

## Da waren doch diese Protokolle der Taskforce COVID-19 des BAG

Anfang April 2024 hat das Bundesamt für Gesundheit (BAG) auf seiner Website völlig geräuschlos die Protokolle der Taskforce COVID-19 des BAG veröffentlicht. Selbstredend mit vielen Schwärzungen des Textes. Man möchte meinen, Schwarz sei die Farbe der Amtsschimmel! Was passend wäre, denn in den Amtsstuben scheint das Schwarz-Weiss-Denken weit verbreitet zu sein. Das haben uns die letzten 4 Jahre geradezu gnadenlos vor Augen geführt. Interessierte Kreise haben sich zusammen mit der Vereinigung "Bürger fragen nach" daran gemacht, die 1.700 Protokoll-Seiten zu lesen und auszuwerten. Eine Suche nach der Stecknadel im Heuhaufen. Erste Ergebnisse sollen hier geteilt werden.



Natürlich haben all jene, die sich sowieso nicht mit diesen Protokollen befassen wollen, weil sie an keinerlei Aufarbeitung der Corona-Krise interessiert sind, sofort klargestellt, dass es sich "nur" um die COVID-Taskforce des BAG handele, das weisungsgebunden sei und damit nicht um die sich selbst (oder durch Hintermänner) ins Leben gerufene und sich damals selbst anbiedernde Swiss National COVID-19 Science Task Force handele. Geschenkt! Denn die Letztgenannte hat angeblich keine Protokolle erstellt. Begründung: Man hätte nur Zoom-Calls gemacht. Auch das ist geschenkt.

## Denn diese Antwort ist einfach zu billig.

Insofern nehmen wir doch einfach das, was wir haben. Und das sind die besagten Protokolle der BAG-Taskforce.

Im Folgenden werden in zeitlicher Reihenfolge einige Auszüge aus den Protokollen vorgestellt, anhand derer der Leser seine eigenen Schlüsse ziehen kann. Das ist auch gar nicht so schwer, wie wir sehen werden.

Zuvor sollte der Leser aber noch einige Passagen aus dem [Report „A World at Risk“](#) des Global Preparedness Monitoring Boards (GPMB) kennen. Wohlgemerkt von September 2019, als Herr und Schweizer weit davon entfernt waren zu befürchten, dass eine Mikrobe, die um die Ecke biegt, ihr Leben für eine Weile auf den Kopf stellen würde. Andere Herrschaften hatten davon aber offenbar bereits Kenntnis und haben sich minutiös darauf vorbereitet.

## SEVEN URGENT ACTIONS TO PREPARE THE WORLD FOR HEALTH EMERGENCIES



### Heads of government must commit and invest.

Heads of government in every country must commit to preparedness by implementing their binding obligations under the International Health Regulations (IHR (2005). They must prioritize and dedicate domestic resources and recurrent spending for preparedness as an integral part of national and global security, universal health coverage and the Sustainable Development Goals (SDG).

#### **Progress indicator(s) by September 2020**

- All countries that have completed an assessment of their capacities by 1 July 2019 have developed a costed National Action Plan for Health Security (NAPHS), identified required resources and started to implement the plan.

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## Development assistance funders must create incentives and increase funding for preparedness.

Donors, international financing institutions, global funds and philanthropies must increase funding for the poorest and most vulnerable countries through development assistance for health and greater/earlier access to the United Nations Central Emergency Response Fund to close financing gaps for their national actions plans for health security as a joint responsibility and a global public good. Member states need to agree to an increase in WHO contributions for the financing of preparedness and response activities and must sustainably fund the WHO Contingency Fund for Emergencies, including the establishment of a replenishment scheme using funding from the revised World Bank Pandemic Emergency Financing Facility.

### **Progress indicator(s) by September 2020**

- WHO member states agree to an increase in contributions for preparedness at the Seventy-third World Health Assembly in 2020; and Member States, the World Bank and donors provide sustainable financing for the Contingency Fund for Emergencies to a level of US\$ 100 million annually.



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- WHO established the Research and Development (R&D) Blueprint to help organizations identify research needs and work with country partners to plan for and implement studies during epidemics (34).
- WHO Member States adopted the PIP Framework to improve pandemic influenza preparedness globally and support a more equitable response. Through the PIP Framework, WHO has supported countries financially and technically to improve certain essential public health capacities and established a virtual stockpile of pandemic influenza vaccines (currently estimated at more than 400 million doses). Global production capacity for influenza vaccines has increased to an estimated 6.4 billion doses (35).
- Bolstering pandemic influenza preparedness, the Global Influenza Surveillance and Response System has grown to 151 laboratories in 115 countries and has been commended repeatedly for timely identification, assessment and monitoring of influenza and other respiratory pathogens, including MERS and SARS.
- Funding for research has increased. While figures on R&D funding for epidemics are difficult to come by, studies show investment in research on neglected diseases rose by 7% between 2016 and 2017, representing a 10-year high. Over the last decade, national public-sector funding from low- and middle-income countries grew 17% (36). As of June 2019, CEPI has raised US\$ 750 million to develop vaccines to stop future epidemics (37).

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### Ultimate objectives:

The tools and systems needed to respond effectively to a fast-moving and lethal respiratory pathogen are in place: A universal influenza vaccine is effective and routinely used to protect the global population; new therapeutics and broad-spectrum antivirals are widely available to treat and reduce mortality from a range of viruses; novel pathogens are routinely identified and sequenced, and the sequences are shared on a globally accessible website. Distributed manufacturing of vaccines (including nucleic acid types) begins within days of obtaining the new sequences and effective vaccines are pre-tested and approved for use within weeks.

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Progress indicator(s) by September 2020

- The Secretary-General of the United Nations, with the Director-General of WHO and Under-Secretary-General for Humanitarian Affairs, strengthens coordination and identifies clear roles and responsibilities and timely triggers for a coordinated United Nations systemwide response for health emergencies in different countries and different health and humanitarian emergency contexts.
- The United Nations (including WHO) conducts at least two systemwide training and simulation exercises, including one covering the deliberate release of a lethal respiratory **pathogen**.
- WHO develops intermediate triggers to mobilize national, international and multilateral action early in outbreaks, to complement the existing mechanisms for later and more advanced stages of an outbreak under the IHR (2005).
- The Secretary General of the United Nations convenes a high-level dialogue with health, security and foreign affairs officials to determine how the world can address the threat of a lethal respiratory **pathogen** pandemic, as well as managing preparedness for disease outbreaks in complex, insecure contexts.

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## Von der Orchester- zur Generalprobe

Das ist sozusagen eine kleine Vorgesichte aus dem Jahr 2019 (September). Man könnte es als Orchesterproben bezeichnen, bevor es dann im Oktober 2019 zum allseits bekannten “Event 201” kam – zur Generalprobe.

- <https://multipolar-magazin.de/artikel/wurde-die-corona-krise-geplant>
- <https://centerforhealthsecurity.org/our-work/tabletop-exercises/event-201-pandemic-tabletop-exercise>
- <https://www.youtube.com/watch?v=AoLw-Q8X174>

Und nun zu den BAG-Protokollen ab Februar 2020:  
[Protokolle der Task Force Covid-19 des BAG \(admin.ch\)](#)

## 10. Februar 2020

Seit dem 5. Februar ist EIN Kind in Neuchâtel in Quarantäne. Mehr war nicht los in

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BAG

der Schweiz.

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