

# 7-1-7 Bottleneck Categories

To help identify areas in greatest need of remedial action and investment, categorize bottlenecks and review the most frequently recurring categories. Common bottleneck categories identified through implementation of the 7-1-7 approach are listed below. This list is not exhaustive and additional bottleneck categories may be needed.

## Q CLINICAL OR HEALTH CARE WORKER

- Health professional with no training in surveillance and response
- Limited clinical case management capacity
- Low awareness or clinical suspicion by health workers
- Lack of clinical surveillance focal point/ capacity

## ✓ COORDINATION

- Lack of coordination across public health units or agencies
- Lack of multisectoral/disciplinary response teams
- Lack of one health information sharing/collaboration
- Weak response coordination, including incident management and rapid response team capacity

# DATA SYSTEMS

- Data entry delay
- Lack of timely or complete surveillance data
- Technological challenge for electronic surveillance/reporting systems (e.g., network coverage)

# EVENT CHARACTERISTICS

- Access issues (remote, fragile, conflict settings)
- New or unexpected pathogen

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## Q LABORATORY

- Delayed laboratory confirmation
- Delayed specimen collection
- Delayed specimen transportation
- Lack of diagnostic commodities (lab reagents, RDTs, specimen collection kits)
- Laboratory reporting failure

## PATIENT OR COMMUNITY

- Delay in care-seeking by patient
- Inadequate sensitivity of community detection

- Low community knowledge or trust
- Risk communications or community engagement

## → PLANNING & PROCEDURES

- Failure to follow event notification procedures
- Failure to follow initial risk assessment or event verification procedures
- Inadequate procedures in place for event notification
  - Inadequate risk assessments, preparedness, or response plans

## + RESOURCES & PROCUREMENT

- Competing priorities (including COVID-19)
- Lack of available resources for response initiation or rapid resource mobilization
- Limited availability of countermeasures or personal protective equipment
- Logistics and shipment delays
- Human resources gaps for public health