Dostawa sprzętu laboratoryjnego dla Zakładu Higieny Weterynaryjnej w Warszawie"). [<http://www.bip.wiw.mazowsze.pl/wiw/zamowienia-publiczne-1/8969,Dostawa-sprzetu-laboratoryjnego-dla-Zakladu-Higieny-Weterynaryjnej-w-Warszawie.html>]. Accessed on 27 October 2020

[7] Regional Sanitary Inspectorate in Rzeszów (Wojewódzka Stacja Sanitarno-Epidemiologiczna w Rzeszowie. May 2018. "PURCHASE OF LABORATORY EQUIPMENT FOR THE REGIONAL SANITARY INSPECTORATE IN RZESZOW". ("ZAKUP SPRZETU LABORATORYJNEGO DLA WOJEWÓDZKIEJ STACJI SANITARNO -EPIDEMIOLOGICZNEJ W RZESZOWIE"). [<https://wsse.rzeszow.pl/zamowienia/zakup-sprzetu-laboratoryjnego-dla-wojewodzkiej-stacji-sanitarno-epidemiologicznej-w-rzeszowie>]. Accessed on 27 October 2020

[8] The National Veterinary Research Institute in Puławy. (Państwowy Instytut Weterynaryjny - Państwowy Instytut Badawczy w Puławach. 2020. [<http://zampub.piwet.pulawy.pl/index.php/zamowienia-publiczne-mainmenu-9/przetargi-mainmenu-28>]. Accessed on 27 October 2020

4.2.2 Stockpiling for emergencies

4.2.2a

Does the country have a stockpile of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

Current Year Score: 2

Poland has stockpiles of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for national use during a public health emergency. As per the Health Minister's Decree of 28 June 2010 on the Creation of the Central Medical and Sanitary Countermeasures Reserves Agency (CMSCRA), the CMSCRA's task is "stockpiling and distribution of equipment, disinfectants, glass, other medical and laboratory measures, and educational materials, intended to be used either during an epidemic or simply to maintain the country's proper sanitary standards." This includes protective laboratory equipment, vaccines, and more. [1] In attachment no. 2 of the Decree, point 6e explicitly mentions personal protective equipment (PPE), including masks, coveralls, shoe covers and gloves. [1] Moreover, one of the sub-units of the CMSCRA includes Pharmaceutical Wholesaler of Sera and Vaccinations, which has amongst other tasks stockpiling vaccines. [1] Furthermore, article 4 of the Act of 29 October 2010 on Strategic Reserves makes provision for inclusion of medical reserves. [2] These include drugs, sera and vaccines, disinfectants, dressings and bandages, protective clothing, disposable medical devices, medical equipment, and accommodation equipment. [3]

[1] Wolters Kluwer. 2020. "The Health Minister's Decree of 28 June 2010 on the creation of the Central Medical and Sanitary Countermeasures Reserves Agency". ("Zarządzenie Ministra Zdrowia z dnia 28 czerwca 2010 r. w sprawie Centralnej Bazy Rezerw Sanitarno-Przeciwepidemicznych"). [<https://sip.lex.pl/akty-prawne/dzienniki-resortowe/centralna-baza-rezerw-sanitarno-przeciwepidemicznych-34410591>]. Accessed on 29 October 2020.

[2] Polish Parliament. 2010. The Act of October 29, 2010 on strategic reserves ("Ustawa z dnia 29 października 2010 r. o rezerwach strategicznych") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20102291496>]. Accessed on 29 October 2020.

[3] Material Reserves Agency. 2020. Medical reserves ("Rezerwy medyczne"). [<https://arm.gov.pl/index.php?dz=rezerwy-medyczne>] Accessed on 29 October 2020.

4.2.2b

Does the country have a stockpile of laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Yes = 2, Yes, but there is limited evidence about what the stockpile contains = 1, No = 0

Current Year Score: 2

Poland has stockpiles of laboratory supplies for national use during a public health emergency. As per the Health Minister's Decree of 28 June 2010 on the Creation of the Central Medical and Sanitary Countermeasures Reserves Agency (CMSCRA), the CMSCRA's task is "stockpiling and distribution of equipment, disinfectants, glass, other medical and laboratory measures, and educational materials, intended to be used either during an epidemic or simply to maintain the country's proper sanitary standards." This includes protective laboratory equipment, vaccines, and more. [1] In attachment no.2 of the Decree, point 6b explicitly mentions the inclusion of laboratory glass and laboratory equipment. [1] Furthermore, article 4 of the Act of 29 October 2010 on Strategic Reserves makes provision for inclusion of medical reserves including medicinal products. [2] These include drugs, sera and vaccines, disinfectants, dressings and bandages, protective clothing, disposable medical devices, medical equipment, and accommodation equipment. [3]

[1] Wolters Kluwer. 2020. "The Health Minister's Decree of 28 June 2010 on the creation of the Central Medical and Sanitary Countermeasures Reserves Agency". ("Zarządzenie Ministra Zdrowia z dnia 28 czerwca 2010 r. w sprawie Centralnej Bazy Rezerw Sanitarno-Przeciwepidemicznych"). [<https://sip.lex.pl/akty-prawne/dzienniki-resortowe/centralna-baza-rezerw-sanitarno-przeciwepidemicznych-34410591>]. Accessed on 29 October 2020.

[2] Polish Parliament. 2010. The Act of October 29, 2010 on strategic reserves ("Ustawa z dnia 29 października 2010 r. o rezerwach strategicznych") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20102291496>]. Accessed on 29 October

2020.

[3] Material Reserves Agency. 2020. Medical reserves ("Rezerwy medyczne"). [<https://arm.gov.pl/index.php?dz=rezerwy-medyczne>] Accessed on 29 October 2020.

4.2.2c

Is there evidence that the country conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Poland conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency. There is no mention of periodic reviews in the Health Minister's Decree of 28 June 2010 on the Creation of the Central Medical and Sanitary Countermeasures Reserves Agency or the Act of 29 October 2010 on Strategic Reserves. [1, 2] There is no evidence of periodic reviews on the websites of the Government Agency for Strategic Reserves or the Ministry of Health. [3, 4]

[1] Wolters Kluwer. 2020. "The Health Minister's Decree of 28 June 2010 on the creation of the Central Medical and Sanitary Countermeasures Reserves Agency". ("Zarządzenie Ministra Zdrowia z dnia 28 czerwca 2010 r. w sprawie Centralnej Bazy Rezerw Sanitarno-Przeciwpidemicznych"). [<https://sip.lex.pl/akty-prawne/dzienniki-resortowe/centralna-baza-rezerw-sanitarno-przeciwpidemicznych-34410591>]. Accessed on 29 October 2020.

[2] Polish Parliament. 2010. The Act of October 29, 2010 on strategic reserves ("Ustawa z dnia 29 października 2010 r. o rezerwach strategicznych") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20102291496>]. Accessed on 29 October 2020.

[3] Government Agency for Strategic Reserves. [<https://www.rars.gov.pl/>] Accessed on 4 May 2021.

[4] Ministry of Health. [<https://www.gov.pl/web/zdrowie>]. Accessed on 4 May 2021.

4.2.3 Manufacturing and procurement for emergencies

4.2.3a

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?
- Is there evidence of a plan/mechanism to procure medical supplies (e.g. MCMs, medicines, vaccines, equipment, PPE) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 1

There is no evidence that Poland has a plan or agreement to leverage domestic manufacturing capacity to produce medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for a national use during a public health emergency, but there is evidence of a plan to procure medical supplies during a public health emergency. The Health Minister's Decree of 28 June 2010 on the Creation of the Central Medical and Sanitary Countermeasures Reserves Agency (CMSCRA) stipulates that the CMSCRA's main tasks are stockpiling and distribution of medical reserves, but it does not mention manufacturing. [1] However, Task no. 8 of CMSCRA is "purchasing, on behalf of and in accordance with the conditions specified by the Minister of Health, for further distribution, of medicinal products, medical devices, personal protective equipment (PPE) or other articles necessary to combat infections and infectious diseases in humans, in connection with the announcement of an

epidemic threat or epidemic status". [1]. Moreover, Poland is part of the European Union's Joint Procurement Agreement, which aims to "secure more equitable access to specific medical countermeasures and an improved security of supply, together with more balanced prices for the participating EU countries", by ensuring the availability to acquire vaccines, antivirals and medical countermeasures for serious cross-border threats to health [2]. Furthermore, article 13 of the Act of 29 October 2010 on Strategic Reserves stipulates that, during an epidemic or public health emergency, the Material Reserves Agency "makes purchases of a specified number of assortments for reserves with Ministry of Health's priority over other entities" [3]. Article 14 of this act states that additional reserves beyond the original scope of the program might be created during an epidemic. [3]

[1] Wolters Kluwer. 2020. "The Health Minister's Decree of 28 June 2010 on the creation of the Central Medical and Sanitary Countermeasures Reserves Agency". ("Zarządzenie Ministra Zdrowia z dnia 28 czerwca 2010 r. w sprawie Centralnej Bazy Rezerw Sanitarno-Przeciwepidemicznych"). [<https://sip.lex.pl/akty-prawne/dzienniki-resortowe/centralna-baza-rezerw-sanitarno-przeciwepidemicznych-34410591>]. Accessed on 29 October 2020

[2] European Commission. "Joint Procurement of medical countermeasures". [https://ec.europa.eu/health/preparedness_response/joint_procurement_en]. Accessed 29 October 2020.

[3] Polish Parliament. 2010 The Act of October 29, 2010 on strategic reserves ("Ustawa z dnia 29 października 2010 r. o rezerwach strategicznych") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20102291496>]. Accessed on 29 October 2020.

4.2.3b

Does the country meet one of the following criteria?

- Is there evidence of a plan/agreement to leverage domestic manufacturing capacity to produce laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

- Is there evidence of a plan/mechanism to procure laboratory supplies (e.g. reagents, media) for national use during a public health emergency?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is no evidence that Poland has a plan or agreement to leverage domestic manufacturing capacity to produce laboratory supplies, or to procure them, for national use during a public health emergency. The Health Minister's Decree of 28 June 2010 on the Creation of the Central Medical and Sanitary Countermeasures Reserves Agency (CMSCRA) stipulates that the CMSCRA's main tasks are stockpiling and distribution of medical reserves including laboratory equipment, but it does not mention manufacturing. [1] Task no.8 of CMSCRA is "purchasing, on behalf of and in accordance with the conditions specified by the Minister of Health, for further distribution, of medicinal products, medical devices, personal protective equipment (PPE) or other articles necessary to combat infections and infectious diseases in humans, in connection with the announcement of an epidemic threat or epidemic status", but laboratory equipment is not explicitly mentioned. [1] Distribution of apparatus, disinfectants and other laboratory resources is mentioned as part of the tasks of the CMSCRA's sub-units called Purchasing Department, Investment Coordination, Storage of Disinfectants and Reserves, but scaling up production or procurement is not mentioned. [1] The Act of October 29, 2010 on strategic reserves does not explicitly mention scaling up production nor procurement of laboratory equipment during a public health emergency [2]

[1] Wolters Kluwer. 2020. "The Health Minister's Decree of 28 June 2010 on the creation of the Central Medical and Sanitary Countermeasures Reserves Agency". ("Zarządzenie Ministra Zdrowia z dnia 28 czerwca 2010 r. w sprawie Centralnej Bazy Rezerw Sanitarno-Przeciwepidemicznych"). [<https://sip.lex.pl/akty-prawne/dzienniki-resortowe/centralna-baza-rezerw-sanitarno-przeciwepidemicznych-34410591>]. Accessed on 29 October 2020

[2] Polish Parliament. 2010. The Act of October 29, 2010 on strategic reserves ("Ustawa z dnia 29 października 2010 r. o

rezerwach strategicznych") [<https://isap.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20102291496>]. Accessed on 29 October 2020.

4.3 MEDICAL COUNTERMEASURES AND PERSONNEL DEPLOYMENT

4.3.1 System for dispensing medical countermeasures (MCM) during a public health emergency

4.3.1a

Does the country have a plan, program, or guidelines in place for dispensing medical countermeasures (MCM) for national use during a public health emergency (i.e., antibiotics, vaccines, therapeutics and diagnostics)?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence that Poland has guidelines in place for dispensing medical countermeasures for national use during a public health emergency. Applicable legislation only contains provisions detailing the procedures for distributing medical countermeasures during a public health emergency from the central reserve agency (Agencja Rezerw Materialowych) to the applying entity, but does not provide any guidelines as to how the applying entity is to dispense them to the end user. The Act of 29 October 2010 on Strategic Reserves provides for the creation of a central reserves agency, and also contains provisions detailing procedures for distributing reserve materials to applying entities. Its 19th article specifies that it is up to the applying entity to "dispense the strategic reserves to the end receivers", but it does not specify the method of dispensing. [1] The National Crisis Management Plan (part A, page 66) does note that in case of an epidemic, the Central Reserves Agency is to support the health minister and the sanitary inspectorates by making medical countermeasures available to them, but it states directly that the "reception, transport, dispensing, storage and the proper preparation of the reserves for further use is up to the applying entity", with, no more details on how such dispensing should be organized. [2] The Health Minister's Decree of 28 June 2006 on the Creation of the Central Medical and Sanitary Countermeasures Reserves Agency does state that the Agency's tasks include the storage, securing and distribution of vaccines and other medical countermeasures to prevent and combat public health emergencies, including those caused by infectious diseases, but it contains no more detailed guidelines on how such distribution is to be carried out or even whether it should also involve dispensing the countermeasures to end users. [3] Regional Crisis Management Plans do note that in case of an epidemic, the governor may apply to either the Central Reserves Agency or the Central Medical and Sanitary Countermeasures Reserves Agency and requisition them to release medical countermeasures, but they provide no guidelines on how the countermeasures should be delivered to the end user. The Lesser Poland Plan merely notes that any medical countermeasures obtained from the Central Medical and Sanitary Countermeasures Reserves Agency during an epidemic are to be kept by the sanitary inspectorates and released to local public health facilities upon their request. [4, 5] The Health Minister's Decree of 29 March 2017 on the Provision of Vaccines and Other Immunological Medicinal Products Used in the Event of an Epidemic provide the legal and operational framework for dispensing "vaccines and other immunological medicinal products" in the event of a public health emergency. [1] The Decree provides legal provisions applicable to the composition, size and manner of storing the reserves of vaccines and other immunological medicinal products used in the event of an epidemic, as well as details on when the reserves are to be released, the method of distribution of medicinal products released from the reserve, but does not mention anything about dispensing them to end users. [6] The websites of the Ministry of Health, the Ministry of Internal Affairs and Administration, the Ministry of National Defence, and the Governmental Security Center contain no further relevant information. [7, 8, 9, 10]

[1] Polish Parliament. 2018. "Act of 29 October 2010 on strategic reserves. ("Ustawa z dnia 29 października 2010 r. o rezerwach strategicznych"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20102291496>]. Accessed on 27

October 2020.

[2] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2020, Część A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf>]. Accessed on 27 October 2020.

[3] Wolters Kluwer. 2019. "The Health Minister's Decree of 28 June 2006 on the creation of the Central Medical and Sanitary Countermeasures Reserves Agency". ("Zarządzenie Ministra Zdrowia z dnia 28 czerwca 2006 r. w sprawie Centralnej Bazy Rezerw Sanitarno-Przeciwepidemicznych"). [<https://sip.lex.pl/akty-prawne/dzienniki-resortowe/centralna-baza-rezerw-sanitarno-przeciwepidemicznych-34066381>]. Accessed on 27 October 2020.

[4] Public Information Bulletin (Biuletyn Informacji Publicznej). 2018. "Regional Action Plan in case of an epidemic" ("Wojewódzki plan działania na wypadek wystąpienia epidemii"). [<https://bip.malopolska.pl/muw,a,14090,wojewodzki-plan-dzialania-na-wypadek-wystapienia-epidemii.html>]. Accessed on 27 October 2020.

[5] Lodz Province Office. (Łódzki Urząd Wojewódzki). 2015. "Regional Action Plan in case of an epidemic" ("Wojewódzki plan działania na wypadek wystąpienia epidemii").

[https://www.lodzkie.eu/data/other/wojewodzki_plan_dzialania_na_wypadek_wys.pdf]. Accessed on 27 October 2020.

[6] Polish Parliament. 2017. "The Health Minister's Decree of 29 March 2017 on the provision of vaccines and other immunological medicinal products used in the event of an epidemic". ("Rozporządzenie Ministra Zdrowia z dnia 29 marca 2017 r. w sprawie rezerwy szczepionek oraz innych immunologicznych produktów leczniczych, stosowanych w razie wystąpienia zagrożenia epidemicznego lub epidemii").

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20170000735>]. Accessed on 27 October 2020.

[7] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 27 October 2020.

[8] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. [<https://rcb.gov.pl>]. Accessed on 27 October 2020.

[9] Ministry of Internal Affairs and Administration. 2020. [<https://www.gov.pl/web/mswia>]. Accessed on 27 October 2020.

[10] Ministry of National Defence. 2020. "Recent news". ("Aktualności"). [<https://www.gov.pl/web/obrona-narodowa/aktualnosci5>]. Accessed on 27 October 2020.

4.3.2 System for receiving foreign health personnel during a public health emergency

4.3.2a

Is there a public plan in place to receive health personnel from other countries to respond to a public health emergency?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of a mechanism in place to receive health personnel from other countries to respond to public health emergencies. On 22 October 2020, the Polish Parliament accepted adjustments to the Act of 5 December 1996 on the Professions of Doctor and Dentist, adding a clause in Chapter 2: "The right to practice as a doctor, which includes accepting medical diplomas of doctors from outside of EU contingent on the fact that the diploma is accepted by Poland and is up to the EU standards or proof of completing Medical Verification Examination". The changes in requirements will be legal from 1 January 2021. [1,2,3] Media outlets claim that this is aimed at attracting doctors from the east, mainly Ukraine and Belarus. [4,5] Furthermore, there are a number of agreements in place enabling Poland to request personnel. As an EU member, Poland has access to the European Centre for Disease Prevention and Control, which, among other things, provides support during public health emergencies [6,7]. Poland participates in the EU Civil Protection Mechanism and the European Emergency Response Capacity. [8] The mechanism was set up to enable coordinated assistance from the participating states to victims of natural and man-made disasters in Europe and elsewhere. [9] The European Emergency Response Capacity (EERC) brings together resources from 23 participating states, ready for when the next disaster strikes. These resources can

be rescue or medical teams, experts, specialised equipment or transportation. [10] However, there is no evidence of provisions for facilitating the arrival and movement of foreign medical personnel during a public health emergency on the websites of the Ministry of Health, the Ministry of National Defense, the Ministry of Internal Affairs and Administration, or the Governmental Security Center. [11,12,13,14]

[1] Polish Parliament. 1996. The Act of December 5, 1996 on the Professions of Doctor and Dentist ("Ustawa z dnia 5 grudnia 1996 r. o zawodach lekarza i lekarza dentysty").

[<https://isap.sejm.gov.pl/isap.nsf/download.xsp/WDU19970280152/U/D19970152Lj.pdf>] Accessed on 27 October 2020.

[2] Polish Parliament. 2020. Draft act amending the act on the professions of doctor and dentist and certain other acts ("projekt ustawy - o zmianie ustawy o zawodach lekarza i lekarza dentysty oraz niektórych innych ustaw").

[<http://orka.sejm.gov.pl/Druki9ka.nsf/0/D7FDC1A357FE57C4C12584F6003ABEF4/%24File/172.pdf>] Accessed on 27 October 2020.

[3] Money.pl. 2020. Coronavirus. The Sejm adopted a law simplifying the employment of doctors from outside the EU ("Koronawirus. Sejm przyjął ustawę upraszczającą zatrudnienie lekarzy spoza UE")

[<https://www.money.pl/gospodarka/koronawirus-sejm-przyjal-ustawe-upraszczajaca-zatrudnienie-lekarzy-spoza-ue-6567454523763424a.html>] Accessed on 27 October 2020.

[4] Wprost. 2020. Poland wants to bring in doctors from Belarus and Ukraine. The army and the SP will also join the fight against COVID-19 ("Polska chce sprowadzać lekarzy z Białorusi i Ukrainy. Do walki z COVID-19 włączy też ratowników wojska i SP") [<https://www.wprost.pl/koronawirus-w-polsce/10378666/polska-chce-sprowadzac-lekarzy-z-bialorusi-i-ukrainy-do-walki-z-covid-19-wlacz-tyz-ratownikow-wojska-i-sp.html>] Accessed on 27 October 2020.

[5] Money.pl. 2020. Doctors from Ukraine will get entitlements easier? Trade unions: "verification must be strict". ("Lekarze z Ukrainy łatwiej otrzymają uprawnienia? Związkowcy: "weryfikacja musi być ścisła")

[<https://www.money.pl/gospodarka/lekarze-z-ukrainy-latwiej-otrzymaja-uprawnienia-zwiazkowcy-weryfikacja-musi-byc-scisla-6475380535347329a.html>] Accessed on 27 October 2020.

[6] European Centre for Disease Prevention and Control. "Surveillance and Response Support."

[<https://ecdc.europa.eu/en/about-us/who-we-are/units/surveillance-and-response-support>]. Accessed 27 October 2020.

[7] European Centre for Disease Prevention and Control. "Preparedness." [<https://ecdc.europa.eu/en/about-us/what-we-do/preparedness>]. Accessed 27 October 2020.

[8] European Emergency Response Coordination Centre. "Emergency Response Coordination Centre (ERCC) – DG ECHO Daily Map | 27/06/2017/European Emergency Response Capacity".

[https://erccportal.jrc.ec.europa.eu/ERCmaps/20170627_DailyMap_EERC_GeneralOverview.pdf]. Accessed on 127 October 2020.

[9] European Commission. 2020. "EU Civil Protection Mechanism". [http://ec.europa.eu/echo/what/civil-protection/mechanism_en]. Accessed on 127 October 2020.

[10] European Commission. 2020. "European Emergency Response Capacity". [https://ec.europa.eu/echo/what/civil-protection/european-emergency-response-capacity_en]. Accessed on 27 October 2020.

[11] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>] Accessed on 26 November 2020.

[12] Ministry of National Defence. 2020. [<https://www.gov.pl/web/obrona-narodowa>] Accessed on 26 November 2020.

[13] The Ministry of Internal Affairs and Administration. 2020. [<https://www.gov.pl/web/mswia/o-urzedzie-mswia>] Accessed on 26 November 2020.

[14] Governmental Security Center. 2020. [<https://rcb.gov.pl/>] Accessed on 26 November 2020.

4.4 HEALTHCARE ACCESS

4.4.1 Access to healthcare

4.4.1a

Does the constitution explicitly guarantee citizens' right to medical care?

Guaranteed free = 4, Guaranteed right = 3, Aspirational or subject to progressive realization = 2, Guaranteed for some groups, not universally = 1, No specific provision = 0

Current Year Score: 3

2020

World Policy Analysis Center

4.4.1b

Access to skilled birth attendants (% of population)

Input number

Current Year Score: 99.8

2016

WHO/World Bank/United Nations Children's Fund (UNICEF)

4.4.1c

Out-of-pocket health expenditures per capita, purchasing power parity (PPP; current international \$)

Input number

Current Year Score: 451.35

2017

WHO Global Health Expenditure database

4.4.2 Paid medical leave

4.4.2a

Are workers guaranteed paid sick leave?

Paid sick leave = 2, Unpaid sick leave = 1, No sick leave = 0

Current Year Score: 2

2020

World Policy Analysis Center

4.4.3 Healthcare worker access to healthcare

4.4.3a

Has the government issued legislation, a policy, or a public statement committing to provide prioritized healthcare services to healthcare workers who become sick as a result of responding to a public health emergency?

Yes = 1 , No = 0

Current Year Score: 0

There is no public evidence of a legislation, policy or a public statement committing the Polish government to provide prioritized healthcare services to healthcare workers who become sick as a result of responding to a public health emergency. The Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans, the Act of 26 April 2007 on Crisis Management, the most recent National Crisis Management Plan, and the website of the Ministry of Health do not provide any guidelines or regulations as to the provision of prioritized health care services to healthcare workers who become sick as a result of responding to a public health emergency. [1, 2, 3, 4] Articles 47 and 48 of Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans provide general rules for employing healthcare professionals during an epidemic, noting that such persons are entitled to, among other things, a work contract with the entity coordinating the public healthcare emergency efforts, but it makes no mention of prioritized healthcare. [2]

[1] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi).

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 27 October 2020.

[2] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzeniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 27 October 2020.

[3] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2020, Część A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf/>]. Accessed on 27 October 2020.

[4] Ministry of Health. 2018. [<https://www.gov.pl/web/zdrowie>]. Accessed on 27 October 2020.

4.5 COMMUNICATIONS WITH HEALTHCARE WORKERS DURING A PUBLIC HEALTH EMERGENCY

4.5.1 Communication with healthcare workers

4.5.1a

Is there a system in place for public health officials and healthcare workers to communicate during a public health emergency?

Yes = 1 , No = 0

Current Year Score: 1

There is a system in place for public health officials and healthcare workers to communicate during a public health emergency in Poland. Specific rules for the communication are contained in the National Crisis Management Plan, as well as in the Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans and the Act of 26 April 2007 on Crisis Management. [1, 2, 3] As per the Crisis Management Act, regional and district authorities are tasked with creating their own crisis management plans, covering both prevention and response for a number of separate scenarios, including an epidemic scenario. [4] Regional and district plans include protocols for setting up the regional and district crisis

management centres. Within these centres there are designated people on call, who respond to phone calls from the general population, the police, sanitary and veterinary inspectorates and others, and pass information on to the relevant entities. A typical communication chain in an epidemic event encompassing a district would be the following: a doctor passes the information on to the hospital director (or directly to the sanitary/veterinary inspectorate), the hospital director passes the information on to the district public health care unit, which then calls the district sanitary or veterinary inspectorate, which then passes the information on to the district crisis management centre. If an epidemic encompasses a region or affects or may affect the whole country, the communication pattern is the same, with corresponding regional and national entities in the place of district ones. [4, 5, 6]

[1] Government Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan. (Krajowy Plan Zarządzania Kryzysowego [<https://rcb.gov.pl/krajowy-plan-zarzadzania-kryzysowego/>]). Accessed on 27 October 2020.

[2] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 27 October 2020.

[3] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzaniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]). Accessed on 27 October 2020

[4] Olsztyn Regional Authorities (Urząd Wojewódzki w Olsztynie). 2020. "Regional Crisis Management Plan. ("Wojewódzki Plan Zarządzania Kryzysowego"). [http://bip.uw.olsztyn.pl/pl/bip/wojewodzki_plan/px_wpz_k_2018.pdf]. Accessed on 27 October 2020.

[5] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzaniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]). Accessed on 27 October 2020.

[6] Poznan Regional Authorities (Urząd Wojewódzki w Poznaniu). 2016. "Regional Crisis Management Plan. ("Wojewódzki Plan Zarządzania Kryzysowego"). [<https://www.poznan.uw.gov.pl/wojewodzki-plan-dzialan-na-wypadek-wystapienia-epidemii>]. Accessed on 27 October 2020.

4.5.1b

Does the system for public health officials and healthcare workers to communicate during an emergency encompass healthcare workers in both the public and private sector?

Yes = 1, No = 0

Current Year Score: 0

There is no public evidence that Poland's system for public health officials and healthcare workers to communicate during an emergency encompasses healthcare workers in the private sector. No explicit mention of healthcare workers in the private sector was found in the National Crisis Management Plan, in the Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans, or in the Act of 26 April 2007 on Crisis Management. [1, 2, 3] No such evidence is available on the websites of the Governmental Security Center, the Ministry of Internal Affairs and Communication, and the Ministry of Health. [4, 5, 6] As per the Crisis Management Act, regional and district authorities are tasked with creating their own crisis management plans. These include lists of contracts signed by the authorities for the purpose of the prevention of and response to emergencies, including epidemics. However, a review of a number of such plans confirmed that contracts are signed between regional and district authorities and other public entities such as the police or the Postal Service Office, but not with private providers. [7]

[1] Government Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan. (Krajowy Plan Zarządzania Kryzysowego [<https://rcb.gov.pl/krajowy-plan-zarzadzania-kryzysowego/>]). Accessed on 27 October 2020.

[2] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zakażeń i chorób zakaźnych u ludzi).

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 27 October 2020.

[3] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzeniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 27 October 2020

[4] The Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. [<https://rcb.gov.pl>]. Accessed on 27 October 2020.

[5] Ministry of Internal Affairs and Administration. 2020.[<https://www.gov.pl/web/mswia>]. Accessed on 27 October 2020.

[6] The Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie/>]. Accessed on 27 October 2020.

[7] Olsztyn Regional Authorities (Urząd Wojewódzki w Olsztynie). 2020. "Regional Crisis Management Plan. ("Wojewódzki Plan Zarządzania Kryzysowego"). [http://bip.uw.olsztyn.pl/pl/bip/wojewodzki_plan/px_wpkz_2018.pdf]. Accessed on 27 October 2020.

4.6 INFECTION CONTROL PRACTICES AND AVAILABILITY OF EQUIPMENT

4.6.1 Healthcare associated infection (HCAI) prevention and control programs

4.6.1a

Is there evidence that the national public health system is monitoring for and tracking the number of healthcare associated infections (HCAI) that take place in healthcare facilities?

Yes = 1, No = 0

Current Year Score: 1

The national public health system monitors for and tracks the number of healthcare-associated infections (HCAIs) in healthcare facilities in Poland. The Health Minister's Decree of 23 December 2011 requires all Polish healthcare facilities to monitor, register and report all cases of HCAIs, and also sets forth procedures to be followed by all healthcare facilities in case such an infection occurs. [1] Each case of an HCAI and each case of an AMR infection (as defined in the Decree of 23 December 2011) must be duly described and recorded by all hospitals in their respective internal registries of nosocomial and AMR infections. Data recorded in the registries must be kept for at least 20 years. Furthermore, each hospital is also obliged to report each case of a nosocomial or an AMR infection that has occurred in the hospital to the local sanitary inspectorate. Cases of HCAI are reported to the sanitary inspectorate within 24 hours of detection, within 30 days of the infection's termination, and also periodically, at intervals of no longer than 12 months. [1] Up until June 2018 data on HCAIs in healthcare facilities in Poland had not been published, in breach of applicable law. This changed in June 2018, when the Polish Ministry of Health published the so-called "Healthcare Needs: 2018 Maps" which, for the first time, presented the actual statistics on the number and the types of HCAI as reported by Polish hospitals. In 2020, Ministry of Health launched interactive "Health Need Maps", which include selected HCAIs. [3,4]

[1] Polish Parliament. 2011. "Health Minister's of 23 December 2011 on the list of alarm agents, records of nosocomial infections and alarm agents as well as reports on the current epidemiological situation of the hospital". (Rozporządzenie Ministra Zdrowia z dnia 23 grudnia 2011 r. w sprawie listy czynników alarmowych, rejestrów zakażeń szpitalnych i czynników alarmowych oraz raportów o bieżącej sytuacji epidemiologicznej szpitala).

[<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20112941741>]. Accessed on 27 October 2020.

[2] Termedia. 2018. "Hospital infections disclosed". ("Ujawnili zakażenia szpitalne"). [<https://www.termedia.pl/mz/Ujawnili-zakazenia-szpitalne,30310.html>]. Accessed on 27 October 2020.

[3] Ministry of Health: Database of System and Implementation Analyzes ("Ministerstwo Zdrowia: Baza Analiz Systemowych i Wdrożeniowych"). 2020. Health needs map 2020 ("Mapa potrzeb zdrowotnych 2020")

[<https://basiw.mz.gov.pl/index.html#/visualization?id=3304>] Accessed on 27 October 2020.

[4] Polityka Zdrowotna. 2020. Interactive map of health needs from the Ministry of Health ("Interaktywna mapa potrzeb zdrowotnych od MZ") [<https://www.politykazdrowotna.com/61231,interaktywna-mapa-potrzeb-zdrowotnych-od-mz>] Accessed on 27 October 2020.

4.7 CAPACITY TO TEST AND APPROVE NEW MEDICAL COUNTERMEASURES

4.7.1 Regulatory process for conducting clinical trials of unregistered interventions

4.7.1a

Is there a national requirement for ethical review (e.g., from an ethics committee or via Institutional Review Board approval) before beginning a clinical trial?

Yes = 1 , No = 0

Current Year Score: 1

There is a national requirement in Poland for an ethical review before beginning a clinical trial. Before beginning a clinical trial, the bioethical committee (Komisja Bioetyczna) assesses whether the proposed trial is ethically acceptable. This is required by article 35 of the Act of 20 April 2004 on Medicinal Products, article 19 of the Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products, and article 37b of 2001 Pharmaceutical Law. All of these laws apply to the process of seeking approval for a clinical trial, as well as to applications for the registration of tried medicinal products. [1, 2, 3]

[1] Polish Parliament. 2004. "Act of 20 April 2004 on medicinal products ". ("Ustawa z dnia 20 kwietnia 2004 r. o wyrobach medycznych"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040930896>]. Accessed on 27 October 2020.

[2] Polish Parliament. 2011. "Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products". ("Ustawa z dnia 18 marca 2011 r. o Urzędzie Rejestracji Produktów Leczniczych, Wyrobów Medycznych i Produktów Biobójczych"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20110820451>]. Accessed on 27 October 2020.

[3] Polish Parliament. 2001. "Act of 6 September 2001 – Pharmaceutical Law". ("Ustawa z dnia 6 września 2001 r. Prawo farmaceutyczne"). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=wdu20011261381>]. Accessed on 27 October 2020.

4.7.1b

Is there an expedited process for approving clinical trials for unregistered medical countermeasures (MCM) to treat ongoing epidemics?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of an expedited process for approving clinical trials for unregistered medical countermeasures in Poland to treat ongoing epidemics. The Act of 20 April 2004 on Medicinal Products, the Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products, and the Pharmaceutical Law of 6 September 2001, which together regulate the approval of clinical trials, contain no evidence of such an expedited process. [1, 2, 3] There is no such evidence on the website of the Ministry of Health, either. [4] Polish regulations on clinical trials on medicinal products for human use are in full compliance with the European Directive 2001/20/EC. [5] The legislation covers applicant

registration, authorization processes, the silent agreement principle in the authorization process, and transparency. [1, 4]

[1] Polish Parliament. 2004. “Act of 20 April 2004 on medicinal products “. (“Ustawa z dnia 20 kwietnia 2004 r. o wyrobach medycznych”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040930896>]. Accessed on 27 October 2020

[2] Polish Parliament. 2011. “Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products”. (“Ustawa z dnia 18 marca 2011 r. o Urzędzie Rejestracji Produktów Leczniczych, Wyrobów Medycznych i Produktów Biobójczych”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20110820451>]. Accessed on 27 October 2020

[3] Polish Parliament. 2001. “Act of 6 September 2001 – Pharmaceutical Law”. (“Ustawa z dnia 6 września 2001 r. Prawo farmaceutyczne”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=wdu20011261381>]. Accessed on 27 October 2020

[4] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 27 October 2020

[5] Journal of Clinical Research Best Practices. October 2015. “Clinical Study Startup Timelines in Central and Eastern Europe”. [https://firstclinical.com/journal/2015/1510_CEE.pdf]. Accessed on 27 October 2020.

4.7.2 Regulatory process for approving medical countermeasures

4.7.2a

Is there a government agency responsible for approving new medical countermeasures (MCM) for humans?

Yes = 1 , No = 0

Current Year Score: 1

There is a government agency responsible for approving new medical countermeasures for humans in Poland. The Polish governmental agency that approves new medical countermeasures for humans is called the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products, and it was created by the Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products. [1] The office is responsible for the authorization of medicinal products, the market entry and the use of biocidal products, the supervision, market entry and use of medical devices, as well as clinical trials, including veterinary clinical trials. The office is required to cooperate with public administration bodies and research institutes, and with the competent institutions of the European Union, the European Medicines Agency (EMA), the European Chemicals Agency (ECHA), the European Directorate for the Quality of Medicines (EDQM), as well as the competent authorities of European Union member states, Switzerland and member states of the European Free Trade Agreement.

[1] Polish Parliament. 2011. “Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products”. (“Ustawa z dnia 18 marca 2011 r. o Urzędzie Rejestracji Produktów Leczniczych, Wyrobów Medycznych i Produktów Biobójczych”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20110820451>]. Accessed on 27 October 2020.

4.7.2b

Is there an expedited process for approving medical countermeasures (MCM) for human use during public health emergencies?

Yes = 1 , No = 0

Current Year Score: 0

There is no evidence of an expedited process for approving medical countermeasures (MCM) for human use during public health emergencies in Poland. The approval of medicinal products – including drugs and other products that can be used to

protect against or treat conditions associated with chemical, biological, radiological, or nuclear threats – is governed by the Act of 20 April 2004 on Medicinal Products, the Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products, and the Pharmaceutical Law of 6 September 2001. The legislation covers applicant registration, authorization processes, and the silent agreement principle in the authorization process, but it does not mention an expedited process for approving medical countermeasures for human use during public health emergencies. [1,2,3,4]. The websites of the Ministry of Health, the Governmental Security Center (Poland's emergency operations centre), the Ministry of Internal Affairs and Administration, as well as the crisis management law contain no relevant information. [5,6,7,8]

- [1] Polish Parliament. 2004. “Act of 20 April 2004 on medicinal products “. (“Ustawa z dnia 20 kwietnia 2004 r. o wyrobach medycznych”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20040930896>]. Accessed on 28 October 2020.
- [2] Polish Parliament. 2011. “Act of 18 March 2011 on the Office for Registration of Medicinal Products, Medical Devices and Biocidal Products”. (“Ustawa z dnia 18 marca 2011 r. o Urzędzie Rejestracji Produktów Leczniczych, Wyrobów Medycznych i Produktów Biobójczych”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20110820451>]. Accessed on 28 October 2020.
- [3] Polish Parliament. 2001. “Act of 6 September 2001 – Pharmaceutical Law”. (“Ustawa z dnia 6 września 2001 r. Prawo farmaceutyczne”). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=wdu20011261381>]. Accessed on 28 October 2020.
- [4] Journal of Clinical Research Best Practices. October 2015. “Clinical Study Startup Timelines in Central and Eastern Europe”. [https://firstclinical.com/journal/2015/1510_CEE.pdf]. Accessed on 28 October 2020.
- [5] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. [<https://rcb.gov.pl>]. Accessed 28 October 2020
- [6] Ministry of Internal Affairs and Administration. 2020. [<https://www.gov.pl/web/mswia>]. Accessed on 28 October 2020.
- [7] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 28 October 2020.
- [8] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarządzeniu kryzysowym. [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 28 October 2020.

Category 5: Commitments to improving national capacity, financing plans to address gaps, and adhering to global norms

5.1 INTERNATIONAL HEALTH REGULATIONS (IHR) REPORTING COMPLIANCE AND DISASTER RISK REDUCTION

5.1.1 Official IHR reporting

5.1.1a

Has the country submitted IHR reports to the WHO for the previous calendar year?

Yes = 1 , No = 0

Current Year Score: 1

2020

World Health Organization

5.1.2 Integration of health into disaster risk reduction

5.1.2a

Are epidemics and pandemics integrated into the national risk reduction strategy or is there a standalone national disaster risk reduction strategy for epidemics and pandemics?

Yes = 1, No = 0

Current Year Score: 1

Pandemics are integrated into Poland's national risk reduction strategy. Both parts of the Polish National Crisis Management Plan (adopted January 2018 and updated in 2020) have sections dedicated to epidemics (Part A deals with prevention and planning; Part B with response and recovery). [1,2] Part A discusses epidemics as potential threats to national security and defines them as an occurrence of infections or infectious diseases of greater scale than previously reported or an occurrence of infections or infectious diseases which have thus far not been present in a given area. As per guidelines included in Plan A, in case of an epidemic, the main governmental institutions coordinating risk reduction efforts are the Ministry of Health and the Chief Sanitary Inspectorate, along with their subordinate bodies. Their tasks in terms of risk reduction include, among others: adapting legislation on infections and infectious diseases; continuous monitoring and analysis of the epidemiological situation to pre-empt outbreaks; purchasing and stockpiling vaccines; exchanging information and coordinating measures to prevent and fight infections and contagious diseases with the member states of the European Union, the European Commission and the European Centre for Prevention and Control of Diseases; ensuring readiness in terms of keeping free hospital beds; and exercising preventive and ongoing sanitary supervision. [1]

[1] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2020 Update, Part A. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2020, Czesc A). [<https://rcb.gov.pl/wp-content/uploads/KPZK-cz.-A-2020-1-1.pdf/>]. Accessed on 28 October 2020.

[2] Governmental Security Center (Rządowe Centrum Bezpieczeństwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarządzania Kryzysowego, Aktualizacja 2019, Czesc B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 28 October 2020.

5.2 CROSS-BORDER AGREEMENTS ON PUBLIC HEALTH AND ANIMAL HEALTH EMERGENCY RESPONSE

5.2.1 Cross-border agreements

5.2.1a

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to public health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 2

Poland has cross-border agreements on public health emergencies with neighboring countries and as part of a regional group, and there is no evidence of gaps in implementation. As a member of the European Union (EU), Poland is a stakeholder of the European Centre for Disease Prevention and Control (ECDC) [1, 2]. The ECDC, among other responsibilities, provides support to EU member states during public health emergencies [1, 2]. In addition, within the EU, the Health Security Committee (HSC) provides a platform for the health ministries of member states (including Poland) to coordinate national responses to cross-border public health emergencies [3, 4]. Decision No 1082/2013/EU of the European Parliament and of the Council of 22 October 2013 on Serious Cross-Border Threats to Health, which applies directly in Poland as an EU member,

contains rules on early warning and the combatting of serious cross-border threats to health, and also establishes a mechanism for joint procurement of medical countermeasures among EU member states. [1, 2] Poland also has bilateral agreements on mutual cooperation, including in healthcare, with Latvia, Estonia, Russia, Saint Petersburg, Georgia, Ukraine and Uzbekistan. [5] The agreements with Ukraine and Saint Petersburg directly mention epidemics. [5] Poland also has an agreement with Germany on mutual assistance in disasters and emergencies, though it does not specifically mention public health emergencies. [6]

[1] European Centre for Disease Prevention and Control. "Surveillance and Response Support".

[<https://ecdc.europa.eu/en/about-us/who-we-are/units/surveillance-and-response-support>]. Accessed on 28 October 2020.

[2] European Centre for Disease Prevention and Control. "Preparedness". [<https://ecdc.europa.eu/en/about-us/what-we-do/preparedness>]. Accessed on 28 October 2020.

[3] European Commission. "Health Security Committee members".

[https://ec.europa.eu/health/preparedness_response/risk_management/hsc/members_en]. Accessed on 28 October 2020

[4] European Union (EU). 2013. "Decision No 1082/2013/EU of the European Parliament and of the Council of 22 October 2013 on serious cross-border threats to health and repealing Decision No 2119/98/EC".

[https://ec.europa.eu/health/sites/health/files/preparedness_response/docs/decision_serious_crossborder_threats_22102013_en.pdf]. Accessed on 28 October 2020

[5] Ministry of Foreign Affairs. 2020. Online Treaty Base: Bilateral Treaties ("Internatowa Baza Traktatowa: Umowy Dwustronne") [<https://traktaty.msz.gov.pl/umowa-1>] Accessed on 24 November 2020.

[6] Infor. 2020. An agreement between the Republic of Poland and the Federal Republic of Germany on mutual assistance in disasters and natural disasters or other serious accidents, made in Warsaw on April 10, 1997 ("Umowa między Rzeczpospolitą Polską a Republiką Federalną Niemiec o wzajemnej pomocy podczas katastrof i klęsk żywiołowych lub innych poważnych wypadków, sporządzona w Warszawie dnia 10 kwietnia 1997 r") [<https://www.infor.pl/akt-prawny/DZU.1999.022.0000201,umowa-miedzy-rzeczpospolita-polska-a-republika-federalna-niemiec-o-wzajemnej-pomocy-podczas-katastrof-i-klask-zywiolowych-lub-innych-powaznych-wypadkow.html>] Accessed on 24 November 2020.

5.2.1b

Does the country have cross-border agreements, protocols, or MOUs with neighboring countries, or as part of a regional group, with regards to animal health emergencies?

Yes = 2, Yes, but there is evidence of gaps in implementation = 1, No = 0

Current Year Score: 2

Poland has cross-border agreements on animal health emergencies as part of a regional group, and there is no evidence of gaps in implementation. European Union regulation on animal health emergencies focuses on common action in areas such as early warning systems and risk assessment, aiming at improving capacity to predict, prevent and respond to transboundary animal diseases. [1] The Animal Health Advisory Committee, operating under the European Commission, unites animal business stakeholders from farmers through to food retailers, veterinarians, international bodies and third-country representatives. [2] The Committee follows animal health situations and policy developments and provides guidance to the Commission on the appropriate level of animal or public health protection, and on priorities for action and communication. [2] Poland is also a member of the Veterinary Emergency Team, created by the European Commission, which deals with serious animal epidemics, and which is composed of "experts in the fields of veterinary sciences, virology, wildlife, laboratory testing, risk management and other relevant areas". [3] The Veterinary Emergency Team conducted three missions in Poland in recent years, in November 2017 and November 2019 regarding African swine fever and in January 2020 on avian influenza. [4,5,6] The European Union has implemented Animal Disease Notification System (ADNS), which is a notification system designed to register and document the evolution of the situation of important infectious animal diseases.

[7,8]

- [1] Council of the European Union. 2017. Animal health: a common way forward on emergency preparedness. [<https://www.consilium.europa.eu/en/press/press-releases/2017/06/30/animal-health/>]. Accessed on 28 October 2020.
- [2] European Commission. 2020. "Animal Health Advisory Committee". [https://ec.europa.eu/food/animals/health/advisory_committees_en]. Accessed on 28 October 2020.
- [3] European Commission. 2020. "Veterinary Emergency Team". [https://ec.europa.eu/food/animals/animal-diseases/emergency-team_en]. Accessed on 28 October 2020.
- [4] European Commission. 2017. Mission of the Community Veterinary Emergency Team (CVET) to Poland. [https://ec.europa.eu/food/sites/food/files/animals/docs/reg-com_ahw_20171130_asf_cvvet-mission_pol.pdf] Accessed on 24 November 2020.
- [5] European Commission. 2019. Mission of the Veterinary Emergency Team (EUVET) to Poland. [https://ec.europa.eu/food/sites/food/files/animals/docs/reg-com_ahw_20191216_asf_euvet_pol.pdf] Accessed on 24 November 2020.
- [6] European Commission. 2020. Mission of the Veterinary Emergency Team (EU VET), Avian Influenza, Poland [https://ec.europa.eu/food/sites/food/files/animals/docs/reg-com_ahw_20200213_hpai_euvet_pol.pdf] Accessed on 24 November 2020.
- [7] Animal Disease Notification System (ADNS). 2020. [https://ec.europa.eu/food/animals/animal-diseases/not-system_en]. Accessed on 28 October 2020.
- [8] EUR-Lex. 2020. "Council Directive of December 21, 1982 on the notification of animal diseases in the Community". [<https://eur-lex.europa.eu/legal-content/PL/TXT/HTML/?uri=CELEX:01982L0894-20130101&from=EN>]. Accessed on 28 October 2020.

5.3 INTERNATIONAL COMMITMENTS

5.3.1 Participation in international agreements

5.3.1a

Does the county have signatory and ratification (or same legal effect) status to the Biological Weapons Convention?

Signed and ratified (or action having the same legal effect) = 2, Signed = 1, Non-compliant or not a member = 0

Current Year Score: 2

2021

Biological Weapons Convention

5.3.1b

Has the country submitted confidence building measures for the Biological Weapons Convention in the past three years?

Yes = 1, No = 0

Current Year Score: 1

2021

Biological Weapons Convention

5.3.1c

Has the state provided the required United Nations Security Council Resolution (UNSCR) 1540 report to the Security Council Committee established pursuant to resolution 1540 (1540 Committee)?

Yes = 1, No = 0

Current Year Score: 1

2021

Biological Weapons Convention

5.3.1d

Extent of United Nations Security Council Resolution (UNSCR) 1540 implementation related to legal frameworks and enforcement for countering biological weapons:

Very good (60+ points) = 4, Good (45–59 points) = 3, Moderate (30–44 points) = 2, Weak (15–29 points) = 1, Very weak (0–14 points) or no matrix exists/country is not party to the BWC = 0

Current Year Score: 4

2021

Biological Weapons Convention

5.3.2 Voluntary memberships

5.3.2a

Does the country meet at least 2 of the following criteria?

- Membership in Global Health Security Agenda (GHSA)
- Membership in the Alliance for Country Assessments for Global Health Security and IHR Implementation (JEE Alliance)
- Membership in the Global Partnership Against the Spread of Weapons and Materials of Mass Destruction (GP)
- Membership in the Australia Group (AG)
- Membership in the Proliferation Security Initiative (PSI)

Needs to meet at least two of the criteria to be scored a 1 on this measure. , Yes for five = 1 , Yes for four = 1 , Yes for three = 1 , Yes for two = 1 , Yes for one = 0 , No for all = 0

Current Year Score: 1

2021

Global Health Security Agenda; JE Alliance; Global Partnership; Australia Group; PSI

5.4 JOINT EXTERNAL EVALUATION (JEE) AND PERFORMANCE OF VETERINARY SERVICES PATHWAY (PVS)

5.4.1 Completion and publication of a Joint External Evaluation (JEE) assessment and gap analysis

5.4.1a

Has the country completed a Joint External Evaluation (JEE) or precursor external evaluation (e.g., GHSA pilot external assessment) and published a full public report in the last five years?

Yes = 1, No = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.4.1b

Has the country completed and published, within the last five years, either a National Action Plan for Health Security (NAPHS) to address gaps identified through the Joint External Evaluation (JEE) assessment or a national GHSA roadmap that sets milestones for achieving each of the GHSA targets?

Yes = 1, No = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.4.2 Completion and publication of a Performance of Veterinary Services (PVS) assessment and gap analysis

5.4.2a

Has the country completed and published a Performance of Veterinary Services (PVS) assessment in the last five years?

Yes = 1, No = 0

Current Year Score: 0

2021

OIE PVS assessments

5.4.2b

Has the country completed and published a Performance of Veterinary Services (PVS) gap analysis in the last five years?

Yes = 1, No = 0

Current Year Score: 0

2021

OIE PVS assessments

5.5 FINANCING

5.5.1 National financing for epidemic preparedness

5.5.1a

Is there evidence that the country has allocated national funds to improve capacity to address epidemic threats within the past three years?

Yes = 1 , No = 0

Current Year Score: 1

There is evidence that Poland has allocated national funds to improve capacity to address epidemic threats within the past three years. The National Health Program is a strategic document for public health, established for the years 2016–2020, which includes "Objective 4 - Reduction of health risk resulting from physical, chemical and biological hazards in the external environment, workplace, residence, recreation and study". The task list for this objective includes reducing exposure to biological pathogens, counteracting the development of antibiotic resistance in microorganisms and limiting exposure to harmful chemicals and biological agents in the human environment. [1] It also highlights the tasks for education targeting prevention of infectious diseases and infections in humans, conducting research on biological pathogens for the purposes of epidemiological surveillance and epidemiological supervision over infectious diseases [1] The amount allocated for this particular objective has been limited to no more than PLN 17 million (USD 4.5 million), derived annually from the state budget [1]. There is no evidence that the general national budget allocated to the Ministry of Health specifically addresses epidemic threats. [2]

[1] Polish Parliament. 2016 Ordinance of the Council of Ministers of 4 August 2016 on the National Health Program for 2016-2020 ("Rozporządzenie Rady Ministrów z dnia 4 sierpnia 2016 r. w sprawie Narodowego Programu Zdrowia na lata 2016-2020") [<https://www.gov.pl/web/zdrowie/narodowy-program-zdrowia-ogloszenia>] Accessed on 28 October 2020.

[2] Ministry of Health. 2020. Budget ("Budżet"). [<https://www.gov.pl/web/zdrowie/budzet>] Accessed on 28 October 2020.

5.5.2 Financing under Joint External Evaluation (JEE) and Performance of Veterinary Services (PVS) reports and gap analyses

5.5.2a

Does the Joint External Evaluation (JEE) report, National Action Plan for Health Security (NAPHS), and/or national GHSA roadmap allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a JEE = 0

Current Year Score: 0

2021

WHO Strategic Partnership for IHR and Health Security (SPH); Global Health Security Agenda

5.5.2b

Does the Performance of Veterinary Services (PVS) gap analysis and/or PVS assessment allocate or describe specific funding from the national budget (covering a time-period either in the future or within the past five years) to address the identified gaps?

Yes = 1 , No/country has not conducted a PVS = 0

Current Year Score: 0

2021

OIE PVS assessments

5.5.3 Financing for emergency response

5.5.3a

Is there a publicly identified special emergency public financing mechanism and funds which the country can access in the face of a public health emergency (such as through a dedicated national reserve fund, an established agreement with the World Bank pandemic financing facility/other multilateral emergency funding mechanism, or other pathway identified through a public health or state of emergency act)?

Yes = 1 , No = 0

Current Year Score: 1

There is a publicly identified special emergency public financing mechanism that Poland can access in the face of a public health emergency. According to the National Crisis Management Plan, in the event of a major disaster (including a public health emergency) causing damage worth more than EUR 3 billion (USD 3.6 million) or more than 0.6% of the state's gross national income, regardless of domestic sources of financing, it is possible to apply for a subsidy from the European Union Solidarity Fund. [1] The plan specifies that an application for the subsidy must be submitted to the European Commission as soon as possible, no later than 10 weeks after the first damage caused by the disaster. [1] Poland is not listed among eligible borrowing countries for the World Bank pandemic financing facility, or for the International Development Association. [2, 3]

[1] Governmental Security Center (Rzadowe Centrum Bezpieczenstwa). 2020. National Crisis Management Plan, 2019 Update, Part B. (Krajowy Plan Zarzadzania Kryzysowego, Aktualizacja 2019, Czesc B) [<https://rcb.gov.pl/wp-content/uploads/TEKST-KPZK.B.2019.pdf>] Accessed on 28 October 2020.

[2] International Development Association/World Bank Group. 2018. "Borrowing Countries". [<http://ida.worldbank.org/about/borrowing-countries>]. Accessed on 28 October 2020.

[3] Pandemic Emergency Financing Facility. 2017. "Operational Brief for Eligible Countries". [<http://pubdocs.worldbank.org/en/119961516647620597/PEF-Operational-Brief-Dec-2017.pdf>]. Accessed on 28 October 2020.

5.5.4 Accountability for commitments made at the international stage for addressing epidemic threats

5.5.4a

Is there evidence that senior leaders (president or ministers), in the past three years, have made a public commitment either to:

- Support other countries to improve capacity to address epidemic threats by providing financing or support?
- Improve the country's domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 0

There is insufficient evidence that senior leaders in Poland have made public commitments to support other countries to improve capacity to address epidemic threats by providing financing or support and commit to improving the country's domestic capacity to address epidemic threats by expanding financing or requesting support to improve capacity in the past three years. In the light of the COVID-19 pandemic, the Material Reserves Agency, which is designed to streamline processes and improve Poland's response capacity and time during emergencies and crises such as pandemics, has received criticism for its slow response time and inadequate preparedness. [1] According to a government press release, the Chancellery of the Prime Minister is working on changes to amend the aforementioned act and improve the functioning of the Material Reserves Agency. [1] However, the changes are only in the planning stages, and no concrete public commitments have been made. There is no further relevant evidence on the websites of the Ministry of Health, the Ministry of Foreign Affairs, the United Nations or the World Health Organization.

[1] Gazeta Prawna. 2020. The Reform of the Material Reserves Agency ("Reforma Agencji Rezerw Materiałowych") [<https://www.gazetaprawna.pl/artykuly/1491536,reforma-agencji-rezerw-materialowych.html>] Accessed on 28 October 2020.

[2] Ministry of Health. [<https://www.gov.pl/web/zdrowie>] Accessed on 24 November 2020.

[3] Ministry of Foreign Affairs. [<https://www.gov.pl/web/dyplomacja>] Accessed on 24 November 2020.

[4] United Nations. [<https://www.un.org/>]. Accessed on 24 November 2020.

[5] World Health Organization. [<https://www.who.int/>]. Accessed on 24 November 2020.

5.5.4b

Is there evidence that the country has, in the past three years, either:

- Provided other countries with financing or technical support to improve capacity to address epidemic threats?
- Requested financing or technical support from donors to improve the country's domestic capacity to address epidemic threats?

Needs to meet at least one of the criteria to be scored a 1 on this measure., Yes for both = 1, Yes for one = 1, No for both = 0

Current Year Score: 1

In the past three years, there is evidence that Poland has invested finances to improve its own domestic capacity to address epidemic threats, but there is no evidence that Poland has provided financing or support to other countries to help them do so. The Polish Ministry of Foreign Affairs has provided funding to help combat COVID-19 in Palestine in March 2020, in Ukraine and Moldova in June 2020 and among refugees in Jordan in October 2020, but there is no evidence that any of these projects aim to improve capacity to address future epidemics. [1, 2, 3] The Polish Development Corporation's 2018 Annual Report states that in that year in Myanmar Poland funded the vaccination of almost 2,000 children, and training on basics of hygiene and epidemics prevention for 1,300 children, but there is no evidence that this project included measures to

improve Myanmar's capacity to address epidemics. [3] 2018 also saw Poland involved in the provision of medical aid to displaced persons and host communities in Iraqi Kurdistan, including preventive check-ups to prevent epidemic outbreaks, but again there is no evidence of measures to improve local capacity to address pandemics. [4] According to the Georgetown Global Health Security Tracking, Poland spent USD 163,390 of donated funds on zoonotic disease research between 2014 and 2020. [5] In 2014–2017, Poland took part in the Pandhub project funded by the European Union, which helped to develop tools to help transport operators and public health and safety authorities develop their preparedness and response plans, including the development of an information system for data collection, a risk assessment tool and basic procedures to identify project hotspots to enable a better understanding of disease transmission mechanisms, as well as guidelines for the protection of people and infrastructure as well as the decontamination process. [6] The websites of Ministry of Health, Ministry of Foreign Affairs and World Health Organization contain no further relevant evidence. [7,8,9]

[1] Polskapomoc. Gov.pl. 2020. Polish Aid for Palestine in the Age of Coronavirus. ("Polska pomoc dla Palestyny w dobie koronawirusa"). [<https://www.gov.pl/web/polskapomoc/polska-pomoc-dla-palestyny-w-dobie-koronawirusa>]. Accessed on 28 October 2020.

[2] Polskapomoc. Gov.pl. 2020. Humanitarian support for Ukraine and Moldova. ("Wsparcie humanitarne dla Ukrainy i Mołdawii") [<https://www.gov.pl/web/polskapomoc/wsparcie-humanitarne-dla-ukrainy-i-moldawii>]. Accessed on 28 October 2020.

[3] Polskapomoc. Gov.pl. 2020. Polish aid in the fight against the pandemic in the refugee camp in Zaatari. ("Polska pomoc w walce z pandemią w obozie dla uchodźców w Zaatari.") [<https://www.gov.pl/web/polskapomoc/polska-pomoc-w-walce-z-pandemia-w-obozie-dla-uchodzcow-w-zaatari>] Accessed on 28 October 2020.

[4] Polskapomoc. Gov.pl. 2020. Annual Report 2018 ("Raport Roczny 2018") [<https://www.gov.pl/web/polskapomoc/raport-roczny-2018>] Accessed on 24 November 2020.

[5] Georgetown Infectious Disease Atlas (GIDA) Global Health Security Tracker. 2020. Recipient profile: Poland. [<https://tracking.ghscosting.org/details/183/recipient>] Accessed on 24 November 2020.

[6] European Commission. 2018. Enhanced preparedness and response plans for pandemics. [<https://cordis.europa.eu/article/id/238734-enhanced-preparedness-and-response-plans-for-pandemics>] Accessed on 24 November 2020.

[7] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>] Accessed on 24 November 2020.

[8] Ministry of Foreign Affairs. 2020. [<https://www.gov.pl/web/dyplomacja>] Accessed on 24 November 2020.

[9] World Health Organization. 2020 Poland: news. [https://www.euro.who.int/en/countries/poland/news/news/news?root_node_selection=75377] Accessed on 24 November 2020.

5.5.4c

Is there evidence that the country has fulfilled its full contribution to the WHO within the past two years?

Yes = 1, No = 0

Current Year Score: 1

2021

Economist Impact analyst qualitative assessment based on official national sources, which vary by country

5.6 COMMITMENT TO SHARING OF GENETIC AND BIOLOGICAL DATA AND SPECIMENS

5.6.1 Commitment to sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) in both emergency and nonemergency research

5.6.1a

Is there a publicly available plan or policy for sharing genetic data, clinical specimens, and/or isolated specimens (biological materials) along with the associated epidemiological data with international organizations and/or other countries that goes beyond influenza?

Yes = 1, No = 0

Current Year Score: 0

There is no evidence of a publicly available plan or policy for sharing genetic data, clinical specimens, or isolated specimens (biological materials) along with the associated epidemiological data with international organizations or other countries that goes beyond influenza. Decision No 1082/2013/EU of the European Parliament and of the Council of 22 October 2013 on Serious Cross-Border Threats to Health, which applies directly to Poland as a European Union (EU) member state, contains rules on early warning and the combatting of serious cross-border threats to health. It establishes the list of communicable diseases that are to be notified to the European Centre for Disease Prevention and Control. [1] Poland's crisis management centers at all administrative levels are required to monitor the ongoing situation (weather, water levels, spillage of hazardous biological material, cases of transmittable diseases, etc.) and to submit daily, weekly and monthly reports to their counterparts at higher levels. The top-level Governmental Security Center cooperates with foreign institutions including the EU by sharing data on possible critical events, including on infectious and transmittable disease with pandemic potential. [2] Per Art. 25 of the Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans, the Polish Chief Sanitary Inspectorate is required to cooperate with the EU, the European Commission and with the European Centre for Disease Prevention and Control (ECDC) as regards infectious diseases and epidemiological supervision. Data shared with these institutions include: "transferring data on cases of infections, morbidity or deaths from infectious diseases collected in national registers," and "the exchange of other relevant data critical to prevent and combat infections and infectious diseases". [3] The websites of the Ministry of Health, Ministry of Agriculture, Ministry of Science and Higher Education and Ministry of Economic Development, Labour and Technology contain no relevant evidence. [4, 5, 6, 7]

[1] Official Journal of the European Union (EU). 2013. "Decision No 1082/2013/EU of the European Parliament and the Council of 22 October 2013 on serious cross-border threats to health and repealing Decision No 2119/98/EC (Text with EEA relevance)". L 293. [<https://eur-lex.europa.eu/legal-content/EN/TXT/HTML/?uri=CELEX:32013D1082&from=en>]. Accessed 29 October 2020.

[2] Polish Parliament. 2007. Act of 26 April 2007 on crisis management. (Ustawa z dnia 26 kwietnia 2007 r. o zarzadzaniu kryzysowym.) [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20070890590>]. Accessed on 29 October 2020.

[3] Polish Parliament. 2008. Act of 5 December 2008 on the Prevention and Control of Infections and Infectious Diseases in Humans. (Ustawa z dnia 5 grudnia 2008 r. o zapobieganiu oraz zwalczaniu zaka?e? i chorób zaka?nych u ludzi). [<http://prawo.sejm.gov.pl/isap.nsf/DocDetails.xsp?id=WDU20082341570>]. Accessed on 29 October 2020.

[4] Ministry of Health. 2020. [<https://www.gov.pl/web/zdrowie>]. Accessed on 12 November 2020.

[5] Ministry of Agriculture. 2020. [<https://www.gov.pl/web/rolnictwo>] Accessed on 12 November 2020.

[6] Ministry of Science and Higher Education. 2020 [<https://www.gov.pl/web/science>] Accessed on 12 November 2020.

[7] Ministry of Economic Development, Labour and Technology. 2020. [<https://www.gov.pl/web/development-labour->

technology] Accessed on 12 November 2020.

5.6.1b

Is there public evidence that the country has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past two years?

Yes = 0, No = 1

Current Year Score: 1

There is no public evidence that Poland has not shared samples in accordance with the Pandemic Influenza Preparedness (PIP) framework in the past two years. [1] The World Health Organization (WHO) has not reported any non-compliance in the past two years by Poland. There is no such information in international or Polish media outlets, either.

[1] World Health Organization. 2020. "Influenza: Virus Sharing". [http://www.who.int/influenza/pip/virus_sharing/en]. Accessed on 29 October 2020.

5.6.1c

Is there public evidence that the country has not shared pandemic pathogen samples during an outbreak in the past two years?

Yes = 0, No = 1

Current Year Score: 1

There is no public evidence that Poland has not shared pandemic pathogen samples during an outbreak in the past two years. There is also no evidence of Poland not sharing COVID-19 samples during its outbreak. The World Health Organization (WHO) has not reported any such instances in the past two years by Poland. [1] There are no media reports in international or local media indicating that Poland did not share pandemic pathogen samples.

[1] World Health Organization. 2020. "Poland". [<http://www.who.int/countries/pol/en/>]. Accessed on 29 October 2020.

Category 6: Overall risk environment and vulnerability to biological threats

6.1 POLITICAL AND SECURITY RISK

6.1.1 Government effectiveness

6.1.1a

Policy formation (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1b

Quality of bureaucracy (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1c

Excessive bureaucracy/red tape (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1d

Vested interests/cronyism (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1e

Country score on Corruption Perception Index (0-100, where 100=best)

Input number

Current Year Score: 56

2020

Transparency International

6.1.1f

Accountability of public officials (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 2

2020

Economist Intelligence

6.1.1g

Human rights risk (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 3

2020

Economist Intelligence

6.1.2 Orderly transfers of power

6.1.2a

How clear, established, and accepted are constitutional mechanisms for the orderly transfer of power from one government to another?

Very clear, established and accepted = 4, Clear, established and accepted = 3, One of the three criteria (clear, established, accepted) is missing = 2, Two of the three criteria (clear, established, accepted) are missing = 1, Not clear, not established, not accepted = 0

Current Year Score: 3

2021

Economist Intelligence

6.1.3 Risk of social unrest

6.1.3a

What is the risk of disruptive social unrest?

Very low: Social unrest is very unlikely = 4, Low: There is some prospect of social unrest, but disruption would be very limited = 3, Moderate: There is a considerable chance of social unrest, but disruption would be limited = 2, High: Major social unrest is likely, and would cause considerable disruption = 1, Very high: Large-scale social unrest on such a level as to seriously challenge government control of the country is very likely = 0

Current Year Score: 2

2021

Economist Intelligence

6.1.4 Illicit activities by non-state actors

6.1.4a

How likely is it that domestic or foreign terrorists will attack with a frequency or severity that causes substantial disruption?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 3

2021

Economist Intelligence

6.1.4b

What is the level of illicit arms flows within the country?

4 = Very high, 3 = High, 2 = Moderate, 1 = Low, 0 = Very low

Current Year Score: 1

2020

UN Office of Drugs and Crime (UNODC)

6.1.4c

How high is the risk of organized criminal activity to the government or businesses in the country?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 3

2021

Economist Intelligence

6.1.5 Armed conflict

6.1.5a

Is this country presently subject to an armed conflict, or is there at least a moderate risk of such conflict in the future?

No armed conflict exists = 4, Yes; sporadic conflict = 3, Yes; incursional conflict = 2, Yes, low-level insurgency = 1, Yes; territorial conflict = 0

Current Year Score: 4

2021

Economist Intelligence

6.1.6 Government territorial control

6.1.6a

Does the government's authority extend over the full territory of the country?

Yes = 1, No = 0

Current Year Score: 1

2021

Economist Intelligence

6.1.7 International tensions

6.1.7a

Is there a threat that international disputes/tensions could have a negative effect?

No threat = 4, Low threat = 3, Moderate threat = 2, High threat = 1, Very high threat = 0

Current Year Score: 3

2021

Economist Intelligence

6.2 SOCIO-ECONOMIC RESILIENCE

6.2.1 Literacy

6.2.1a

Adult literacy rate, population 15+ years, both sexes (%)

Input number

Current Year Score: 98.7

2008-2018

United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO);
The Economist Intelligence Unit

6.2.2 Gender equality

6.2.2a

United Nations Development Programme (UNDP) Gender Inequality Index score

Input number

Current Year Score: 0.88

2018

United Nations Development Programme (UNDP); The Economist Intelligence Unit

6.2.3 Social inclusion

6.2.3a

Poverty headcount ratio at \$1.90 a day (2011 PPP) (% of population)

Input number

Current Year Score: 0.2

2017

World Bank; Economist Impact

6.2.3b

Share of employment in the informal sector

Greater than 50% = 2, Between 25-50% = 1, Less than 25% = 0

Current Year Score: 0

The latest available figures indicate that less than 25% of Poland's employment is in the informal sector. According to the latest available data from the Central Statistical Office, the share of employment in the informal economy in Poland was 5.4% in 2017. [1] According to International Labour Organization, Poland's share of employment in the informal sector was 20.1% in 2016. [2] According to an unofficial source, which bases its data on a survey conducted on nationwide research panel Ariadna, 16% of Poles admit to working in the informal sector. [3]

[1] Central Statistical Office. 2019. Undeclared work in Poland in 2017. ("Praca nierejestrowana w Polsce w 2017 roku") [<https://stat.gov.pl/obszary-tematyczne/rynek-pracy/pracujacy-bezrobotni-bierni-zawodowo-wg-bael/praca-nierejestrowana-w-polsce-w-2017-roku,22,5.html>] Accessed on 29 October 2020.

[2] International Labour Organization. 2016. Overview of the informal economy in Poland [https://www.ilo.org/budapest/WCMS_751320/lang--en/index.htm] Accessed on 29 October 2020.

[3] Ciekaweliczby.pl 2020. Every sixth Pole admits to working "illegally" (survey). ("Co szósty Polak przyznaje się do pracy „na czarno” (sondaż)") [https://ciekaweliczby.pl/praca_na_czarno/] Accessed on 29 October 2020.

6.2.3c

Coverage of social insurance programs (% of population)

Scored in quartiles (0-3, where 3=best)

Current Year Score: 3

2016, or latest available

World Bank; Economist Impact calculations

6.2.4 Public confidence in government

6.2.4a

Level of confidence in public institutions

Input number

Current Year Score: 0

2021

Economist Intelligence Democracy Index

6.2.5 Local media and reporting

6.2.5a

Is media coverage robust? Is there open and free discussion of public issues, with a reasonable diversity of opinions?

Input number

Current Year Score: 1

2021

Economist Intelligence Democracy Index

6.2.6 Inequality

6.2.6a

Gini coefficient

Scored 0-1, where 0=best

Current Year Score: 0.3

Latest available.

World Bank; Economist Impact calculations

6.3 INFRASTRUCTURE ADEQUACY

6.3.1 Adequacy of road network

6.3.1a

What is the risk that the road network will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 2

2021

Economist Intelligence

6.3.2 Adequacy of airports

6.3.2a

What is the risk that air transport will prove inadequate to meet needs?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 3

2021

Economist Intelligence

6.3.3 Adequacy of power network

6.3.3a

What is the risk that power shortages could be disruptive?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 3

2021

Economist Intelligence

6.4 ENVIRONMENTAL RISKS

6.4.1 Urbanization

6.4.1a

Urban population (% of total population)

Input number

Current Year Score: 60.04

2019

World Bank

6.4.2 Land use

6.4.2a

Percentage point change in forest area between 2006–2016

Input number

Current Year Score: 0.61

2008-2018

World Bank; Economist Impact

6.4.3 Natural disaster risk

6.4.3a

What is the risk that the economy will suffer a major disruption owing to a natural disaster?

Very low = 4, Low = 3, Moderate = 2, High = 1, Very high = 0

Current Year Score: 4

2021

Economist Intelligence

6.5 PUBLIC HEALTH VULNERABILITIES

6.5.1 Access to quality healthcare

6.5.1a

Total life expectancy (years)

Input number

Current Year Score: 77.6

2018

United Nations; World Bank, UNICEF; Institute for Health Metrics and Evaluation (IHME); Central Intelligence Agency (CIA)
World Factbook

6.5.1b

Age-standardized NCD mortality rate (per 100 000 population)

Input number

Current Year Score: 441.6

2019

WHO

6.5.1c

Population ages 65 and above (% of total population)

Input number

Current Year Score: 18.12

2019

World Bank

6.5.1d

Prevalence of current tobacco use (% of adults)

Input number

Current Year Score: 26

2018

World Bank

6.5.1e

Prevalence of obesity among adults

Input number

Current Year Score: 23.1

2016

WHO

6.5.2 Access to potable water and sanitation

6.5.2a

Percentage of homes with access to at least basic water infrastructure

Input number

Current Year Score: 99

2017

UNICEF; Economist Impact

6.5.2b

Percentage of homes with access to at least basic sanitation facilities

Input number

Current Year Score: 98.8

2017

UNICEF; Economist Impact

6.5.3 Public healthcare spending levels per capita

6.5.3a

Domestic general government health expenditure per capita, PPP (current international \$)

Input number

Current Year Score: 1432.59

2018

WHO Global Health Expenditure database

6.5.4 Trust in medical and health advice

6.5.4a

Trust medical and health advice from the government

Share of population that trust medical and health advice from the government , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 1

2018

Wellcome Trust Global Monitor 2018

6.5.4b

Trust medical and health advice from medical workers

Share of population that trust medical and health advice from health professionals , More than 80% = 2, Between 60-80%, or no data available = 1, Less than 60% = 0

Current Year Score: 2

2018

Wellcome Trust Global Monitor 2018