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UK Public Health Rapid Support Team

**UK Government's Public Health Support team for
Public Health Emergencies and outbreak response -
*how we do it.***

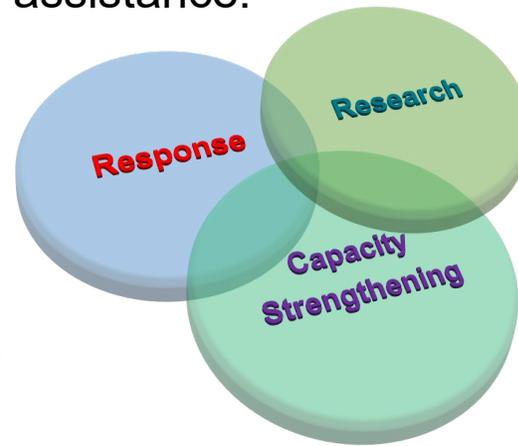
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UK Public Health Rapid Support Team



Funded by DHSC ODA, since 2016, UK-Govt's asset for technical assistance to PH emergencies. Partnership between UKHSA & LSHTM.

We partner with ODA eligible countries and multinational partners to support effective response to outbreaks before they develop into global health emergencies and can deploy public health specialists, over a range of technical disciplines, in response to requests for assistance.



Deployable public health disciplines:

- Epidemiology
- Microbiology
- Infection Prevention and Control
- Risk Communications & Community Engagement (RCCE) and Social Science
- Mental Health & Psychosocial Support (MHPSS)

Additional areas of expertise:

- Implementation Science
- Capacity Strengthening
- Monitoring, Evaluation and Learning
- Specialist research & project management, comms.
- Logistics and operational support

Recent and ongoing activities across the triple remit

Response

- **Gaza/OPTs** Epi support (surveillance & Health Operations) to UNWRA from Jordan
- **South Sudan:** Multiple Epi deployments to support WHO, with **Yellow fever and disease surveillance** in displaced population from Sudan.
- **Marburg virus:** Three people deployed, to **Rwanda** to support UNICEF/GoR
- **Dengue:** Bilateral Epi support to **Somaliland** MoHD
- **Cholera:**
 - **Zambia** Epi, IPC and Social Science support to ZNPHI;
 - **Sudan:** Incident Manager to WHO (from Egypt); and
 - Health Coordinator to UNICEF for **South Sudan**.
- **Mpox Clade 2b:** Bilateral Deployment of a team of three (RCCE, Epi and Clinical PH) to **South Africa**.
- **Mpox Clade 1b:** Bilateral deployment (Epi and IPC) to **Africa-CDC to support the continental IMST**; and IPC deployment to **Kenya** WHO, via GOARN.

Research

3-year Research plan contains peer reviewed portfolio of research projects, including:

- **Mental Health & Psychosocial Support** package for infectious disease outbreaks, pivoted to MHPSS Readiness to response to mpox in Uganda.
- **Epidemiological & clinical review of mpox (clade 2)** in **Nigeria** (Nigeria CDC and Oxford)
- **IPC** Briefing paper on priorities for **cleaning practices in resource-limited hospital settings**
- Operational research framework workshop with **Africa CDC**
- Research with KEMRI (**Kenya**) on the **impact of real-time sequencing in outbreak response mobile labs**.
- Research into **Marburg** virus prevalence in human and fruit bat populations in **Guinea** with Univ of Oxford

Capacity Strengthening

Over 50 activities, per year including:

- RST and **Africa CDC** AVoHC induction training in **Cameroon, Addis & Lusaka** and **AvoHC induction train the trainer training**.
- **Interregional Field Simulation Exercise (IFX)** of WHO Rapid Response Mobile Labs - mock deployment of our Mobile lab and Micro team, **Istanbul & Georgia**.
- **Ghana Community Protection, One Health SimEx** with WHO. With another planned this month for **Uganda**.
- **Health diplomacy in outbreak management** course
- **RCCE** Workshop in southern Africa and roll-out of **RQA assessment tool** developed during Cholera response.
- Provision of **SME/Technical Advice** to various partners' technical working groups, steering committees, e.g. **input to mpox Guidance**

Partnership is key to how we work, from the field to the global stage



UK-PHRST human resource

- **Workforce selection/technical expertise.**

UK-PHRST workforce are experienced technical experts, who work for the team full-time. Recruited by open and fair competition/recruitment.

Previous outbreak response/field experience is preferable, as is recognised post-grad training: PhD, FETP, BMS, etc.

Ex-domestic UK PH Workforce, Academia, ex-WHO, ex-MSF, ex-IFRC/NGOs, etc.

- **Surge capacity and core deployable team**

Core deployable team full-time roles, no competing priorities with ‘other work’.

Reservists working elsewhere in public health – bank/honorary contracts and agreements with employer.

Maintaining capacity in UK-PHRST

- **Building internal capacity**

Exchange with domestic UKHSA workforce.

Triple mandate

Professional networks and Communities of practise (GAORN DiSC, EPIET, Humanitarian advisors)

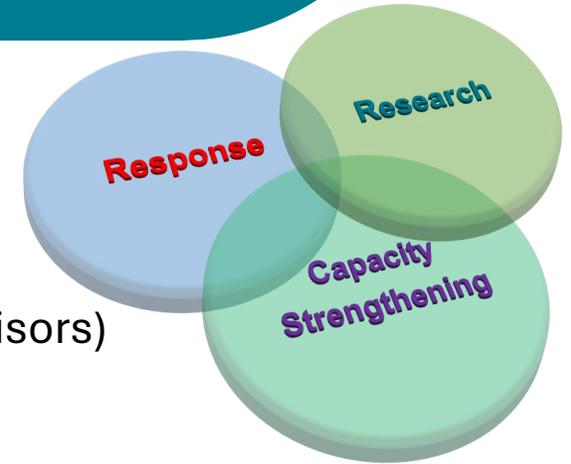
- **Preparedness/training initiatives for the team**

In-house residential ‘deployment training’: scenario based 3-4day training, transferrable (non-technical) skills.

= GOARN Tier 2 training.

UK-Govt SAFE+ training.

UNDDSS BSAFE,
GOARN and others



Deploying UK-PHRST

Multilateral (70%)

UK-EMT(10%)

Bilateral (20%)

In-country (UN) GOARN partner



Defined (ToRs) RFA to 320+ GOARN partners

UK-PHRST offer support in response to GOARN RFA and are selected by requester

UK-PHRST deploy as technical consultant to requesting agency country office/IMT

OSL:



Host country MoH or NPHI

Direct Govt → Govt request for assistance from MoH/NPHI to UK-PHRST

UK-PHRST discipline leads work up ToR for deployment with requester, confirm remit.

UK-PHRST deploy technical advisor into national response infrastructure



Foreign, Commonwealth & Development Office

Lessons identified – what works

- Ringfenced global staff – no ‘day job’.
- Surge capacity - reservists
- Equitable Partnerships and partner led “what do you need from us?” NOT “this is what we think you need”.
- Use of British Embassies and High Commissions to ‘facilitate’ requests for assistance using existing relationships in-country (MoH, NPHI, WHO country office etc).
- **Sustainable impact:** identifying research and capacity strengthening opportunities during deployment and building relationships to provide follow-up support and make a long-term difference – applying lessons learnt beyond the AAR.

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UK-PHRST Colleagues: Operational Team + technical teams

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Our partners and collaborators:



Foreign, Commonwealth & Development Office

