Russia

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

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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: 1

Russia has a national plan on antimicrobial resistance (AMR), but there is insufficient evidence that it integrates surveillance, detection and reporting of priority AMR pathogens. The Strategy for Preventing the Spread of Antimicrobial Resistance in the Russian Federation until 2030 (adopted 2017) outlines seven objectives: (i) raising awareness of AMR amongst the population; (ii) raising standards and awareness amongst medical professionals; (iii) introduction and enhancement of medical and agricultural practices limiting AMR; (iv) introduction of practices to monitor the spread of AMR; (v) research on AMR and new antibiotics; (vi) introduction and enhancement of measures monitoring trade and supply of antibiotics; (vii) development of interdepartmental and international cooperation on AMR [1]. However, the Strategy does not define a specific group of priority pathogens, and its approach to surveillance, detection and reporting of priority AMR pathogens is limited and insufficiently integrated. Targets for the "systemic monitoring" of AMR include surveillance based on diagnostics data from microbiological laboratories and reference centers, the creation of a single interdepartmental database on AMR, and surveillance of trace amounts of antibiotics in animal-based food products, but there are no specific plans for AMR surveillance, or details on the methods to be used. The Strategy's targets on AMR research do not outline plans or methods for analysis of the data collected through surveillance, and beyond the creation of the interdepartmental AMR database, the Strategy does not refer to the presentation or reporting of surveillance or analysis data [1]. Additionally, an Action Plan for the implementation of the Strategy for years 2017–2020 is available on the Ministry of Health (MoH) website, but it does not contain any specific detail on methods for surveillance, detection or reporting of AMR, defining only requirements for legislation to prevent AMR [2]. There is no further references to implementation of the AMR strategy or other policies integrating AMR surveillance, detection and reporting on the websites of the Ministry of Health or the Ministry of Agriculture [3, 4]. Finally, Russia has not completed a JEE assessment, and no AMR action plan is listed on the World Health Organization website [5, 6].

[1] Government of the Russian Federation. No. 2045-r of 25 September 2017. "The Strategy for Preventing the Spread of Antimicrobial Resistance in the Russian Federation until 2030 (Стратегия предупреждения распространения антимикробной резистентности резистентности в Российской Федерации на период до 2030 года)". [http://government.ru/docs/29477/]. Accessed 4 November 2020.
[2] Ministry of Health of the Russian Federation. 11 September 2017. "Plan of Actions for the Implementation of the Strategy for the Mid-term Period (2017-2020) (План Мероприятий По Реализации Стратегии На Среднесрочный Период (2017 – 2020 Годы)". [https://static-0.rosminzdrav.ru/system/attachments/attaches/000/036/161/original/%D0%9F%D0%9B%D0%90%D0%9D_%D0%BC%D0%B5%D1%80%D0%BE%D0%BF%D1%80%D0%B8%D1%8F%D1%82%D0%B8%D0%B9_%D0%BF%D0%BE_%D1%80%D0%B5%D0%B0%D0%BB%D0%B8%D0%B7%D0%B0%D1%86%D0%B8%D0%B8_%D0%A1%D1%82%D1%80%D0%B0%D1%82%D0%B5%D0%B3%D0%B8%D0%B8_%D0%BD%D0%B0_%D1%81%D1%80%D0%B5%D0%B4%D0%BD%D0%B5%D1%81%D1%80%D0%BE%

D1%87%D0%BD%D1%8B%D0%B9_%D0%BF%D0%B5%D1%80%D0%B8%D0%BE%D0%B4_%282017_%E2%80%93_2020_%D0%B3%D0%BE%D0%B4%D1%8B%29.pdf?1507709525]. Accessed 4 November 2020.
[3] Ministry of Health the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 4 November 2020.
[4] Ministry of Agriculture the Russian Federation. [www.mcx.ru/]. Accessed 4 November 2020.
[5] World Health Organization (WHO). "Joint External Evaluation (JEE) mission reports". [https://www.who.int/ihr/procedures/mission-reports/en/]. Accessed 4 November 2020.
[6] World Health Organization (WHO). "Library of national AMR action plans". [http://www.who.int/antimicrobial-resistance/national-action-plans/library/en]. Accessed 4 November 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: 2

Russia has the capacity to test for all of the priority AMR pathogens. Russia's central microbe and anti-microbial research center is the National Research Institute of Antimicrobial Chemotherapy (IAC), founded in 1999 and based at the Ministry of Health's Smolensk State Medical University. Two of the IAC's constituent bodies monitor AMR in Russia: the Center for Monitoring of Antibiotic Resistance (CMAR), and the Interregional Association for Clinical Microbiology and Antimicrobial Chemotherapy (IACMAC) [1]. Various IAC sources show that the Institute's laboratories can test for N. gonorrheae, Mycobacterium tuberculosis, Shigella spp, S. pneumoniae, S. aureus, E. coli, and Salmonella spp. [2, 3, 4, 5, 6]. The latest 2018 report on the World Health Organization's Central And Eastern European Surveillance of Antimicrobial Resistance (CAESAR) programme provides information on Russian AMR results for K. pneumoniae, E. coli, P. aeruginosa, Acinetobacter spp., S. aureus, E. faecalis and E. faecium [7]. Whilst Russian data on AMR in K. pneumoniae are publicly available, it is unclear which institution tests for this pathogen, as the IAC's website does not contain any evidence of such testing [1].

[1] Institute for Antimicrobial Chemotherapy. "Structure of the National Research Institute for Antimicrobial Chemotherapy (Структура учреждения)". [http://www.antibiotic.ru/iac.php]. Accessed 4 November 2020.
[2] Interregional Association for Clinical Microbiology and Antimicrobial Chemotherapy. "AMRmap". [http://map.antibiotic.ru/]. Accessed 4 November 2020.
[3] Interregional Association for Clinical Microbiology and Antimicrobial Chemotherapy. "Multi-centre study of resistance of Streptococcus pneumoniae, haemophilus and group A streptococcus - PeGAS Многоцентровое исследование резистентности пневмококков, гемофил и стрептококков группы А – ПеГАС)". [http://www.antibiotic.ru/iacmac/ru/rosnet/pegas.shtml]. Accessed 4 November 2020.
[4] Interregional Association for Clinical Microbiology and Antimicrobial Chemotherapy. "Study of antimicrobial resistance of gram(+) microorganisms: S. aureus and Enterococcus spp. - StEnt ("Изучение антибиотикорезистентности грам(+) микроорганизмов: S.aureus и Enterococcus spp. – СтЭнт)". [http://www.antibiotic.ru/iacmac/ru/rosnet/stent.shtml]. Accessed 4 November 2020.
[5] Interregional Association for Clinical Microbiology and Antimicrobial Chemotherapy. "Study of the sensitivity of N. gonorrhoeae to antibiotics - ARGON (Исследование чувствительности N.gonorrhoeae к антибактериальным препаратам – АРГОН)". [http://www.antibiotic.ru/iacmac/ru/rosnet/argon.shtml]. Accessed 4 November 2020.
[6] Institute for Antimicrobial Chemotherapy. "Antibiotic resistance in Russia (Антибиотикорезистентность в России)". [http://www.antibiotic.ru/index.php?doc=95]. Accessed 4 November 2020.
[7] World Health Organization (WHO). "Central Asian and Eastern European Surveillance of Antimicrobial Resistance Annual report 2018". [https://www.euro.who.int/en/health-topics/disease-prevention/antimicrobial-resistance/publications/2018/central-asian-and-eastern-european-surveillance-of-antimicrobial-resistance-annual-report-

2018-2018]. Accessed 4 November 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 Russia conducts environmental detection or surveillance activities for antimicrobial residues or AMR organisms. The Strategy for Preventing the Spread of Antimicrobial Resistance in the Russian Federation until 2030 (adopted 2017) lays out actions aimed at ensuring systematic monitoring of the spread of antimicrobial resistance, but neither the strategy itself nor its action plan for 2017–2020 mentions conducting environmental surveillance [1, 2]. The latest Review of the State and Pollution of the Environment in the Russian Federation, for 2019, does not provide information on antimicrobial residues or AMR organisms in soil or waterways [3]. No evidence of such surveillance being conducted could be located on the websites of the Federal Service for Hydrometeorology and Environmental Monitoring, the Ministry of Natural Resources and Ecology or the Ministry of Health website [4, 5, 6]. Finally, Russia's WHO Tripartite Antimicrobial Resistance (AMR) Self-assessment Survey for 2019 does not provide evidence of ARM environmental detection or surveillance activities taking place [7].

[1] Government of the Russian Federation. No. 2045-r of 25 September 2017. "The Strategy for Preventing the Spread of Antimicrobial Resistance in the Russian Federation until 2030 (Стратегия предупреждения распространения антимикробной резистентности резистентности в Российской Федерации на период до 2030 года)". [http://government.ru/docs/29477/]. Accessed 12 November 2020.
[2] Ministry of Health of the Russian Federation. 11 September 2017. "Plan of Actions for the Implementation of the Strategy for the Mid-term Period (2017-2020) (План Мероприятий По Реализации Стратегии На Среднесрочный Период (2017 – 2020 Годы)". [https://static-0.rosminzdrav.ru/system/attachments/attaches/000/036/161/original/%D0%9F%D0%9B%D0%90%D0%9D_%D0%BC%D0%B5%D1%80%D0%BE%D0%BF%D1%80%D0%B8%D1%8F%D1%82%D0%B8%D0%B9_%D0%BF%D0%BE_%D1%80%D0%B5%D0%B0%D0%BB%D0%B8%D0%B7%D0%B0%D1%86%D0%B8%D0%B8_%D0%A1%D1%82%D1%80%D0%B0%D1%82%D0%B5%D0%B3%D0%B8%D0%B8_%D0%BD%D0%B0_%D1%81%D1%80%D0%B5%D0%B4%D0%BD%D0%B5%D1%81%D1%80%D0%BE%D1%87%D0%BD%D1%8B%D0%B9_%D0%BF%D0%B5%D1%80%D0%B8%D0%BE%D0%B4_%282017_%E2%80%93_2020_%D0%B3%D0%BE%D0%B4%D1%8B%29.pdf?1507709525]. Accessed 12 November 2020.
[3] Federal Service for Hydrometerology and Monitoring of the Environment (Rosgidromet). 2019. "Review of the State and Pollution of the Environment in the Russian Federation for 2019 (Обзор состояния и загрязнения окружающей среды в Российской Федерации за 2019 год)". [http://www.meteorf.ru/product/infomaterials/90/?year=2019&ID=90]. Accessed 12 November 2020.
[4] Federal Service for Hydrometerology and Monitoring of the Environment (Rosgidromet). [http://www.meteorf.ru]. Accessed 12 November 2020.
[5] Ministry of Natural Resources and Ecology of the Russian Federation. [http://www.mnr.gov.ru/]. Accessed 12 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 12 November 2020.
[7] World Health Organization (WHO). 2019. "Global Database for the Tripartite Antimicrobial Resistance (AMR) Country Self-assessment Survey (TrACSS)". [https://amrcountryprogress.org/]. Accessed 12 November 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

There are national laws and regulations in place requiring prescriptions for antibiotic use for humans, but there is evidence of gaps in enforcement. Decree 681 on Approval of the List of Narcotic Substances, Psychoactive Drugs and Their Precursors Subject to Control in the Russian Federation (adopted 1998, last amended 2020) sets out a list of drugs subject to control in the country, including a range of antibiotics [1]. Order 328 on the Rational Application of Medicines, Rules for Writing Prescriptions for Them and Procedure for Their Issue by Pharmaceutical Institutions (Organizations) (adopted 1999, last amended 2008) stipulates the procedure for obtaining medicines, prohibiting a range of drugs from being sold without a prescription, including the antibiotics listed in Decree no. 681 [2, 3]. Russia's WHO Tripartite Antimicrobial Resistance (AMR) Self-assessment Survey for 2019 confirms that the country has laws/regulations on prescription and sale of antimicrobials for human use [4]. However, there is evidence that people can in practice buy antibiotics without a prescription. In 2016, the director of the National Research Institute of Antimicrobial Chemotherapy reported that there was a problem with the enforcing the ban [5]. Consequently, in 2017 Order 647 on Approval of the Regulations Appropriate to Pharmacy Practice on Medicines was introduced, aiming to solve the issue by making it compulsory for pharmacies to conduct and submit internal audits on their performance [6]. Additionally, also in 2017 Order 403 on the Approval of Rules for the Issue of Medicines, Including Immunobiological Products, by Pharmaceutical Organizations and Individual Entrepreneurs Holding Pharmacist Licenses updated the procedure for selling medicines, inter alia reaffirming the prohibition on providing antibiotics without a prescription and increasing penalties for non-compliance [7]. However, it has since been reported (in 2018 and in 2020) that whilst buying antibiotics without a prescription has become more difficult, it is still widely possible [8, 9].

[1] Government of the Russian Federation. No.681 of 30 June 1998. "On Approval of the List of Narcotic Substances, Psychoactive Drugs and Their Precursors Subject to Control in the Russian Federation (Об утверждении перечня наркотических средств, психотропных веществ и их прекурсоров, подлежащих контролю в Российской Федерации)". [http://base.garant.ru/12112176/#block_222]. Accessed 5 November 2020.
[2] Ministry of Health of the Russian Federation. No.328 of 28 August 1999. "On the Rational Application of Medicines, Rules for Writing Prescriptions for Them and Procedure for Their Issue by Pharmaceutical Institutions (Organizations) (О рациональном назначении лекарственных средств, правилах выписывания рецептов на них и порядке их отпуска аптечными учреждениями (организациями))". [https://minzdrav.gov.ru/documents/8001-prikaz-minzdravsotsrazvitiya-rossii-328-ot-23-avgusta-1999-g]. Accessed 5 November 2020.
[3] Russian Pharmaceuticals. 19 June 2008. "Sale of antibiotics without prescription from a doctor prohibited (Продажа антибиотиков без рецепта врача запрещена)". [http://pharmapractice.ru/1754]. Accessed 5 November 2020.
[4] World Health Organization (WHO). 2019. "Global Database for the Tripartite Antimicrobial Resistance (AMR) Country Self-assessment Survey (TrACSS)". [https://amrcountryprogress.org/]. Accessed 5 November 2020.
[5] Izvestiya. 28 September 2016. "Antibiotics Will Not Be Sold Without a Prescription (Антибиотики без рецепта не продадут)". [https://iz.ru/news/634810]. Accessed 5 November 2020.
[6] Ministry of Health of the Russian Federation. No. 647n of 31 August 2016. "On Approval of the Regulations Appropriate to Pharmacy Practice on Medicines (Об утверждении Правил надлежащей аптечной практики лекарственных препаратов для медицинского применения)". [https://rg.ru/2017/01/10/minzdrav-prikaz647-site-dok.html]. Accessed 5 November 2020.
[7] Ministry of Health of the Russian Federation. No.403n of 11 July 2017. "On the Approval of Rules for the Issue of Medicines, Including Immunobiological Products, by Pharmaceutical Organizations and Individual Entrepreneurs Holding Pharmacist Licenses (Об утверждении правил отпуска лекарственных препаратов для медицинского применения, в том

числе иммунобиологических лекарственных препаратов, аптечными организациями, индивидуальными предпринимателями, имеющими лицензию на фармацевтическую деятельность)". [https://rg.ru/2017/09/12/minzdrav-prikaz403-site-dok.html]. Accessed 5 November 2020.
[8] Novosti Kubani. 1 March 2018. "Antibiotics by Prescription: Unnecessary Bother or Care for the Health of Citizens of Kuban (Антибиотики по рецепту: лишние хлопоты или забота о здоровье кубанцев)". [https://kubnews.ru/obshchestvo/2018/03/01/antibiotiki/]. Accessed 5 November 2020.
[9] Ryazanskiye vedomosti. 4 March 2020. "Do We Diagnose Ourselves? (Диагноз ставим сами?)". [https://rv-ryazan.ru/diagnoz-stavim-sami/]. Accessed 5 November 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: 0

There is no public evidence that prescriptions are required for animal antibiotics in Russia. According to the State Register of Medicinal Products for Veterinary Use (last modified 2020), all medicines registered for veterinary use can be obtained without a prescription [1]. The Action Plan for the Implementation of the ARM Strategy for Years 2017–2020 (adopted 2017) includes plans to introduce regulations limiting the use of antibiotics for animals [2]. The plan indicates that the Ministry of Agriculture (MoA) and the Federal Service for Veterinary and Phytosanitary Surveillance (Rosselkhoznadzor) are the institutions responsible for introducing, by the end of 2020, legislation that aims to restrict the use of antibiotics for animals, including requiring a prescription for their purchase [2]. However, there is no evidence of such legislation – or of progress in its development or adoption – on the websites of the MoA, Rosselkhoznadzor or the Ministry of Health [3, 4, 5]. Finally, Russia's AMR action plan is not listed on the World Health Organization website, and no evidence of prescriptions for antibiotic use for animals could be found in international or local media [6].

[1] Open Data Portal of Russia. "State Register of Medicinal Products for Veterinary Use (Государственный реестр лекарственных средств для ветеринарного применения)". [https://data.gov.ru/opendata/7708523530-gosreestrleksredstv]. Accessed 5 November 2020.
[2] Ministry of Health of the Russian Federation. 11 September 2017. "Plan of Actions for the Implementation of the Strategy for the Mid-term Period (2017-2020) (План Мероприятий По Реализации Стратегии На Среднесрочный Период (2017 – 2020 Годы)". [https://static-0.rosminzdrav.ru/system/attachments/attaches/000/036/161/original/%D0%9F%D0%9B%D0%90%D0%9D_%D0%BC%D0%B5%D1%80%D0%BE%D0%BF%D1%80%D0%B8%D1%8F%D1%82%D0%B8%D0%B9_%D0%BF%D0%BE_%D1%80%D0%B5%D0%B0%D0%BB%D0%B8%D0%B7%D0%B0%D1%86%D0%B8%D0%B8_%D0%A1%D1%82%D1%80%D0%B0%D1%82%D0%B5%D0%B3%D0%B8%D0%B8_%D0%BD%D0%B0_%D1%81%D1%80%D0%B5%D0%B4%D0%BD%D0%B5%D1%81%D1%80%D0%BE%D1%87%D0%BD%D1%8B%D0%B9_%D0%BF%D0%B5%D1%80%D0%B8%D0%BE%D0%B4_%282017_%E2%80%93_2020_%D0%B3%D0%BE%D0%B4%D1%8B%29.pdf?1507709525]. Accessed 5 November 2020.
[3] Ministry of Agriculture the Russian Federation. [www.mcx.ru/]. Accessed 5 November 2020.
[4] Federal Service for Veterinary and Phytosanitary Supervision. "Normative Documents (Нормативные документы)". [https://fsvps.gov.ru/fsvps/laws/class/3]. Accessed 5 November 2020
[5] Ministry of Health the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 5 November 2020.
[6] World Health Organization (WHO). "Library of national AMR action plans". [http://www.who.int/antimicrobial-resistance/national-action-plans/library/en]. Accessed 5 November 2020

1.2 ZOONOTIC 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: 0

There is no evidence of a national strategy on zoonotic diseases in Russia. Whilst there is evidence that the Veterinary Department of the Ministry of Agriculture monitors zoonotic diseases, publishing reports on the situation in the country, no strategy documents could be located on the ministry's website [1, 2]. Such documents are also absent from the Ministry of Health website [3]. The Federal Service for Supervision of Consumer Rights Protection and Human Welfare is responsible for the development of sanitary and epidemiological regulations, and for monitoring their implementation, but there is no explicit reference to zoonotic diseases in the legislation (adopted 2004, last amended 2013) regulating the Service's functions [4].

[1] Ministry of Agriculture of the Russian Federation. 12 October 2018. "Epizoonotic Situation by Zoonosis in the Russian Federation (Эпизоотическая ситуация по антропозоонозам в Российской Федерации)". [http://mcx.ru/ministry/departments/departament-veterinarii/news/kruglyy-stol-v-ramkakh-20-y-agropromyshlennoy-vystavki-zolotaya-osen-organizovannoy-departamentom-ve/]. Accessed 5 November 2020.
[2] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 5 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 5 November 2020
[4] Government of the Russian Federation. No.322 of 30 June 2004. "On the Approval of the Resolution on the Federal Service for Surveillance in the Sphere of Consumer Protection and Human Welfare (О федеральной службе по надзору в сфере защиты прав потребителей и благополучия человека)". [http://www.rospotrebnadzor.ru/region/functions.php]. Accessed 5 November 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

There is no public evidence that Russia has legislation that identifies pathways for transmission of zoonotic diseases from animals to humans, which includes measures for risk identification and reduction. Federal Service for Veterinary and Phytosanitary Surveillance (Rosselkhoznadzor), under the supervision of the Ministry of Agriculture (MoA), is the state executive body that carries out the function of protecting the population from animal infectious deseases [1]. The websites of the Rosselkhoznadzor or the MoA have not found to contain evidence on documents addressing zoonotic disease spillover risks [1, 2]. There is no public evidence of such legislation on the websites of the Ministry of Health or the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare, which is responsible for developing and monitoring the fulfilment of sanitary and epidemiological regulations [3, 4]. However, Rosselkhoznadzor has published a series of documents dedicated to the Prevention and Control of Infectious Diseases Common to Humans and Animals, covering 13 zoonotic diseases that include brucellosis, salmonellosis, anthrax and rabies [5]. Each document dedicated to a particular zoonosis describes pathways for transmission of zoonotic diseases from animals to humans and lays out measures and requirements

for the prevention of infection in animals, from animals to humans, and humans to humans [5]. The documents, however, do not describe measures taken by the Rosselkhoznadzor or any other federal or regional agency to address spillover risks or prevent such events.

[1] Federal Service for Veterinary and Phytosanitary Surveillance. [https://fsvps.gov.ru/fsvps/main.html?_language=en]. Accessed 17 November 2020.
[2] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 17 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 17 November 2020.
[4] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [http://www.rospotrebnadzor.ru/]. Accessed 17 November 2020.
[5] Federal Service for Veterinary and Phytosanitary Surveillance. "Documents. Prevention and Control of Infectious Diseases Common to Humans and Animals (Документы. Профилактика и борьба с заразными болезнями, общими для человека и животных)". [https://fsvps.gov.ru/fsvps/laws/class/16/56]. Accessed 17 November 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: 0

There is no evidence of a national plan for the surveillance and control of zoonotic pathogens. Whilst there is evidence that the Veterinary Department of the Ministry of Agriculture performs monitoring of such zoonotic diseases as tuberculosis, anthrax, rabies, avian influenza, brucellosis and leptospirosis in animals, no guidance documents governing the surveillance or control of these pathogens were found on the ministry's website [1, 2]. Such documents are also absent from the Ministry of Health website [3]. However, Order 150 on the Introduction of Logging and Reporting Documentation of Tuberculosis Monitoring (adopted 2004), issued pursuant to Law 77-FZ on the Prevention of the Spread of Tuberculosis in the Russian Federation (adopted 2001, last amended 2018), provides forms for the collection of information on tuberculosis patients and their treatment [4, 5]. The forms are to be filled out by institutions caring for the patients and to be submitted to the Ministry on a quarterly basis [4].

[1] Ministry of Agriculture of the Russian Federation. 12 October 2018. "Epizoonotic Situation by Zoonosis in the Russian Federation (Эпизоотическая ситуация по антропозоонозам в Российской Федерации)". [http://mcx.ru/ministry/departments/departament-veterinarii/news/kruglyy-stol-v-ramkakh-20-y-agropromyshlennoy-vystavki-zolotaya-osen-organizovannoy-departamentom-ve/]. Accessed 5 November 2020.
[2] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 5 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 5 November 2020
[4] Ministry of Health of the Russian Federation. No.150 of 13 February 2004. "On the Introduction of Logging and Reporting Documentation of Tuberculosis Monitoring ("О введении в действие учетной и отчетной документации мониторинга туберкулеза)". [http://docs.cntd.ru/document/901893053]. Accessed 5 November 2020.
[5] Government of the Russian Federation. No. 77-FZ of 18 June 2001. "On the Prevention of the Spread of Tuberculosis in the Russian Federation (О предупреждении распространения туберкулеза в Российской Федерации)". [http://docs.cntd.ru/document/901789645]. Accessed 5 November 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 that Russia has a department, agency, or similar unit dedicated to zoonotic disease that functions across ministries. Evidence of such platform is absent from the websites of the Ministry of Health and the Ministry of Agriculture [1, 2]. Article 22 of Veterinary Law 4979-1 (adopted 1998, last amended 2020) states that it is the State Veterinary Regulator, the State Consumer Protection and Human Welfare Regulator, and the State Customs Agency are jointly responsible for protecting the population from diseases to which both humans and animals are susceptible [3]. From these stakeholders, the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) has demonstrated the most involvement by periodically issuing resolutions that contain recommendations to other state departments on how to respond to threats or instances of zoonotic diseases. For example, in response to the 2016 Zika fever epidemic, Rospotrebnadzor recommended that the Ministry of Health introduce limitations on blood donations by people returning from regions affected by the virus, and that the Ministry of Transport updates its disinfection and disinsection policies [4]. Other instances include resolutions on measures to contain rabies and anthrax [5, 6].

[1] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 5 November 2020.
[2] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 5 November 2020.
[3] Government of the Russian Federation. No.4979-1 of 14 May 1993. "Veterinary Law (О ветеринарии)". [https://fzrf.su/zakon/o-veterinarii-4979-1/]. Accessed 5 November 2020.
[4] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.14 of 13 February 2016. "On Measures to Prevent the Spread of Zika Virus in the Territory of the Russian Federation (О мерах по недопущению распространения на территории РФ лихорадки Зика)". [http://www.rospotrebnadzor.ru/documents/details.php?ELEMENT_ID=5802]. Accessed 5 November 2020.
[5] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.30 of 18 April 2018. "On Additional Measures Aimed at Preventing Rabies in the Russian Federation (О дополнительных мерах, направленных на профилактику бешенства в Россйской Федерации)". [http://www.rospotrebnadzor.ru/deyatelnost/epidemiological-surveillance/?ELEMENT_ID=10503]. Accessed 5 November 2020.
[6] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.180 of 12 December 2016. "On Additional Measures Aimed at the Prevention of Anthrax in the Russian Federation (О дополнительных мероприятиях, направленных на профилактику сибирской язвы в Российской Федерации)". [http://www.rospotrebnadzor.ru/deyatelnost/epidemiological-surveillance/?ELEMENT_ID=7673]. Accessed 5 November 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

Russia has a mechanism for owners of livestock to conduct and report on disease surveillance to a government agency. Article 7 of Regulation SP 3.1.084-96 / VP 13.3.4.1100-96 on the Prevention and Control of Infectious Diseases Common to Humans and Animals (adopted 1996), stipulates that animal owners, livestock producers and animal feed producers are required to "immediately notify veterinarians about all cases of sudden death or simultaneous mass illness of animals, as well

as about their unusual behavior" [1]. Furthermore, enterprises and organizations owning animals are obliged to inform either the Federal Service for Veterinary and Phytosanitary Surveillance (Rosselkhoznador) or the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare about any incidents or situations presenting a risk of an infection with a zoonotic disease [1]. Rosselkhoznador's regional bodies operate hotlines for reports of priority local epizootic diseases and other environmental threats [2, 3]. In case of an outbreak or concerns over the development thereof, Rosselkhoznadzor's regional offices are required to immediately inform the Ministry of Agriculture in accordance with the procedures layed out in Regulation 189 on the Provision of Information to the System of State Information Support in the Field of Agriculture (adopted 2008) [4].

[1] Chief State Veterinary Inspector of the Russian Federation and Deputy Chief State Sanitary Doctor of the Russian Federation. SP 3.1.084-96 / VP 13.3.4.1100-96 of 31 May 1996. "Prevention and Control of Infectious Diseases Common to Humans and Animals (Профилактика и борьба с заразными болезнями, общими для человека и животных)". [http://www.fsvps.ru/fsvps/laws/167.html#4]. Accessed 5 November 2020.
[2] Department of Rosselkhoznadzor for the Rostov, Volgograd and Astrakhan regions and Republic of Kalmykia. "Hotline (Горячая линия)". [https://rsn-rostov.ru/goryachaya-liniya/]. Accessed 5 November 2020.
[3] Department of Rosselkhoznadzor for the Altai Krai and Republic of Altai. "Hotline for African swine fever (Горячая линия по африканской чуме свиней)". [http://www.rshn-alt.ru/index.php?option=com_content&view=article&id=7997:2017-08-24-04-06-42&catid=44:2017-08-23-06-45-3]. Accessed 5 November 2020.
[4] Ministry of Agriculture of the Russian Federation. No.189 of 2 April 2008. "On the Regulations for the Provision of Information to the System of State Information Support in the Field of Agriculture (О Регламенте предоставления информации в систему государственного информационного обеспечения в сфере сельского хозяйства)". [http://www.garant.ru/products/ipo/prime/doc/12059867/]. Accessed 5 November 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 that Russia has laws or guidelines explicitly protecting the data generated through disease surveillance activities. Cases when livestock is officially inspected by a state body fall under the provision of Law 294-FZ on the Protection of Rights of Legal Persons and Individual Entrepreneurs During the Conduction of State Inspection and Municipal Inspection (adopted 2008), which prohibits state inspection services from distributing information collected during an inspection [1]. Similarly, the Personal Data Law 152-FZ (adopted 2006, last amended 2020) regulates the collection and distribution of personal data, and can be considered as applicable to cases when citizens submit information to state inspection [2]. Whilst the Federal Service for Phytosanitary and Veterinary Surveillance's (Rosselkhoznadzor's) Order 779 on Personal Data in the Possesion of the Federal Service for Phytosanitary and Veterinary Surveillance (adopted 2014) regulates the Service's personal data processing procedures, it does not explicitly refer to data collected during animal surveillance activities [3]. Finally, Order 189 on Regulations for Provision of Information to the State Information System for the Agricultural Sector (adopted 2008) stipulates that regional authorities are obliged to communicate information on outbreaks of zoonotic diseases to the Ministry of Agriculture (MoA) immediately upon notification. The communication form provided in the order is marked with the notice "Confidentiality is guaranteed by the receiver of the information", but it does not elaborate on how confidentiality is guaranteed [4]. No further policy documents protecting personal data were found on the Ministry of Health website [5]. Several federal bodies of the MoA have published separate policy documents on personal data obtained online, but these were not found to contain any specific reference to data collected during disease surveillance activities [6, 7]. No additional evidence of any legislation protecting the data generated through disease surveillance activities was located on

the websites of the Ministry of Agriculture or Ministry of Health [5, 8].

[1] Governmnet of the Russian Federation. No.294-FZ of 26 December 2008. “On the Protection of Rights of Legal Persons and Individual Entrepreneurs During the Conduction of State Inspection and Municipal Inspection (О защите прав юридических лиц и индивидуальных предпринимателей при осуществлении государственного контроля (надзора) и муниципального контроля)". [http://www.consultant.ru/document/cons_doc_LAW_83079/]. Accessed 6 November 2020.
[2] Governmnet of the Russian Federation. No.152-FZ of 27 July 2006. “On Personal Data” (О персональных данных)". [http://docs.cntd.ru/document/901990046]. Accessed 6 November 2020.
[3] Federal Service for Phytosanitary and Veterinary Surveillance. No.779 of 24 December 2014. "On Personal Data in the Possesion of the Federal Service for Phytosanitary and Veterinary Surveillance (О персональных данных в Федеральной службе по ветеринарному и фитосанитарному надзору)". [http://www.fsvps.ru/fsvps/laws/4115.html]. Accessed 6 November 2020.
[4] Ministry of Agriculture of the Russian Federation. No.189 of 2 April 2008. "On the Regulations for Provision of Information to the State Information System for the Agricultural Sector ("О регламенте предоставления информации в систему государственного информационного обеспечения в сфере сельского хозяйства)". [http://www.fsvps.ru/fsvps-docs/ru/iac/asf/laws/reglament_189.pdf]. Accessed 6 November 2020.
[5] Ministry of Agriculture of the Russian Federation. [www.mcx.ru]. Accessed 6 November 2020.
[6] Ministry of Agriculture of the Stavropol Krai. No.220 of 6 May 2013. "On the Protection of Personal Data at the Ministry of Agriculture of the Stavropol Krai (О защите персональных данных в министерстве сельского хозяйства ставропольского края)". [http://www.mshsk.ru/download/Prikaz/220.pdf]. Accessed 6 November 2020.
[7] Ministry of Agriculture of the Republic of Bashkortostan. No.237 of 4 August 2015. "On the Organisation of Processing of Personal Data at the Ministry of Agriculture of the Republic of Bashkortostan (Об организации процессов обработки персональных данных в министерстве сельского хозяйства республики башкортостан)". [http://docs.cntd.ru/document/441631454]. Accessed 6 November 2020.
[8] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 6 November 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: 1

Russia conducts surveillance of zoonotic disease in wildlife. The latest available annual report (2018) of the Veterinary Department of the Ministry of Agriculture contains wildlife surveillance data of the following diseases: rabies, avian influenza, and brucellosis [1]. The number of rabies cases is aggregated into three categories: agricultural, wild and domestic animals. The number of brucellosis cases is given for deer, large horned livestock and small horned livestock [1]. The website of the Ministry of Agriculture (MoA) does not contain any further reports or documents on wildlife surveillance data [2]. However, the Federal Service for Veterinary and Phytosanitary Surveillance (Rosselkhoznadzor) publishes yearly and quarterly reports on the zoonotic disease situation in the country. The 2019 report provides statistics, the number of infected and incidence rate, of rabies in wild boars and of avian influenza in wild birds [3]. The report also gives cumulative infection rate of all the wild animals for a particular zoonosis, for example stating that in 2019 Q1, 45% (or 167) of animals that died from rabies were wild [3].

[1] Ministry of Agriculture of the Russian Federation. 12 October 2018. "Epizoonotic Situation by Zoonosis in the Russian Federation (Эпизоотическая ситуация по антропозоонозам в Российской Федерации)". [http://mcx.ru/ministry/departments/departament-veterinarii/news/kruglyy-stol-v-ramkakh-20-y-agropromyshlennoy-vystavki-zolotaya-osen-organizovannoy-departamentom-ve/]. Accessed 5 November 2020.

[2] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 5 November 2020.
[3] Federal Service for Veterinary and Phytosanitary Surveillance. "Epizootic situation in the Russian Federation, 2019 (Эпизоотическая ситуация в Российской Федерации 2019 год)". [https://fsvps.gov.ru/fsvps/iac/rf/reports.html].. Accessed 5 November 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: 1

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: 53.86

2019

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 of mechanisms for collaboration between the Russian state and the private sector in controlling or responding to zoonoses. The Federal Service for Veterinary and Phytosanitary Surveillance (Rosselkhoznadzor), under the supervision of the Ministry of Agriculture, is an executive body that is responsible for the prevention and control of zoonoses [1]. Sanitary-Veterinary Rules SP 3.1.084-96 / VP 13.3.4.1100-96 on the Prevention and Control of Infectious Diseases Common to Humans and Animals (adopted 1996) stipulate the obligations of enterprises and organizations in the area of zoonosis prevention and control, but they do not outline any cooperation mechanisms between the state and the private sector [2]. No legislation covering such mechanisms could be located on the websites of Rosselkhoznadzor or Ministry of Agriculture [1, 3]. The Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor), under the supervision of Ministry of Health, is responsible developing and monitoring the fulfilment of sanitary and epidemiological regulations [4]. Whilst Rospotrebnadzor periodically issues resolutions that refer to zoonosis and involve the private sector, there is no evidence of collaboration mechanisms on Rospotrebnadzor's website or that of the Ministry of Health [4, 5, 6].

[1] Federal Service for Veterinary and Phytosanitary Surveillance. [https://fsvps.gov.ru/fsvps/main.html?_language=en]. Accessed 17 November 2020.
[2] Chief State Veterinary Inspector of the Russian Federation and Deputy Chief State Sanitary Doctor of the Russian Federation. SP 3.1.084-96 / VP 13.3.4.1100-96 of 31 May 1996. "Prevention and Control of Infectious Diseases Common to Humans and Animals (Профилактика и борьба с заразными болезнями, общими для человека и животных)". [https://fsvps.gov.ru/fsvps/laws/167.html]. Accessed 17 November 2020.
[3] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 17 November 2020.
[4] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. [http://www.rospotrebnadzor.ru/]. Accessed 17 November 2020.
[5] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.14 of 12 February 2016. "On Measures to Prevent the Spread of Zika Fever in the Russian Federation (О мерах по недопущению распространения на территории РФ лихорадки Зика)". [https://www.rospotrebnadzor.ru/documents/details.php?ELEMENT_ID=5802]. Accessed 17 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 17 November 2020.

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 insufficient evidence that Russia maintains an annually updated record of facilities at which work with especially dangerous pathogens and toxins is carried out. While Russian policy documents clearly indicate that inventory records must be kept and maintained at facilities working with especially dangerous pathogens and toxins, there is insufficient evidence of a national register. Resolution 1.2.036-95 on the Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (adopted 1995), prepared by the State Committee for Sanitary and Epidemiological Supervision, sets out procedures for working with dangerous microorganisms, classified into groups I-IV (descending danger level) [1]. Article 3 of the resolution stipulates that departments working with materials in pathogenicity

groups I-IV are obliged to maintain records of inventories (their storage and movement), and that this information should be stored for three years [1]. However, there is no reference to inventory records being collected at the national level [1]. Furthermore, the Federal Service on Surveillance of Consumer Rights Protection and Human Welfare (Rospotrebnadzor) is responsible for licensing organizations to work with dangerous pathogens and ionizing radiation [2]. The register of the licensed organizations is publicly available, but there is no indication of Rospotrebnadzor maintaining records of their inventories [3]. Finally, the state policy in the Field of Chemical and Biological Safety until 2025 and beyond (approved 2013) envisages the creation of a federal register for facilities that present a potential chemical or biological danger, but there is no evidence that it has been established on the websites of the Ministry of Defence, Ministry of Health or Ministry of Agriculture [4, 5, 6, 7]. Every year, Russia reports to the United Nations Office at Geneva (UNOG) for the "Confidence Building Measure Return", which is a reporting mechanism set by the Biological Weapons Convention, and each report includes data on Biosafety Level (BSL) facilities, their standards, organisational structure, activity and other related information [8]. However, Russia's reports are not publicly available [8]. No evidence of maintained record of facilities could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials [9].

[1] State Committee for Sanitary and Epidemiological Supervision. No.1.2.036-95 of 28 August 1995. "Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (Порядок учета, хранения, передачи и транспортирования микроорганизмов I - IV групп патогенности)". [http://www.zakonprost.ru/content/base/10931]. Accessed 6 November 2020.
[2] Government of the Russian Federation. No.322 of 30 June 2004. "On the Approval of the Resolution on the Federal Service for Supervision of Consumer Rights Protection and Human Welfare (О федеральной службе по надзору в сфере защиты прав потребителей и благополучия человека)". [http://www.rospotrebnadzor.ru/region/functions.php]. Accessed 6 November 2020.
[3] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. "Register of Issued Licenses for Activities Related to the Use of Pathogens of Infectious Diseases, and Licenses for Activities in the Use of Sources of Ionizing Radiation (Реестр выданных лицензий на деятельность, связанную с использованием возбудителей инфекционных заболеваний, и лицензий на деятельность в области использования источников ионизирующего излучения)". [http://fp.crc.ru/licenfr/?type=list]. Accessed 6 November 2020.
[4] President of the Russian Federation. No.Pr-2573 of 1 November 2013. "On the Fundamentals of the State Policy of the Russian Federation in the Field of Chemical and Biological Safety for the Period Up to 2025 and Beyond (Об Основах государственной политики Российской Федерации в области обеспечения химической и биологической безопасности на период до 2025 года и дальнейшую перспективу)". [http://www.garant.ru/products/ipo/prime/doc/70423098/#ixzz5cOb2DIIq]. Accessed 6 November 2020.
[5] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 6 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 6 November 2020.
[7] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 6 November 2020.
[8] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 6 November 2020.
[9] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 6 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

Russia does not have biosecurity legislation or regulations in place. In 2017, the Ministry of Health prepared a draft bill for a Biological Security Law, but the third reading of the bill has not yet taken place, having been postponed in March 2020 until an unknown date [1]. After the bill's third reading, the Federal Council and the president still need to approve it before it becomes law [1]. The bill addresses biosecurity, jointly listing accidents and deliberate attacks on the facilities that store or work with dangerous pathogens as one of the main biological threats (article 7) [1]. Article 11 further stipulates biosecurity measures, such as introducing technological solutions to prevent the release of pathogens and providing physical protection from unauthorized access to the pathogens, but it does not elaborate on the details of these measures [1]. The State Policy in the Field of Chemical and Biological Safety until 2025 and Beyond (approved 2013) outlines broad biosecurity targets, but it does not address specific measures besides enhancement of automatic accident prevention processes [2]. Resolution 1.2.036-95 on the Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (adopted 1995), prepared by the State Committee for Sanitary and Epidemiological Supervision, mainly focuses on biosafety measures when working with pathogens, but it does outline some general biosecurity procedures, for example, operational practices (keeping a record of pathogens, their storage and movement) [3]. Every year, Russia reports to the United Nations Office at Geneva (UNOG) for the "Confidence Building Measure Return", which is a reporting mechanism set by the Biological Weapons Convention, and each report includes data on Biosafety Level (BSL) facilities, their standards, organisational structure, activity and other related information [4]. However, Russia's reports are not publicly available, therefore it is unknown if any biosecurity regulations are shared in the reports [4]. No evidence of biosecurity legislation could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials [5]. No additional evidence of Russian regulations on biosecurity was found on the websites of the Ministries of Health, Agriculture or Defense [6, 7, 8].

[1] Ministry of Health fo the Russian Federation. No. 850485-7 of 16 August 2017. "On Biological Security in the Russian Federation (О биологической безопасности Российской Федерации)". [https://sozd.duma.gov.ru/bill/850485-7#bh_histras]. Accessed 6 November 2020.
[2] President of the Russian Federation. No.Pr-2573 of 1 November 2013. "On the Fundamentals of the State Policy of the Russian Federation in the Field of Chemical and Biological Safety for the Period Up to 2025 and Beyond (Об Основах государственной политики Российской Федерации в области обеспечения химической и биологической безопасности на период до 2025 года и дальнейшую перспективу)".
[http://www.garant.ru/products/ipo/prime/doc/70423098/#ixzz5cOb2DIIq]. Accessed 6 November 2020.
[3] State Committee for Sanitary and Epidemiological Supervision. No.1.2.036-95 of 28 August 1995. "Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (Порядок учета, хранения, передачи и транспортирования микроорганизмов I - IV групп патогенности)".
[http://www.zakonprost.ru/content/base/10931]. Accessed 6 November 2020.
[4] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 6 November 2020.
[5] Verification Research, Training and Information Centre. "BWC Legislation Database".
[https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 6 November 2020.
[6] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 6 November 2020.
[7] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 6 November 2020.
[8] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 6 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

No evidence was found that biosecurity legislation or regulations are yet in place in Russia, or that there is an agency responsible for the enforcement of such regulations. In 2017, the Ministry of Health prepared a draft bill for a Biological Security Law, but the third reading of the bill has not yet taken place, having been postponed in March 2020 until an unknown date [1]. After the bill's third reading, the Federal Council and the president still need to approve it before it becomes law [1]. The bill sets out measures aimed at protecting the population and the environment from exposure to dangerous biological materials, to prevent biological threats, and to develop a national-level biological risk monitoring system [1]. The bill contains an extensive list of federal bodies that are stakeholders in the procedures and measures laid out, for example the Ministry of Health and the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare are responsible for approving rules on physical protection of biological materials and on preventing their unauthorized access [1]. Additionally, Decree 303 on Delineation of Powers of Federal Executive Authorities to Provide for the Biological and Chemical Safety of the Russian Federation does not explicitly mention biosecurity, but does designate the Minstries of Health, Defense, Industry and Trade and Civil Defence, Emergencies and Elimination of Consequences of Natural Disasters (Emercom) as being responsible for the security of facilities in which biological materials are stored or handled for their relevant field of work [2]. Every year, Russia reports to the United Nations Office at Geneva (UNOG) for the "Confidence Building Measure Return", which is a reporting mechanism set by the Biological Weapons Convention, and each report includes data on Biosafety Level (BSL) facilities, their standards, organisational structure, activity and other related information [3]. However, Russia's reports are not publicly available. No evidence of an agency could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials [4]. No other evidence of such an agency was found on the websites of the Ministries of Health, Defence and Agriculture, or that of Emercom [5, 6, 7, 8].

[1] Ministry of Health fo the Russian Federation. No. 850485-7 of 16 August 2017. "On Biological Security in the Russian Federation (О биологической безопасности Российской Федерации)". [https://sozd.duma.gov.ru/bill/850485-7#bh_histras]. Accessed 6 November 2020.
[2] Government of the Russian Federation. No.303 of 16 May 2005. "About Delineation of Powers of Federal Executive Authorities to Provide for the Biological and Chemical Safety of the Russian Federation (О разграничении полномочий федеральных органов исполнительной власти в области обеспечения биологической и химической безопасности Российской Федерации). [http://pravo.gov.ru/proxy/ips/?docbody=&prevDoc=102159135&backlink=1&&nd=102092414]. Accessed 6 November 2020.
[3] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 6 November 2020.
[4] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 6 November 2020.
[5] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 6 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 6 November 2020.
[7] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 6 November 2020.
[8] Ministry for Civil Defence, Emergencies and Elimination of Consequences of Natural Disasters. [www.mchs.gov.ru/]. Accessed 6 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 evidence that Russia has taken action to consolidate inventories of dangerous pathogens and toxins. In 2016, the Ministry of Health submitted a draft law on the National Collection of Pathogenic Microorganisms, envisaging inter alia the consolidation of national collections [1]. The draft is currently at the regulatory impact assessment stage [1]. According to a 2016 academic article, four agencies hold state collections of pathogenic microorganisms: the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor), the Russian Academy of Sciences, the Ministry of Defense and the Ministry of Agriculture [2]. Information on Rospotrebnadzor's collections of pathogenic microorganisms is available online, but no references to collections of pathogens held by the other three bodies were found on their websites [3, 4, 5]. Rospotrebnadzor controls a network of centers that use pathogenic microorganisms for conducting studies, disease monitoring and diagnostic testing, three of which are recognized as the "state collection" of pathogenic microorganisms. Order 88 on Measures to Improve Monitoring of Pathogens of Infectious and Parasitic Diseases (adopted 2008, invalidated in 2017 by Order 1116) listed 50 centres under Rospotrebnadzor's control that held dangerous agents [6]. The subsequent Order 1116 on Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (adopted 2017) increased the number of such centers to 81 [7]. Every year, Russia reports to the United Nations Office at Geneva (UNOG) for the "Confidence Building Measure Return", which is a reporting mechanism set by the Biological Weapons Convention, and each report includes data on Biosafety Level (BSL) facilities, their standards, organisational structure, activity and other related information [8]. However, Russia's reports are not publicly available. No evidence of efforts to consolidate inventories of dangerous pathogens and toxins could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials [9].

[1] Ministry of Health of the Russian Federation. 2016. "About the National Collection of Pathogenic Microorganisms (О национальной коллекции патогенных микроорганизмов)". [https://regulation.gov.ru/p/50017/]. Accessed 9 November 2020.
[2] Onishenko, G. G., Kutyrev, V. V., Osin, A. V. 2016. "Collection Activities in the Sphere of Use of Pathogenic Microorganisms for the Provision of Biological Security in the Russian Federation (Коллекционная деятельность в области использования патогенных микроорганизмов в обеспечении биологической безопасности Российской Федерации)". Infectious diseases: news, opinions, training. 2016/01 37:46. [https://cyberleninka.ru/article/v/kollektsionnaya-deyatelnost-v-oblasti-ispolzovaniya-patogennyh-mikroorganizmov-v-obespechenii-biologicheskoy-bezopasnosti]. Accessed 9 November 2020.
[3] Russian Academy of Sciences. [http://www.ras.ru/index.aspx]. Accessed 9 November 2020.
[4] Ministry of Defence of the Russian Federation. [http://mil.ru/]. Accessed 9 November 2020.
[5] Minstry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 9 November 2020.
[6] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.88 of 17 March 2008. "On Measures to Improve Monitoring of Pathogens of Infectious and Parasitic Diseases (О мерах по совершенствованию мониторинга за возбудителями инфекционных и паразитарных болезней)". [base.garant.ru/4186495/]. Accessed 9 November 2020.
[7] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 of 1 December 2017. "On Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (О совершенствовании системы мониторинга, лабораторной диагностики инфекционных и паразитарных болезней и индикации ПБА в Российской Федерации)". [http://www.garant.ru/products/ipo/prime/doc/71750024/#ixzz5cWCP6XAu]. Accessed 9 November 2020.

[8] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 9 November 2020.
[9] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 9 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

Russia has the capacity to conduct polymerase chain reaction (PCR) diagnostic testing for both Ebola and anthrax. Reagents for PCR-based testing for Ebola and anthrax are listed on the State Register of Medical Products [1]. Both can be found on sale at an online catalogue of molecular diagnostics products, sold under the AmpliSens trademark [2, 3]. AmpliSens diagnostic reagents are produced by a state-owned company Scientific Production Complex of the Central Research Institute of Epidemiology (CRIE) of the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) [4]. The CRIE's Centre for Molecular Diagnostics, developer of the Ebola reagents, became "entirely ready for timely etiological diagnosis of Ebola" in August 2014, and the AmpliSens reagents' registration dates from October 2014 [2, 5]. The Center for Molecular Diagnostics (CMD) of the Central Research Institute for Epidemiology of Rospotrebnadzor has PCR testing capacity for Ebola [5]. While the AmpliSens anthrax diagnostic reagents were registered in November 2011, the Russian Scientific Research Anti-Plague Institute "Microbe" has conducted PCR-based testing for anthrax since 2000 [3, 6].

[1] Federal Service For Surveillance in Healthcare. "State Register of Medical Products and Organisations (Individual Entrepreneurs) Producing Medical Products (Государственный реестр медицинских изделий и организаций (индивидуальных предпринимателей), осуществляющих производство и изготовление медицинских изделий)". [http://www.roszdravnadzor.ru/services/misearch]. Accessed 9 November 2020.
[2] InterLabService. "Set of Reagents for the Determination of Rna of the Ebola Virus, Zaire Variant (Ebov Zaire) in Biological Material by Polymerase Chain Reaction (Pcr) for in Vitro Diagnostics (Набор реагентов для определения РНК вируса лихорадки Эбола, вариант Заир (EBOV Zaire) в биологическом материале методом полимеразной цепной реакции (ПЦР) для диагностики in vitro)". [http://www.interlabservice.ru/catalog/reagents/index.php?sid=2238&id=10201]. Accessed 9 November 2020.
[3] InterLabService. "A Set of Reagents for Detecting Bacillus Anthracis Dna in Biological Material and Environmental Objects by Polymerase Chain Reaction (Pcr) With Hybridization Fluorescence Detection in Real Time (Набор реагентов для выявления ДНК Bacillus anthracis в биологическом материале и объектах окружающей среды методом полимеразной цепной реакции (ПЦР) с гибридизационно-флуоресцентной детекцией в режиме реального времени). [http://www.interlabservice.ru/catalog/reagents/index.php?sid=1464&id=6226]. Accessed 9 November 2020.
[4] Scientific Production Complex of the Central Research Institute of Epidemiology of Rospotrebnadzor. "Federal Budgetary Scientific Institution Central Research Institute of Epidemiology of Rospotrebnadzor (Федеральное бюджетное научное учреждение Центральный научно-исследовательский институт эпидемиологии Роспотребнадзора)". [www.amplisens.ru]. Accessed 9 November 2020.
[5] Centre for Molecular Diagnostics. "Ebola Virus Disease (Лихорадка Эбола)". [https://www.cmd-online.ru/o-cmd/novosti/lihoradka-ebola/]. Accessed 9 November 2020.
[6] Sayapina L. V., Lobach R. N., Bondarev V. P., Nikityuk N. F. 2016. "Current State of Laboratory Diagnosis of Anthrax: Detection and Identification of Bacillus Anthracis (Современное состояние лабораторной диагностики сибирской язвы: обнаружение и идентификация Bacillus anthracis). Biopreparatives. Prophylaxis, Diagnostics, Treatment.

[https://cyberleninka.ru/article/n/sovremennoe-sostoyanie-laboratornoy-diagnostiki-sibirskoy-yazvy-obnaruzhenie-i-identifikatsiya-bacillus-anthracis]. Accessed 9 November 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 trainthe-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 that Russia has standardized biosecurity training for personnel in facilities housing or working with especially dangerous pathogens. Russia's Regulation SP 1.3.3118-13 on Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (adopted 2013) outline several measures that are to be taken when working with especially dangerous pathogens, which include physical containment and operational practices, as well as checks on personnel and procedures for dealing with emergencies [1]. The regulation stipulates that maximum-containment laboratories are required to develop operational instructions for work with especially dangerous pathogens and to develop training courses on these instructions; persons are then required to pass an exam in order to be cleared for work with the pathogens [1]. However, no standardized set of operational rules or program for the training is outlined in the regulation. The Federal Agency for Technical Regulation and Metrology (Rosstandart) serves as the national standardization body, and inter alia may introduce state standards in the area of public health [2]. In 2015, Rosstandart introduced State Standard 55234.4-2014 on Requirements for Personnel for Biorisk Reduction, based on the European BioSafety Association's Biosafety Professional Competence [3]. The standard sets out key competencies and skills of "biosafety professionals", namely, advisors for organizations that work with dangerous biological agents, developing and monitoring their biosafety and security strategies in consultation with the management, and conducting personnel training [3]. However, it is clearly stated that biosecurity is limited to the particular laboratory setting and an organization's biosecurity plan does not necessary cover all the regional or national legal and regulatory requirements [3]. No further evidence of standardized biosecurity training for personnel working with dangerous biological agents could be found on the Rosstandart's website, or on those of Ministries of Health, Defense and Agriculture [5, 6, 7] Under the Biological Weapons Convention, Russia submits annual reports on its compliance with six Confidence-Building Measures (CBM) to the United Nations Office at Geneva (UNOG). CBM E, entitled "Declaration of Legislation, Regulations and Other Measures", requires data on biosecurity policies implemented by the respondent country [8]. However, Russia's CBM reports are not publicly available [9]. No such evidence could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials either [10].

[1] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.SP 1.3.3118-13 of 28 November 2013. "Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (Безопасность работы с микроорганизмами I-II групп патогенности (опасности)). [http://docs.cntd.ru/document/499061798]. Accessed 9 November 2020.
[2] Federal Agency for Technical Regulation and Metrology. GOST R 1.0-2012 of 23 December 2012. "Standardization in the Russian Federation (Стандартизация в Российской Федерации)". [http://docs.cntd.ru/document/1200102193]. Accessed 9 November 2020.
[3] Federal Agency for Technical Regulation and Metrology. No.GOST R 55234.4-2014 of 24 October 2014. "Practical Aspects of Risk Management. Requirements for Personnel for Biorisk Reduction (Практические аспекты менеджмента риска. Требования к персоналу для снижения биориска). [http://docs.cntd.ru/document/1200114208]. Accessed 9 November 2020.
[4] Federal Agency for Technical Regulation and Metrology. [www.gost.ru/]. Accessed 9 November 2020.

[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 9 November 2020.
[6] Ministry of Defence of the Russian Federation. [www.mil.ru/]. Accessed 9 November 2020.
[7] Ministry of Agriculture of the Russian Federation. [www.mcx.ru/]. Accessed 9 November 2020.
[8] United Nations Office for Disarmament Affairs. 2015. "Guide to Participating in the Confidence-Building Measures of the Biological Weapons Convention".
[https://www.unog.ch/80256EDD006B8954/(httpAssets)/DE1EE44AFE8B8CF9C1257E36005574E4/$file/cbm-guide-2015.pdf]. Accessed 9 November 2020.
[9] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 9 November 2020.
[10] Verification Research, Training and Information Centre. "BWC Legislation Database".
[https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 9 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: 2

In Russia, personnel working with dangerous pathogens, toxins and biological materials are subject to preliminary drug tests and psychological checks, but there is no evidence of mandatory background checks. Order 302n on the Approval of Lists of Harmful or Dangerous Production Processes and Occupations During the Execution of Which Preliminary and Periodic Medical Examinations Are Compulsory, and the Procedure for Compulsory Preliminary and Periodic Medical Examinations of Workers Occupied in Difficult Work and in Harmful (or) Dangerous Labour Conditions (adopted 2011, last amended 2020) states that personnel working in an environment that contains "materials infected with or suspected of infection with microorganisms of pathogenicity groups 3-4 [and] 1-2", as well as biological toxins, are subject to medical examinations once per year [1]. Potential candidates must undergo preliminary examinations that include a psychological examination and a drug test [1]. Order 302n does not stipulate background checks being required, nor is such a requirement noted in Decree SP 1.3.3118-13 on Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II [2]. No additional evidence of requirements for such checks was found on the websites of the Ministries of Health, Agriculture or Defense [3, 4, 5]. Under the Biological Weapons Convention, Russia submits annual reports on its compliance with six Confidence-Building Measures (CBM) to the United Nations Office at Geneva (UNOG). These reports are required to include data on biosecurity policies implemented by the respondent country [6]. However, Russia's CBM reports are not publicly available [7]. No additional information could be obtained from the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials either [8].

[1] Ministry of Health and Social Development of the Russian Federation. No.302n of 12 April 2011. "On the Approval of Lists of Harmful or Dangerous Production Processes and Occupations During the Execution of Which Preliminary and Periodic Medical Examinations Are Compulsory, and the Procedure for Compulsory Preliminary and Periodic Medical Examinations of Workers Occupied in Difficult Work and in Harmful (or) Dangerous Labour Conditions (Об утверждении перечней вредных и (или) опасных производственных факторов и работ, при выполнении которых проводятся обязательные предварительные и периодические медицинские осмотры (обследования), и Порядка проведения обязательных

предварительных и периодических медицинских осмотров (обследований) работников, занятых на тяжелых работах и на работах с вредными и (или) опасными условиями труда)".
[http://www.consultant.ru/document/cons_doc_LAW_120902/]. Accessed 12 January 2019.
[2] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.SP 1.3.3118-13 of 28 November 2013. "Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (Безопасность работы с микроорганизмами I-II групп патогенности (опасности))". [http://docs.cntd.ru/document/499061798]. Accessed 9 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 9 November 2020.
[4] Ministry of Defence of the Russian Federation. [www.mil.ru/]. Accessed 9 November 2020.
[5] Ministry of Agriculture of the Russian Federation. [https://mcx.gov.ru/]. Accessed 9 November 2020.
[6] United Nations Office for Disarmament Affairs. 2015. "Guide to Participating in the Confidence-Building Measures of the Biological Weapons Convention".
[https://www.unog.ch/80256EDD006B8954/(httpAssets)/DE1EE44AFE8B8CF9C1257E36005574E4/$file/cbm-guide-2015.pdf]. Accessed 9 November 2020.
[7] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 9 November 2020.
[8] Verification Research, Training and Information Centre. "BWC Legislation Database".
[https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 9 November 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: 0

Information on Russia's regulations on the safe and secure transport of infectious substances is publicly available, but the regulations do not refer to category A and B substances. Resolution 1.2.036-95 on Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (adopted 1995) sets out regulations for transportation of infectious substances [1]. While the majority of infectious substances classified by the United Nations (UN) categories A and B appear in Russia's I–IV classification of infectious substances, Resolution 1.2.036-95 does not specifically refer to the UN categories [1]. No evidence of other national regulations on the safe and secure transport of infectious substances which make a reference to the UN categories of infectious substances was found on the websites of the Ministries of Transport, Health, Defense or Agriculture [2, 3, 4, 5]. Every year, Russia reports to the United Nations Office at Geneva (UNOG) for the "Confidence Building Measure Return", which is a reporting mechanism set by the Biological Weapons Convention, and each report includes data on Biosafety Level (BSL) facilities, their standards, organizational structure, activity and other related information [6]. However, Russia's reports are not publicly available. No evidence of a regulation referring to category A and B substances could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials [7].

[1] State Committee for Sanitary and Epidemiological Supervision. No.1.2.036-95 of 28 August 1995. "Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (Порядок учета, хранения, передачи и транспортирования микроорганизмов I - IV групп патогенности)".
[http://www.zakonprost.ru/content/base/10931]. Accessed 9 November 2020.
[2] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 9 November 2020.

[3] Ministry of Defence of the Russian Federation. [www.mil.ru/]. Accessed 9 November 2020.
[4] Ministry of Agriculture of the Russian Federation. [https://mcx.gov.ru/]. Accessed 9 November 2020.
[5] Ministry of Transport of the Russian Federation. [https://mintrans.gov.ru/]. Accessed 9 November 2020.
[6] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation". [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 9 November 2020.
[7] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 9 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

Russia has regulations to oversee the cross-border transfer and end-user screening of especially dangerous pathogens, toxins, and pathogens with pandemic potential. Regulation 634 on the Implementation of Control Over Foreign Economic Activity in Relation to Microorganisms, Toxins, Equipment and Technologies (adopted 2001, last amended 2018) stipulates that the Federal Service for Technical and Export Control issues single-use licenses for export of dangerous biological material [1]. The regulation's provision for foreign end-user screening requires the receiver to provide documents stating the purpose of the export and its use, confirming that the receiver is the end-user, and that the materials will not be re-exported or used for purposes contravening the Biological Weapons Convention [1]. Under the Biological Weapons Convention, Russia submits annual reports on its compliance with six Confidence-Building Measures (CBM) to the United Nations Office at Geneva (UNOG). These reports are required to include data on biosecurity policies implemented by the respondent country [2]. However, Russia's CBM reports are not publicly available [3]. No additional information on cross-border transfer and end-user screening could be located on the the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials [4].

[1] Government of the Russian Federation. No.634 of 29 July 2001."Regulation on the Implementation of Control Over Foreign Economic Activity in Relation to Microorganisms, Toxins, Equipment and Technologies (Положение об осуществлении контроля за внешнеэкономической деятельностью в отношении микроорганизмов, токсинов, оборудования и технологий)". [http://base.garant.ru/12124113/530920c96cd67f329d79518f856728a6/#ixzz5cQdVxsDL]. Accessed 9 November 2020.
[2] United Nations Office for Disarmament Affairs. 2015. "Guide to Participating in the Confidence-Building Measures of the Biological Weapons Convention". [https://www.unog.ch/80256EDD006B8954/(httpAssets)/DE1EE44AFE8B8CF9C1257E36005574E4/$file/cbm-guide-2015.pdf]. Accessed 9 November 2020.
[3] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation". [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 9 November 2020.
[4] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 9 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

Biosafety regulations are in place in Russia. The regulations are covered in three separate documents issued by the State Committee for Sanitary and Epidemiological Supervision and its successor, the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. Resolution 1.2.036-95 on the Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (adopted 1995) outlines the procedure for licensing organizations to work with dangerous pathogens, as well as rules for their safe storage, transfer and transport [1]. Sanitary Rules SP 1.3.3118-13 on Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (adopted 2013) detail requirements and procedures to ensure that work with the two most dangerous groups of pathogens is safe, designating directors and department heads to be responsible for biosafety at their organization, and requiring all personnel to report any detected breach of biosafety standards to the management, and also covering requirements on the use of safety equipment (including personal protective equipment) as well as the necessity for the organizations to adopt reaction plans for a range of accidents [2]. Sanitary Rules SP 1.3.2322-08 on Safety of Work With Microorganisms of III-IV Groups of Pathogenicity (Danger) and Causative Agents of Parasitic Diseases (adopted 2008, last amended 2011) similarly lay out requirements to ensure biosafety but while working with less dangerous pathogens [3]. Under the Biological Weapons Convention, Russia submits annual reports on its compliance with six Confidence-Building Measures (CBM) to the United Nations Office at Geneva (UNOG). These reports are required to include data on biosafety policies implemented by the respondent country [4]. However, Russia's CBM reports are not publicly available [5].

[1] State Committee for Sanitary and Epidemiological Supervision. No.14 of 28 August 1995. "Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (Порядок учета, хранения, передачи и транспортирования микроорганизмов I - IV групп патогенности)". [http://www.zakonprost.ru/content/base/10931]. Accessed 9 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.SP 1.3.3118-13 of 28 November 2013. "Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (Безопасность работы с микроорганизмами I-II групп патогенности (опасности))". [http://docs.cntd.ru/document/499061798]. Accessed 9 November 2020.
[3] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.SP 1.3.2322-08 of 28 January 2008. "Safety of Work With Microorganisms of III-IV Groups of Pathogenicity (Danger) and Causative Agents of Parasitic Diseases (Безопасность работы с микроорганизмами III-IV групп патогенности (опасности) и возбудителями паразитарных болезней)". [http://docs.cntd.ru/document/902091086]. Accessed 9 November 2020.
[4] United Nations Office for Disarmament Affairs. 2015. "Guide to Participating in the Confidence-Building Measures of the Biological Weapons Convention". [https://www.unog.ch/80256EDD006B8954/(httpAssets)/DE1EE44AFE8B8CF9C1257E36005574E4/$file/cbm-guide-2015.pdf]. Accessed 9 November 2020.
[5] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation". [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 9 November 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

Russian legislation designates an agency responsible for the enforcement of biosafety regulation. Decree 322 on the Federal Service on Surveillance of Consumer Rights Protection and Human Welfare (Rospotrebnadzor) (adopted 2004, last amended 2013), regulating the Service's functions and responsibilities, designates Rospotrebnadzor to perform state sanitary and epidemiological supervision over compliance with sanitary legislation, and to develop and approve state sanitary and epidemiological rules and hygiene standards, which make up Russia's biosafety regulations [1]. Additionally, Decree 303 on the Delineation of Powers of Federal Executive Authorities to Provide for the Biological and Chemical Safety of the Russian Federation (adopted 2005) reiterates Rospotrebnadzor as the responsible institution for the enforcement of biosafety legislation [2]. Furthemore, State Sanitary Rules SP 1.3.3118-13 on Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (adopted 2013) and Rules SP 1.3.2322-08 on Safety of Work With Microorganisms of III-IV Groups of Pathogenicity (Danger) and Causative Agents of Parasitic Diseases (adopted 2008, last amended 2011) both state that the sanitary and epidemiological supervision over the fulfillment of the requirements of these rules is carried out by the territorial bodies of Rospotrebnadzor [3, 4]. Under the Biological Weapons Convention, Russia submits annual reports on its compliance with six Confidence-Building Measures (CBM) to the United Nations Office at Geneva (UNOG). These reports are required to include data on biosafety policies implemented by the respondent country [5]. However, Russia's CBM reports are not publicly available [6].

[1] Government of the Russian Federation. No.322 of 30 June 2004. "About the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (О федеральной службе по надзору в сфере защиты прав потребителей и благополучия человека)". [https://www.rospotrebnadzor.ru/region/functions.php]. Accessed 10 November 2020.
[2] Government of the Russian Federation. No.303 of 16 May 2005. "About Delineation of Powers of Federal Executive Authorities to Provide for the Biological and Chemical Safety of the Russian Federation (О разграничении полномочий федеральных органов исполнительной власти в области обеспечения биологической и химической безопасности Российской Федерации). [http://pravo.gov.ru/proxy/ips/?docbody=&prevDoc=102159135&backlink=1&&nd=102092414]. Accessed 10 November 2020.
[3] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.SP 1.3.3118-13 of 28 November 2013. "Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (Безопасность работы с микроорганизмами I-II групп патогенности (опасности))". [http://docs.cntd.ru/document/499061798]. Accessed 10 November 2020.
[4] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.SP 1.3.2322-08 of 28 January 2008. "Safety of Work With Microorganisms of III-IV Groups of Pathogenicity (Danger) and Causative Agents of Parasitic Diseases (Безопасность работы с микроорганизмами III-IV групп патогенности (опасности) и возбудителями паразитарных болезней)". [http://docs.cntd.ru/document/902091086]. Accessed 10 November 2020.
[5] United Nations Office for Disarmament Affairs. 2015. "Guide to Participating in the Confidence-Building Measures of the Biological Weapons Convention".
[https://www.unog.ch/80256EDD006B8954/(httpAssets)/DE1EE44AFE8B8CF9C1257E36005574E4/$file/cbm-guide-2015.pdf]. Accessed 10 November 2020.
[6] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation". [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 10 November 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 trainthe-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 public evidence that biosafety training, using a standardized approach, is required for personnel working at facilities which handle dangerous biological agents in Russia. State Sanitary Rules SP 1.3.3118-13 on Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (adopted 2013) require maximum-containment laboratories to develop operational instructions for work with especially dangerous pathogens, and to prepare training courses on these instructions [1]. However, the rules do not outline a standardized set of operational rules or a program for the training courses [1]. The Federal Agency for Technical Regulation and Metrology (Rosstandart) serves as the national standardization body, and inter alia may introduce state standards in the area of public health [2]. In 2015, Rosstandart introduced State Standard 55234.4-2014 on Requirements for Personnel for Biorisk Reduction, based on the European BioSafety Association's Biosafety Professional Competence [3]. The standard lists highly detailed learning objectives and targets to be achieved during education and training of biosafety professionals, including the relevant scientific background, biorisk assessment and management, assessment of facilities' compliance with standards, and training of laboratory personnel. However, it is clearly not designed to be applied to all personnel working at facilities handling dangerous biological agents, and the document contains no evidence of any requirements for general biosafety training to be provided to all personnel working with especially dangerous biological agents [3]. No further evidence of a standardized biosafety training could be found on the Rosstandart's website, or on those of Ministries of Health, Defense and Agriculture [4, 5, 6, 7]. Under the Biological Weapons Convention, Russia submits annual reports on its compliance with six Confidence-Building Measures (CBM) to the United Nations Office at Geneva (UNOG). These reports are required to include data on biosafety policies implemented by the respondent country [8]. However, Russia's CBM reports are not publicly available [9]. No evidence on standardized biosafety training could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials either [10].

[1] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.SP 1.3.3118-13 of 28 November 2013. "Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (Безопасность работы с микроорганизмами I-II групп патогенности (опасности))". [http://docs.cntd.ru/document/499061798]. Accessed 10 November 2020.
[2] Federal Agency for Technical Regulation and Metrology. No.GOST R 55234.4-2014 of 24 October 2014. "Practical Aspects of Risk Management. Requirements for Personnel for Biorisk Reduction (Практические аспекты менеджмента риска. Требования к персоналу для снижения биориска). [http://docs.cntd.ru/document/1200114208]. Accessed 10 November 2020.
[3] Federal Agency for Technical Regulation and Metrology. GOST R 1.0-2012 of 23 December 2012. "Standardization in the Russian Federation (Стандартизация в Российской Федерации)". [http://docs.cntd.ru/document/1200102193]. Accessed 10 November 2020.
[4] Federal Agency for Technical Regulation and Metrology. [https://www.gost.ru/ru]. Accessed 10 November 2020.
[5] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 10 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 10 November 2020.
[7] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 10 November 2020.
[8] United Nations Office for Disarmament Affairs. 2015. "Guide to Participating in the Confidence-Building Measures of the Biological Weapons Convention".
[https://www.unog.ch/80256EDD006B8954/(httpAssets)/DE1EE44AFE8B8CF9C1257E36005574E4/$file/cbm-guide-

2015.pdf]. Accessed 10 November 2020
[9] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 10 November 2020.
[10] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 10 November 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 Russia has conducted an assessment to determine whether there is ongoing dual use research with especially dangerous pathogens, toxins, pathogens with pandemic potential. In accordance with Decree 322 on the Federal Service on Surveillance of Consumer Rights Protection and Human Welfare (Rospotrebnadzor) (adopted 2004, last amended 2013), regulating the Service's functions and responsibilities, Rospotrebnadzor is responsible for overseeing compliance with sanitary legislation in organizations working with especially dangerous pathogens, including laboratories conducting research for the detection of biological agent nucleic acids, experimental work ("all types of work using microorganisms and products of their microbiological synthesis, prions, toxins and poisons of biological origin") and production (of vaccines, sera, immunoglobulins) [1, 2]. However, there is no public evidence on Rospotrebnadzor's website that the service has conducted an assesment to determine whether there is ongoing dual use research [3]. The websites of the Ministries of Health, Defence, and Agriculture were not found to contain any references to a national policy on oversight of dual use research [4, 5, 6]. Russia's national public health institute, the National Medical Research Centre for Preventive Medicine, is only responsible for non-communicable diseases and there is no evidence that it has conducted an assessment to determine whether dual-use research is ongoing [7]. Under the Biological Weapons Convention, Russia submits annual reports on its compliance with six Confidence-Building Measures (CBM) to the United Nations Office at Geneva (UNOG). These reports are required to include data on all facilities under the country's jurisdiction that are designed to work with especially dangerous pathogens and toxins, including the types of biological agents each facility stores and processes, and details on the activities they are used for [8]. However, Russia's CBM reports are not publicly available [9]. No evidence on policy targeting dual use research could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials either [10].

[1] Government of the Russian Federation. No.322 of 30 June 2004. "About the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (О федеральной службе по надзору в сфере защиты прав потребителей и благополучия человека)". [https://www.rospotrebnadzor.ru/region/functions.php]. Accessed 10 November 2020.
[2] Federal Service on Surveillance of Consumer Rights Protection and Human Welfare. No.SP 1.3.3118-13 of 28 November 2013. "Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (Безопасность работы с микроорганизмами I-II групп патогенности (опасности))". [http://docs.cntd.ru/document/499061798]. Accessed 10 November 2020.
[3] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru]. Accessed 10 November 2020.

[4] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 10 November 2020.
[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 10 November 2020.
[6] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 10 November 2020.
[7] National Medical Research Centre for Preventive Medicine. [https://www.gnicpm.ru]. Accessed 10 November 2020.
[8] United Nations Office for Disarmament Affairs. 2015. "Guide to Participating in the Confidence-Building Measures of the Biological Weapons Convention".
[https://www.unog.ch/80256EDD006B8954/(httpAssets)/DE1EE44AFE8B8CF9C1257E36005574E4/$file/cbm-guide-2015.pdf]. Accessed 10 November 2020
[9] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 10 November 2020.
[10] Verification Research, Training and Information Centre. "BWC Legislation Database".
[https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 10 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 no evidence of national legislation requiring oversight of dual use research. The Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor)'s sanitary and epidemiological rules on working with especially dangerous and dangerous pathogens stipulate that Rospotrebnadzor performs sanitary supervision of organizations performing such work, including laboratories conducting research for the detection of biological agent nucleic acids, experimental work ("all types of work using microorganisms and products of their microbiological synthesis, prions, toxins and poisons of biological origin") and production (of vaccines, sera, immunoglobulins) [1, 2]. Rospotrebnadzor's Federal Anti-Plague Center supervises work with group I pathogens (plague), while regional Anti-Plague institutes oversee work with group II pathogens (total of 8, including antrax, brucellosis, cholera), and the regional Rospotrebnadzor departments supervise work with group III-IV microorganisms [1, 2]. However, the regulations do not explicitly mention dual use research. The websites of the Ministry of Health, Ministry of Defence, and Ministry of Agriculture do not contain any references to a national policy on oversight of dual use research [3, 4, 5]. Every year, Russia reports to the United Nations Office at Geneva (UNOG) for the "Confidence Building Measure Return", which is a reporting mechanism set by the Biological Weapons Convention, and each report includes data on Biosafety Level (BSL) facilities, their standards, organizational structure, activity and other related information. However, Russia's CBM reports are not publicly available [6]. No evidence on policy targeting dual use research could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials either [7].

[1] Federal Service for Surveillance in the Sphere of Protection of Consumer Rights and Human Welfare. No.SP 1.3.3118-13 of 28 November 2013. "Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (Безопасность работы с микроорганизмами I-II групп патогенности (опасности))". [http://docs.cntd.ru/document/499061798]. Accessed 10 November 2020.
[2] Federal Service for Surveillance in the Sphere of Protection of Consumer Rights and Human Welfare. No.SP 1.3.2322-08 of 28 January 2008. "Safety of Work With Microorganisms of III-IV Groups of Pathogenicity (Danger) and Causative Agents of Parasitic Diseases (Безопасность работы с микроорганизмами III-IV групп патогенности (опасности) и возбудителями паразитарных болезней)". [http://docs.cntd.ru/document/902091086]. Accessed 10 November 2020.
[3] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 10 November 2020.

[4] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 10 November 2020.
[5] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 10 November 2020.
[6] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 10 November 2020.
[7] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 10 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 no evidence that Russia has an agency responsible for the oversight of dual-use research. The Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor)'s sanitary and epidemiological rules on working with especially dangerous and dangerous pathogens stipulate that Rospotrebnadzor performs sanitary supervision of organizations performing such work, including laboratories conducting research for the detection of biological agent nucleic acids, experimental work ("all types of work using microorganisms and products of their microbiological synthesis, prions, toxins and poisons of biological origin") and production (of vaccines, sera, immunoglobulins) [1, 2]. Rospotrebnadzor's Federal Anti-Plague Center supervises work with group I pathogens (plague), while regional Anti-Plague institutes oversee work with group II pathogens (total of 8, including antrax, brucellosis, cholera), and the regional Rospotrebnadzor departments supervise work with group III-IV microorganisms [1, 2]. However, the regulations do not explicitly mention dual use research as being under Rospotrebnadzor's supervision. The websites of the Ministry of Health, Ministry of Defense, and Ministry of Agriculture do not contain any references to an agency responsible for the oversight of dual-use research [3, 4, 5]. Every year, Russia reports to the United Nations Office at Geneva (UNOG) for the "Confidence Building Measure Return", which is a reporting mechanism set by the Biological Weapons Convention, and each report includes data on Biosafety Level (BSL) facilities, their standards, organizational structure, activity and other related information. However, Russia's CBM reports are not publicly available [6]. No evidence of such an agency could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials either [7].

[1] Federal Service for Surveillance in the Sphere of Protection of Consumer Rights and Human Welfare. No.SP 1.3.3118-13 of 28 November 2013. "Safety of Work With Microorganisms of Pathogenic (Danger) Groups I-II (Безопасность работы с микроорганизмами I-II групп патогенности (опасности))". [http://docs.cntd.ru/document/499061798]. Accessed 10 November 2020.
[2] Federal Service for Surveillance in the Sphere of Protection of Consumer Rights and Human Welfare. No.SP 1.3.2322-08 of 28 January 2008. "Safety of Work With Microorganisms of III-IV Groups of Pathogenicity (Danger) and Causative Agents of Parasitic Diseases (Безопасность работы с микроорганизмами III-IV групп патогенности (опасности) и возбудителями паразитарных болезней)". [http://docs.cntd.ru/document/902091086]. Accessed 10 November 2020.
[3] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 10 November 2020.
[4] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 10 November 2020.
[5] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 10 November 2020.
[6] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 10 November 2020.
[7] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 10

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 evidence that Russia has legislation requiring screening of synthesized DNA against lists of known pathogens and toxins before it is sold. Law 86-FZ on State Regulation in the Field of Genetic Engineering (adopted 1996, last amended 2016) covers genetic modification and engeneering of viruses and microorganisms, but there is no mention of their registration or screening before being sold [1]. The law states that legal entities and citizens that carry out genetic engineering activities with microorganisms potentially capable of transmitting infections and with pathogens of especially dangerous infections must obtain a licence in accordance with Regulation 771 on Licensing Activities in the Field of Use of Infectious Agents Diseases of Humans and Animals (Except, if the Specified Activities Are Carried Out in Medical Purposes) and Genetically Engineered-Modified Organisms of Potential Hazard Level III and IV, Implemented in Closed Systems (adopted 2012, last amended 2015) [2]. This regulation lays out procedure for licensing entities to perform genetic modification and engeneering, but it makes no reference to the procedure for when such GMOs are being sold [2]. No evidence of legislation covering requirement for GMOs being screened was located on the websites of the Ministries of Health, Defense or Agriculture [3, 4, 5]. Every year, Russia reports to the United Nations Office at Geneva (UNOG) for the "Confidence Building Measure Return", which is a reporting mechanism set by the Biological Weapons Convention, and each report includes data on Biosafety Level (BSL) facilities, their standards, organizational structure, activity and other related information. However, Russia's CBM reports are not publicly available [6]. No evidence of legislation requiring synthesized DNA screening could be located on the Verification Research, Training and Information Centre's database of legislation related to biological weapons and materials either [7].

[1] Government of the Russian Federation. No.86-FZ of 3 July 1996. "On State Regulation in the Field of Genetic Engineering (О государственном регулировании в области генно-инженерной деятельности)". [https://legalacts.ru/doc/federalnyi-zakon-ot-05071996-n-86-fz-o/#100062]. Accessed 10 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.771 of 18 July 2012. "Administrative Regulation of the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare in Providing Public Service for Licensing Activities in the Field of Use of Infectious Agents Diseases of Humans and Animals (Except, if the Specified Activities Are Carried Out in Medical Purposes) and Gene-engineered-modified Organisms of Potential Hazard Levels III and IV, Implemented in Closed Systems (Административный регламент Федеральной службы по надзору в сфере защиты прав потребителей и благополучия человека по предоставлению государственной услуги по лицензированию деятельности в области использования возбудителей инфекционных заболеваний человека и животных (за исключением случая, если указанная деятельность осуществляется в медицинских целях) и генно-инженерно-модифицированных организмов III и IV степеней потенциальной опасности, осуществляемой в замкнутых системах)". [https://legalacts.ru/doc/prikaz-rospotrebnadzora-ot-18072012-n-771-ob/#100243]. Accessed 10 November 2020.
[3] Ministry of Science and Higher Education of the Russian Federation. [https://minobrnauki.gov.ru/]. Accessed 10 November 2020.
[4] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 10 November 2020.
[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 10 November 2020.

[6] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 10 November 2020.
[7] United Nations Office at Geneva. "Confidence Building Measures. Russian Federation." [https://bwc-ecbm.unog.ch/state/russian-federation]. Accessed 10 November 2020.
[8] Verification Research, Training and Information Centre. "BWC Legislation Database". [https://www.vertic.org/programmes/biological-weapons-and-materials/bwc-legislation-database/r/]. Accessed 10 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: 2

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

The Russian national laboratory system has the capacity to conduct at least five WHO-defined core tests, but there is no evidence that Russia has defined four country-specific tests. The Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) controls a network of reference centers, listed in Order 1116 on Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (adopted 2017) [1]. The laboratorty network can test for five WHO-defined core tests, tuberculosis (TB) being the exception [1]. Although not listed as being part of the national reference center network, in 2015, three laboratories of the Federal TB Institutes were recognized as National Centers of Excellence for WHO TB Supranational Reference laboratory Network (SRLN) [2]. All three laboratories conduct microscopy for TB [3, 4, 5]. Order 1116 provides a list of diagnostic methods for pathogens of I-II danger group used by the reference centers and these include PCR testing for influenza A and B and lateral flow immunochromatographic assays for malaria, suggesting that laboratories can conduct rapid diagnostic testing [1]. The website of the HIV reference laboratory confirms the use serology testing for HIV [6]. Furthermore, the Pasteur Institute of Epidemiology and Microbiology, the reference laboratory for typhoid, conducts bacteria culture tests, but the website does not explicitly state for which diseases [7]. The Pasteur Insititute developed guidelines on Bacteriological Diagnostics of Typhoid and Paratyphoid Fever A, B and C (2007) and, in 2016, organised a training on diagnosing typhoid fever inter alia by bacteriological testing at the Guinean Institute of Applied Biology [8, 9]. This suggests that the reference laboratory performs bacteria culture test for S. Typhi. Finally, the reference laboratory for Poliomyelitis, the Chumakov Federal Scientific Center for Research and Development of Immune-and-Biological Products of the Russian Academy of Sciences, is also the WHO Reference Center for Polio Surveillance [10]. Whilst the Center's website does not contain information on methods of testing for polio, according to the National Laboratory for the Diagnosis of Poliomyelitis Checklist for WHO annual accreditation, one of the criteria for accreditation is "Virologic tests are performed on at least 150 stool specimens annually", thus, confirming that it conducts virus culture test for polio [12]. The websites of the Ministry of Health or Rospotrebnadzor, or the WHO country webpage provide no evidence on Russia having selected four country-defined tests [13, 14, 15].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 of 1 December 2017. "On Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (О совершенствовании системы мониторинга, лабораторной диагностики инфекционных и паразитарных болезней и индикации ПБА в Российской Федерации)". [http://www.garant.ru/products/ipo/prime/doc/71750024/#ixzz5cWCP6XAu]. Accessed 17 November 2020.
[2] World Health Organisation (WHO). 10 February 2015. "Three Russian TB laboratories recognized as Centers of Excellence as part of the TB Supranational Reference laboratory Network (SRLN) of the World Health Organization". [https://www.euro.who.int/en/health-topics/communicable-diseases/tuberculosis/news/news/2015/02/three-russian-tb-laboratories-recognized-as-centers-of-excellence-as-part-of-the-tb-supranational-reference-laboratory-network-srln-of-the-world-health-organization]. Accessed 17 November 2020.
[3] FSBI Novosibirsk Research Institute of Tuberculosis. "Fluorescent Microscopy (Detection of Tuberculosis) (Люминесцентная микроскопия (выявление туберкулеза))". [http://nsk-niit.ru/ru/katalog/punkty-priema-pacientov/perechen-issledovanij-po-gruppam/laboratornaja-diagnostika/bakteriologicheskie-issledovanija/ljuminescentnaja-mikroskopija]. Accessed 17 November 2020.
[4] FSBI Ural Research Institute of Phthisiopulmonology. "Laboratory of Microbiology and PCR Diagnostics (Лаборатория микробиологии и ПЦР диагностики)". [http://urniif.ru/clinic/house/mbl/]. Accessed 17 November 2020.
[5] FSBI Central Research Institute of Tuberculosis. "Department of Microbiology (Отдел микробиологии)". [https://critub.ru/department-of-microbiology/]. Accessed 17 November 2020.
[6] FBSI Central Research Institute of Epidemiology of Rospotrebnadzor. "Human Immunodeficiency Virus, Quality Summary

Detection of Antibodies to Virus Types 1 and 2 and Antigen p24 Anti-HIV1,2/ag p24 (Вирус иммунодефицита человека (Human Immunodeficiency Virus), качественное суммарное определение антител к 1 и 2 типу вируса и антигена p24 anti-HIV1,2/Ag p24)". [https://www.cmd-online.ru/analizy-i-tseny/virus-immunodeficita-cheloveka-kachestvennoje-summarnoje-opredelenije-antitel-k-1-i-2-tipu-virusa-i-antigena-p24_040601/]. Accessed 17 November 2020.
[7] Pasteur Institute of Epidemiology and Microbiology. "Central Clinical Diagnostic Laboratory (Центральная клинико-диагностическая лаборатория)". [https://www.pasteurorg.ru/rubric/296/Centralnaya-kliniko-diagnosticheskaya-laboratoriya-CKDL]. Accessed 17 November 2020.
[8] Federal Center for Hygiene and Epidemiology of Rospotrebnadzor. 29 December 2007. "Guidelines. Bacteriological Diagnostics of Typhoid and Paratyphoid Fever A, B and C (Методические рекомендации. Бактериологическая диагностика брюшного тифа и паратифов А, В и С)". [http://docs.cntd.ru/document/1200065159]. Accessed 17 November 2020.
[9] Pasteur Institute of Epidemiology and Microbiology. 12 December 2016. "The Institute of Applied Biology of Guinea Conducted a Training Cycle "Laboratory Diagnosis of Typhoid Fever" (В Институте Прикладной Биологии Гвинеи проведен цикл повышения квалификации «Лабораторная диагностика брюшного тифа»)".
[https://www.pasteurorg.ru/article/261/2604/V-Institute-Prikladnoy-Biologii-Gvinei-proveden-cikl-povysheniya-kvalifikacii-Laboratornaya-diagnostika-bryushnogo-tifa]. Accessed 17 November 2020.
[10] Chumakov Federal Scientific Center for Research and Development of Immune-and-Biological Products of Russian Academy of Sciences. "Structure (Организационная структура)". [http://www.chumakovs.ru/about/structure/]. Accessed 17 November 2020.
[11] World Health Organisation (WHO). 2004. "Polio laboratory manual, 4th ed".
[https://apps.who.int/iris/handle/10665/68762]. Accessed 17 November 2020.
[12] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 17 November 2020.
[13] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 17 November 2020.
[14] World Health Organisation (WHO). "Countries. Russian Federation". [https://www.euro.who.int/en/countries/russian-federation]. Accessed 17 November 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

There is no public evidence that Russia has a permanent, general plan in place for conducting testing during a public health emergency, but there is a temporary procedure for the testing of COVID-19. The Disaster Medicine Service of the Ministry of Health is part of the All-Russian Service for Disaster Medicine, and Order 380 on Regulations on the Disaster Medicine Service of the Ministry of Health of the Russian Federation (adopted 2000) states that it is also responsible for responding to emergencies caused by epidemics [1]. Whilst laying out action plans for responding to emergencies of various kinds, the order does not mention conducting testing during a public health emergency [1]. No documents concering testing could be located on the website of the All-Russian Service for Disaster Medicine or that of Ministry of Health [2, 3]. The Disaster Medicine Service performs its tasks in direct interaction with the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) [1]. In accordance with Order 1116 on Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (adopted 2017), Rospotrebnadzor controls the network of national reference laboratories [4]. The order provides a list of reference centers for testing dangerous infectious pathogens, specifying the centers' respective testing foci, for

example, Federal State Budgetary Institution State Scientific Center of Virology and Biotechnology "Vector" is reference center for rare, exotic and emerging diseases (such as dengue fever, yellow fever, and chikungunya fever) [4]. However, there is no indication that any of the centers perform testing for novel pathogens, nor can such evidence can be located on Rospotrebnadzor's website [5]. Such evidence is also absent from the website of Ministry of Agriculture [6]. However, in response to the COVID-19 pandemic, Decree 507 on the Temporary Procedure for the Distribution of Test Systems in the Russian Federation for the Diagnosis of New Coronavirus Infection (2020) lays out a temporary procedure, valid until January 2021, aimed at harmonizing the production of COVID-19 tests with demand for them [7]. The decree stipulates that organizations carrying out diagnostic testing are to communicate their estimated test needs for the following week to their regional branch of the Federal Center of Hygiene and Epidemiology. Regional summary information of the test needs are sent to the Federal Center of Hygiene and Epidemiology, which also receives weekly data on the volumes of test systems produced by organizations subordinate to federal executive bodies for the upcoming calendar week, month and 2 months, and establishes test distribution schedules to meet the demand. Testing centers are also obliged to provide the number of individual positive test results on a daily basis to establish the incidence numbers in each constituent entity of Russia [7].

[1] Ministry of Health of the Russian Federation. No.308 27 October 2000. "Regulations on the Disaster Medicine Service of the Ministry of Health of the Russian Federation (Положение о службе медицины катастроф Министерства здравоохранения Российской Федерации)". [http://docs.cntd.ru/document/901776429]. Accessed 19 November 2020.
[2] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 19 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 19 November 2020.
[4] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 of 1 December 2017. "On Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (О совершенствовании системы мониторинга, лабораторной диагностики инфекционных и паразитарных болезней и индикации ПБА в Российской Федерации)". [http://www.garant.ru/products/ipo/prime/doc/71750024/#ixzz5cWCP6XAu]. Accessed 19 November 2020.
[5] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 19 November 2020.
[6] Ministry of Agriculture of the Russian Federation. [https://mcx.gov.ru/en/]. Accessed 19 November 2020.
[7] Government of the Russian Federation. No.507 of 15 April 2020. "On the Temporary Procedure for the Distribution of Test Systems in the Russian Federation for the Diagnosis of New Coronavirus Infection (О временном порядке распределения в Российской Федерации тест-систем для диагностики новой коронавирусной инфекции)". [https://www.garant.ru/products/ipo/prime/doc/73798594/#1000]. Accessed 19 November 2020.

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

Most of the laboratories in Russia's network of national reference facilities are accredited. The Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) controls the network of Russia's reference centers that monitor pathogens of infectious and parasitic diseases [1]. The Federal Accreditation Service (FAS) is responsible for accreditation of laboratories according to the Russian laboratory accreditation system, and, in 2017, FAS signed the International Laboratory Accreditation Cooperation Mutual Recognition Arrangement (ILAC MRA) [2]. Consequently, FSA accreditation coresponds with the standard ISO/IEC 17025 on "General Requirements for the Competence

of Testing and Calibration Laboratories" [2]. This is confirmed by the ILAC MRA signatory list [3]. There are 22 reference centers for monitoring pathogens of infectious and parasitic diseases, centers for laboratory diagnostics and scientific and methodological centers for certain areas of activity with microorganisms [1]. Out of these, 16 are listed in the FAS register of accredited laboratories [4]. No further information on accreditation of the remaining six reference centers was found on the websites of FAS or the Ministry of Health [5, 6]. Russia's national public health institute, the National Medical Research Centre for Preventive Medicine, is only responsible for non-communicable diseases [7].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 of 1 December 2017. "On Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (О совершенствовании системы мониторинга, лабораторной диагностики инфекционных и паразитарных болезней и индикации ПБА в Российской Федерации)". [http://www.garant.ru/products/ipo/prime/doc/71750024/#ixzz5cWCP6XAu]. Accessed 11 November 2020.
[2] Federal Accreditation Service. 30 October 2017. "The National Accreditation System is Internationally Recognized (Национальная система аккредитации получила международное признание)". [https://fsa.gov.ru/press-center/news/5876/]. Accessed 11 November 2020.
[3] International Laboratory Accreditation Cooperation. "ILAC MRA and Signatories". [https://ilac.org/ilac-mra-and-signatories/]. Accessed 11 November 2020.
[4] Federal Accreditation Service. "Register of Accredited Institutions (Реестр аккредитованных организаций)". [https://pub.fsa.gov.ru/ral]. Accessed 11 November 2020.
[5] Federal Accreditation Service. [https://pub.fsa.gov.ru]. Accessed 11 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 11 November 2020.
[7] National Medical Research Centre for Preventive Medicine. [https://www.gnicpm.ru]. Accessed 11 November 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 evidence that Russia has a national laboratory serving as a reference facility that is subject to external quality assurance review. The Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) controls a network of reference centers for monitoring agents of infectious and parasitic diseases [1]. Decree 1116 on Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (adopted 2017), which stipulates the functions of reference centers, does not mention them being subjected to external quality assurance review [1]. The Rospotrebnadzor website and those of the Ministries of Health and Agriculture were not found to contain any information on external quality assurance of the reference facilities [2, 3, 4]. Russia's national public health institute, the National Medical Research Center for Preventive Medicine, is only responsible for non-communicable diseases and its website includes no evidence of any reference laboratory under its remit serving as a reference facility for the WHO-defined core tests [5].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 of 1 December 2017. "On Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (О совершенствовании системы мониторинга, лабораторной диагностики инфекционных и паразитарных болезней и индикации ПБА в Российской Федерации)". [http://www.garant.ru/products/ipo/prime/doc/71750024/#ixzz5cWCP6XAu]. Accessed 11 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 11 November 2020.

[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 11 November 2020.
[4] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 11 November 2020.
[5] National Medical Research Centre for Preventive Medicine. [https://www.gnicpm.ru]. Accessed 11 November 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 insufficient evidence that Russia's system for transporting specimens between collection sites and laboratories has nationwide coverage. Resolution 1.2.036-95 on Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (adopted 1995) sets out compulsory procedures for safe transportion of pathogens [1]. The procedures include sending samples via special (state) postal service or with a courier. Group I-II pathogens are sent either with a special communication or with an envoy of two people accompanying the courier, one of whom must have a medical (biological, veterinary) education and must have authorization to work with I-II group pathogens. However, the resolution does not specifically refer to a nationwide specimen transport system. No further information regarding a nationwide specimen transport system was found on the websites of the Ministries of Agriculture and Health, or that of the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (successor agency to the State Committee for Sanitary and Epidemiological Supervision) [2, 3, 4].

[1] State Committee for Sanitary and Epidemiological Supervision. No.1.2.036-95 of 28 August 1995. "Procedures for Registration, Storing, Handover and Transport of Microorganisms of the Pathogenicity Groups I-IV (Порядок учета, хранения, передачи и транспортирования микроорганизмов I - IV групп патогенности)". [http://www.zakonprost.ru/content/base/10931]. Accessed 11 November 2020.
[2] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 11 November 2020.
[3] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 11 November 2020.
[4] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 11 November 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 publicly available evidence that Russia has a plan 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 Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) oversees the national public health laboratory system and licenses laboratories, in accordance Law 317 on Establishes the Procedure for Licensing Activities in the Field of Use of Pathogens of Infectious Diseases of Humans and Animals, and Genetically Engineered Organisms of the III

and IV Degrees of Potential Danger (adopted 2012, last amended 2015) [1]. However, this law does not mention issuing licenses for scaling up testing capacity. There is no evidence of a plan for rapidly authorizing or licensing laboratories in the directory of Rospotrebnadzor's website, which is dedicated to regulatory legal acts on licensing activities [2]. Rospotrebnadzor's webpages on licensing state that it is necessary to apply for a re-issuance of the license if the licensee intends to carry out a licensed type of activity that is not indicated on the existing license, or if the licensee intends to make changes to the list of work performed or services provided [2]. However, there is no stipulation of a procedure for re-licensing towards increasing laboratory capacity [2]. There is also no evidence of such a plan on the websites of the Ministry of Health or the Ministry of Agriculture [3, 4].

[1] Government of the Russian Federation. No. 317 of 16 April 2012. "About Licensing Activities in the Field of Use of Infectious Diseases in Human and Animals (Except, if Specified the Activities Are Carried Out for Medical Purposes) And Gene-engineered-modified Organisms Iii and Iv Degrees of Potential Hazard, Implemented in Closed Systems (О лицензировании деятельности в области использования возбудителей инфекционных заболеваний человека и животных (за исключением случая, если указанная деятельность осуществляется в медицинских целях) и генно-инженерно-модифицированных организмов iii и iv степеней потенциальной опасности, осуществляемой в замкнутых системах)". [http://www.consultant.ru/cons/cgi/online.cgi?req=doc;base=LAW;n=176575#06652229173928719]. Accessed 21 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. "Licensing". [http://69.rospotrebnadzor.ru/directions/register/licenzirovaniye/]. Accessed 21 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 21 November 2020.
[4] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 21 November 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 public evidence that Russia is conducting ongoing event-based surveillance and analysis for infectious diseases. According to Decree 322 (adopted 2004, last amended 2013), which regulates the functions and responsibilities of the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor), Rospotrebnadzor is responsible for "establishing the causes and identifying the conditions for the occurrence and spread of infectious diseases" [1]. Order 1116 on Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (adopted 2017) lists institutions that, under Rospotrebnadzor's supervision, are responsible for monitoring infectious diseases [2]. The institutions are divided into five types, responsible for a different area of disease surveillance. The Centers for Indication of Agents of Infectious Diseases of Pathogenesis Groups I-II and Ensuring Anti-epidemic Readiness are responsible for identifying and classifying dangerous pathogens [3]. The network of Centres for Hygiene and Epidemiology, represented by a sub-department in each Russian federal subject, performs the collection of samples of dangerous pathogens intended for the analysis conducted by the Centres for Indication [4]. The Scientific Method Centers for Monitoring of Agents of Infectious and Parasite Diseases of Pathogenesis Groups III-IV researches the etiology of less dangerous pathogens and ensures the quality of surveillance

activities [5]. Finally, there are 22 Reference Centers for Monitoring Agents of Infectious and Parasitic Diseases, each focusing on a different group of diseases [6]. For example, Russia's Influenza Surveillance System is partly managed by the Research Institute of Influenza, which serves as a reference laboratory, but there is no evidence that event-based surveillance is conducted as part of the System [7]. No evidence that any of these centers perform event-based surveillance was found in their founding documents [3, 4, 5, 6]. The websites of the Ministries of Health and Agriculture were not found to contain evidence of such surveillance activities taking place [8, 9].

[1] Government of the Russian Federation. No.322 of 30 June 2004. "About the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (О федеральной службе по надзору в сфере защиты прав потребителей и благополучия человека)". [https://www.rospotrebnadzor.ru/region/functions.php]. Accessed 11 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 of 1 December 2017. "On Improving the Monitoring System, Laboratory Diagnostics of Infectious and Parasitic Diseases and Indication of Pathogenic Biological Agents in the Russian Federation (О совершенствовании системы мониторинга, лабораторной диагностики инфекционных и паразитарных болезней и индикации ПБА в Российской Федерации)". [http://www.garant.ru/products/ipo/prime/doc/71750024/#ixzz5cWCP6XAu]. Accessed 11 November 2020.
[3] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 (appendix no.4) of 1 December 2017. "On the Centres for Indication of Agents of Infectious Diseases of Pathogenesis Groups I-II and Ensuring Anti-epidemic Readiness (О Центре индикации возбудителей инфекционных болезней I-II групп патогенности и обеспечения противоэпидемической готовности)". [http://base.garant.ru/71850024/172a6d689833ce3e42dc0a8a7b3cddf9/]. Accessed 11 November 2020.
[4] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 (appendix no.5) of 1 December 2017. "On the Support Base of the Centres for Indication of Agents of Infectious Diseases of Pathogenesis Groups I-II and Ensuring Anti-epidemic Readiness (Об Опорной базе Центра индикации возбудителей инфекционных болезней I-II групп патогенности)". [http://base.garant.ru/71850024/c9c989f1e999992b41b30686f0032f7d/]. Accessed 11 November 2020.
[5] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 (appendix no.6) of 1 December 2017. "On the Scientific Method Centres for Monitoring of Agents of Infectious and Parasite Diseases of Pathogenesis Groups III-IV (О Научно-методическом центре по мониторингу за возбудителями инфекционных и паразитарных болезней II-IV групп патогенности)". [http://base.garant.ru/71850024/7dede6ac8f25be619ed07c17ed1c62c9/]. Accessed 11 November 2020.
[6] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.1116 (appendix no.7) of 1 December 2017. "On Reference Centres for Monitoring Agents of Infectious and Parasitic Diseases (О Референс-центре по мониторингу за возбудителями инфекционных и паразитарных болезней)". [http://base.garant.ru/71850024/1a3794674ba91fb6f13d1885dca9f9e1/]. Accessed 11 November 2020.
[7] Ministry of Health of the Russian Federation. "Influenza Surveillance System in Russia". [https://www.influenza.spb.ru/en/influenza_surveillance_system_in_russia/]. Accessed 11 November 2020.
[8] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 11 November 2020.
[9] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 11 November 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: 1

Russia has reported a potential public health emergency of international concern (PHEIC) to the World Health Organization (WHO) within the last two years.

According to the WHO COVID-19 Dashboard, Russia reported its first case of the virus on January 31st, 2020, which was after it was declared as PHEIC by the WHO on Januray 30, and the country has since been providing data on the daily count of new confirmed cases and deaths [1]. Additionally, the WHO COVID-19 Health System Response Monitor contains a timeline and the latest information on Russia's COVID-19 policy responses [2]. The WHO country news webpage also reflects on Russia's response to the COVID-19 pandemic [3].

On 18 February 2021, the National IHR Focal Point for the Russian Federation notified WHO of detection of avian influenza A(H5N8) in seven human clinical specimens. These are the first reported detection of avian influenza A(H5N8) in humans. [4]

[1] World Health Organization (WHO). 2020. "WHO Coronavirus Disease (COVID-19) Dashboard. Russia Federation". [https://covid19.who.int/region/euro/country/ru]. Accessed 11 November 2020.
[2] World Health Organization (WHO). 2020. "COVID-19 Health System Response Monitor. Russia Federation". [https://www.covid19healthsystem.org/countries/russianfederation/countrypage.aspx]. Accessed 11 November 2020.
[3] World Health Organization (WHO). 2020. "Country page - Russia Federation. News." [https://www.euro.who.int/en/countries/russian-federation/news/news/news?root_node_selection=70444]. Accessed 11 November 2020.
[4] World Health Organization (WHO). 2021. "Human infection with avian influenza A (H5N8) – the Russian Federation" [https://www.who.int/csr/don/26-feb-2021-influenza-a-russian-federation/en/]

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

Russia's government operates an electronic reporting surveillance system encompassing regional and national levels. In 2012, the Head Center for Hygiene and Epidemiology of the Russian Federal Medical-Biological Agency (FMBA) launched an online system to monitor and analyse the sickness rate of infectious diseases [1]. Data are aggregated from state statistical reporting forms filled out at medical centers, hospitals and the FMBA's regional departments, on blood tests, inoculations and sickness rates [2]. Information is collected on a wide range of infectious diseases including typhoid, measles, HIV, tuberculosis, polio, and hepatitis [3].

[1] Head Center for Hygiene and Epidemiology. "Shared Information Space (Общее информационное пространство)". [http://fmba-gcgie.ru/obshchee-informatsionnoe-prostranstvo/]. Accessed 11 November 2020.
[2] Aksenov L. A., Krivenko O. V., Mamaeva G. G., Petukov A. I. 2013. "Online Automated System of Monitoring of Sickness Rate of Infectious Diseases of the Served Contingent and the Population of the FMBA of Russia (Онлайновая автоматизированная система мониторингаинфекционной заболеваемостиобслуживаемого контингента и населенияФМБА России)". Information-measuring and Control Systems, No. 10: 42-45. [https://itmcongress.ru/dl/2014/01/14/Automated-online-monitoring-system-of-FMBA-Russian.pdf]. Accessed 11 November 2020.
[3] Federal State Statistics Service. No.694 of 22 November 2019. "On the Approval of the Forms of Federal Statistical Observation With the Instructions for Their Filling for the Organization of the Federal Supervision Service in the Field of

Consumer Rights Protection and Human Welfare (Об утверждении форм федерального статистического наблюдения с указаниями по их заполнению для организации федеральной службой по надзору в сфере защиты прав потребителей и благополучия человека федерального статистического наблюдения за санитарным состоянием субъекта Российской Федерации)". [https://normativ.kontur.ru/document?moduleId=1&documentId=350156]. Accessed 11 November 2020.

2.3.2b

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

Yes = 1 , No = 0

Current Year Score: 0

Russia's electronic disease surveillance system does not collect real-time laboratory data. In 2012, the Head Center for Hygiene and Epidemiology of the Russian Federal Medical-Biological Agency (FMBA) launched an online system to monitor and analyse the sickness rate of infectious diseases [1]. According to a 2013 academic article on the surveillance system, all clinical hospitals, infirmaries, hygiene and epidemiology centers and territorial departments of the Federal Medical-Biological Agency are connected to the electronic disease surveillance system [1]. It is also stated that the data are derived from forms that are completed by medical institutions manually [1]. In 2019, Order 694 on the Approval of the Forms of Federal Statistical Observation With the Instructions for Their Filling introduced new federal statistical observation forms and instructions for filling them out [2, 3]. The order contains monthly and annual forms, as well as deadlines for their submission, depending on the reporting agency, for example, sub-departments of the Center for Hygiene and Epidemiology in each Russian federal subject are required to submit the form 7 days after the reporting period [2]. No evidence that the system uses real-time data was found on the websites of the Ministry of Health or the FMBA [4, 5].

[1] Aksenov L. A., Krivenko O. V., Mamaeva G. G., Petukov A. I. 2013. "Online Automated System of Monitoring of Sickness Rate of Infectious Diseases of the Served Contingent and the Population of the FMBA of Russia (Онлайновая автоматизированная система мониторингаинфекционной заболеваемостиобслуживаемого контингента и населенияФМБА России)". Information-measuring and Control Systems, No. 10: 42-45. [https://itmcongress.ru/dl/2014/01/14/Automated-online-monitoring-system-of-FMBA-Russian.pdf]. Accessed 11 November 2020.
[2] Federal State Statistics Service. No.694 of 22 November 2019. "On the Approval of the Forms of Federal Statistical Observation With the Instructions for Their Filling for the Organization of the Federal Supervision Service in the Field of Consumer Rights Protection and Human Welfare (Об утверждении форм федерального статистического наблюдения с указаниями по их заполнению для организации федеральной службой по надзору в сфере защиты прав потребителей и благополучия человека федерального статистического наблюдения за санитарным состоянием субъекта Российской Федерации)". [https://normativ.kontur.ru/document?moduleId=1&documentId=350156]. Accessed 11 November 2020.
[3] Russian Association of Legal Information GARANT. "Statistical Information on Parasitic and Infectious Diseases Must Be Submitted for New Forms (Статистические сведения по паразитарным и инфекционным заболеваниям нужно сдавать по новым формам)".[http://www.garant.ru/news/1248497/]. Accessed 11 November 2020.
[4] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 11 November 2020.
[5] Federal Medical and Biological Agency. [http://fmba-gcgie.ru/]. Accessed 11 November 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: 1

A national system of electronic health records exists in Russia, but there is insufficient evidence that the system is commonly in use. A national system of personal electronic health "cards" (i.e. digital records) for healthcare system users has been in development under the Ministry of Health since 2013 [1]. According to Decree 555 on the Single State Information System in the Sphere of Healthcare (adopted 2018, last amended 2020), the Information System incorporates a multitude of sub-systems, including that of Federal Integrated Electronic Medical Records (IEMR), designed for the "the collection, systemization and processing of structured, de-personalized information on individuals receiving medical care" [2]. The Electronic Medical Record system will integrate electronic systems of the country's constituent entities as individual cities and regions have developed, or are in the process of developing, local electronic health record systems [2]. In 2019, it was announced that data exchange between local medical organizations and IEMR have been established [3]. Furthermore, it has been projected that by 2024 all state and municipal medical organizations will provide citizens with access to their electronic medical documents [3]. However, it is unclear to what extent the records of the local systems have already been transferred to the IEMR, as such information was not found on the website of the Ministry of Health [4]. The ministry has introduced a portal for operational interaction of the participants of the Single State Information System, aimed at improving openness and transparency of the project, but no public evidence of the current figures for use of the IEMR could be located on the website [5]. Nevertheless, there is evidence of local record input in the IEMR as, for example, the Medical Information and Analytical Center of Rostov Region, since May 2019, publishes monthly reports that provide the number of records transferred to the IEMR [6].

[1] Ministry of Health of the Russian Federation. 20 November 2013. "Structure of the Electronic Medical Record Approved by the Ministry of Health (Минздравом России утверждена структура электронной медицинской карты). [https://www.rosminzdrav.ru/news/2013/11/20/1314-minzdravom-rossii-utverzhdena-struktura-elektronnoy-meditsinskoy-karty]. Accessed 12 November 2020.
[2] Government of the Russian Federation. No.555 of 5 May 2018. "On the Single State Information System in the Sphere of Healthcare (О Единой Государственной Информационной Системе В Сфере Здравоохранения)".[http://base.garant.ru/71937270/]. Accessed 12 November 2020.
[3] Zdrav Expert. "Development Stages of the Single State Health Information System (Этапы создания ЕГИСЗ)". [http://zdrav.expert/index.php/%D0%9F%D1%80%D0%BE%D0%B5%D0%BA%D1%82:%D0%95%D0%B4%D0%B8%D0%BD%D0%B0%D1%8F_%D0%B3%D0%BE%D1%81%D1%83%D0%B4%D0%B0%D1%80%D1%81%D1%82%D0%B2%D0%B5%D0%BD%D0%BD%D0%B0%D1%8F_%D0%B8%D0%BD%D1%84%D0%BE%D1%80%D0%BC%D0%B0%D1%86%D0%B8%D0%BE%D0%BD%D0%BD%D0%B0%D1%8F_%D1%81%D0%B8%D1%81%D1%82%D0%B5%D0%BC%D0%B0_%D0%B7%D0%B4%D1%80%D0%B0%D0%B2%D0%BE%D0%BE%D1%85%D1%80%D0%B0%D0%BD%D0%B5%D0%BD%D0%B8%D1%8F_(%D0%95%D0%93%D0%98%D0%A1%D0%97)#.D0.AD.D1.82.D0.B0.D0.BF.D1.8B_.D1.81.D0.BE.D0.B7.D0.B4.D0.B0.D0.BD.D0.B8.D1.8F_.D0.95.D0.93.D0.98.D0.A1.D0.97]. Accessed 12 November 2020.
[4] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 12 November 2020.
[5] Portal for Operational Interaction of the Participants of the Single State Information System. [http://portal.egisz.rosminzdrav.ru/]. Accessed 12 November 2020.

[6] Medical Information and Analytical Center of Rostov Region. "Single State Information System in the Sphere of Healthcare. IEMR (Единой Государственной Информационной Системе В Сфере Здравоохранения. ЭМК)". [https://www.miacrost.ru/index.php?option=com_content&view=article&id=191&Itemid=161]. Accessed 12 November 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

Russia's national public health system has access to electronic health records. In Russia, the provision of medical services is predominantly ensured by the Federal Compulsory Medical Insurance Fund, which is managed by the Ministry of Health [1]. In 2018,146.3 million people were insured under the mandatory statutory health insurance [1]. In 2013, the Ministry of Health begun the development of national system of personal electronic health "cards" (i.e. digital records) [2]. According to Decree 555 on the Single State Information System in the Sphere of Healthcare (adopted 2018, last amended 2020), which incorporates the Federal Integrated Electronic Medical Records, the Ministry of Health operates the Single System and all medical organisations are required to provide information to the Sytsem [3]. The legislation, therefore, guarantees that the national public health system has access to the electronic health records of its citizens.

[1] Federal Compulsory Medical Insurance Fund. "Federal Compulsory Medical Insurance Fund System in the Russian Federation (Система ОМС в РФ)".[http://www.ffoms.gov.ru/system-oms/]. Accessed 12 November 2020.
[2] Ministry of Health of the Russian Federation. 20 November 2013. "Structure of the Electronic Medical Record Approved by the Ministry of Health (Минздравом России утверждена структура электронной медицинской карты). [https://www.rosminzdrav.ru/news/2013/11/20/1314-minzdravom-rossii-utverzhdena-struktura-elektronnoy-meditsinskoy-karty]. Accessed 12 November 2020.
[3] Government of the Russian Federation. No.555 of 5 May 2018. "On the Single State Information System in the Sphere of Healthcare (О Единой Государственной Информационной Системе В Сфере Здравоохранения)".[http://base.garant.ru/71937270/]. Accessed 12 November 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 is evidence that Russia's national electronic health records system uses standards to ensure that data are comparable. The 2012 development document of the Single State Information System in the Sphere of Healthcare, which incorporates a multitude of sub-systems, including that of Federal Integrated Electronic Medical Records, foresees use of standards to ensure that medical data are comparable [1]. It stipulates that the system of Electronic Medical Records will follow the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD-10) [1]. The use of such standards in practice is confirmed by the website dedicated to providing information and support on the use of Single State Information System in the Sphere of Healthcare, which states that the Electronic Medical Record system applies International Statistical Classification of Diseases and Related Health Problems [2].

[1] Ministry of Health of the Russian Federation. 17 December 2012. "Single State Information System in the Sphere of Healthcare. Explanatory Note to the System Project. Book 1 Basic Systems Engineering Solutions for the Construction of the

Uniform State Health Information System (Единая Государственная Информационная Система В Сфере Здравоохранения. Пояснительная записка к системному проекту. Книга 1 Основные системотехнические решения по построению егисз.)".
[https://portal.egisz.rosminzdrav.ru/files/%D0%9A%D0%BD%D0%B8%D0%B3%D0%B0%201%20%D0%A0%D0%B0%D0%B7%D0%B4%D0%B5%D0%BB%2001%20%D0%9E%D0%B1%D0%BE%D1%81%D0%BD%D0%BE%D0%B2%D0%B0%D0%BD%D0%B8%D0%B5%20%D0%B8%20%D1%80%D0%B5%D1%88%D0%B5%D0%BD%D0%B8%D1%8F%20%D0%BF%D0%BE%20%D0%BE%D0%B1%D1%89%D0%B5%D0%B9%20%D1%86%D0%B5%D0%BB%D0%B5%D0%B2%D0%BE%D0%B9%20%D0%B0%D1%80%D1%85%D0%B8%D1%82%D0%B5%D0%BA%D1%82%D1%83%D1%80%D0%B5%20%D0%95%D0%93%D0%98%D0%A1%D0%97.doc]. Accessed 12 November 2020.
[2] Single State Information System in the Sphere of Healthcare. "Egisz Incorporates 13 Sub-systems (ЕГИСЗ включает в себя 13 групп подсистем)." [https://egisz.rosminzdrav.ru/#fourthPage]. Accessed 12 November 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: 0

There is insufficient evidence of mechanisms to share health surveillance data between ministries responsible for human and animal health. The Rules SP 3.1.084-96 / VP 13.3.4.1100-96 on Prevention and Control of Infectious Diseases Common to Humans and Animals (adopted 1996) stipulate that the Federal Service for Surveillance in the Sphere of Protection of Consumer Rights and Human Welfare (Rospotrebnadzor) and the Federal Service for Veterinary and Phytosanitary Surveillance (FSVPS) "carry out, within their competence, constant interaction in the field of protecting the population from infectious diseases common to humans and animals" [1]. However, the rules do not provide any further details on the communication mechanisms [1]. No evidence of such mechanisms was located on the websites of Rospotrebnadzor or FSVPS [2, 3]. In 2018, the Ministry of Agriculture and Rospotrebnadzor signed a cooperation agreement, which reportedly envisages cooperation between the two agencies in the localization and elimination of foci of particularly dangerous diseases common to humans and animals [4]. The agreement, however, is not publicly available [2, 3]. Additionally, in October 2018, the Ministry of Agriculture organised an interdepartmental roundtable discussion, where one of the topics discused was the interdepartmental cooperation and controlling the spread of anthroponozes based on the report by Rospotrebnadzor [5]. The details of this topic of discussion are not publicly available [3, 6]. The websites of the Ministry of Health and Ministry of Natural Resources and Ecology were found to contain no information on mechanisms to share surveillance data [7, 8].

[1] Chief State Veterinary Inspector of the Russian Federation and Deputy Chief State Sanitary Doctor of the Russian Federation. SP 3.1.084-96 / VP 13.3.4.1100-96 of 31 May 1996. "Prevention and Control of Infectious Diseases Common to Humans and Animals (Профилактика и борьба с заразными болезнями, общими для человека и животных)". [http://www.fsvps.ru/fsvps/laws/167.html#4]. Accessed 13 November 2020.
[2] Federal Service for Veterinary and Phytosanitary Surveillance. [https://fsvps.gov.ru/]. Accessed 13 November 2020.
[3] Federal Service for Surveillance on Consumer Rights and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 13 November 2020.
[4] Federal Service for Surveillance on Consumer Rights and Human Welfare. 20 September 2018. "On Signing a Cooperation Agreement Between Rospotrebnadzor and the Ministry of Agriculture of the Russian Federation (О подписании соглашения о сотрудничестве между Роспотребнадзором и Министерством сельского хозяйства РФ)".

[https://www.rospotrebnadzor.ru/about/info/news/news_details.php?ELEMENT_ID=10652&sphrase_id=1573659]. Accessed 13 November 2020.
[5] Ministry of Agriculture of the Russian Federation. 12 October 2018. "Round Table in the Framework of the 20th Agro-industrial Exhibition "Golden Autumn", Organized by the Veterinary Department of the Ministry of Agriculture of Russia (Круглый стол в рамках 20-й агропромышленной выставки «Золотая осень», организованной Департаментом ветеринарии Минсельхоза России)". [https://mcx.gov.ru/ministry/departments/departament-veterinarii/news/kruglyy-stol-v-ramkakh-20-y-agropromyshlennoy-vystavki-zolotaya-osen-organizovannoy-departamentom-ve/]. Accessed 13 November 2020.
[6] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 13 November 2020.
[7] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 13 November 2020.
[8] Ministry of Natural Resources and Ecology of the Russian Federation. [http://www.mnr.gov.ru/]. Accessed 13 November 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

Russia makes de-identified health surveillance data on disease outbreaks publicly available on government websites, but the statistics are not shared at least on a weekly basis. Until the end of 2018, the Federal Service for Surveillance on Consumer Rights and Human Welfare (Rospotrebnadzor) periodically published tables showing infection rates for over 60 infectious diseases, including both rarer diseases such as HIV, brucella and malaria, and the more common influenza, tuberculosis and pneumonia. Rospotrebnadzor published these as aggregate data up to each month (for example, January- February, January-March, January-April), but the publication of these datasets was discontinued in 2019 [1, 2]. The Ministry of Health has more recently published data on infection rates in Russia of diseases such as influenza, but the ministry does not publish such data on a regular basis [3]. There is also no evidence of regular disease data publication on the official federal government website or the Ministry of Health's website [4, 5].

[1] Federal Service for Surveillance on Consumer Rights and Human Welfare. "Infectious disease sickness rates January-October 2018 (Инфекционная заболеваемость в Российской Федерации за январь-октябрь 2018г.)". [http://rospotrebnadzor.ru/activities/statistical-materials/statictic_details.php?ELEMENT_ID=10897]. Accessed 20 November 2020.
[2] Federal Service for Surveillance on Consumer Rights and Human Welfare. "Statistical materials (Статистические материалы)". [http://rospotrebnadzor.ru/activities/statistical-materials/]. Accessed 20 November 2020.
[3] Facebook. Ministry of Health of the Russian Federation. [https://www.facebook.com/MinzdravRu/?fref=ts]. Accessed 20 November 2020.
[4] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 20 November 2020.
[5] Government of the Russian Federation. [http://government.ru/]. Accessed 20 November 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

Russia makes de-identified COVID-19 surveillance data, including details such as daily case count and mortality rate, available on government websites. The Russian government has set up an official website dedicated to providing information and statistics on COVID-19 in the country, including daily and total figures on tests performed, cases identified, cases detected in the last 24 hours, patients that have recovered, death rate and active cases. The surveillance data is updated daily and the public can also access disaggregated data based on regions [1, 2].

[1] StopCoronavirus.rf. [https://xn--80aesfpebagmfblc0a.xn--p1ai/]. Accessed 16 November 2020.
[2] StopCoronavirus.rf. "Operational data (Оперативные данные)". [https://xn--80aesfpebagmfblc0a.xn--p1ai/information/]. Accessed 16 November 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

The confidentiality of individuals' health information is safeguarded by Russian legislation. Federal Law 323-FZ on the Foundations of Health Protection of the Citizens in the Russian Federation (adopted 2011, last amended 2020) stipulates that information on a person's health, generated through medical examination and treatment, is confidential [1]. Furthermore, Decree 555 on the Single State Information System in the Sphere of Healthcare (adopted 2018, last amended 2020), which includes Federal Integrated Electronic Medical Records (IEMR), states that the system is designed for the "the collection, systemization and processing of structured, de-personalized information on individuals receiving medical care" [2]. The procedure for depersonalizing information processed in the IEMR is laid out in Order 341n on the Procedure for Depersonalizing Information About Persons Who Receive Medical Care, as Well as About Persons in Respect of Whom Medical Examinations Are Carried Out (adopted 2018), issued pursuent to Federal Law 323-FZ on Basics of Health Protection of the Citizens in the Russian Federation [3]. The order on the procedure for depersonalizing information provides a list of information that is to be depersonalized, including patients personal details, diagnosis, medical history [3]. Article 7 of Federal Law 152-FZ on Personal Data (adopted 2006, last amended 2020) also obliges information system operators to safeguard the confidentiality of personal data, including personal health information, stating that "operators and other persons who have gained access to personal data are obliged not to disclose it to third parties and not to distribute personal data without the consent of the subject of personal data, unless otherwise provided by federal law" [4]. Finally, the Decree 1119 on Requirements for the Protection of Personal Data Processed in Information Systems of Personal Data (adopted 2012) stipulates on technical measures of the information systems to prevent unauthorized, including accidental, access to personal data, but the decree does not directly address information confidentiality [5].

[1] Government of the Russian Federation. No.323-FZ of 21 November 2011. "On the Foundations of Health Protection of the Citizens in the Russian Federation (Об основах охраны здоровья граждан в Российской Федерации)". [http://base.garant.ru/12191967/]. Accessed 13 November 2020.
[2] Government of the Russian Federation. No.555 of 5 May 2018. "On the Single State Information System in the Sphere of Healthcare (О Единой Государственной Информационной Системе В Сфере Здравоохранения)".[http://base.garant.ru/71937270/]. Accessed 13 November 2020.

[3] Ministry of Health of the Russian Federation. No.341n of 14 June 2018. "On The Procedure for Depersonalizing Information About Persons Who Receive Medical Care, as Well as About Persons in Respect of Whom Medical Examinations Are Carried Out (Порядок обезличивания сведений о лицах, которым оказывается медицинская помощь, а также о лицах, в отношении которых проводятся медицинские экспертизы, медицинские осмотры и медицинские освидетельствования)". [http://base.garant.ru/72010050/53f89421bbdaf741eb2d1ecc4ddb4c33/#block_1000]. Accessed 13 November 2020.
[4] Government of the Russian Federation. No.152-FZ of 27 July 2006. "On Personal Data (О персональных данных)". [http://ivo.garant.ru/#/document/12148567/paragraph/4:0]. Accessed 26 November 2020.
[5] Government of the Russian Federation. No.1119 of 1 December 2012. "On Requirements for the Protection of Personal Data Processed in Information Systems of Personal Data (Об утверждении требований к защите персональных данных при их обработке в информационных системах персональных данных)". [http://ivo.garant.ru/#/document/70252506/]. Accessed 13 November 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

Russia has legislation safeguarding the confidentiality of health information, which covers the protection from cyber attacks. Decree 555 on the Single State Information System in the Sphere of Healthcare (adopted 2018, last amended 2020), which includes Federal Integrated Electronic Medical Records (IEMR), states that the system is designed for the "the collection, systemization and processing of structured, de-personalized information on individuals receiving medical care" [1]. The decree lays out procedures for protecting information contained in the system from "unauthorized […] acess […], the result of which may be destruction, modification, blocking, copying, provision or distribution of personal data, as well as other illegal actions", and mandates the use of certified information security tools [1]. Furthermore, Decree 1119 on Requirements for the Protection of Personal Data Processed in Information Systems of Personal Data (adopted 2012) details 4 levels of threats and the corresponding levels of security required for their protection [2]. According to this decree, information systems processing and storing "special" categories of personal data, including data about people's health condition, are vulnerable to level 1 (highest) security threats, described as "conditions and factors creating current danger of unsanctioned access to personal data" [2]. Such systems require level 1 (highest) security measures, including information security tools that have been assessed for correspondence to legal requirements among other measures [2]. Article 19 of Federal Law 152-FZ on Personal Data (adopted 2006, last amended 2020) also requires the safeguarding of health information, and lays out requirements to ensure protection against security threats, defined as in Decree 555, obliging personal data information system operators to implement organizational and technical measures [3].

[1] Government of the Russian Federation. No.555 of 5 May 2018. "On the Single State Information System in the Sphere of Healthcare (О Единой Государственной Информационной Системе В Сфере Здравоохранения)".[http://base.garant.ru/71937270/]. Accessed 13 November 2020.
[2] Government of the Russian Federation. No.1119 of 1 December 2012. "On Requirements for the Protection of Personal Data Processed in Information Systems of Personal Data (Об утверждении требований к защите персональных данных при их обработке в информационных системах персональных данных)". [http://ivo.garant.ru/#/document/70252506/]. Accessed 13 November 2020.
[3] Government of the Russian Federation. No.152-FZ of 27 July 2006. "On Personal Data (О персональных данных)".

[http://ivo.garant.ru/#/document/12148567/paragraph/4:0]. Accessed 26 November 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: 0

There is no evidence that the Russian government has committed to share surveillance data for one or more than one disease with other countries in the region during public health emergencies. In July 2018, the Heads of State Council of the Shanghai Cooperation Organisation (SCO), of which Russia is a founding member, adopted the Statement on Joint Efforts Against the Threat of Epidemics in the SCO space, in which they highlighted "the importance of exchanging reliable information about infectious diseases in the SCO space", but the document does not mention an explicit commitment to share surveillance data during public health emergencies [1]. The 1993 CIS Agreement on the Exchange of Information on Natural and Man-made Emergencies, on Information Interaction for the Elimination of Their Consequences and Assistance to the Affected Population committed Russia to sharing data on national emergencies, but the document does not explicitly mention health surveillance data or public health emergencies [2]. No further evidence of commitments by Russia to share surveillance data in an emergency with other countries in the region was found on the websites of the Ministry of Health or the Federal Service for Surveillance in the Sphere of Protection of Consumer Rights and Human Welfare [3, 4].

[1] Shanghai Cooperation Organisation. 10 of June 2018. "Statement by the Heads of the Shanghai Cooperation Organisation Member States on Joint Efforts Against the Threat of Epidemics in the SCO space". [http://eng.sectsco.org/documents/]. Accessed 17 November 2020.
[2] Commonwealth of Independent States. 22 of January 1993. "Agreement on the Exchange of Information on Natural and Man-made Emergencies, on Information Interaction for the Elimination of Their Consequences and Assistance to the Affected Population (Соглашение об обмене информацией о чрезвычайных ситуациях природного и техногенного характера, об информационном взаимодействии при ликвидации их последствий и оказании помощи пострадавшему населению)". [http://docs.cntd.ru/document/901952088]. Accessed 17 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 17 November 2020.
[4] Federal Service for Surveillance on Protection of Consumer Rights and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 17 November 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: 1

Russia has a system to provide support at the sub-national level to conduct contact tracing in the event of a public health emergency, but only in response to active public health emergencies. In July 2020, Russia's Ministry of Digital Development, Communications and Mass Media developed a system for tracing contacts of people infected with COVID-19 that was to be implemented using data collected by the Ministry of Health (the phone number of the infected individual) as well as identification of contacts through geo-location and mobile telephone operator data. The list of contacts' names were to be then sent to regional operational headquarters, the Russian Guard, the Ministry of Internal Affairs and to the Ministry of Health [1]. The system was eventually launched via a mobile application in November 2020 [2]. Resolution SP. 3.4.2318-08 on Sanitary Protection of the Territory of the Russian Federation (adopted 2008, last amended 2016) does not name an agency or service that would be responsible for contact tracing and does not mention procedures for supporting sub-national systems to conduct contact tracing in case of an active or potential public health emergency [3]. There is also no mention of providing support at the sub-national level to conduct contact tracing in Decision 794 on the Unified State System for the Prevention and Elimination of Emergency Situations (adopted 2001, last amended 2020), in Order 380 on the Regulations on the Disaster Medicine Service (adopted 2000), or on the websites of the Ministry of Health, the Federal Service for Supervision on Consumer Rights Protection and Human Welfare or the All-Russian Center for Disaster Medicine [4, 5, 6, 7, 8].

[1] Government of the Russian Federation. 23 March 2020. "Decisions following the meeting of the Presidium of the Coordination Council under the Government of the Russian Federation to combat the spread of the new coronavirus infection (О решениях по итогам заседания президиума Координационного совета при Правительстве Российской Федерации по борьбе с распространением новой коронавирусной инфекции)". [http://government.ru/dep_news/39243/]. Accessed 21 November 2020.
[2] Gazeta.ru. 6 July 2020. "Russia has developed a contact tracing system for COVID-19 patients (В России разработана система отслеживания контактов больных COVID-19)". [https://www.gazeta.ru/tech/news/2020/07/06/n_14636035.shtml]. Accessed 21 November 2020.
[3] Kommersant. 17 November 2020. "Ministry of Finance to Launch Contact Tracking App to Fight COVID-19 (Минцифры запустит приложение для отслеживания контактов для борьбы с COVID-19)". [https://www.kommersant.ru/doc/4575048]. Accessed 21 November 2020.
[4] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.SP. 3.4.2318-08 of 22 January 2008. "Sanitary Protection of the Territory of the Russian Federation (Санитарная охрана территории Российской Федерации)". [http://docs.cntd.ru/document/902094693]. Accessed 21 November 2020.
[5] Government of the Russian Federation. No.794 of 30 December 2003. "On the Unified State System for the Prevention and Elimination of Emergency Situations (О единой государственной системе предупреждения и ликвидации чрезвычайных ситуаций)". [http://docs.cntd.ru/document/901884206]. Accessed 21 November 2020.
[6] Ministry of Health of the Russian Federation. No.380 of 27 October 2000. "Regulations on the Disaster Medicine Service of the Ministry of Health of the Russian Federation (Положение о службе медицины катастроф Министерства здравоохранения Российской Федерации)". [http://docs.cntd.ru/document/901776429]. Accessed 21 November 2020.
[7] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 21 November 2020.
[8] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 21 November 2020.
[9] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 21 November 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: 2

Russia provides nationwide wraparound services that include economic support and medical attention to enable infected people and their contacts to self-isolate during an epidemic. Section 6 of Order 952n on Issuance and Registration of Incapacity for Work Certificates, Including the Procedure for Forming Incapacity for Work Certificates in the Form of an Electronic Document (approved 2020) governs the issuance of certificates to those ordered to isolate during quarantine, as well as in case of the threat of the spread of diseases that pose a threat to others [1]. The certificates entitle the holder to receive money during the period that they are unable to work due to isolating, as long as they are insured in the mandatory statutory social insurance system. [1]. Law 52-FZ on the Sanitary and Epidemiological Wellbeing of the Population (adopted 1999, last amended 2020), states that people subjected to isolation are those infected (or suspected of being infected) with an infectious disease, and contact persons of those with confirmed diagnosis [2]. This law also states that people required to isolate are to receive medical supervision or treatment [2]. The deseases classified as dangerous to others are listed in Resolution 715 on List of Socially Significant Diseases and the List of Diseases That Pose a Danger to Others (adopted 2004, amended 2020), and include diphtheria, tuberculosis, cholera and COVID-19 [3].Furthermore, temporary orders have been issued in response to the COVID-19 pandemic, which foresee that paid Incapacity for Work Certificates can also be obtained by citizens returnig from epidemiologically unsafe countries, providing that proof of travel is presented in the application [4].

[1] Ministry of Health of the Russian Federation. No.952n of 1 September 2020. "Issuance and Registration of Incapacity for Work Certificates, Including the Procedure for Forming Incapacity for Work Certificates in the Form of an Electronic Document (Выдачи и оформления листков нетрудоспособности, включая порядок формирования листков нетрудоспособности в форме электронного документа)". [http://www.consultant.ru/document/cons_doc_LAW_362176/2634316553bd75b75850d2d1410344511c5a6d6f/#dst100017]. Accessed 20 November 2020.
[2] Government ofthe Russian Federation. No.52-FZ of 17 March 1999. "On the Sanitary and Epidemiological Well-being of the Population (О санитарно-эпидемиологическом благополучии населения)". [http://docs.cntd.ru/document/901729631]. Accessed 20 November 2020.
[3] Government of the Russian Federation. No.715 of 1 December 2004. "List of Socially Significant Diseases and the List of Diseases That Pose a Danger to Others (Об утверждении перечня социально значимых заболеваний и перечня заболеваний, представляющих опасность для окружающих)". [http://docs.cntd.ru/document/901916651]. Accessed 20 November 2020.
[4] Official Internet Portal of Public Services. 13 November 2020. "How to Apply for Sick Leave During Quarantine (Как оформить больничный на время карантина)". [https://www.gosuslugi.ru/help/news/2020_03_26_quarantine]. Accessed 20 November 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 publicly available evidence that Russia makes de-identified data on contact tracing efforts for COVID-19 available on government websites. In July 2020, Russia's Ministry of Digital Development, Communications and Mass Media developed a system for tracing contacts of people infected with COVID-19 and it was to be implemented using data collected by the

Ministry of Health (the phone number of the infected individual) as well as identification of contacts through geo-location and mobile telephone operator data. The list of contacts' names were to be then sent to regional operational headquarters, the Russian Guard, the Ministry of Internal Affairs and to the Ministry of Health [1]. The system was eventually launched via a mobile application in November 2020 [2]. However, there is no evidence that regular data on contact tracing are published on the websites of the Ministry of Health, Federal Service for Surveillance on Consumer Rights Protection and Human Welfare, the Ministry of the Interior, the All-Russian Center for Disaster Medicine, the Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters, or the dedicated websites set up for coronavirus data and news updates [3, 4, 5, 6, 7, 8].

[1] Gazeta.ru. 6 July 2020. "Russia has developed a contact tracing system for COVID-19 patients (В России разработана система отслеживания контактов больных COVID-19)".
[https://www.gazeta.ru/tech/news/2020/07/06/n_14636035.shtml]. Accessed 21 November 2020.
[2] Kommersant. 17 November 2020. "Ministry of Finance to Launch Contact Tracking App to Fight COVID-19 (Минцифры запустит приложение для отслеживания контактов для борьбы с COVID-19)".
[https://www.kommersant.ru/doc/4575048]. Accessed 21 November 2020.
[3] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 21 November 2020.
[4] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 21 November 2020.
[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 21 November 2020.
[6] Ministry of the Interior of the Russian Federation. [https://mvd.ru/]. Accessed 21 November 2020.
[7] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 21 November 2020.
[8] StopCoronavirus.rf. [https://xn--80aesfpebagmfblc0a.xn--p1ai/]. Accessed 21 November 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: 2

Russia has a cooperative agreement between the public health system and border control authorities to monitor suspected and potential cases for international travelers in preparation for future public health emergencies. Resolution SP. 3.4.2318-08 on Sanitary Protection of the Territory of the Russian Federation (adopted 2008, last amended 2016) lays out a cooperation procedure between the state border authorities and the Federal Service for Supervision on Consumer Rights Protection and Human Welfare (Rospotrebnadzor), to ensure sanitary and anti-epidemic protection of the territory of Russia and to prevent the introduction and spread of dangerous infectious diseases that pose a danger to the population. The resolution states that the cooperation procedure can be used during pandemics and other public health emergencies. The cooperation procedure involves public health officials receiving daily reports from the administration of airports, sea ports, railway stations and bus stations on the movement of vehicles and travelers, and then organizing the implementation of anti-epidemic measures through the identification of (suspected) infected persons in vehicles and at checkpoints on Russia's state border. They then organize isolation wards and quarantine facilities for the temporary isolation of identified patients or persons with suspected illness who have traveled into the country [1]. Additionally, Regulation No.218n on Administrative Regulations for the Federal

Service for Supervision of Consumer Rights Protection and Human Welfare (Rospotrebnadzor) to Perform the State Function of Sanitary and Quarantine Control at Checkpoints on the Russian Section of the External Border of the Customs Union (adopted 2012) provides further elaboration on Rospotrebnadzor's procedures when their officials are positioned at the border crossing checkpoints, which involve communication with the state border service. The Regulation outlines a communication plan on what to do if an emergency risk is detected – if people have arrived from countries with areas infected with dangerous infectious diseases, or if someone is identified as sick or there is a suspicion that someone might be [2].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.SP. 3.4.2318-08 of 22 January 2008. "Sanitary Protection of the Territory of the Russian Federation (Санитарная охрана территории Российской Федерации)". [http://docs.cntd.ru/document/902094693]. Accessed 21 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.218n of 12 March 2012. "Administrative Regulations for the Federal Service for Supervision of Consumer Rights Protection and Human Welfare to Perform the State Function of Sanitary and Quarantine Control at Checkpoints on the Russian Section of the External Border of the Customs Union (Административный регламент исполнения Федеральной службой по надзору в сфере защиты прав потребителей и благополучия человека государственной функции по осуществлению санитарно-карантинного контроля в пунктах пропуска на российском участке внешней границы Таможенного союза)". [http://www.32.rospotrebnadzor.ru/content/view/84/56/]. Accessed 20 November 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

Applied epidemiological training programs are available in Russia, but there is no evidence that the Russian government provides resources for citizens to participate in such programs abroad. In Russia, applied epidemiology training is available to graduate medical students as a two-year residency specialization option. The Federal State Educational Standard for this course stipulates that 69–75 of the course's 120 credits should be assigned to work experience at a medical institution [1]. Russia is not a member of the main global epidemiological training programs, including those run by the Training Programs in Epidemiology and Public Health Interventions Network, the US Center for Disease Control, and the European Center for Disease Prevention and Control [2, 3, 4]. In 2019, the Ministry of Health established a cooperation agreement with the Center for International Health Protection (ZIG) at the Robert Koch Institute, Germany, seeking strategic recommendations on the implementation of a new national FETP to strengthen the country's disease surveillance system and outbreak preparedness and response capacity [5]. The new FETP foresees that "fellows will spend at least 80 percent of the training time in the field engaged with practical, hands-on assignments during disease outbreaks and other types of public health emergencies" [5]. No further information on the new FETP or government resources available for citizens to participate in

applied epidemiology training programs abroad was found on the website of the Ministry of Health, Ministry of Science and Higher Education and that of the Federal Service for Surveillance in the Sphere of Protection of Consumer Rights and Human Welfare [6, 7, 8].

[1] Federal State Educational Standard of Higher Education. 29 October 2014. "FSES Residency. Epidemiology. (ФГОС ВО по направлениям ординатуры. Эпидемиология)". [http://fgosvo.ru/fgosvo/97/91/9/189]. Accessed 13 November 2020.
[2] TEPHINET. [https://www.tephinet.org/]. Accessed 13 November 2020.
[3] Center for Disease Control. [https://www.cdc.gov/globalhealth/healthprotection/fetp/index.htm]. Accessed 13 November 2020.
[4] EPIET/EUPHEM. [https://ecdc.europa.eu/en/epiet-euphem]. Accessed 13 November 2020.
[5] Robert Koch Institute. 6 December 2019. "New Cooperation Project With the Ministry of Health of the Russian Federation on Implementation of the Russian Field Epidemiology Training Program".[https://www.rki.de/EN/Content/Institute/International/ZIG/Moscow_mission.html]. Accessed 13 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 13 November 2020.
[7] Ministry of Science and Higher Education of the Russian Federation. [https://minobrnauki.gov.ru/]. Accessed 13 November 2020.
[8] Federal Service for Surveillance in the Sphere of Protection of Consumer Rights and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 13 November 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: 0

Applied epidemiological training programs available in Russia do not include animal health professionals, nor are specific animal health field epidemiology training programs offered. In Russia, applied epidemiology training is available exclusively to graduate medical students as a two-year residency specialisation option [1]. The corresponding educational standard for veterinary courses does not make any mention of animal health epidemiology [2]. Russia is not a member of the main global epidemiological training programs, including those run by the Training Programs in Epidemiology and Public Health Interventions Network, the US Center for Disease Control, and the European Center for Disease Prevention and Control [3, 4, 5]. In 2019, the Ministry of Health established a cooperation agreement with the Center for International Health Protection (ZIG) at the Robert Koch Institute in Germany, seeking strategic recommendations on the implementation of a new national FETP [6]. The available description of the new FETP does not explicitly state if it will be inclusive of animal health professionals [6]. No further information on the new FETP or any specific animal health field epidemiological training programs was found on the websites of the Ministry of Agriculture, Federal Service for Veterinary and Phytosanitary Surveillance, Ministry of Health, and Federal Service for Surveillance on Consumer Rights Protection and Human Welfare [7, 8, 9, 10].

[1] Federal State Educational Standard of Higher Education. 29 October 2014. "FSES Residency. Epidemiology. (ФГОС ВО по направлениям ординатуры. Эпидемиология)". [http://fgosvo.ru/fgosvo/97/91/9/189]. Accessed 13 November 2020.
[2] Ministry of Education and Science of the Russian Federation. No.896 of 30 July 2014. “On the Approval of Federal State Educational Standard of Higher Education for Direction of Study 36.06.01 Veterinary Science and Zooculture (Федеральный государственный образовательный стандарт высшего образования. Подготовка кадров высшей квалификации Направление подготовки 36.06.01 Ветеринария и зоотехния.)". [http://fgosvo.ru/fgosvo/95/91/7/173]. Accessed 13 November 2020.

[3] TEPHINET. [https://www.tephinet.org/]. Accessed 13 November 2020.
[4] Center for Disease Control. [https://www.cdc.gov/globalhealth/healthprotection/fetp/index.htm]. Accessed 13 November 2020.
[5] EPIET/EUPHEM. [https://ecdc.europa.eu/en/epiet-euphem]. Accessed 13 November 2020.
[6] Robert Koch Institute. 6 December 2019. "New Cooperation Project With the Ministry of Health of the Russian Federation on Implementation of the Russian Field Epidemiology Training Program".[https://www.rki.de/EN/Content/Institute/International/ZIG/Moscow_mission.html]. Accessed 13 November 2020.
[7] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 13 November 2020.
[8] Ministry of Agriculture of the Russian Federation. [[https://mcx.gov.ru/]. Accessed 13 November 2020.
[9] Federal Service for Veterinary and Phytosanitary Surveillance. [https://fsvps.gov.ru/]. Accessed 13 November 2020.
[10] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 13 November 202010

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

Russia has an overarching national public health emergency response plan addressing diseases with pandemic potential. The sanitary rules issued by the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor), approved by the Chief State Sanitary Doctor of Russia, include Methodological Guidelines MU 3.4.2552-

09 on Organization and Implementation of Primary Anti-Epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-Being of the Population (adopted 2009), which give detailed guidelines on actions to be taken after discovering a person suspected of having contracted one of the infectious diseases listed in the guidelines, including smallpox, poliomyelitis caused by wild poliovirus, human influenza caused by a new subtype of the virus and severe acute respiratory syndrome (SARS) [1]. Sub-sections of the document provide guidelines for anti-epidemic measures that must be carried out by teams of epidemiologists, evacuators and disinfectors. The guidelines lay out specific instructions for diagnosing, quarantining and hospitalizing patients, and for performing evacuation, disinfection, disinsection and deratization [1]. The guidelines have been issued pursuent to Federal Law 52-FZ on the Sanitary and Epidemiological Well-being of the Population (adopted 1999, last amended 2020), which prescribes introducing sanitary and anti-epidemic measures in the event of a threat or spread of infectious diseases that pose a danger to others, but which does not stipulate disease-specific actions [2]. Federal Law 52-FZ states that the chief state sanitary doctor and his or her deputies can announce the introduction of such measures, and it is the responsibility of Russia's federal subjects (constituent regions) to ensure their enactment [2].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 2020.
[2] Government ofthe Russian Federation. No.52-FZ of 17 March 1999. "On the Sanitary and Epidemiological Well-being of the Population (О санитарно-эпидемиологическом благополучии населения)". [http://docs.cntd.ru/document/901729631]. Accessed 26 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: 0

Russia's overarching plan has not been updated in the last 3 years. Russia's emergency response plan addressing diseases with pandemic potential is laid out in Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population, which give detailed guidelines on actions to be taken after discovering a person suspected of having contracted one of the infectious diseases listed in the guidelines, including smallpox, poliomyelitis caused by wild poliovirus, human influenza caused by a new subtype of the virus, severe acute respiratory syndrome (SARS) [1]. The guidelines were adopted in 2009 and there is no public evidence that the document has been updated since then [1].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)".

[http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 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: 1

Russia's overarching national emergency response plan includes specific considerations for paediatric and other populations. The plan is laid out in Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (adopted 2009), which give detailed guidelines on actions to be taken after discovering a person suspected of having contracted one of the infectious diseases listed in the guidelines, including smallpox, poliomyelitis caused by wild poliovirus, human influenza caused by a new subtype of the virus, severe acute respiratory syndrome (SARS) [1]. The guidelines include considerations for paediatric population, for example, if a case of polio is discovered, children under 5 who have been in contact with the patient must be examined by a paediatrician and neurologist and kept under medical observation for 20 days [1]. Treatment plans for a range of diseases contained in the guidelines also specify alternative dosages and drugs for children, pregnant women and breastfeeding mothers, where appropriate [1].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 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 public evidence that Russia has a specific mechanism for engaging with the private sector to assist with outbreak emergency preparedness and response. Russia's emergency response plan addressing diseases with pandemic potential is laid out in Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-Epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-Being of the Population (adopted 2009) [1]. The plan does not mention engaging with the private sector to assist with outbreak emergency preparedness and response. Furthermore, Law 52-FZ on the Sanitary and Epidemiological Well-being of the Population (adopted 1999, last amended 2020) makes no reference to private sector involvement, in some cases prescribing responsibilities of state agencies in a way that precludes involvement of the private sector, for example, by stating that the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare's network of laboratories are to be used to identify and eliminate disease threats (i.e. not private laboratories) [2]. No evidence of mechanism enabling the participation of the private sector was found on the websites of the Ministry of Health, the Ministry for Civil Defense, Emergencies and Elimination of Consequences of Natural Disasters or the All-Russian Center for Disaster Medicine [3, 4, 5].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 2020.
[2] Government ofthe Russian Federation. No.52-FZ of 17 March 1999. "On the Sanitary and Epidemiological Well-being of the Population (О санитарно-эпидемиологическом благополучии населения)". [http://docs.cntd.ru/document/901729631]. Accessed 22 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 22 November 2020.
[4] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru]. Accessed 22 November 2020.
[5] All-Russian Centre for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 22 November 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

Russia has guidelines in place to implement non-pharmaceutical interventions (NPIs) during an epidemic or pandemic for more than one disease. Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-Epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (adopted 2009) prescribe disinfection, disinsection and deratisation, as well as the introduction of unspecified "restrictive measures" to prevent the spread of infectious diseases, such as cholera, yellow fever, poliomyelitis and smallpox among others [1]. The Law 52-FZ on

the Sanitary and Epidemiological Well-being of the Population (adopted 1999, last amended 2020) also outlines restrictive measures, including a "special regime for economic and other activities", as well as restrictions on people's movement, to be determined on the basis of proposals and orders from chief state sanitary doctors and their deputies [2].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 2020.
[2] Government ofthe Russian Federation. No.52-FZ of 17 March 1999. "On the Sanitary and Epidemiological Well-being of the Population (О санитарно-эпидемиологическом благополучии населения)". [http://docs.cntd.ru/document/901729631]. Accessed 22 November 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, Russia has actived its national emergency response plan for an infectious disease outbreak, but there is no evidence that the country has completed a national-level biological threat-focused exercise. On 19 March 2020, the Russian government announced a "high alert" status for all 85 of its 85 federal subjects (consituent regions) due to COVID-19 [1], and the country has since introduced a multitude of anti-epidemic measures that have been issued on the basis of the article 51 of Law 52-FZ on the Sanitary and Epidemiological Well-being of the Population (adopted 1999, last amended 2020) [2]. Article 51 of Law 52-FZ mandates the chief state sanitary doctor and his deputies to order sanitary and anti-epidemic measures in the event of a threat of an epidemic, or to limit its spreading [3]. As of November 2020, the repositary of the Resolutions of the Chief State Sanitary Doctor contains 19 documents that prescribe measures aimed at limiting the spread of COVID-19 virus, referencing article 51 of the of Law 52-FZ [2]. There is no evidence of Russia conducting a national-level biological threat-focused exercise on the websites of the Ministry of Health, the Ministry of Agriculture, the Ministry of Civil Defence, Emergencies and Elimination of Consequences of Natural Disasters, the Ministry of Defence, the All-Russian Center for Disaster Medicine, the World Health Organization's (WHO) relevant country and regional pages, or the official website of the Government of Russia [4, 5, 6, 7, 8, 9, 10, 11]. Finally, the WHO's webpage dedicated to simulation exercises has not found to contain information on Russia having conducted a biological threat-focused exercise in the past year [12].

[1] TASS. 19 March 2020. "High alert due to coronavirus introduced throughout Russia (Режим повышенной готовности из-за коронавируса введен на всей территории России)". [https://tass.ru/obschestvo/8027563]. Accessed 21 November

2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. "Resolutions of the Chief State Sanitary Doctor of the Russian Federation (Постановления Главного государственного санитарного врача Российской Федерации)". [https://www.rospotrebnadzor.ru/region/korono_virus/post.php]. Accessed 26 November 2020.
[3] Government ofthe Russian Federation. No.52-FZ of 17 March 1999. "On the Sanitary and Epidemiological Well-being of the Population (О санитарно-эпидемиологическом благополучии населения)". [http://docs.cntd.ru/document/901729631]. Accessed 26 November 2020.
[4] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 21 November 2020.
[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 21 November 2020.
[6] Government of the Russian Federation. [http://government.ru/]. Accessed 21 November 2020.
[7] Ministry of Agriculture of the Russian Federation. [https://mcx.gov.ru/]. Accessed 21 November 2020.
[8] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 21 November 2020.
[9] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 21 November 2020.
[10] World Health Organisation. "Russian Federation". [https://www.euro.who.int/ru/countries/russian-federation]. Accessed 21 November 2020.
[11] World Health Organisation. "Regional Office for Europe". [https://www.euro.who.int/ru/home]. Accessed 21 November 2020.
[12] World Health Organisation. "Simulation Exercise". [https://extranet.who.int/sph/simulation-exercise]. Accessed 30 November 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 publicly available evidence that in the past year Russia has identified a list of gaps and best practices in response, either through an infectious disease response of a biological-threat focused exercise, and developed a plan to improve response capabilities. There is no evidence of that Russia has developed such a plan on the After Action Review pages of the World Health Organization, the websites of the Ministry of Health, the Ministry of Agriculture, the Ministry of Civil Defense, Emergencies and Elimination of Consequences of Natural Disasters, the Ministry of Defense, the Minsitry of the Interior, the All-Russian Center for Disaster Medicine, the European Centre for Disease Prevention and Control, the WHO's country and regional pages, or the official website of the Government of Russia [1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11].

[1] World Health Organisation. Extranet. "After Action Review". [https://extranet.who.int/sph/after-action-review]. Accessed 21 November 2020.
[2] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 21 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 21 November 2020.
[4] Ministry of the Interior of the Russian Federation. [https://mvd.ru/]. Accessed 21 November 2020.
[5] Government of the Russian Federation. [http://government.ru/]. Accessed 21 November 2020.
[6] Ministry of Agriculture of the Russian Federation. [https://mcx.gov.ru/]. Accessed 21 November 2020.
[7] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 21 November 2020.

[8] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 21 November 2020.
[9] European Centre for Disease Prevention and Control. [https://www.ecdc.europa.eu/en]. Accessed 21 November 2020.
[10] World Health Organisation. "Russian Federation". [https://www.euro.who.int/ru/countries/russian-federation]. Accessed 21 November 2020.
[11] World Health Organisation. "Regional Office for Europe". [https://www.euro.who.int/ru/home]. Accessed 21 November 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 publicly available evidence that in the past year Russia has undergone a national-level biological threat-focused exercise that has included private sector representatives. There is no evidence of Russia conducting a national-level biological threat-focused exercise on the websites of the Ministry of Health, the Ministry of Agriculture, the Ministry of Civil Defense, Emergencies and Elimination of Consequences of Natural Disasters, the Ministry of Defense, the Minsitry of the Interior, the All-Russian Center for Disaster Medicine, the European Centre for Disease Prevention and Control, the World Health Organization's (WHO) country and regional pages, or the official website of the Government of Russia [1, 2, 3, 4, 5, 6, 7, 8, 9, 10]. Finally, the WHO's webpage dedicated to simulation exercises has not found to contain information on Russia having conducted a national-level biological threat-focused exercise in the past year [11].

[1] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 21 November 2020.
[2] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 21 November 2020.
[3] Ministry of the Interior of the Russian Federation. [https://mvd.ru/]. Accessed 21 November 2020.
[4] Government of the Russian Federation. [http://government.ru/]. Accessed 21 November 2020.
[5] Ministry of Agriculture of the Russian Federation. [https://mcx.gov.ru/]. Accessed 21 November 2020.
[6] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 21 November 2020.
[7] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 21 November 2020.
[8] European Centre for Disease Prevention and Control. [https://www.ecdc.europa.eu/en]. Accessed 21 November 2020.
[9] World Health Organisation. "Russian Federation". [https://www.euro.who.int/ru/countries/russian-federation]. Accessed 21 November 2020.
[10] World Health Organisation. "Regional Office for Europe". [https://www.euro.who.int/ru/home]. Accessed 21 November 2020.
[11] World Health Organisation. "Simulation Exercise". [https://extranet.who.int/sph/simulation-exercise]. Accessed 30 November 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: 0

Russia has a generalized emergency operations center (EOC), but there is no evidence that it covers public health issues. Russia's EOC is the National Crisis Management Center, which in January 2020 ceased to be an independent legal entity and became a structural subdivision of the central office of the Ministry for Civil Defense, Emergencies and Elimination of the Consequences of Natural Disasters (EMERCOM) [1, 2]. EMERCOM is responsible for directing and coordinating activities in the field of civil defense, prevention of and response to disasters resulting from accidents, natural and man-made disasters, employment of conventional and CBR weapons, as well as ensuring fire safety and safety on bodies of water [3]. However, there is no specific reference to public health emergencies on the EMERCOM website or in the legislation regulating the Ministry's functions and responsibilities [4]. No evidence of a generalised EOC that manages public health emergencies or an EOC dedicated to such emergencies could be located on the Ministry of Health website [5].

[1] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. "National Crisis Management Centre [https://en.mchs.gov.ru/Ministry/Forces/national-crisis-management-centre]. Accessed 19 November 2020.
[2] TASS. 14 September 2020. "Putin canceled the law that made the NCMC EMERCOM of Russia an independent institution (Путин отменил закон, делавший НЦУКС МЧС самостоятельным учреждением)". [https://tass.ru/obschestvo/9455027]. Accessed 19 November 2020.
[3] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. "Main Functions (Основные функции)". [https://www.mchs.gov.ru/ministerstvo/o-ministerstve/obyazannosti-ministerstva/osnovnye-funkcii-mchs-rossii]. Accessed 19 November 2020.
[4] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. "Documents (Документы)". [https://www.mchs.gov.ru/dokumenty]. Accessed 19 November 2020.
[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 19 November 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 evidence of a Russian emergency operations center (EOC) required to conduct a drill for a public health emergency scenario at least once per year, nor there is evidence that they conduct a health-specific yearly drill. The Ministry for Civil Defense, Emergencies and Elimination of the Consequences of Natural Disasters (EMERCOM) is responsible for directing and coordinating activities in the field of civil defense, prevention of and response to disasters resulting from accidents, natural and man-made disasters, employment of conventional and CBR weapons, as well as ensuring fire safety and safety on bodies of water [1]. Its subdivision the National Crisis Management Center is charged with timely response to and management of emergencies [2]. Order 284 on Instructions for the Preparation and Conduct of Exercises and Training on Civil Defense, Protecting the Population From Emergencies of Situations, Ensuring Fire Safety and Safety People at Water Bodies (adopted 2013) sets out frequency requirements for conducting exercises and drills [3]. It states that coordinated exercises are held once every 3 years for up to 8 hours, and municipalities and organizations that have hazardous production facilities, as well as medical institutions with more than 600 beds are required to conduct exercises with the same frequency but lasting up to 2 days [3]. The websites of EMERCOM, Ministry of Health and All-Russian Center for Disaster Medicine have found to contain no evidence that health-specified drills are conducted yearly [4, 5, 6].

[1] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. "Main Functions (Основные функции)". [https://www.mchs.gov.ru/ministerstvo/o-ministerstve/obyazannosti-ministerstva/osnovnye-funkcii-mchs-rossii]. Accessed 19 November 2020.
[2] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. "National Crisis Management Centre [https://en.mchs.gov.ru/Ministry/Forces/national-crisis-management-centre]. Accessed 19 November 2020.
[3] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. No.284 of 24 April 2013. Instructions for the Preparation and Conduct of Exercises and Training on Civil Defense, Protecting the Population From Emergencies of Situations, Ensuring Fire Safety and Safety People at Water Bodies (Инструкция по подготовке и проведению учений и тренировок по гражданской обороне, защите населения от чрезвычайных ситуаций, обеспечению пожарной безопасности и безопасности людей на водных объектах)". [https://www.mchs.gov.ru/dokumenty/normativnye-pravovye-akty-mchs-rossii/556]. Accessed 19 November 2020.
[4] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 19 November 2020.
[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 19 November 2020.
[6] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 19 November 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 public evidence that a coordinated emergency response or emergency response exercise activated within 120 minutes of the identification of the public health emergency/scenario has taken place in the last year. No such evidence could be located on the websites of the Ministry for Civil Defense, Emergencies and Elimination of the Consequences of Natural Disasters (EMERCOM), the Ministry of Health or the All-Russian Center for Disaster Medicine [1, 2, 3]. On 19 March 2020, Russian government announced a "high alert" status for all 85 of its regions due to COVID-19 [4], but there is no evidence that it did so within 120 minutes of identifying anything, or that any other formal emergency response was initiated, including on the websites of EMERCOM, the Ministry of Health, the Ministry of the Interior, the Presidential Executive Office or the Russian Government [1, 2, 5, 6, 7].

[1] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 19 November 2020.
[2] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 19 November 2020.
[3] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 19 November 2020.
[4] TASS. 19 March 2020. "High alert due to coronavirus introduced throughout Russia (Режим повышенной готовности из-за коронавируса введен на всей территории России)". [https://tass.ru/obschestvo/8027563]. Accessed 19 November 2020.
[5] Ministry of the Interior of the Russian Federation. [https://en.mvd.ru/]. Accessed 19 November 2020.
[6] Presidential Executive Office. [http://kremlin.ru/]. Accessed 19 November 2020.
[7] Government of the Russian Federation. [http://government.ru/]. Accessed 19 November 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

Russia has legislation that mandates collaboration between public health and security authorities to respond to a potential bioterrorism attack, but there is no evidence that the country has carried out an exercise to respond to such a potential threat. The Federal Service for Surveillance on Consumer Rights and Human Welfare's (Rospotrebnadzor's) Decree 50 on Measures for Implementation of Powers of the Unified Federal Centralized System of the State Sanitary and Epidemiological Supervision in the Field of Ensuring Biological and Chemical Safety (adopted 2009) states that "the use of pathogens for terrorist purposes" and "unsanctioned access of extremist forces to laboratories working with especially dangerous diseases" are among biological and chemical threats facing the Russian Federation [1]. It orders public health officials at Russia's security agencies and the Federal Medical-Biological Agency to collaborate with Rospotrebnadzor, and its regional departments and laboratories, on setting out measures to prevent and respond to the use of pathogens for terrorist aims [1]. However, the document does not stipulate specific guidelines or operating procedures for these tasks. No evidence of a coordinated response exercise conducted by public health and security authorities, or procedures for such coordination was found on the website of the Ministry Civil Defense, Emergencies and Elimination of Consequences of Natural Disasters or the Ministry of Health [2, 3].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.50 of 18 April 2009. "Measures for Implementation of Powers of the Unified Federal Centralized System of the State Sanitary and Epidemiological Supervision in the Field of Ensuring Biological and Chemical Safety (О мерах по реализации полномочий единой федеральной централизованной системы государственного санитарно-эпидемиологического надзора в области обеспечения биологической и химической безопасности)". [http://www.garant.ru/products/ipo/prime/doc/4089061/]. Accessed 19 November 2020.
[2] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [http://mchs.gov.ru/]. Accessed 19 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 19 November 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

Russia does not have a national risk communication plan for health emergencies that outlines how messages will reach populations and sectors with different communication needs. Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-Epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Wellbeing of the Population (adopted 2009) do not contain risk communication plan intended to inform the public [1]. According to Law No.323-FZ on the Foundations of Health Protection of the Citizens in the Russian Federation (adopted 2011), public communication of risks and occurrences of epidemics and infectious diseases is the responsibility of Russia's federal subjects (constituent regions), but the law does not stipulate that the regional plans should outline how they will reach populations and sectors with different communications needs [2]. A sample of regional and municipal risk communication plans was found to contain no evidence of such provisions [3, 4, 5, 6, 7, 8]. Russia's constitution allows federal subjects to grant languages other than Russian official status and use them in local administration and state institutions, but does not require any particular usage of languages designated as locally official [9]. No evidence was found of plans for messages to reach populations and sectors with specific communications requirements on the websites of the Ministry of Health or the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare [10, 11].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 2020.
[2] Government of the Russian Federation. No.323-FZ of 21 November 2011. "On the Foundations of Health Protection of the Citizens in the Russian Federation (Об основах охраны здоровья граждан в Российской Федерации)". [http://base.garant.ru/12191967/]. Accessed 22 November 2020.
[3] State Council of the Khase of the Republic of Adygeya. No.513 of 3 March 2016. "On the Implementation by Local Self-government Bodies of Urban Districts and Municipal Areas of Certain Powers in the Field of Health Protection (О реализации органами местного самоуправления городских округов и муниципальных районов отдельных полномочий в сфере охраны здоровья)". [http://base.garant.ru/43602146/]. Accessed 22 November 2020.
[4] Legislative Council of the Penza Region. No.2335-ZPO of 28 December 2012. "About Informing the Population About the Possibility of Spreading Socially Significant Diseases and Diseases That Pose a Danger to Others, as Well as About the Threat of Occurrence and Occurrence of Epidemics (Об информировании населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий)". [docs.cntd.ru/document/949117485]. Accessed 22 November 2020.
[5] Ministry of Health of the Khabarovsk Krai. No.45 of 14 July 2009. "Informing the Population of the Khabarovsk Territory on

the Occurrence or Threat of Occurrence of Infectious Diseases and Mass Noninfectious Diseases (Poisoning), State of Habitat and Conducted Sanitary-antiepidemic (Preventive) Activities on the Prevalence of Socially Significant Diseases and Diseases That Pose a Danger to Others, About the Situation in the Disaster Area and Measures to Be Taken (Информирование населения Хабаровского края о возникновении или об угрозе возникновения инфекционных заболеваний и массовых неинфекционных заболеваний (отравлений), о состоянии среды обитания и проводимых санитарно-противоэпидемических (профилактических) мероприятиях, о распространенности социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, об обстановке в зоне чрезвычайной ситуации и о принимаемых мерах)". [http://docs.cntd.ru/document/995127966]. Accessed 22 November 2020.
[6] Government of the Vologda City. No.1420 of 22 February 2018. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also on Occurences or Threats of Epidemics on the Territory of the Municipal Entity "City of Vologda" (Порядок информирования населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий на территории муниципального образования "Город Вологда")". [http://docs.cntd.ru/document/446644548]. Accessed 22 November 2020.
[7] Council of the Rural Settlement of Vepsskoe Natsionalnoe of the Babaevsky District. No.63 of 4 September 2018. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also on Occurences or Threats of Epidemics (Об утверждении порядка информирования населения о возможности распространения социально значимых заболеваний и заболеваний, предоставляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий)". [https://vepsskoe.ru/index.php/sessii-deputatov/resheniya-soveta/resheniya-2018/2630-reshenie-63-ot-04-09-2018-g-ob-utverzhdenii-poryadka-informirovaniya-naseleniya-o-vozmozhnosti-rasprostraneniya-sotsialno-znachimykh-zabolevanij-i-zabolevanij-predostavlyayushchikh-opasnost-dlya-okruzhayushchikh-a-takzhe-ob-ugroze-vozniknoveniya-i-o-vozni]. Accessed 22 November 2020.
[8] Cabinet of Ministers of the Republic of Tatarstan. No.607 of 28 August 2013. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also Provision of Information on Occurences or Threats of Epidemics (Об утверждении Порядка информирования населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также информирования об угрозе возникновения и о возникновении эпидемий)". [http://www.garant.ru/hotlaw/tatarstan/493126/]. Accessed 22 November 2020.
[9] Constitution of the Russian Federation. 12 December 1993. Art. III, Sec. 68. [https://www.zakonrf.info/konstitucia/68/]. Accessed 22 November 2020.
[10] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 22 November 2020.
[11] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru]. Accessed 22 November 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: 0

There is no evidence that Russia has a national risk communication plan for use during a public health emergency, but there are sub-national plans. Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-Epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (adopted 2009) outline risk communication guidelines within the health sector during public health emergencies, but do not address how the country would communicate with the public [1]. According to Law No.323-FZ on the Foundations of Health Protection of the Citizens in the Russian Federation (adopted 2011), public communication of risks and occurrences of epidemics and infectious diseases is the responsibility of Russia's federal subjects (constituent regions) [2]. The law permits regions to enact local legislation, passing this responsibility down to municipalities, but not all regions do so. For example, in Khabarovsk Krai, the infectious disease risk communication plan is published and executed by the regional Ministry of Health, in accordance with a gubernatorial decree [3, 4]. By contrast, Vologda Oblast's legislation makes individual municipalities responsible for adopting and executing disease communication plans; as examples, the plans of the City of Vologda and Rural Settlement of Vepsskoe Natsionalnoe can be found online [5, 6, 7, 8]. The Republic of Tartarstan combines both the above approaches, with the regional infectious disease risk communication plan, developed by the Ministry of Health, charging both the regional Ministry of Health and municipalities with execution of the plan, which is supported by municipality documentation such as the Charter of the Cheremshan Municipal District [9, 10]. No evidence of a nationwide public health emergency risk communication plan was found on the websites of the Ministry of Civil Defence, Emergencies and Elimination of Consequences of Natural Disasters or the Ministry of Health, or that of the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare [11, 12, 13].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 2020.
[2] Government of the Russian Federation. No.323-FZ of 21 November 2011. "On the Foundations of Health Protection of the Citizens in the Russian Federation (Об основах охраны здоровья граждан в Российской Федерации)". [http://base.garant.ru/12191967/]. Accessed 22 November 2020.
[3] Ministry of Health of the Khabarovsk Krai. No.45 of 14 July 2009. "Informing the Population of the Khabarovsk Territory on the Occurrence or Threat of Occurrence of Infectious Diseases and Mass Noninfectious Diseases (Poisoning), State of Habitat and Conducted Sanitary-antiepidemic (Preventive) Activities on the Prevalence of Socially Significant Diseases and Diseases That Pose a Danger to Others, About the Situation in the Disaster Area and Measures to Be Taken (Информирование населения Хабаровского края о возникновении или об угрозе возникновения инфекционных заболеваний и массовых неинфекционных заболеваний (отравлений), о состоянии среды обитания и проводимых санитарно-противоэпидемических (профилактических) мероприятиях, о распространенности социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, об обстановке в зоне чрезвычайной ситуации и о принимаемых мерах)". [http://docs.cntd.ru/document/995127966]. Accessed 22 November 2020.
[4] Governor of the Khabarovsk Krai. No.79 of 3 April 2006. "On the Timely Provision of Information to the Population on Occurences or Threats of Infectious Diseases and Mass Non-communicable Diseases (Poisonings), on the Condition of the Human Environment and the Execution of Sanitary and Anti-epidemic (Preventive) Measures (Об обеспечении своевременного информирования населения о возникновении или об угрозе возникновения инфекционных заболеваний и массовых неинфекционных заболеваний (отравлений), о состоянии среды обитания и проводимых санитарно-противоэпидемических (профилактических) мероприятиях)". [http://docs.cntd.ru/document/995115943]. Accessed 22 November 2020.
[5] Governor of the Vologda Region. No.2929-OZ of 13 December 2012. "On the Provision of Information by Local

Government Agencies to the Population of Municipal and Urban Districts of the Vologda Region on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also on Occurences or Threats of Epidemics (Об информировании органами местного самоуправления населения муниципальных районов и городских округов вологодской области о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий)". [http://docs.cntd.ru/document/453364245]. Accessed 22 November 2020.
[6] Government of the Vologda City. No.1420 of 22 February 2018. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also on Occurences or Threats of Epidemics on the Territory of the Municipal Entity "City of Vologda" (Порядок информирования населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий на территории муниципального образования "Город Вологда")". [http://docs.cntd.ru/document/446644548]. Accessed 22 November 2020.
[7] Vologda City Administration. No.666 of 18 June 2018. "On the Approval of the Action Plan for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also on Occurences or Threats of Epidemics on the Territory of the Municipal Entity "City of Vologda"(План мероприятий по информированию населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий на территории муниципального образования "Город Вологда"). [http://docs.cntd.ru/document/550126523]. Accessed 22 November 2020.
[8] Council of the Rural Settlement of Vepsskoe Natsionalnoe of the Babaevsky District. No.63 of 4 September 2018. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also on Occurences or Threats of Epidemics (Об утверждении порядка информирования населения о возможности распространения социально значимых заболеваний и заболеваний, предоставляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий)". [https://vepsskoe.ru/index.php/sessii-deputatov/resheniya-soveta/resheniya-2018/2630-reshenie-63-ot-04-09-2018-g-ob-utverzhdenii-poryadka-informirovaniya-naseleniya-o-vozmozhnosti-rasprostraneniya-sotsialno-znachimykh-zabolevanij-i-zabolevanij-predostavlyayushchikh-opasnost-dlya-okruzhayushchikh-a-takzhe-ob-ugroze-vozniknoveniya-i-o-vozni]. Accessed 22 November 2020.
[9] Cabinet of Ministers of the Republic of Tatarstan. No.607 of 28 August 2013. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also Provision of Information on Occurences or Threats of Epidemics (Об утверждении Порядка информирования населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также информирования об угрозе возникновения и о возникновении эпидемий)". [http://www.garant.ru/hotlaw/tatarstan/493126/]. Accessed 22 November 2020.
[10] Council of the Cheremshan Municipal District. No.94 of 22 May 2017. "New edition of the Provisions of the Charter of the Cheremshan municipal district of the Republic of Tatarstan (Новая редакция Положения Устава Черемшанского муниципального района Республики Татарстан)". [http://cheremshan.tatarstan.ru/ustav-cheremshanskogo-munitsipalnogo-rayona.htm]. Accessed 22 November 2020.
[11] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [http://mchs.gov.ru/]. Accessed 22 November 2020.
[12] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 22 November 2020.
[13] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru]. Accessed 22 November 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: 0

Russia does not have a national risk communication plan for health emergencies that designates a specific position within the government to serve as the primary spokesperson to the public during a public health emergency. Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-Epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Wellbeing of the Population (adopted 2009) do not contain risk communication plan intended to inform the public [1]. According to Law No.323-FZ on the Foundations of Health Protection of the Citizens in the Russian Federation (adopted 2011), public communication of risks and occurrences of epidemics and infectious diseases is the responsibility of Russia's federal subjects (constituent regions), but it also permits regions to pass this responsibility down to municipalities [2]. A sample of regional and municipal risk communication plans was found to cotain no evidence of a specific position being assigned to serve as the primary spokesperson to the public during a public health emergency [3, 4, 5, 6, 7, 8]. No other evidence was found on the websites of the Ministry of Health and the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare [9, 10].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 2020.
[2] Government of the Russian Federation. No.323-FZ of 21 November 2011. "On the Foundations of Health Protection of the Citizens in the Russian Federation (Об основах охраны здоровья граждан в Российской Федерации)". [http://base.garant.ru/12191967/]. Accessed 22 November 2020.
[3] State Council of the Khase of the Republic of Adygeya. No.513 of 3 March 2016. "On the Implementation by Local Self-government Bodies of Urban Districts and Municipal Areas of Certain Powers in the Field of Health Protection (О реализации органами местного самоуправления городских округов и муниципальных районов отдельных полномочий в сфере охраны здоровья)". [http://base.garant.ru/43602146/]. Accessed 22 November 2020.
[4] Legislative Council of the Penza Region. No.2335-ZPO of 28 December 2012. "About Informing the Population About the Possibility of Spreading Socially Significant Diseases and Diseases That Pose a Danger to Others, as Well as About the Threat of Occurrence and Occurrence of Epidemics (Об информировании населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий)". [docs.cntd.ru/document/949117485]. Accessed 22 November 2020.
[5] Ministry of Health of the Khabarovsk Krai. No.45 of 14 July 2009. "Informing the Population of the Khabarovsk Territory on the Occurrence or Threat of Occurrence of Infectious Diseases and Mass Noninfectious Diseases (Poisoning), State of Habitat and Conducted Sanitary-antiepidemic (Preventive) Activities on the Prevalence of Socially Significant Diseases and Diseases That Pose a Danger to Others, About the Situation in the Disaster Area and Measures to Be Taken (Информирование населения Хабаровского края о возникновении или об угрозе возникновения инфекционных заболеваний и массовых неинфекционных заболеваний (отравлений), о состоянии среды обитания и проводимых санитарно-противоэпидемических (профилактических) мероприятиях, о распространенности социально значимых заболеваний и

заболеваний, представляющих опасность для окружающих, об обстановке в зоне чрезвычайной ситуации и о принимаемых мерах)". [http://docs.cntd.ru/document/995127966]. Accessed 22 November 2020.
[6] Government of the Vologda City. No.1420 of 22 February 2018. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also on Occurences or Threats of Epidemics on the Territory of the Municipal Entity "City of Vologda" (Порядок информирования населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий на территории муниципального образования "Город Вологда")". [http://docs.cntd.ru/document/446644548]. Accessed 22 November 2020.
[7] Council of the Rural Settlement of Vepsskoe Natsionalnoe of the Babaevsky District. No.63 of 4 September 2018. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also on Occurences or Threats of Epidemics (Об утверждении порядка информирования населения о возможности распространения социально значимых заболеваний и заболеваний, предоставляющих опасность для окружающих, а также об угрозе возникновения и о возникновении эпидемий)". [https://vepsskoe.ru/index.php/sessii-deputatov/resheniya-soveta/resheniya-2018/2630-reshenie-63-ot-04-09-2018-g-ob-utverzhdenii-poryadka-informirovaniya-naseleniya-o-vozmozhnosti-rasprostraneniya-sotsialno-znachimykh-zabolevanij-i-zabolevanij-predostavlyayushchikh-opasnost-dlya-okruzhayushchikh-a-takzhe-ob-ugroze-vozniknoveniya-i-o-vozni]. Accessed 22 November 2020.
[8] Cabinet of Ministers of the Republic of Tatarstan. No.607 of 28 August 2013. "On the Approval of the Procedure for Informing the Population on Possibilities of Spread of Socially Significant Diseases and Diseases Presenting Danger for Surrounding People, and Also Provision of Information on Occurences or Threats of Epidemics (Об утверждении Порядка информирования населения о возможности распространения социально значимых заболеваний и заболеваний, представляющих опасность для окружающих, а также информирования об угрозе возникновения и о возникновении эпидемий)". [http://www.garant.ru/hotlaw/tatarstan/493126/]. Accessed 22 November 2020.
[9] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 22 November 2020.
[10] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru]. Accessed 22 November 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, Russia's public health system has regularly, actively shared messages via online media platforms to inform the public about ongoing public health concerns and to dispel rumors, misinformation and disinformation. The Russian government has set up an official website – StopCoronavirus.rf – dedicated to providing information, reports and statistics on COVID-19 in the country, including daily and total figures on the spread of the disease and the related death rate [1, 2]. Notably, the website provides links to a separate site, called CoronaFake, which is dedicated to highlighting misinformation, providing information to counteract falsehoods, and debunking rumours. The site is run by Alexander Malkevich, the first deputy chairman of the Media Commission of the Public Chamber of Russia and head of the Working Group on Countering

the Dissemination of Inaccurate Information, Public Control and Security of the Internet, within the Civic Chamber of the Russian Federation [3]. The Russian government has also set up StopCoronavirus.rf social media pages, for example on Facebook and VKontakte [4, 5]. Aside from COVID-19, the Ministry of Health regularly publishes information, updates and guidance on a range of other health issues and public health concerns. For example, on 2 November 2020 the Ministry of Health published an update on influenza cases up to that date on its Facebook page, and during October and November it published a range of other informative posts on cancer, diabetes, arthritis and strokes [6, 7, 8].

[1] StopCoronavirus.rf. [https://xn--80aesfpebagmfblc0a.xn--p1ai/]. Accessed 16 November 2020.
[2] StopCoronavirus.rf. "All about the coronavirus". ("Все о коронавирусе"). [https://xn--80aesfpebagmfblc0a.xn--p1ai/about-covid/#transmitted]. Accessed 16 November 2020.
[3] CoronaFake. [https://coronafake.ru/]. Accessed 16 November 2020.
[4] Facebook. StopCoronavirus.rf. [https://www.facebook.com/stopcoronavirusrf/]. Accessed 16 November 2020.
[5] VKontakte. StopCoronavirus.rf. [https://vk.com/stopcoronavirusrf]. Accessed 16 November 2020.
[6] Facebook. Ministry of Health of the Russian Federation. [https://www.facebook.com/MinzdravRu/photos/a.231028340564713/1282116698789200/]. Accessed 16 November 2020.
[7] Facebook. Ministry of Health of the Russian Federation. [https://www.facebook.com/MinzdravRu/posts/1268693273464876]. Accessed 16 November 2020.
[8] Facebook. Ministry of Health of the Russian Federation. [https://www.facebook.com/MinzdravRu/?fref=ts]. Accessed 16 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: 1

There is no evidence that Russia's senior leaders have shared misinformation or disinformation on infectious diseases in the past two years. No evidence have been found in major Russian news outlets nor in international media [1, 2, 3, 4, 5, 6]. However, in March 2020, Parlamentskaya Gazeta, an official publication of the Russian Federal Assembly, published part of an interview with Andrei Klimov, a Russian senator, head of the Commission for the Protection of State Sovereignty and member of the Federation Council Committee on Foreign Affairs, in which Klimov said that the United States of America (US) could be responsible for developing COVID-19 in laboratories and distributing it to the world, reasoning that the US had long been developing such viruses and that it had previously considered artificially reducing populations in under-developed countries, to further US interests [7, 8]. Also in March 2020, Ivan Surma, a Russian diplomat, said that COVID-19 could have been created in US laboratories [7].

[1] TASS. [https://tass.ru/]. Accessed 26 November 2020.
[2] Vesti.ru. [https://www.vesti.ru/]. Accessed 26 November 2020.
[3] Lenta.ru. [https://lenta.ru/]. Accessed 26 November 2020.
[4] BBC News. [https://www.bbc.com/news]. Accessed 26 November 2020.
[5] Reuters. [http://reuters.com]. Accessed 26 November 2020.
[6] Euronews. [https://www.euronews.com/]. Accessed 26 November 2020.
[7] BBC News. 9 April 2020. "Whose ears are sticking out": Covid-19 conspiracy theories in Russian departmental media ("Чьи уши торчат": теории заговора о Covid-19 в российских ведомственных СМИ)". [https://www.bbc.com/russian/news-52235498]. Accessed 19 November 2020.
[8] Parlamentskaya Gazeta. 18 March 2020. "Klimov explained where the assumptions about the American origin of the

coronavirus come from (Климов объяснил, откуда берутся предположения об американском происхождении коронавируса)". [https://www.pnp.ru/politics/klimov-obyasnil-otkuda-berutsya-predpolozheniya-ob-amerikanskom-proiskhozhdenii-koronavirusa.html]. Accessed 19 November 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: 82.64

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: 164.39

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: 3.0

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

In the past year, Russia has issued a restriction, without international or bilateral support, on the export of medical goods due to an infectious disease outbreak. On 2 March 2020, Russia introduced an export ban on 17 types of medical items that were in high demand due to the COVID-19 pandemic, including medical masks, gloves, goggles, respirators, protective suits, medical bedding items and disinfectants. The ban was originally set to be in force until 1 June 2020, but was lifted on 3 May [1, 2, 3, 4]. However, the Eurasian Economic Union, of which Russia is a member, also announced an export ban on medical items such as disinfectants and PPE to countries outside of the union from 24 March until 30 September 2020 [5, 6].

[1] The Moscow Times. "Coronavirus in Russia: The Latest News". [https://www.themoscowtimes.com/2020/11/12/coronavirus-in-russia-the-latest-news-nov-12-a69117]. Accessed 12 November 2020.
[2] Government of the Russian Federation. 4 March 2020. "A decision was made to introduce a temporary ban on the export of certain types of products from the Russian Federation (Принято решение о введении временного запрета на вывоз отдельных видов продукции из Российской Федерации)". [http://government.ru/docs/39057/]. Accessed 12 November 2020.
[3] Global Trade Alert. 2 March 2020. "Russian Federation: Coronavirus-related export ban on medical devices and items". [https://www.globaltradealert.org/intervention/78836/export-ban/russian-federation-coronavirus-related-export-ban-on-medical-devices-and-items#:~:text=On%202%20March%202020%2C%20the,2%20and%201%20June%202020]. Accessed 12 November 2020.
[4] Made In Russia. 5 May 2020. "Russia is ready to export medical masks after the government lifted the ban". [https://madeinrussia.ru/en/news/1602]. Accessed 12 November 2020.
[5] Global Trade Alert. 24 March 2020. "Eurasian Economic Union: Export ban on disinfection substances, medical items and individual protection items". [https://www.globaltradealert.org/state-act/43594/eurasian-economic-union-export-ban-on-disinfection-substances-medical-items-and-individual-protection-items]. Accessed 12 November 2020.
[6] Eurasian Economic Commission. 26 March 2020. "EAEU countries to restrict export of means required for COVID-19 control". [http://www.eurasiancommission.org/en/nae/news/Pages/26-03-2020-3.aspx]. Accessed 12 November 2020.

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: 0

In the past year, Russia has issued a restriction, without international or bilateral support, on the export of non-medical goods due to an infectious disease outbreak. On 20 March 2020, Russia introduced a 10-day export ban on all types of cereal products due to the potential impact of the COVID-19 pandemic on domestic food supplies [1, 2]. Furthermore, on 12 April 2020 the Eurasian Economic Union, which includes Russia, introduced a restriction on exports of sunflower seeds, soybeans, onions, buckwheat, rice and rye outside to countries outside of the union until 30 June 2020, also due to the pandemic [3].

[1] Latifundist.com. 24 March 2020. "Russia has banned the export of all types of cereals due to coronavirus (Россия запретила экспорт всех видов круп из-за коронавируса)". [https://latifundist.com/novosti/49266-rossiya-zapretila-eksport-vseh-vidov-krup-iz-za-koronavirusa]. Accessed 12 November 2020.
[2] News.ru. 23 March 2020. "Russia has banned grain exports (Россия запретила экспорт зерна)". [https://news.ru/politics/rossiya-zapretila-eksport-zerna/]. Accessed 12 November 2020.
[3] Reuters. 3 April 2020. "Trade restrictions on food exports due to the coronavirus pandemic". [https://www.reuters.com/article/us-health-coronavirus-trade-food-factbox-idUSKBN21L332]. Accessed 12 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, Russia has issued a restriction, without international or bilateral support, on travelers arriving from certain countries due to an infectious disease outbreak. In the week of 8–14 March 2020, Russia closed its borders to all foreign citizens arriving from Poland, Norway and Italy, in an attempt to slow the spread of the coronavirus pandemic, and on 16 March 2020 Russia closed its border with Belarus as a "proactive step" against COVID-19. On 30 March 2020, Russia closed its borders completely to foreign nationals arriving from any country and began to reopen them only from 8 June, granting priority entry to foreigners who were traveling to Russia for medical treatment or to take care of relatives [1].

[1] The Moscow Times. "Coronavirus in Russia: The Latest News". [https://www.themoscowtimes.com/2020/11/12/coronavirus-in-russia-the-latest-news-nov-12-a69117]. Accessed 12 November 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: 401.39

2016

WHO; national sources

4.1.1b

Nurses and midwives per 100,000 people

Input number

Current Year Score: 854.29

2017

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: 1

Russia has a public healthcare workforce strategy in place, which has been updated in the past five years. Russia's State Program on the Development of Healthcare 2018–2025 (approved 2017) includes nine priority projects, one of which is titled "New Specialists in the Modern Healthcare" [1]. This project sets out a range of measures and key performance indicators to address the current shortfall of medical workers [1]. In February 2019, the Ministry of Health launched a further workplace strategy, the Sectoral Target Program on the Management of Healthcare Human Resources for 2019–2024 [2]. Amongst its seven objectives, three identify key areas in which medical specialists are currently lacking. Firstly, six midwifery and gynaecology simulation centres are to be opened by the end of 2021, increasing the number of obstetricians, gynaecologists, neonatologists and anaestheticians (both new and experienced specialists) trained in Russia [3]. Secondly, the programme assigns RUB 3.2 billion (US$ 48.9 million) per year as incentives for doctors to re-locate to small towns and provincial areas [3]. Finally, the program aims to identify labour market demand in Russia for extra medical and pharmaceutical professionals,

and gradually expand the number and quality of available training programmes to match demand projected by 2024 [3].

[1] Government of the Russian Federation. 3 August 2017. "Documentation for the Priority Project "New Specialists of the Modern Healthcare" (Утверждён паспорт приоритетного проекта "Новые кадры современного здравоохранения")". [government.ru/projects/selection/640/28686/]. Accessed 13 November 2020.
[2] Ministry of Health of the Russian Federation. 11 February 2019. "Departmental Target Programmes (Ведомственные целевые программы). [https://www.rosminzdrav.ru/ministry/programms/health/info/vedomstvennye-tselevye-programmy]. Accessed 13 November 2020.
[3] Ministry of Health of the Russian Federation. No.68 of 19 February 2019. "On Approval of the Departmental Target Programme "Management of Healthcare Human Resources (Об утверждении ведомственной целевой программы "Управление кадровыми ресурсами здравоохранения").
[https://www.rosminzdrav.ru/ministry/programms/health/info/vedomstvennye-tselevye-programmy]. Accessed 13 November 2020.

4.1.2 Facilities capacity

4.1.2a

Hospital beds per 100,000 people

Input number

Current Year Score: 712

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

Russia has the capacity to isolate patients with highly communicable diseases in patient isolation rooms located within the country. The infectious disease departments of numerous hospitals in Russia contain patient isolation rooms specifically for patients with highly communicable and dangerous diseases. For example, the infectious disease departments of the B.I. Alperovich City Clinical Hospital No.3 in Tomsk, the KGBUZ City Clinical Hospital No.10 in Khabarovsk, the N.A Semashko City Clinical Hospital No.1. in Rostov-on-Don, and the A.Z. Bashlyayevoy Children's City Clinic Hospital in Moscow all contain isolation rooms designed to receive patients with especially dangerous infections – some with restricted entrance points to ensure complete isolation and reduce the risk to the rest of the building or unit [1, 2, 3, 4]. In March 2020, Deputy Prime Minister Marat Khusnullin made a commitment that Russia would build new isolation units in several regions for patients with infectious diseases, due to the threat of COVID-19 [5]. By October 2020, for example, such a unit had been established within a multifunctional medical center in Khabarovsk Oblast, dedicated to receiving patients infected with coronavirus and fitted with boxes designed for complete isolation of patients [6].

[1] B.I. Alperovich City Clinical Hospital No.3. "Infectious diseases department (Инфекционное отделение)". [https://gb3.ru/?page_id=38]. Accessed 20 November 2020.

[2] KGBUZ City Clinical Hospital No.10. "Infectious diseases department (Инфекционное отделение)". [http://gkb10.medkhv.ru/content/infekcionnoe-otdelenie]. Accessed 20 November 2020.
[3] N.A Semashko City Clinical Hospital No.1. "Infectious diseases department number 6 (Инфекционное отделение № 6)". [http://fb7928kn.bget.ru/department/infekcionnoe-otdelenie-6/]. Accessed 20 November 2020.
[4] A.Z. Bashlyayevoy Children's City Clinic Hospital. "Infectious diseases department no.1 (Инфекционное отделение № 1)". [https://www.tdgb-mos.ru/1infekciya.html]. Accessed 20 November 2020.
[5] Reuters. 22 March 2020. "Russia to build more coronavirus isolation units on Chinese model". [https://www.reuters.com/article/health-coronavirus-russia-idUSL8N2BF0HD]. Accessed 20 November 2020.
[6] Ministry of Defence of the Russian Federation. 12 October 2020. "Sixty beds were prepared in a multifunctional medical center in the Khabarovsk territory for civilian patients with COVID-19". [https://eng.mil.ru/en/news_page/country/more.htm?id=12318918@egNews]. Accessed

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: 1

There is evidence that Russia has demonstrated capacity to expand isolation capacity in response to an infectious disease outbreak in the past two years, but there is no evidence that the country has developed, updated or tested a plan to expand isolation capacity. In response to the COVID-19 pandemic, the isolation capacity has been increased across a multitude of Russia's regional medical institutions. For example, by November 2020, in the region of Perm Krai, 4524 beds in 30 hospitals had been repurposed for the isolation and treatment of COVID-19 patients [1]. By November 2020, 6350 new bed spaces had been created in the regional hospitals of Samara [2]. In April 2020, 272 new bed spaces were established in the region of Yamal, while the city of Rostov-on-Don had created an additional 345 bed spaces for the isolation and treatment of COVID-19 patients by December 2020 [3, 4]. However, no public evidence of Russia having developed, updated or tested a specific plan to expand isolation capacity could be located on the websites of the Ministry of Health, the Russian Federal Service for Surveillance on Consumer Rights Protection and Human Welfare, or the Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters [5, 6, 7]. There is also no mention of a plan for expanding isolation capacity in Resolution SP. 3.4.2318-08 on Sanitary Protection of the Territory of the Russian Federation (adopted 2008, last amended 2016), Decision 794 on the Unified State System for the Prevention and Elimination of Emergency Situations (adopted 2001, last amended 2020), or in Order 380 on the Regulations on the Disaster Medicine Service (adopted 2000) [8, 9, 10].

[1] Official Portal of the Governor of the Perm Kai Region. 20 November 2020. "Additional 100 Beds Were Redesigned for the Treatment of Patients With Coronavirus in the Perm Krai Territory (Для лечения больных коронавирусом в Пермском крае перепрофилировано дополнительно 100 коек)". [https://www.permkrai.ru/news/dlya-lecheniya-bolnykh-koronavirusom-v-permskom-krae-pereprofilirovano-dopolnitelno-100-koek/]. Accessed 28 April 2021.
[2] TASS. 17 November 2020. "Samara Region Is Ready to Deploy an Additional 700 Beds for the Treatment of Coronavirus Patients (В Самарской области готовы дополнительно развернуть 700 коек для лечения коронавируса)". [https://tass.ru/obschestvo/10029293]. Accessed 28 April 2021.
[3] Ministry of Health of the Russian Federation. 23 April 2020. "Regional Hospitals Create Additional Beds for Coronavirus Treatment (В больницах региона созданы дополнительные койки для лечения коронавируса)".

[https://minzdrav.gov.ru/regional_news/13797-v-bolnitsah-regiona-sozdany-dopolnitelnye-koyki-dlya-lecheniya-koronavirusa]. Accessed 28 April 2021.
[4] Official Portal of the Government of the Rostov Region. 29 December 2020. "345 Additional Beds Deployed in Rostov-on-don to Treat Patients With Coronavirus (На Дону развернут 345 дополнительных коек для лечения больных коронавирусом)". [https://www.donland.ru/news/12008/]. Accessed 28 April 2021.
[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 28 April 2021.
[6] Russian Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 28 April 2021.
[7] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 28 April 2021.
[8] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.SP. 3.4.2318-08 of 22 January 2008. "Sanitary Protection of the Territory of the Russian Federation (Санитарная охрана территории Российской Федерации)". [http://docs.cntd.ru/document/902094693]. Accessed 28 April 2021.
[9] Government of the Russian Federation. No.794 of 30 December 2003. "On the Unified State System for the Prevention and Elimination of Emergency Situations (О единой государственной системе предупреждения и ликвидации чрезвычайных ситуаций)". [http://docs.cntd.ru/document/901884206]. Accessed 28 April 2021.
[10] Ministry of Health of the Russian Federation. No.380 of 27 October 2000. "Regulations on the Disaster Medicine Service of the Ministry of Health of the Russian Federation (Положение о службе медицины катастроф Министерства здравоохранения Российской Федерации)". [http://docs.cntd.ru/document/901776429]. Accessed 28 April 2021.

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, which can be used by the Ministries of Health and Agriculture for the acquisition of both laboratory and medical supplies. Law 233-FZ on the Procurement of Goods, Works, Services by Certain Types of Legal Entities (adopted 2011) regulates procurement procedure of state entities, and stipulates that they should publish details of procurement contracts on the National Electronic Platform [1]. The platform's website lists the Ministries of Agriculture and Health, along with their regional departments, as procurers [2]. One of the product categories listed on the site is "Pharmaceutical Products, Medical Chemicals, Products for Medical Use and Laboratory Diagnostic Reagents" [2]. The register of published tenders confirms that the platform is routinely used for procuring both laboratory and medical supplies [2].

[1] Government of the Russian Federation. No. 233-FZ of 18 July 2011. "On the Procurement of Goods, Works, Services by Certain Types of Legal Entities (О закупках товаров, работ, услуг отдельными видами юридических лиц). [http://www.consultant.ru/document/Cons_doc_LAW_116964/]. Accessed 16 November 2020.
[2] National Electronic Platform. "Procurers, and Agencies, Institutions and Organisations Authorised for Procurement (Заказчики, уполномоченные органы, уполномоченные учреждения и организации, осуществляющие полномочия

заказчика). [https://etp-ets.ru/organization/catalog/customer]. Accessed 16 November 2020.
[3] National Electronic Platform. "Register of Published Procurements (Auctions) (Реестр опубликованных закупок (аукционы))". [https://www.etp-ets.ru/procedure/catalog/]. Accessed 16 November 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

Russia maintains stockpiles of medical supplies (e.g. MCMs, medicines, vaccines, medical equipment, PPE) for use during a public health emergency, including essential medicines. In accordance with Law 79-FZ on the State Material Reserves (adopted 1994, last amended 2019), the Federal Agency for State Reserves (Rosrezerv) maintains stockpiles "to ensure measures to prevent or localize epidemics, epizootics and radiation contamination" [1]. The list of maintained reserves (approved 2014, last amended 2020) is divided in 32 categories, including "rubber and plastic products" (which includes sterile disposable surgical rubber and latex gloves) and "hygiene or pharmaceutical products" (of which no breakdown is publicly available) [2, 3, 4]. The list also includes medicinal products and materials used for medical purposes [2]. The list of medical countermeasures falling under this category is extensive and includes inactivated, toxoid and biosynthetic vaccines, diagnostic kits and antibiotics, among other countermeasures [3].

[1] Government of the Russian Federation. No.79-FZ of 29 December 1994. "On the State Material Reserves (О государственном материальном резерве)". [https://www.rosreserv.ru/Dokumenti/Zakoni_i_ukazi/Federalnij_zakon_ot_29_dekabrja_1994_g.]. Accessed 16 November 2020.
[2] Federal Agency for State Reserves. No.119 of 1 July 2018. "On Approval of the List of Groups of Material Assets of the State Material Reserve (Об утверждении перечня групп материальных ценностей государственного материального резерва)". [https://www.rosreserv.ru/document/7180]. Accessed 16 November 2020.
[3] Federal Agency for Technical Regulation and Metrology. No.ОК 034-2014 of 31 January 2014. "Russian Classification of Product by Economic Activities. Medicinal Products and Materials Used for Medical Purposes"(Общероссийский классификатор продукции по видам экономической деятельности. Средства лекарственные и материалы, применяемые в медицинских целях)". [http://www.consultant.ru/document/cons_doc_LAW_163703/b85666452dec45917ff07d9ba3a4bd506d23836a/]. Accessed 16 November 2020.
[4] Federal Agency for Technical Regulation and Metrology. No.ОК 034-2014 of 31 January 2014. "Russian Classification of Product by Economic Activities. Rubber and Plastic Products" (Общероссийский классификатор продукции по видам экономической деятельности. Изделия резиновые и пластмассовые)". [http://www.consultant.ru/document/cons_doc_LAW_163703/13448d31a27d6e958845fb24a48493a8f92e6996/]. Accessed 16 November 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: 1

Russia maintains stockpiles of laboratory supplies for use during a public health emergency but there is no detailed information on what is included. In accordance with Law 79-FZ on the State Material Reserves (adopted 1994, last amended 2019), the Federal Agency for State Reserves (Rosrezerv) maintains stockpiles "to ensure measures to prevent or localize epidemics, epizootics and radiation contamination" [1]. The list of maintained reserves include medicinal products and materials used for medical purposes [2]. The list of products falling under this category (approved 2014, last amended 2020) is publicly available and includes reagents [3].

[1] Government of the Russian Federation. No.79-FZ of 29 December 1994. "On the State Material Reserves (О государственном материальном резерве)". [https://www.rosreserv.ru/Dokumenti/Zakoni_i_ukazi/Federalnij_zakon_ot_29_dekabrja_1994_g.]. Accessed 16 November 2020.
[2] Federal Agency for State Reserves. No.119 of 1 July 2018. "On Approval of the List of Groups of Material Assets of the State Material Reserve (Об утверждении перечня групп материальных ценностей государственного материального резерва)". [https://www.rosreserv.ru/document/7180]. Accessed 16 November 2020.
[3] Federal Agency for Technical Regulation and Metrology. No.ОК 034-2014 of 31 January 2014. "Russian Classification of Product by Economic Activities. Medicinal Products and Materials Used for Medical Purposes"(Общероссийский классификатор продукции по видам экономической деятельности. Средства лекарственные и материалы, применяемые в медицинских целях)". [http://www.consultant.ru/document/cons_doc_LAW_163703/b85666452dec45917ff07d9ba3a4bd506d23836a/]. Accessed 16 November 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 public evidence that Russia conducts or requires an annual review of the national stockpile to ensure the supply is sufficient for a public health emergency. In accordance with Law 79-FZ on the State Material Reserves (adopted 1994, last amended 2019), the Federal Agency for State Reserves (Rosrezerv) maintains stockpiles "to ensure measures to prevent or localize epidemics, epizootics and radiation contamination" [1]. Article 6 of the law requires that the volume of stockpiled materials to be constantly maintained, however the law does not stipulate on the procedure for, or frequency of, reviewing the national stockpile to ensure that a certain volume is maintained [1]. No evidence of a requirement to conduct an annual review or evidence of such a review being conducted annually could be located on the websites of Rosrezerv, the Ministry of Health, the Russian Federal Service for Surveillance on Consumer Rights Protection and Human Welfare, the Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters, or the Ministry of Defence [2, 3, 4, 5, 6].

[1] Government of the Russian Federation. No.79-FZ of 29 December 1994. "On the State Material Reserves (О государственном материальном резерве)". [https://www.rosreserv.ru/Dokumenti/Zakoni_i_ukazi/Federalnij_zakon_ot_29_dekabrja_1994_g.]. Accessed 26 April 2021.
[2] Federal Agency for State Reserves of the Russian Federation. [https://rosrezerv.gov.ru/]. Accessed 26 April 2021.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 26 April 2021.
[4] Russian Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [https://www.rospotrebnadzor.ru/]. Accessed 26 April 2021.

[5] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 26 April 2021.
[6] Ministry of Defence of the Russian Federation. [http://mil.ru/index.htm]. Accessed 26 April 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: 0

There is no evidence that Russia has a plan or agreement to leverage domestic manufacturing capacity to produce medical supplies, or that the country has a plan or mechanism to procure medical supplies during a public health emergency. No evidence of such plans, agreements or mechanisms was found on the websites of the Ministry of Health, the Ministry of Industry and Trade, the Ministry of Defense, or the Ministry for Civil Defense, Emergencies and Elimination of the Consequences of Natural Disasters [1, 2, 3, 4]. However, in March 2020, the Industrial Development Fund (IDF), established by the Ministry of Industry and Trade, launched a new federal loan program "Counteracting Epidemic Diseases" to increase the manufacturing capacity to produce medical supplies (including PPE and medical equipment) and medical countermesures (MCM) [5]. The program provides loans from RUB 50 million to RUB 500 million (US$ 66,000 to US$ 660,000) with a 1% interest rate per annum for the period of 2 years (exempt from paying the principal debt for up to 1 year) to purchase equipment and materials required for the production of medical supplies and MCM [5]. The program has helped to significantly scale up the producton of PPE. For example, in April 2020 the production of protective masks had increased more than 10 times compared with the beginning of the year [6]. Loans have also been granted for the production of artificial lung ventilators, protective suits, safety goggles, disposable gloves, and for scaling up the manifacturing of antiviral, antifungal drugs, drugs for treating immunodeficiency, and rapid tests for the diagnosis of various infectious diseases, including COVID-19 [5, 7]. Until July 2020, IDF had approved 147 projects with the total loan worth of RUB 40 billion (US$ 528.8 million) [8]. Whilst it is stated that the program is aimed at increasing production for detection, prevention and treatment of epidemic diseases, it is unclear whether the program will remain in place after the COVID-19 pandemic [5].

[1] Ministry of Health of the Russian Federation. "Documents". [https://minzdrav.gov.ru/documents]. Accessed 18 November 2020.
[2] Ministry of Industry and Trade of the Russian Federation. "Documents". [https://minpromtorg.gov.ru/docs/]. Accessed 18 November 2020.
[3] Ministry of Defence of the Russian Federation. "Documents". [https://doc.mil.ru/documents/quick_search.htm]. Accessed 18 November 2020.
[4] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. "Documents". [https://www.mchs.gov.ru/dokumenty]. Accessed 18 November 2020.
[5] Ministry of Industry and Trade of the Russian Federation. 20 April 2020. "FRP issued more than 10 billion rubles to manufacturers of products aimed at fighting coronavirus (ФРП выдал более 10 млрд рублей производителям продукции, направленной на борьбу с коронавирусом)". [https://minpromtorg.gov.ru/press-centre/news/#!frp_vydal_bolee_10_mlrd_rubley_proizvoditelyam_produkcii_napravlennoy_na_borbu_s_koronavirusom]. Accessed 18 November 2020.

[6] TASS. 28 April 2020. "Putin said that Russia does not produce enough protective suits for doctors (Путин заявил, что в России выпускается мало защитных костюмов для врачей)". [https://tass.ru/obschestvo/8356091]. Accessed 18 November 2020.
[7] GMP News. 14 October 2020. "The IDF loan will allow Ingal to start production of Anidulafungin and Ikatibant (Заем ФРП позволит компании «Ингал» наладить производство Анидулафунгина и Икатибанта)". [https://gmpnews.ru/2020/10/zaem-frp-pozvolit-kompanii-ingal-naladit-proizvodstvo-anidulafungina-i-ikatibanta/]. Accessed 18 November 2020.
[8] Ministry of Industry and Trade of the Russian Federation. 10 July 2020. "In the first half of 2020, IDF approved 147 projects for a total loan amount of 40 billion rubles (ФРП в I полугодии 2020 года одобрил 147 проектов на общую сумму займов 40 млрд рублей)". [https://minpromtorg.gov.ru/press-centre/news/#!frp_v_i_polugodii_2020_goda_odobril_147_proektov_na_obshhuyu_summu_zaymov_40_mlrd_rubley]. Accessed 18 November 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 Russia has a plan or agreement to leverage domestic manufacturing capacity to produce laboratory supplies, or that the country has plan or mechanism to procure laboratory supplies during a public health emergency. No evidence of such plans, agreements or mechanisms was found on the websites of the Ministry of Health, Ministry of Industry and Trade, the Ministry of Defense, or the Ministry for Civil Defense, Emergencies and Elimination of the Consequences of Natural Disasters [1, 2, 3, 4]. In March 2020, the Industrial Development Fund (IDF), established by the Ministry of Industry and Trade, launched a new federal loan program "Counteracting Epidemic Diseases", aimed at increasing manifacturing of products used for detection, prevention and treatment of epidemic diseases [5]. Whilst companies producing medical supplies and medical countermeasures have received IDF loans, there is no evidence that loans have been provided for the production of laboratory supplies, including on the websites of the IDF, the Ministry of Industry and Trade, and in local media [1, 2, 6].

[1] Ministry of Health of the Russian Federation. "Documents". [https://minzdrav.gov.ru/documents]. Accessed 18 November 2020.
[2] Ministry of Industry and Trade of the Russian Federation. "Documents". [https://minpromtorg.gov.ru/docs/]. Accessed 18 November 2020.
[3] Ministry of Defence of the Russian Federation. "Documents". [https://doc.mil.ru/documents/quick_search.htm]. Accessed 18 November 2020.
[4] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. "Documents". [https://www.mchs.gov.ru/dokumenty]. Accessed 18 November 2020.
[5] Ministry of Industry and Trade of the Russian Federation. 20 April 2020. "FRP issued more than 10 billion rubles to manufacturers of products aimed at fighting coronavirus (ФРП выдал более 10 млрд рублей производителям продукции, направленной на борьбу с коронавирусом)". [https://minpromtorg.gov.ru/press-centre/news/#!frp_vydal_bolee_10_mlrd_rubley_proizvoditelyam_produkcii_napravlennoy_na_borbu_s_koronavirusom]. Accessed 18 November 2020.

[6] Industrial Development Fund of Russia. [http://idfrf.com/]. Accessed 18 November 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

Russia does not have publicly available guidelines for dispensing medical countermeasures for national use during a public health emergency. Law 79-FZ on the State Material Reserves (adopted 1994, last amended 2019) stipulates that materials are to be dispensed for emergency purposes by order of the government [1]. The accessibility of material reserves is provided for in the Methodological Recommendations for the Creation, Storage, Use and Replenishment of Reserves of Material Resources for the Elimination of Natural and Man-Made Emergencies (adopted 2018), which enables state institutions to create and maintain emergency material reserves, and dispense them during declared emergencies by order of the director of the institution [2]. The recommendations mandate that Russia's more remote areas, especially those in the far north and Arctic zone, must create and maintain reserves in greater quantities than other regions [2]. While the obligation for institutions to plan dispensing of reserves, including medical countermeasures, is evident, the plans themselves are not publicly available through the websites of the Ministry of Health, the Ministry of Defense, the Ministry of Civil Defense, Emergencies and Elimination of the Consequences of Natural Disasters, the All-Russian Center for Disaster Medicine or the Federal Security Service [3, 4, 5, 6, 7].

[1] Government of the Russian Federation. No.79-FZ of 29 December 1994. "On the State Material Reserves (О государственном материальном резерве)". [https://www.rosreserv.ru/Dokumenti/Zakoni_i_ukazi/Federalnij_zakon_ot_29_dekabrja_1994_g.]. Accessed 16 November 2020.
[2] Ministry for Civil Defence, Emergencies and Elimination of Consequences of Natural Disasters of the Russian Federation. 10 August 2018. "Methodological Recommendations for the Creation, Storage, Use and Replenishment of Reserves of Material Resources for the Elimination of Natural and Man-made Emergencies (Методические рекомендации по созданию, хранению, использованию и восполнению резервов материальных ресурсов для ликвидации чрезвычайных ситуаций природного и техногенного характера)". [https://www.mchs.gov.ru/dokumenty/2434]. Accessed 16 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 16 November 2020.
[4] Ministry of Defence of the Russian Federation. [www.mil.ru]. Accessed 16 November 2020.
[5] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 16 November 2020.
[6] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 16 November 2020.
[7] Federal Security Service of the Russian Federation. [www.fsb.ru/]. Accessed 16 November 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: 1

There is evidence that Russia has a plan to receive health personnel from other countries to respond to a public health emergency. Russia has a bilateral agreement with Austria on providing mutual aid in case of emergencies. Although health emergencies are not specified, the agreement covers emergencies more broadly and includes provision of medical aid. Among other procedures to facilitate response logistics, the agreement outlines procedures to facilitate border crossings and the import and export of emergency supplies needed by response teams for the sake of emergency response. [1] No evidence of a broader plan was found on the websites of the Ministry of Health, Ministry of Defence, Ministry of Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters, All-Russian Center for Disaster Medicine or that of the Federal Security Service [2, 3, 4, 5, 6].

[1] National Council of Austria. 2019. "Agreement between the Republic of Austria and the Russian Federation on mutual assistance with disasters human-caused emergencies and cooperation in their prevention". ("ABKOMMEN ZWISCHEN DER REGIERUNG DER REPUBLIK ÖSTERREICH UND DER REGIERUNG DER RUSSISCHEN FÖDERATION.") [https://www.ris.bka.gv.at/Dokumente/BgblAuth/BGBLA_2019_III_49/COO_2026_100_2_1628875.pdfsig]. Accessed 8 August 2020.
[2] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 16 November 2020.
[3] Ministry of Defence of the Russian Federation. [www.mil.ru]. Accessed 16 November 2020.
[4] Ministry for Civil Defence, Emergencies and Elimination of the Consequences of Natural Disasters of the Russian Federation. [https://www.mchs.gov.ru/]. Accessed 16 November 2020.
[5] All-Russian Center for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 16 November 2020.
[6] Federal Security Service of the Russian Federation. [www.fsb.ru/]. Accessed 16 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: 4

2020

World Policy Analysis Center

4.4.1b

Access to skilled birth attendants (% of population)

Input number

Current Year Score: 99.7

2014

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: 568.61

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 that prioritized healthcare is provided to healthcare workers who become sick as a result of responding to a public health emergency. There is no evidence of such a commitment in Law 323-FZ on the Foundations of Health Protection of the Citizens in the Russian Federation (adopted 2011), which sets out rights and obligations of medical organizations in the field of health protection, or in Law 68-FZ on Protection of Population and Territories from Emergency Situations of Natural and Technological Character (adopted 1994, last amended 2020) [1, 2]. Furthermore, Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-Epidemic Measures in Cases of Discovering a Patient (Corpse) Suspected of Infectious Diseases Able to Provoke an Emergency in the Field of Sanitary and Epidemiological Welfare of the Population (adopted 2009), which constitute Russia's epidemic emergency response plan, stipulate that medical workers caring for patients infected with plague, smallpox, new sub-types of influenza, SARS and

Crimean-Congo haemorrhagic fever must be quarantined for the duration of the disease's incubation period [3]. However, the guidelines do not refer to priority treatment of medical workers who fall sick during a public health emergency [3]. No references to healthcare for emergency medical workers were found on the Ministry of Health's list of occupations requiring periodic medical examinations (adopted 2011, amended 2020) [4]. No further evidence was found on the Ministry of Health website or that of the All-Russian Centre for Disaster Medicine [5, 6].

[1] Government of the Russian Federation. No.323-FZ of 21 November 2011. "On the Foundations of Health Protection of the Citizens in the Russian Federation (Об основах охраны здоровья граждан в Российской Федерации)". [http://base.garant.ru/12191967/]. Accessed 19 November 2020.
[2] Government of the Russian Federation. No.68-FZ of 21 December 1994. "On Protection of Population and Territories From Emergency Situations of Natural and Technological Character (О защите населения и территорий от чрезвычайных ситуаций природного и техногенного характера). [http://www.consultant.ru/document/cons_doc_LAW_5295/]. Accessed 19 November 2020.
[3] Federal Service for Surveillance on Consumer Rights and Human Welfare. No. MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Discovering a Patient (Corpse) Suspected of Infectious Diseases Able to Provoke an Emergency in the Field of Sanitary and Epidemiological Welfare of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 19 November 2020.
[4] Ministry of Health and Social Development dated. No.302n of 12 April 2011. "On the Approval of Lists of Harmful or Dangerous Production Processes and Occupations During the Execution of Which Preliminary and Periodic Medical Examinations Are Compulsory, and the Procedure for Compulsory Preliminary and Periodic Medical Examinations of Workers Occupied in Difficult Work and in Harmful (or) Dangerous Labour Conditions (Об утверждении перечней вредных и (или) опасных производственных факторов и работ, при выполнении которых проводятся обязательные предварительные и периодические медицинские осмотры (обследования), и Порядка проведения обязательных предварительных и периодических медицинских осмотров (обследований) работников, занятых на тяжелых работах и на работах с вредными и (или) опасными условиями труда)". [http://www.consultant.ru/document/cons_doc_LAW_120902/]. Accessed 19 November 2020.
[5] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 19 November 2020.
[6] All-Russian Centre for Disaster Medicine. [http://www.vcmk.ru/]. Accessed 19 November 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: 0

No evidence was found of a system for communication between public health officials and healthcare workers during a public health emergency. Russia's emergency response plan addressing diseases with pandemic potential is laid out in Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-Epidemic Measures in

Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Wellbeing of the Population (adopted 2009) [1]. This document provides a list of higher public health authorities that must be notified by health workers if infection with a dangerous disease is discovered, stating that notifications should be made in accordance with the relevant administrative documents approved by the health institution's director [1]. Additionally, Sanitary-Epidemiological Rules SP. 3.4.2318-08 on Sanitary Protection of the Territory of the Russian Federation (adopted 2008, last amended 2016) stipulate that the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare must be informed if an infectious disease is identified by health workers or border officials [2]. However, neither document makes any mention of a system for communication between public health authorities and health workers. No additional evidence of such a system was found on the websites of the Ministry of Health or the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare [3, 4].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.SP. 3.4.2318-08 of 22 January 2008. "Sanitary Protection of the Territory of the Russian Federation (Санитарная охрана территории Российской Федерации)". [http://docs.cntd.ru/document/902094693]. Accessed 22 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 22 November 2020.
[4] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru]. Accessed 22 November 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

No evidence was found of a system for communication between public health officials and healthcare workers during a public health emergency, and hence none that encompasses private sector workers. Russia's emergency response plan addressing diseases with pandemic potential is Methodological Guidelines MU 3.4.2552-09 on Organization and Implementation of Primary Anti-Epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases that Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (adopted 2009) [1]. This document provides a list of higher public health authorities that must be notified by health workers "of state and non-state medical institutions" if infection with a dangerous disease is discovered, stating that notifications should be made in accordance with the relevant administrative documents approved by the health institution's director [1]. Additionally, Sanitary-Epidemiological Rules SP. 3.4.2318-08 on Sanitary Protection of the Territory of the Russian Federation (adopted 2008, last amended 2016) stipulate that the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare must be informed if an infectious disease is identified by health workers at any healthcare institution "irrespective of its form of ownership" [2]. However, neither document makes any mention of a system for communication between public health authorities and health workers. No additional evidence of such a system was found on the websites of the Ministry of Health or the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare [3, 4].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.MU 3.4.2552-09 of 17 September 2009. "Organization and Implementation of Primary Anti-epidemic Measures in Cases of Detection of a Patient (Corpse) Suspected of Having Infectious Diseases That Cause Emergency Situations in the Field of Sanitary and Epidemiological Well-being of the Population (Организация и проведение первичных противоэпидемических мероприятий в случаях выявления больного (трупа), подозрительного на заболевания инфекционными болезнями, вызывающими чрезвычайные ситуации в области санитарно-эпидемиологического благополучия населения)". [http://www.garant.ru/products/ipo/prime/doc/12070459/]. Accessed 22 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. No.SP. 3.4.2318-08 of 22 January 2008. "Sanitary Protection of the Territory of the Russian Federation (Санитарная охрана территории Российской Федерации)". [http://docs.cntd.ru/document/902094693]. Accessed 22 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 22 November 2020.
[4] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru]. Accessed 22 November 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

There is evidence that Russia's national public health system monitors and tracks healthcare associated infections (HCAIs) at healthcare facilities. The National Concept for the Prevention of Infections Associated with the Provision of Medical Care (adopted 2011) outlines the extent of the issue, prevention methods and measures to enhance the system for monitoring HCAIs, including the harmonization of the system with international requirements [1]. The document stipulates that monitoring of HCAIs, including their detection and registration, is to be conducted at the federal, regional, municipal and institutional levels. Furthermore, it states that sickness rates in patients and medical workers, medical facilities and equipment, and microbes and their resistance to antimicrobials are to be analyzed in order to gain information on factors leading to the spread of HCAIs [1]. Furthermore, as a member of the Central Asian and Eastern European Surveillance of Antimicrobial Resistance (CAESAR) network, Russia collects surveillance data on antimicrobial resistance [2]. The 2017 CAESAR report states that the Russian data on 9 key bacteria tested for AMR displayed were obtained from "an annual national surveillance study on AMR of bacterial pathogens causing infections among hospitalized patients", but the study is not named [3]. While the 2011 Concept does not mention which agency is to collect HCAI statistics, a 2018 report of the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) on a Regional Conference on Prevention of HCAIs refers to a Reference Center for monitoring of HCAIs, based at the Central Research Institute of Epidemiology (CRIE), and the Ural-Siberian Scientific-Methodological Center for Prevention of HAIs, based at the Yekaterinburg Viral Infection Research Institute [4]. The webpages of both these centers state that they are involved in monitoring HAI incidence in Russia [5, 6]. However, no reports on HCAI statistics were found on the webpages of either HCAI monitoring center or on the websites of their parent Research Institutes [5, 6, 7, 8]. A 2013 Rospotrebnadzor presentation on HCAIs hosted on the CRIE website gives detailed HCAI statistics for 2004–2012, including a breakdown of sickness rates for 2012 aggregated by type of HCAI and type of medical institution [9]. However, the presentation does not quote the exact source of its information, and contains no further information on agencies monitoring HCAIs. The Rospotrebnadzor website

contains several articles reporting on HCAI-related developments, including national and international conferences on the issue and a November 2018 meeting of the Rospotrebnadzor Scientific Council Task Group on prevention of HCAI (to which no other references were found), but no evidence of statistic reports was found on this website [10, 11]. No further information on HCAI statistics was found on the website of the Ministry of Health [12].

[1] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. 6 November 2011. "The National Concept for the Prevention of Infections Associated With the Provision of Medical Care (Национальная Концепция профилактики инфекций, связанных с оказанием медицинской помощи)". [http://www.garant.ru/products/ipo/prime/doc/70000121/]. Accessed 18 November 2020.
[2] World Health Organization Regional Office for Europe. "Central Asian and Eastern European Surveillance of Antimicrobial Resistance (CAESAR)". [http://www.euro.who.int/en/health-topics/disease-prevention/antimicrobial-resistance/about-amr/central-asian-and-eastern-european-surveillance-of-antimicrobial-resistance-caesar]. Accessed 18 November 2020.
[3] World Health Organization Regional Office for Europe. 2018. "Central Asian and Eastern European Surveillance of Antimicrobial Resistance Annual report 2017". [http://www.euro.who.int/en/health-topics/disease-prevention/antimicrobial-resistance/publications/2017/central-asian-and-eastern-european-surveillance-of-antimicrobial-resistance.-annual-report-2017-2018]. Accessed 18 November 2020.
[4] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. 24 May 2018. "On the regional conference on issues of epidemiology and prevention of HCAIs in Yekaterinburg (О региональном совещании по вопросам эпидемиологии и профилактики ИСМП в Екатеринбурге)". [http://www.rospotrebnadzor.ru/about/info/news/news_details.php?ELEMENT_ID=10098]. Accessed 18 November 2020.
[5] Central Research Institute of Epidemiology. "Laboratory of Healthcare Associated Infections (Лаборатория инфекций, связанных с оказанием медицинской помощи)". [http://www.crie.ru/lab8.html]. Accessed 18 November 2020.
[6] Yekaterinburg Viral Infection Research Institute. "Ural-Siberian scientific-methodological centre for prevention of Healthcare Associated Infections (Об Урало-Сибирском научно-методическом центре по профилактике инфекций)". [http://eniivi.ru/uralo-sibirskiy-tsentr-po-profilaktike-vnutribolnichnykh-infektsiy/]. Accessed 18 November 2020.
[7] Central Research Institute of Epidemiology. [http://www.crie.ru/]. Accessed 18 November 2020.
[8] Yekaterinburg Viral Infection Research Institute. [http://eniivi.ru/]. Accessed 18 November 2020.
[9] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. 2013. "Epidemiological surveillance of HCAI in the Russian Federation (Эпидемиологический надзор за ИСМП в Российской Федерации)". [http://www.crie.ru/vbi3/20-1-0-01.pdf]. Accessed 18 November 2020.
[10] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. 2 November 2018. "On the meeting of the Rospotrebnadzor Scientific Council Task Group on prevention of healthcare associated infections (О заседании проблемной комиссии «Профилактика инфекций, связанных с оказанием медицинской помощи» Ученого совета Роспотребнадзора)". [http://www.rospotrebnadzor.ru/about/info/news/news_details.php?ELEMENT_ID=10817&sphrase_id=1650066]. Accessed 18 November 2020.
[11] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru/]. Accessed 18 November 2020.
[12] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 18 November 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

Russia requires ethical review before beginning a clinical trial. Law 61-FZ on the Circulation of Medicines (adopted 2010, last amended 2020) stipulates that ethical review is required to substantiate a medical trial, and designates the Ministry of Health (MoH) as responsible for appointing members of the Ethics Council and regulating its work [1]. The MoH's Resolution 986n on the Ethics Council (adopted 2012, last amended 2020) states that it is to be composed of experts from medical, scientific and educational institutions, civil society organisations, religious organisations and the media, with the number of medical experts not exceeding that of non-medical experts [2]. The chairperson of the Ethics Council is appointed from the Council's members by the Minister of Health, and must have a PhD in medical sciences and prior experience in both conducting clinical trials and resolving ethical issues related to clinical trials [2]. All Ethics Council members must meet a range of detailed professional and experience requirements, including professional experience and knowledge of the ethical and legal aspects of the protection of human and citizen rights and freedoms [2]. Ethics Council members must not participate in reviews if they are involved with the development of a medicine under review, or contact organizations presenting products for review [3]. The Ministry of Health publishes details on cases considered at each Ethics Council meeting on its website [4].

[1] Governmnet of the Russian Federation. No.61-FZ of 12 April 2010. "On the Circulation of Medicines. Article 26. Expedited Procedure for the Examination of Medicinal Products (Об обращении лекарственных средств. Статья 26. Ускоренная процедура экспертизы лекарственных средств)". [http://www.consultant.ru/document/cons_doc_LAW_99350/5bf6a39f9ac2d01dd3d5078a97fd7d2de39b54c9/]. Accessed 16 November 2020.
[2] Ministry of Health of the Russian Federation. No.986n of 29 of 2012. "On Approval of the Resolution on the Ethics Council (Об утверждении Положения о Совете По Этике)". [http://www.consultant.ru/cons/cgi/online.cgi?from=298837-57&rnd=6BE61CA11F08A3557C48B9F36836417F&req=doc&base=LAW&n=352091&REFDOC=298837&REFBASE=LAW#7mpylaamq1s]. Accessed 16 November 2020.
[3] Ministry of Health of the Russian Federation. No.735n of 26 August 2010. "Organizing and Conducting Ethical Expert Examination on the Possibility of Conducting a Clinical Trial of Medicinal Product for Medical Use and Forming Conclusions of the Council on Ethics (Организации и проведения этической экспертизы возможности проведения клинического исследования лекарственного препарата для медицинского применения и формы заключения совета по этике)". [http://www.consultant.ru/document/cons_doc_LAW_104353/519042bd63b7ead2e7bd54436ebe2c579721b903/#dst100012]. Accessed 16 November 2020.
[4] Ministry of Health of the Russian Federation. "Submissions Reviewed by the Ethics Council in 2019 (Материалы, рассмотренные на Совете по этике в 2019 г.)". [https://minzdrav.gov.ru/ministry/61/11/materialy-po-deyatelnosti-deparatamenta/o-sovete-po-etike/materialy-rassmotrennye-na-sovete-po-etike-v-2019]. Accessed 16 November 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 public evidence that Russia has an expedited process for approving clinical trials for unregistered medical countermeasures (MCM). Federal Law 61-FZ on the Circulation of Medicines (adopted 2010, last amended 2020) inter alia regulates clinical trials, but it does not provide for an expedited process for clinical trials for MCM [1]. Issued in 2017 pursuant to Federal Law 61-FZ, Order 558n on Rules of Carrying Out Examination of Medicines for Medical Use and Features of the Examination of Certain Types of Medicinal Products for Medical Use provides detailed description of the procedure for obtaining the permission to conduct a clinical trial, but there is no mention of an expedited process [2]. No evidence of an expedited process for clinical trials could be located on the Ministry of Health's website [3].

[1] Governmnet of the Russian Federation. No.61-FZ of 12 April 2010. "On the Circulation of Medicines. Article 26. Expedited Procedure for the Examination of Medicinal Products (Об обращении лекарственных средств. Статья 26. Ускоренная процедура экспертизы лекарственных средств)". [http://www.consultant.ru/document/cons_doc_LAW_99350/5bf6a39f9ac2d01dd3d5078a97fd7d2de39b54c9/]. Accessed 16 November 2020.
[2] Ministry of Health of the Russian Federation. No.558n of 24 August 2017. "Rules of Carrying Out Examination of Medicines for Medical Use and Features of the Examination of Certain Types of Medicinal Products for Medical Use (Reference Medicinal Products, Generic Medicinal Products, Biological Medicinal Products, (Biosimilar) Medicinal Products (Biosimilars), Homeopathic Medicinal Products, Herbal Medicinal Products, Drug Combinations) (Правила проведения экспертизы лекарственных средств для медицинского применения и особенности экспертизы отдельных видов лекарственных препаратов для медицинского применения (референтных лекарственных препаратов, воспроизведенных лекарственных препаратов, биологических лекарственных препаратов, биоаналоговых (биоподобных) лекарственных препаратов (биоаналогов), гомеопатических лекарственных препаратов, лекарственных растительных препаратов, комбинаций лекарственных препаратов))". [https://normativ.kontur.ru/document?moduleId=1&documentId=305569#h36]. Accessed 16 November 2020.
[3] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 16 November 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

Russia has a government agency that is responsible for approval of new medical countermeasures for humans. According to Federal Law 61-FZ on the Circulation of Medicines (adopted 2010, last amended 2020), the Federal State Budgetary Institution "Scientific Center for the Expertise of Medicinal Products" (Regmed), under the Ministry of Health (MoH), is responsible for approving new medicines [1]. Regmed also issues permits for clinical trials and conducts different types of examination of both Russian and foreign medicines prior, during and after their registration for use in Russia to ensure their safety, quality and efficacy [2]. Furthermore, as stipulated in Decree 1416 on the Approval of the Rules for State Registration of Medical Devices (adopted 2012, last amended 2020), the Federal Service for Surveillance in Healthcare, under the

supervision of MoH, is responsible for approving the registration of medical devices [3, 4].

[1] Governmnet of the Russian Federation. No.61-FZ of 12 April 2010. "On the Circulation of Medicines. Article 26. Expedited Procedure for the Examination of Medicinal Products (Об обращении лекарственных средств. Статья 26. Ускоренная процедура экспертизы лекарственных средств)".
[http://www.consultant.ru/document/cons_doc_LAW_99350/5bf6a39f9ac2d01dd3d5078a97fd7d2de39b54c9/]. Accessed 16 November 2020.
[2] Scientific Center for the Expertise of Medicinal Products. "About the Center (О центре)".
[https://www.regmed.ru/content/page/SCEEMP_About_center]. Accessed 16 November 2020.
[3] Governmnet of the Russian Federation. No.1416 of 27 December 2012. "On the Approval of the Rules for State Registration of Medical Devices (Об утверждении Правил государственной регистрации медицинских изделий)".
[http://docs.cntd.ru/document/902390883]. Accessed 16 November 2020.
[4] Federal Service for Surveillance in Healthcare. "Registration of Medical Devices (Регистрация медицинских изделий)".
[https://roszdravnadzor.gov.ru/medproducts/registration#]. Accessed 16 November 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: 1

Russia has an expedited process for approving medical countermeasures (MCM) for human use. Article 26 of Law 61-FZ on the Circulation of Medicines (adopted 2010, last amended 2020), outlines a general expedited process for the purpose of state registration of MCM [1]. The accelerated procedure is carried out by decision of the relevant authorized federal executive body within a period not exceeding 80 working days from the submittal of application (as opposed to the usual 160 working days [2]), and also applies to medicinal products for which preclinical studies and clinical trials have been conducted abroad in accordance with the rules of good laboratory and clinical practice, as defined by Russian legislation [1]. The law states that the expedited process "does not mean a decrease in the requirements for the safety, quality and effectiveness of medicines" [1]. Russia has been using expedited process for registering medicines and medical devices for the treatment of COVID-19 since April 2020 [3, 4].

[1] Governmnet of the Russian Federation. No.61-FZ of 12 April 2010. "On the Circulation of Medicines. Article 26. Expedited Procedure for the Examination of Medicinal Products (Об обращении лекарственных средств. Статья 26. Ускоренная процедура экспертизы лекарственных средств)".
[http://www.consultant.ru/document/cons_doc_LAW_99350/5bf6a39f9ac2d01dd3d5078a97fd7d2de39b54c9/]. Accessed 16 November 2020.
[2] Governmnet of the Russian Federation. No.61-FZ of 12 April 2010. "On the Circulation of Medicines. Article 13. State Registration of Medicinal Products (Об обращении лекарственных средств. Статья 13. Государственная регистрация лекарственных препаратов)".
[http://www.consultant.ru/document/cons_doc_LAW_99350/d51604f907a67575d6f37a17e2322f91bee26db8/]. Accessed 16 November 2020.
[3] Ministry of Health of the Russian Federation. 15 November 2020. "The Russian Government Has Extended the Simplified Procedure for Registering Medicines and Medical Devices for the Treatment of Covid-19 (Правительством России продлен упрощённый порядок регистрации лекарств и медицинских изделий для лечения Covid-19)".
[https://minzdrav.gov.ru/news/2020/11/15/15426-pravitelstvom-rossii-prodlen-uproschyonnyy-poryadok-registratsii-lekarstv-i-meditsinskih-izdeliy-dlya-lecheniya-covid-19]. Accessed 16 November 2020.

[4] Government of the Russian Federation. No.1826 of 15 November. "About Modification of the Resolution of the Government of the Russian Federation of April 3, 2020 No. 430 (О внесении изменений в постановление Правительства Российской Федерации от 3 апреля 2020 г. № 430)". [http://government.ru/docs/40859/]. Accessed 16 November 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: 0

Pandemics are not mentioned in Russia's national risk reduction strategy, and there is no evidence that the country has a standalone pandemic risk reduction strategy. While five-year risk reduction strategies were in place between 2000 and 2015, there is no evidence that a risk reduction strategy is currently in place in Russia [1, 2]. The risk reduction strategy in place for 2010–2015 does not mention pandemics [3]. Russia's overarching emergency risk policy and national security strategy refer to the threat of pandemics, but do not mention risk reduction measures [4, 5]. No further evidence of a pandemic risk reduction strategy was found on the Ministry of Health website [6].

[1] Ministry for Civil Defence, Emergencies and the Elimination of Consequences of Natural Disasters of the Russian Federation. "State and Federal Target Programmes (Государственные и федеральные целевые (ведомственные) программы)". [http://www.mchs.gov.ru/activities/fcp]. Accessed 22 November 2020.
[2] Portal of Federal Target Programs of the Russian Federation. "Risk Reduction and Mitigation of the Consequences of

Emergencies of Natural and Technogenic Characters in the Russian Federation (Снижение рисков и смягчение последствий чрезвычайных ситуаций природного и техногенного характера в Российской Федерации)". [http://fcp.economy.gov.ru/cgi-bin/cis/fcp.cgi/Fcp/Search?q=%F1%ED%E8%E6%E5%ED%E8%E5+%F0%E8%F1%EA%EE%E2]. Accessed 22 November 2020.
[3] Government of the Russian Federation. No.555 of 7 July 2011. "On the Approval of the Federal Target Programme 'reduction of Risks and Mitigation of the Consequences of Emergencies of Natural and Technogenic Characters in the Russian Federation Until 2015 (Снижение рисков и смягчение последствий чрезвычайных ситуаций природного и техногенного характера в Российской Федерации до 2015 года)". [http://docs.cntd.ru/document/902291695]. Accessed 22 November 2020.
[4] President of the Russian Federation. No.Pr-3400 of 25 November 2011. "Fundamentals of State Policy in the Field of Ensuring the Security of the Population of the Russian Federation and the Protection of Critical and Potentially Dangerous Objects From Natural, Man-made Threats and Terrorist Acts for the Period Up to 2020 (Основы государственной политики в области обеспечения безопасности населения Российской Федерации и защищенности критически важных и потенциально опасных объектов от угроз природного, техногенного характера и террористических актов на период до 2020 года)". [http://www.garant.ru/products/ipo/prime/doc/70041358/]. Accessed 22 November 2020.
[5] President of the Russian Federation. No.683 of 31 December 2015. "National Security Strategy of the Russian Federation (Стратегия национальной безопасности Российской Федерации)". [http://docs.cntd.ru/document/420327289]. Accessed 22 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 22 November 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

Russia has cross-border agreements on public health emergencies, and there is no evidence of gaps in implementation. In July 2018, the Heads of State Council of the Shanghai Cooperation Organisation (SCO), of which Russia is a member alongside 7 other countries, adopted the "Statement on Joint Efforts Against the Threat of Epidemics in the SCO space", committing to coordinate response measures during epidemics [1]. In November 2020, during the SCO Summit dedicated to the post-pandemic era, the cooperation between the member states to combat the coronavirus pandemic was described as effective, the countries having "exchanged experience, provided medical, technical and advisory assistance" [2]. Member states also committed to expand cooperation in the field of public health, including "comprehensively coordinating emergency response in the field of health and epidemiology, and deepening scientific and technical cooperation in the development of drugs, vaccines and test systems" [2]. Furthermore, Russia is part of the Commonwealth of Independent States (CIS) Healthcare Cooperation Council, and it was reported that at the 32nd annual meeting of the Council (October 2020), also attended by the World Health Organization's Regional Director for Europe, a CIS unified approach to prevent the spread of COVID-19 was discussed, though no further details of the approach have been made public [3, 4, 5].

[1] Shanghai Cooperation Organisation. 10 June 2018. "Statement by the Heads of the Shanghai Cooperation Organisation Member States on Joint Efforts Against the Threat of Epidemics in the SCO space". [http://eng.sectsco.org/documents/].

Accessed 19 November 2020.
[2] Shanghai Cooperation Organisation. 11 November 2020. "Summit to define SCO's postpandemic era". [http://eng.sectsco.org/news/20201110/689121.html]. Accessed 19 November 2020.
[3] Commonwealth of Independent States. "Passport of the Council for Cooperation in the Field of Healthcare of the CIS (Паспорт Совета по сотрудничеству в области здравоохранения СНГ)". [https://e-cis.info/cooperation/3031/77302/]. Accessed 19 November 2020.
[3] Commonwealth of Independent States. "The XXXII meeting of the Council for Cooperation in the Field of Healthcare of the CIS was held in the format of a videoconference (В формате видеоконференции прошло XXXII заседание Совета по сотрудничеству в области здравоохранения СНГ)". [https://e-cis.info/news/564/89099/?sphrase_id=14422]. Accessed 19 November 2020.
[4] UzDaily.com. Commonwealth of Independent States. 29 October 2020. "The 32nd meeting of the CIS Healthcare Cooperation Council takes place in a videoconference format". [https://www.uzdaily.uz/en/post/61159]. Accessed 19 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

Russia has signed a cross-border agreement with regards to animal health emergencies, and there is no evidence of gaps in implementation. Russia is a member of the Commonwealth of Independent States (CIS) and the country has signed the CIS Agreement on Veterinary Cooperation (1993), which stipulates on joint cooperation for the prevention, control and elimination of infectious animal diseases [1]. Article 7 states that the members are to promptly inform one another about the occurrence of acute infectious animal diseases, and to develop and carry out emergency measures to eliminate such diseases in border regions, thus preventing their spread to other countries. Additionally, the agreement outlines interregional cooperation on issues related to emergency situations and elimination of consequences in the event of acute infectious animal diseases. Article 11 states that if necessary, the interested party may turn to other Parties for assistance, which is provided in the form of consultations, referral of experts, supplies of vaccines, serums, other veterinary drugs and diagnostic tools. [1]. No gaps in implementation have been reported, and there is evidence that the CIS countries are sharing information on their epizootic situation and regularly working on new cooperation projects, for example, the Joint Action Plan on the Prevention and Control of Rabies until 2025 (adopted June 2020) [2].

[1] Commonwealth of Independent States. 12 March 1993. "Agreement on Veterinary Cooperation (Соглашение о сотрудничестве в области ветеринарии)". [http://cis.minsk.by/page/2412]. Accessed 19 November 2020.
[2] Commonwealth of Independent States. 11 October 2019. "The CIS headquarters hosted a meeting of the Intergovernmental Council for Cooperation in the Veterinary Field (В штаб-квартире СНГ прошло заседание Межправительственного совета по сотрудничеству в области ветеринарии). [http://cis.minsk.by/news/12217/v-stab-kvartire-sng-proslo-zasedanie-mezpravitelstvennogo-soveta-po-sotrudnicestvu-v-oblasti-veterinarii]. Accessed 19 November 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: 0

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: 0

There is no evidence that Russia has allocated national funds to improve capacity to address epidemic threats within the past three years. No such evidence was found on the websites of the Ministry of Health, Federal Service for Surveillance on Consumer Rights Protection and Human Welfare, the Ministry of Agriculture, the Ministry of Finance, the Presidential Executive Office or that of the Russian government [1, 2, 3, 4, 5].

[1] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 18 November 2020.
[2] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru]. Accessed 18 November 2020.
[3] Ministry of Agriculture of the Russian Federation. [http://mcx.ru/]. Accessed 18 November 2020.
[4] Ministry of Finance of the Russian Federation. [https://minfin.gov.ru/ru/]. Accessed 18 November 2020.
[7] Presidential Executive Office. [http://kremlin.ru/]. Accessed 18 November 2020.
[6] Russian Government. [http://government.ru/]. Accessed 18 November 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

Russia has a special emergency public financing mechanism and funds that it can access in the face of a public health emergency. Law 68-FZ on Protection of Population and Territories from Emergency Situations of Natural and Technological Character (adopted 1994, last amended 2020) states that the executive bodies of the constituent entities of Russia are required to create financial and material reserves for regional and intermunicipal emergency response [1]. Ministry of Finance Recommendations 06-07-17/20270 on the Enhancement of Management of Financial Resources Stipulated in the Budgets of the Subjects of the Russian Federation for the Aim of Prevention of Emergencies and Elimination of Their Consequences (adopted 2017) clearly states that emergency funds can be used to to combat "catastrophes, natural disasters, epidemics" and eliminate their consequences [2]. Where regional funds are insufficient to finance an emergency response, or the emergency is of federal or interregional level, the Reserve Fund of the Government of the Russian Federation for the Prevention and Elimination of Emergencies and the Consequences of Natural Disasters must provide funding [2]. Resolution

1928 on the Allocation and Provision of Reserve Fund (adopted 2019) does not directly mention public health emergencies, but provides a broad description of "natural and man-made emergencies" [3]. However, State Standard 22.0.02-2016 of "Safety in Emergencies" (adopted 2016, last amended 2019) defines events that can cause "emergencies of a natural and technogenic character" as including "a widespread infectious human disease" [4].

[1] Government of the Russian Federation. No.68-FZ of 21 December 1994. "On Protection of Population and Territories From Emergency Situations of Natural and Technological Character (О защите населения и территорий от чрезвычайных ситуаций природного и техногенного характера). [http://www.consultant.ru/document/cons_doc_LAW_5295/]. Accessed 20 November 2020.
[2] Ministry of Finance of the Russian Federation. No.06-07-17/20270 of 6 April 2017. "On Direction of Methodological Recomendations for the Enhancement of Management of Financial Resources Stipulated in the Budgets of the Subjects of the Russian Federation For the Aim of Prevention of Emergencies and Elimination of Their Consequences (О направлении методических рекомендаций по совершенствованию управления финансовыми ресурсами, предусматриваемыми в бюджетах субъектов РФ на цели предупреждения и ликвидации последствий чрезвычайных ситуаций). [http://www.garant.ru/products/ipo/prime/doc/71550762/]. Accessed 20 November 2020.
[3] Government of the Russian Federation. No.1928 of 28 December 2019. "On the Approval of the Rules for the Provision of Other Interbudgetary Transfers From the Federal Budget, the Source of Financial Support for Which is the Budgetary Allocations of the Reserve Fund of the Government of the Russian Federation, the Budgets of the Constituent Entities of the Russian Federation for the Financial Support of Certain Measures to Eliminate Natural and Man-made Emergencies, the Implementation of Compensation Payments to Individuals and Legal Entities, Who Suffered Damage as a Result of a Terrorist Act, and Compensation for Harm Caused in the Suppression of a Terrorist Act by Lawful Actions (Об утверждении Правил предоставления иных межбюджетных трансфертов из федерального бюджета, источником финансового обеспечения которых являются бюджетные ассигнования резервного фонда Правительства Российской Федерации, бюджетам субъектов Российской Федерации на финансовое обеспечение отдельных мер по ликвидации чрезвычайных ситуаций природного и техногенного характера, осуществления компенсационных выплат физическим и юридическим лицам, которым был причинен ущерб в результате террористического акта, и возмещения вреда, причиненного при пресечении террористического акта правомерными действиями)". [http://docs.cntd.ru/document/564089575]. Accessed 20 November 2020.
[4] Federal Agency for Technical Regulation and Metrology. No. GOST R 22.0.02-2016 of 12 September 2016. "Safety in emergencies. Terms and definitions (Безопасность в чрезвычайных ситуациях. Термины и определения)". [http://docs.cntd.ru/document/1200139176]. Accessed 20 November 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 no evidence that in the past three years Russia's senior leaders have made a public commitment to support other countries to improve capacity to address epidemic threats by providing financing or support or to improve Russia's domestic

capacity to address epidemic threats by expanding financing or requesting support to improve capacity. There is no evidence of such public commitments on the websites of the Ministry of Health, the Ministry of Foreign Affairs, the Ministry of the Interior, the Presidential Executive Office, the United Nations, the World Health Organization, or the Russian Government [1, 2, 3, 4, 5, 6, 7].

[1] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/]. Accessed 21 November 2020.
[2] Ministry of Foreign Affairs of the Russian Federation. [https://www.mid.ru/ru/home]. Accessed 21 November 2020.
[3] Ministry of the Interior of the Russian Federation. [https://mvd.ru/]. Accessed 21 November 2020.
[4] Presidential Executive Office. [http://kremlin.ru/]. Accessed 21 November 2020.
[5] United Nations. [https://www.un.org/ru]. Accessed 21 November 2020.
[6] World Health Organisation. "Russian Federation". [https://www.euro.who.int/en/countries/russian-federation]. Accessed 21 November 2020.
[7] Russian Government. [http://government.ru/]. Accessed 21 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, Russia has invested budget funds to provide assistance to other countries in improving their capacity to address epidemic threats, but Russia has not requested such assistance itself. In 2017, Government Decree 1060-r on the Allocation of Funds for the Payment of a Volunteer Target Contribution to the WHO for the Realisation of Measures on the Provision of Assistance to Countries in Implementation of the International Health Regulations 2017–2019 committed US$ 4.22 million from the federal budget to the World Health Organization for the stated aim, and ordered the Russian Federal Service for Surveillance on Consumer Rights Protection and Human Welfare (Rospotrebnadzor) to provide an additional RUB 257.9 million (US$ 3.9 million) from the federal budget to countries in Eastern Europe and Central Asia for the same aim [1]. In 2019, Rospotrebnadzor reported on the use of the investment for the creation of a Center for Monitoring and Rapid Response to Emergencies of a Sanitary and Epidemiological Nature in Eastern Europe and Central Asia [2]. Furthemore, as part of Russia's commitment to assist other countries in the implementation of the IHR, in 2017 and 2018, Rospotrebnadzor provided Kazakhstan, Uzbekistan, Kyrgyzstan and Mongolia with mobile microbiological laboratories, digital workstations and disease diagnostic systems [2, 3]. Training on the prevention and diagnosis of infectious diseases, microbiology and biological safety and on the improvement of epidemiological surveillance was also provided to specialists from Azerbaijan, Armenia, Belarus, Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan [3]. Finally, according to the Georgetown Infectious Disease Atlas (GIDA), in the past three years, Russia has not provided or received funding to improve the country's domestic capacity to address epidemic threats [4, 5]. No evidence was found on the websites of the Ministry of Health and Rospotrebnadzor requesting assistance to improve domestic capacity to address epidemic threats [6, 7].

[1] Government of the Russian Federation. No. 1060-r of 26 May 2017. "On the Allocation of Funds for the Payment of a Volunteer Target Contribution to the WHO for the Realisation of Measures on the Provision of Assistance to Countries in Implementation of the International Health Regulations 2017-2019 (О выделении средств на уплату добровольного целевого взноса во всемирную организацию здравоохранения на реализацию мер по оказанию содействия странам во внедрении международных медико-санитарных правил в 2017 - 2019 годах)". [https://rulaws.ru/goverment/Rasporyazhenie-Pravitelstva-RF-ot-26.05.2017-N-1060-r/]. Accessed 4 November 2020.

[2] Russian Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. 5 January 2019. "On the Provision by Rospotrebnadzor of Assistance to Foreign Countries in the Fight Against Infections in 2018" (Об оказании Роспотребнадзором содействия зарубежным странам в борьбе с инфекциями в 2018 году)". [http://rospotrebnadzor.ru/about/info/news/news_details.php?ELEMENT_ID=11064]. Accessed 4 November 2020.
[3] Russian Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. 3 January 2018. "On the Provision by Rospotrebnadzor of Assistance to Foreign Countries in the Struggle with Infections in 2017 (Об оказании Роспотребнадзором содействия зарубежным странам в борьбе с инфекциями в 2017 году)". [https://www.rospotrebnadzor.ru/about/info/news/news_details.php?ELEMENT_ID=9430&sphrase_id=1584551]. Accessed 4 November 2020.
[4] Georgetown Infectious Disease Atlas (GIDA). "Global Health Security Tracker: Russia/Funder". [https://tracking.ghscosting.org/details/192/funder]. Accessed 3 November 2020.
[5] Georgetown Infectious Disease Atlas (GIDA). "Global Health Security Tracker: Russia/Recipient". [https://tracking.ghscosting.org/details/192/recipient]. Accessed 3 November 2020.
[6] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 3 November 2020.
[7] Russian Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru/]. Accessed 3 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 insufficient evidence that Russia has a policy for sharing biological data or materials with international organizations or other countries that goes beyond influenza. Russia's efforts to combat tuberculosis (TB) involve strong international cooperation, culminating in the organisation of the World Health Organization (WHO) Global Ministerial Conference "Ending TB in the Sustainable Development Era" in Moscow in 2017 [1]. At this event, Russia along with other international partners signed the Moscow Declaration to End TB, committing to improve "coordination of research efforts nationally and globally"

[2]. In 2017, Brazil, Russia, India, China and South Africa created a Tuberculosis Research Network for collaboration on tuberculosis research, aiming to "develop robust research into new tools, diagnostics, vaccines and drugs" [3, 4]. A Russian Ministry of Health official stated that detection of drug-resistant forms of TB, especially those classified as "extremely resistant" or "multi-drug resistant", was the main priority for the network [5]. However, no explicit evidence of a Russian state policy for sharing biological data or materials with other countries was found in online information describing the TB Network [3, 4, 5, 6]. No further mentions of a Russian policy for sharing biological materials was found in Law 77-FZ on the Prevention of the Spread of Tuberculosis (adopted 2001, last amended 2018), or in the 2018 draft State Strategy for Elimination of Tuberculosis in the Russian Federation [7, 8]. No public evidence of a such policy on any other infectious diseases was found on the websites of the Ministry of Health, the Ministry of Agriculture, and of the Federal Service for Surveillance on Consumer Rights Protection and Human Welfare [9, 10, 11].

[1] World Health Organization. 2017. "First WHO Global Ministerial Conference "Ending TB in the Sustainable Development Era" [https://www.who.int/tb/Moscow_Declaration_MinisterialConference_TB/en/]. Accessed 22 January 2019.
[2] World Health Organization. 2017. "Moscow Declaration to End TB". [https://www.who.int/tb/features_archive/Moscow_Declaration_to_End_TB_final_ENGLISH.pdf?ua=1]. Accessed 19 November 2020.
[3] 10th BRICS Summit. 1 July 2018. "BRICS countries join hands to fight TB". [http://www.brics2018.org.za/brics-countries-join-hands-fight-tb]. Accessed 19 November 2020.
[4] Republic of South Africa Health Department. 29 June 2018. "Media Statement: BRICS TB Research Network to accelerate research and innovation through collaboration across the BRICS countries". [http://www.health.gov.za/index.php/2014-03-17-09-48-36/2014-03-17-09-49-50?download=2837:media-statement-brics-tb-research-network-to-accelerate-research-and-innovation-through-collaboration-across-the-brics-countries]. Accessed 19 November 2020.
[5] TB Online. 29 June 2018. "BRICS TB Research Network to accelerate research and innovation through collaboration across the BRICS countries". [http://www.tbonline.info/posts/2018/7/1/brics-tb-research-network-accelerate-research-and-/]. Accessed 19 November 2020.
[6] Kritski, A., Dalcolmo, M. P., Mello, F., Carvalho, A., Silva, D. R., Oliveira, M. M., & Croda, J. 2018. "The role of the Brazilian Tuberculosis Research Network in national and international efforts to eliminate tuberculosis." Jornal brasileiro de pneumologia : publicacao oficial da Sociedade Brasileira de Pneumologia e Tisilogia, 44
[2] , 77-81. [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6044657/]. Accessed 19 November 2020.
[7] Government of the Russian Federation. No.77-FZ of 18 June 2001. "On the Prevention of the Spread of Tuberculosis in the Russian Federation (О предупреждении распространения туберкулеза в Российской Федерации)". [http://docs.cntd.ru/document/901789645]". Accessed 19 November 2020.
[8] Ministry of Health of the Russian Federation. 23 January 2018. "State Strategy for Elimination of Tuberculosis in the Russian Federation until 2025 (Draft) (Государственной стратегии ликвидации туберкулеза в Российской Федерации на период до 2025 года и дальнейшую перспективу) [https://www.rosminzdrav.ru/open/discuss/obschestvennoe-obsuzhdenie-proekta-rasporyazheniya-pravitelstva-rossiyskoy-federatsii-ob-utverzhdenii-gosudarstvennoy-strategii-likvidatsii-tuberkuleza-v-rossiyskoy-federatsii-na-period-do-2025-goda-i-dalneyshuyu-perspektivu]". Accessed 19 November 2020.
[9] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 19 November 2020.
[10] Ministry of Agriculture of the Russian Federation. [www.mcx.ru/]. Accessed 19 November 2020.
[11] Federal Service for Surveillance on Consumer Rights Protection and Human Welfare. [www.rospotrebnadzor.ru]. Accessed 19 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 Russia has not shared influenza samples in accordance with the PIP framework in the past two years. The World Health Organization (WHO) has not reported a lack of compliance from Russia [1], nor can such evidence be found on the Ministry of Health website [2] or in international or local media. Additionally, the WHO Influenza Surveillance Report contains detailed statistical information on Russia's influenza specimens and cases from years 2018 to 2020 [3].

[1] World Health Organization (WHO). "Influenza". [https://www.who.int/influenza/en/]. Accessed 3 November 2020.
[2] Ministry of Health of the Russian Federation. [https://minzdrav.gov.ru/ru]. Accessed 3 November 2020.
[3] World Health Organization (WHO). "Influenza Surveillance Outputs (Russian Federation)". [https://www.who.int/influenza/resources/charts/en/]. Accessed 3 November 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 Russia has not shared COVID-19 samples during the 2020 outbreak or any other pathogen samples during an outbreak in the past two years. Such evidence is absent from the World Health Organization website and also in international and local media [1].

[1] World Health Organization (WHO). "Disease Outbreak News". [http://www.who.int/csr/don/en/]. Accessed 3 November 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: 1

2020

Economist Intelligence

6.1.1b

Quality of bureaucracy (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1c

Excessive bureaucracy/red tape (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1d

Vested interests/cronyism (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 0

2020

Economist Intelligence

6.1.1e

Country score on Corruption Perception Index (0-100, where 100=best)

Input number

Current Year Score: 30

2020

Transparency International

6.1.1f

Accountability of public officials (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

2020

Economist Intelligence

6.1.1g

Human rights risk (Economist Intelligence score; 0-4, where 4=best)

Input number

Current Year Score: 1

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: 1

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: 0

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: 1

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: 1

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: 0

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: 0

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: 99.73

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: 0.74

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

2018

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

Russia's share of employment in the informal sector is below 25%. In 2016, the share of employment in the informal sector was 21.2%, according to data from the Federal State Statistics Service, quoted in two working papers published by the World Bank in 2019 [1, 2]. The statistical databases of the World Bank and the International Labour Organization do not provide data on Russia's informal employment [3, 4, 5].

[1] Yeon Soo Kim, Mikhail Matytsin, Samuel Freije. August 2019. "Informal Employment and Worker's Well-Being in the Russian Federation." Poverty & Equity Global Practice Working Paper 218. World Bank Group.[http://documents1.worldbank.org/curated/en/244511566888789571/pdf/Informal-Employment-and-Worker-s-Well-Being-in-the-Russian-Federation.pdf]. Accessed 5 November 2020.
[2] Apurva Sanghi, Samuel Freije-Rodriguez, Aleksandra Posarac. May 2019. "The Problem Of Informal Employment In Russia" (Проблема Неформальной Занятости В России)". World Bank Group. [http://documents1.worldbank.org/curated/en/835091559937396870/pdf/Stemming-Russia-s-Informality-Unearthing-Causes-and-Developing-Solutions.pdf]. Accessed 5 November 2020.
[3] International Labor Organization. "Country profiles". [https://ilostat.ilo.org/data/country-profiles/]. Accessed 3 November 2020.
[4] International Labor Organization. "Statistics on the informal economy". [https://ilostat.ilo.org/topics/informality/]. Accessed 3 November 2020.
[5] World Bank. "Informal employment (% of total non-agricultural employment)". [https://data.worldbank.org/indicator/SL.ISV.IFRM.ZS?end=2018&locations=RU&name_desc=false&start=1960&view=chart]. Accessed 3 November 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: 2

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: 0

2021

Economist Intelligence Democracy Index

6.2.6 Inequality

6.2.6a

Gini coefficient

Scored 0-1, where 0=best

Current Year Score: 0.38

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: 1

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: 74.59

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: 0.08

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: 2

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: 72.66

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: 619.5

2019

WHO

6.5.1c

Population ages 65 and above (% of total population)

Input number

Current Year Score: 15.09

2019

World Bank

6.5.1d

Prevalence of current tobacco use (% of adults)

Input number

Current Year Score: 28.3

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: 97.09

2017

UNICEF; Economist Impact

6.5.2b

Percentage of homes with access to at least basic sanitation facilities

Input number

Current Year Score: 90.48

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: 884.9

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: 0

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: 1

2018

Wellcome Trust Global Monitor 2018