# Operational Framework for USAID Response to Infectious Disease Outbreaks

## An Additional Help for ADS Chapter 530

## INTRODUCTION

The U.S. Agency for International Development's (USAID) comprehensive, cross-sectoral approach to handling infectious disease outbreaks enables the Agency to provide timely, targeted support and strengthen local capacity when requested by partner-country governments. By leveraging USAID's well-established partnerships with the U.S. Government (USG) interagency and international, nongovernmental, and other organizations, the Agency is able to quickly mobilize and deploy resources effectively during outbreaks that exceed a country's capabilities and may also require an international emergency response.

The *Operational Framework for USAID Response to Infectious Disease Outbreaks*, hereinafter referred to as the "Operational Framework":

- Outlines when, how, and who USAID staff should notify in USAID/Washington (USAID/W) of outbreaks,

- Details how the Agency designates support leads and manages coordination in USAID/W for infectious disease outbreaks affecting human populations, and

- Briefly describes the role of all overseas Operating Units (OUs) for a response (see Appendix 2 for more information on USAID/W designees).

This document is not intended to address coordination at the country level. The Operational Framework is aligned with and in support of the USG Biological Incident Notification and Assessment (BINA) Protocol and the USG Playbook for Biological Incident Response.[1]

## NOTIFICATION

Monitoring outbreaks is a shared responsibility across USAID. Awareness of an event may originate with various stakeholders, both overseas and in Washington.[2] All USAID staff should stay abreast of local infectious disease outbreaks and notify **Outbreak@usaid.gov** when there is an outbreak that may require additional USG assistance.

Notification for outbreaks should pertain specifically to those that meet at least one of the following criteria:

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[1] When a BINA call results in an assessment of a Significant Biological Event, it activates the Playbook for Biological Incident Response (Playbook). The Playbook institutionalizes an immediate interagency response coordination structure at headquarters that is established within 24 to 48 hours of the BINA call.

[2] The Bureau for Global Health's Outbreak Response Team (ORT) proactively monitors alerts and events, and shares information with relevant USAID counterparts in Washington and overseas regarding outbreaks of concern.

1. Is in excess of what would normally be expected to occur locally (e.g. taking into account normal seasonal variation for endemic diseases);,

2. Threatens to spread rapidly within a country or across international borders,

3. Could rapidly overwhelm the local public health capacity, and/or

4. Requires a substantial surge in resources in order to meet country needs.

Following notification, the Outbreak Response Team (ORT)[3] lead or designated lead reaches out to the sender within 24 hours to better understand the situation, requests for assistance, potential gaps in USAID capacity to respond and where additional support, including from USAID/W and the USG interagency, may be needed. USAID/W considers various criteria to determine the level of support, including but not limited to: the geographic scope, severity, complexity, the level of international concern, and USG priority of the outbreak; additional capacity or resources to adequately respond; broader health system and humanitarian impacts; occurrence in a USAID or USG non-presence country; and assessment by partner agencies and international organizations[4]. USAID/W evaluates each outbreak on a case-by-case basis. USAID/W may re-evaluate outbreaks at any time for consideration of additional USG assistance as the outbreak profile evolves.

**NOTIFICATION EMAIL**

**Outbreak@usaid.gov** is a cross-bureau listserv for the Outbreak Working Group with representatives from the Bureau for Global Health (GH), Regional Bureaus, and the Bureau for Humanitarian Assistance (BHA).

Any USAID staff member can submit a notification. The Outbreak Response Team (ORT) lead or designated lead responds to the sender within 24 hours from the time the email was sent.

## DESIGNATION

Once USAID/W determines that an outbreak warrants additional support (i.e., technical, operational, and/or financial resources), USAID/W classifies the event under one of three USAID response systems: GH-supported, BHA-supported, or Agency Task Force-supported (Task Force-supported). These systems describe which OU or central structure has the overall responsibility for leading and managing coordination in USAID/W, with engagement and support from other USAID/W Bureaus and Independent Offices (B/IOs). Designation of a lead Bureau or an Agency Task Force

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[3] USAID established a dedicated Outbreak Response Team (ORT) in the Emerging Threats Division in the Office of Infectious Disease in GH to expand the Agency's capacity to respond to multiple infectious disease outbreaks simultaneously and improve outbreak response coordination. The ORT is responsible for tracking and coordinating responses ranging from small, contained outbreaks to multi-country outbreaks to pandemics.

[4] A particular designation, such as a Public Health Emergency of International Concern (PHEIC) declaration by the World Health Organization, does not automatically result in any particular USAID/W or USG supported response option.

does not supersede the delegations of authority of the Bureaus to carry out programs in their respective areas of responsibility, including committing or obligating funds. Additional information on each response system is detailed below.

A response system designation is intended to centralize coordination and enable a rapid and efficient response in support of all "overseas OUs," including USAID Missions, Country Offices, and regional platforms, as well as embassies without USAID presence. Throughout an outbreak event, the response posture may transition from one response system to another if the outbreak context, profile, or level of USG involvement changes. If an outbreak warrants additional support from USAID/W, USAID/W coordinates with overseas OUs to identify potential funding sources that can be used to support the response with greatest efficiency, within appropriated funding and OU allocations, and consistent with the appropriations law. For USAID/W notified outbreaks that do not warrant additional support, USAID/W closely monitors the event and re-engages when necessary.

In addition to a GH-, BHA-, or Task Force-supported response, the USAID Administrator may activate an Administrator's Crisis Action Team (ACAT) for a high level outbreak or one of corporate significance[5] at the recommendation of Bureau leadership, per the process outlined in the USAID Senior Staff Protocols for High-Level Crises.[6]

## *GH-SUPPORTED RESPONSE FOR USAID/W*

Under a GH-supported response, GH serves as the lead coordinator for USAID/W. GH coordinates the USAID/W response in consultation with the overseas OUs and in collaboration with the Regional Bureau(s) to support the in-country response with technical, operational, and/or financial resources as determined. GH leads USAID/W engagement with the USG interagency[7] and coordinates with donors, multilateral organizations, and regional health institutions at a headquarters level. At the country level, where there is USAID presence, the Mission leads the in-country response.[8] If there is no USAID presence, the lead is determined in consultation with the Regional Mission and the US Ambassador for the in-country response. In both cases, while GH leads the broader USAID/W response coordination, all actions and decisions at USAID/W are made in consultation with the in-country response lead.

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[5] Corporate significance refers to an event that might trigger actions from multiple entities within USAID or USG. Corporate refers to USAID or other USG agencies as a whole.

[6] The Administrator's Crisis Action Team (ACAT) is distinct from an Agency Task Force which is described below. While an ACAT may serve in an advisory role, it would not lead coordination in Washington.

[7] To learn more about the interagency response, please refer to USG Biological Incident Notification and Assessment (BINA) Protocol and USG Playbook for Biological Incident Response.

[8] In most cases where a response is in a country(ies) without a USAID Mission or Country/Office, the Regional Mission overseeing USAID support in the country assumes the equivalent role of the USAID Mission or Country Office as the in-country response lead.

## BUREAU FOR GLOBAL HEALTH MANAGEMENT AND LEADERSHIP STRUCTURE FOR OUTBREAK RESPONSE

USAID established a dedicated ORT in GH's Office of Infectious Disease, Emerging Threats Division to expand the Agency's capacity to respond to multiple infectious disease outbreaks simultaneously and improve outbreak response coordination. The ORT is responsible for tracking and coordinating responses ranging from small, contained outbreaks to multi-country outbreaks to pandemics. Depending on the outbreak and severity, other GH Offices may support an overseas OU during an outbreak, such as the Office of Maternal and Child Health and Nutrition, other teams within the Office of Infectious Disease, or the Office of Country Support.

In-country response needs may be met through: use or redirection of overseas OU bilateral health programming where applicable, use of centrally-managed program funds, deployment of surge staff to support overseas OUs, provision of personal protective equipment from the GH emergency stockpile, and/or other assistance as needed. If available, GH or the overseas OU can program health funding (including but not limited to Global Health Programs funds, Economic Support Funds, etc.) and other accessible funding sources to support immediate response needs. If a more expansive response is warranted, GH can mobilize additional resources from the Emergency Reserve Fund (ERF) if the crisis meets the requirements to access such funds, or emergency supplemental funds if appropriated by Congress.

In some circumstances, GH and Regional Bureau(s) may not have all of the requisite capacities and resources to respond rapidly and effectively. In those instances, additional support from other B/IOs, in Washington or in-country, may be needed to effectively respond depending on the circumstances of the outbreak. GH consults other parts of the Agency to request support to fill in operational or technical gaps appropriate to the B/IO mandate, resource availability, Agency priorities, and specific to the outbreak context and type of response that is warranted. Depending on how the outbreak profile progresses and changing response needs, the response may remain under the GH-supported response or shift to the BHA-supported or Agency Task Force-supported response. In a context where there is a geographic area of a country supported by BHA due to a humanitarian situation designated by a declaration of humanitarian need, GH continues to support the overall outbreak response and collaborates with BHA, as appropriate. BHA prioritizes outbreak readiness within their awards with health, and water and sanitation implementing partners enabling them to respond to outbreaks in their geographic areas of focus based on needs and their capacities.

## BHA-SUPPORTED RESPONSE FOR USAID/W AND USG

When an outbreak progresses to crisis levels characterized by broad societal impacts, excessive mortality, multi-sector needs, disrupted national systems, and a general state of emergency, BHA may be asked to support. If BHA does not already have a presence in a country, a declaration of humanitarian need would be required to enable BHA to work within that country. The BHA-supported response is intended to address the requirements for additional resources and response needs, as well as coordination with the international humanitarian system and across the USG. In humanitarian settings, BHA assumes that due to collapses in health infrastructure and environmental factors, outbreaks are likely to occur. While BHA implementing partners may respond with disease appropriate control measures or case management, BHA would likely still defer to GH for leading outbreak coordination unless the outbreak is of greater significance with a high potential for mortality or global spread.

Under a BHA-supported response, BHA serves as the lead coordinator for USAID and USG response efforts, in coordination with GH, Regional Bureaus, and overseas OUs. BHA's Response Management System (RMS)[9] guides the development of an incident-specific response structure which frequently involves establishing a Washington-based Response Management Team (RMT) with technical support from relevant USG agencies — including from within USAID. Deployment of a Disaster Assistance Response Team (DART) or other operational and technical support is commensurate with response needs and coordination requirements. Where a DART deploys, the DART is the in-country lead for the USG response and may include an overseas OU liaison or a health office liaison from the country OU. If a DART is not necessary, the overseas OU would lead in-country with the support of BHA in Washington. BHA uses established communications processes and procedures to manage the emergency and coordinate the emergency response, including regular communication and information sharing about the humanitarian situation and response activities in affected countries. Depending on how the situation progresses, the response may remain under the BHA-supported response or shift to the GH-supported or Agency Task Force-supported response (e.g. if the outbreak profile has evolved).

## AGENCY TASK FORCE-SUPPORTED RESPONSE FOR USAID/W

In the event of an unusually complex or large-scale outbreak such as a pandemic that exceeds the abilities of Bureaus to coordinate normally, the USAID Administrator may activate a USAID Task Force. A Task Force is a whole-of-agency response structure led by senior leadership to coordinate intra- and interagency response activities (see **ADS 112, Standard Operating Procedures for Task Forces**). A Task Force is an integrated platform that is responsible for Agency-level strategic oversight, coordination, centralized communication, and decision making directly related to a crisis. A Task

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[9] Please refer to ADS 251: International Humanitarian Response for additional information regarding the Response Management System.

Force is not intended to replace the programmatic and operational response of B/IOs and overseas OUs. In the event of an outbreak, the day-to-day planning and implementation of Task Force-related functions remains within the relevant B/IOs and their existing response structures, with shared accountability to the Task Force. The Administrator may appoint co-leads for an Agency Task Force, to include an Executive Director and leadership from a B/IO with primary equities and an institutional role in decision-making.

When activated, a Task Force oversees or delegates a system to manage requests for in-country assistance and communicate that process to Agency employees. Overseas OUs are responsible for providing situational updates to the Task Force, including overseas OU operational status, staffing needs, resource requirements, updates on overseas OU activities, impact on programs, and identifying technical and subject matter experts who can serve as virtual members of the Task Force when relevant.

Depending on how the situation progresses, the response may remain under the Agency Task Force-supported response or shift to the BHA-supported or GH-supported response (e.g. if the outbreak profile has evolved).

## APPENDICES

# APPENDIX 1: HIGH-LEVEL OVERVIEW OF PROCESS FLOW

### Awareness
USAID staff (overseas/in Washington) become aware of outbreak that may require additional USG assistance

### Notification
USAID staff will email Outbreak@usaid.gov with notification of the event

### Follow-up
The ORT Lead or designate lead will follow up with the overseas OU within 24 hours of receipt to better understand the event situation

### Evaluation
USAID/W will evaluate the outbreak event and determine if it warrants additional support from USAID/W in consultation with the overseas OU

### Determination
If determined yes, the outbreak will fall under either the GH-supported, BHA-supported, or Agency Task Force-supported response system*

*USAID/W regularly monitors and reevaluates notified outbreaks to inform potential programming shifts and determine additional USG assistance needs*

*Throughout an outbreak event, the response posture may transition from one response system to another if the outbreak context, profile or level of USG involvement changes.*

## APPENDIX 2: HIGH-LEVEL SUMMARY OF RESPONSE DESIGNATIONS

| USAID Washington Response System^ | General Circumstances | Response Coordination | | Role of the overseas OU |
| --- | --- | --- | --- | --- |
| | | USAID Washington Designee | USAID Coordinating Entities | |
| GH-supported Response | If determined the outbreak warrants additional support from USAID/W, including but not limited to technical advice, financial resources, or surge staff, and does not require a BHA- or Agency Task Force-supported response. | GH | Regional Bureaus, overseas OUs, ACAT if activated, BHA when active in-country, and other B/IOs and the interagency as relevant. | In presence and non-presence USAID countries, the overseas OU leads in country response, in coordination and collaboration with GH. All actions and decisions at USAID/W are made in consultation with the overseas OU response lead. |
| BHA-supported Response | When an outbreak progresses to crisis levels characterized by broad societal impacts, excessive mortality, multi-sector needs, disrupted national systems, and a general state of emergency, BHA may be asked to support. BHA may also lead when an outbreak of significance occurs in a pre-established humanitarian setting. | BHA | GH, Regional Bureaus, overseas OUs, ACAT if activated, and other B/IOs and the interagency, as relevant. | If a DART is activated, the DART leads but may integrate overseas OUs or health office liaisons to support the response. If a DART is not active, the overseas OU would lead in-country and liaise with BHA. |
| Agency Task Force-supported Response | If the outbreak is unusually complex or large-scale like a pandemic, exceeds the abilities of Bureaus to coordinate normally, and requires significant interagency engagement. | Agency Task Force | Whole of Agency | The overseas OU is responsible for providing situational updates to the Task Force, updates on OU activities, impact on programs, and identifying technical and subject matter experts who can serve as virtual members of the Task Force, when relevant. |

^*These systems describe which operating unit or central structure has the overall responsibility for leading and managing coordination in USAID Washington, with engagement and support from other B/IOs.*