



HM Treasury

Treasury Minutes

**Government response on the Thirty Ninth
report from the Committee of Public Accounts:
Session 2014-15**



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39th Report UK's response to the outbreak of Ebola virus disease in West Africa

Presented to Parliament by the Economic Secretary to the Treasury by Command of Her Majesty

Cm 9051

March 2015

TREASURY MINUTES DATED 23 MARCH 2015 ON THE THIRTY NINTH REPORT
FROM THE COMMITTEE OF PUBLIC ACCOUNTS: SESSION 2014-15

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Thirty Ninth Report of Session 2014-15

Department for International Development

The UK's Response to the outbreak of Ebola Virus Disease in West Africa

Summary from the Committee

The UK government has committed a package of direct support of at least £230 million to help contain, control and treat Ebola in West Africa. The department is distributing this money to other departments such as the Ministry of Defence, international institutions and non-governmental organisations. The UK package focuses predominantly on Sierra Leone, and includes support for the construction of treatment facilities, the provision of over 700 treatment beds, and the training and management of burial teams. The first UK-constructed treatment centre opened in November 2014 in Kerry Town, Sierra Leone, and is managed by Save the Children under contract with the department.

The World Health Organisation's role is to provide leadership within the international community on matters critical to health and to engage in partnerships where joint action is needed. The international response to the Ebola outbreak also includes other United Nations agencies, international finance institutions, NGOs and bilateral donors. At country level, the governments of the USA, the UK and France are leading this response in Liberia, Sierra Leone and Guinea respectively.

The Committee took evidence, on 11 December 2014, from the Department for International Development and from two of the department's delivery partners, Save the Children, and the International Rescue Committee. The Committee published its report on 11 February 2015. This is the Government response to the Committee's report.

This response was originally indexed in Treasury Minutes Cm 9033 dated 19 March 2015.

Background resources

- PAC report: - *The UK's response to the outbreak of Ebola Virus Disease in West Africa* - Session 2014-15 (HC 868)

1: Committee of Public Accounts conclusion:

The initial response of the international community to the Ebola outbreak in West Africa was totally inadequate.

Recommendation:

The department should take a lead role in the international community's efforts to learn lessons from this Ebola outbreak. It should also seek assurances that World Health Organisation staff in all of its regions are sufficiently capable to identify and respond to future emerging public health emergencies.

1.1 The Government agrees with the Committee's recommendation.

Target implementation date: Spring 2016.

1.2 The department will continue to play a lead role in international efforts to learn lessons from the outbreak. A robust process across the United Nations (UN) system and the international community must identify lessons learned from the outbreak at the appropriate time. Lesson learning will ensure that the department better understands the risk, global alerts and frontline response systems, and skills needed to tackle other future disease threats.

1.3 The UK played a leading role in securing an ambitious resolution on Ebola lessons learned and World Health Organisation (WHO) reform during the January 2015 WHO Special Session. This resolution intends to increase WHO's capacity and reinforces its Director General's authority at HQ, regional and country office level to prevent, detect and respond to public health emergencies. It creates a public health reserve workforce, establishes in principle a contingency fund, accelerates

WHO's efforts on human resources reform, and mandates its Director General to ensure that funding can be reallocated and disbursed speedily to areas in need during an emergency.

1.4 Working with the Department of Health, the department is using the UK's membership of the Executive Board (2014-17) as an opportunity to obtain further progress on human resources reform by December 2015. Both departments will also work to ensure that, by May 2015, the World Health Assembly agrees on options to establish the contingency fund and other reform measures.

2: Committee of Public Accounts conclusion:

The department was far too slow to react to the developing situation, missing an opportunity to contain quickly the outbreak of Ebola in at least Sierra Leone.

Recommendation:

The department should make sure it has procedures and protocols in place which allow a timely and pre-emptive response to developing public health emergencies in countries which receive UK Aid.

2.1 The Government agrees with the Committee's recommendation.

Target implementation date: December 2015.

2.2 The department has standard operating procedures and protocols in place for use in the event of humanitarian emergencies, including public health emergencies. These include a pool of deployable experts, pre-positioned stocks and transport arrangements. Through its dedicated humanitarian operations team, the department is able to swiftly mobilise additional logistical capabilities and access humanitarian emergency supplies from the department's stockpiles in the UK and Dubai. This stockpile is currently being expanded to meet the needs of up to 75,000 beneficiaries and emergency public health needs are being considered as part of this uplift.

2.3 The department is actively looking at agreeing options, by April 2015, for improving early warning and early action; including for public health and conflict-related emergencies. The department is also in discussions with the UN, Red Cross Movement and Non-Governmental Organisation (NGO) partners to strengthen information exchange on humanitarian issues.

2.4 For countries at risk of disasters, the department has embedded disaster resilience and preparedness into its bilateral country programmes.

2.5 The department is supporting the Department of Health to investigate options, by spring 2015, to build UK expertise which will enable the UK to provide further global leadership on health emergencies and proactively contribute to rapid response capacity and capability.

3: Committee of Public Accounts conclusion:

The Department lacked the experience and capability fully to respond to the outbreak.

Recommendation:

A capability gap currently exists in building and running specialist facilities necessary to deal with outbreaks such as this. The department should create and maintain a detailed contingency plan for sudden onset medical emergencies to ensure that it can quickly deploy its own and partners' staff and equipment through a structured intervention process.

3.1 The Government agrees with the Committee's recommendation.

Target implementation date: Autumn 2016.

3.2 The Ebola outbreak in Sierra Leone has been a unique humanitarian challenge. The department is working to ensure that by April 2015, under its humanitarian response and contingency planning processes, it has access to the personnel and infrastructure needed to mount similar humanitarian responses. By autumn 2016 the department will work to establish a Humanitarian Response Engineering Platform. The Ministry of Defence has agreed the department can request support from military engineering, logistics and medical assets. The UK is also part of the International

Humanitarian Partnership, which can access European civil contingency expertise and funding to provide life support arrangements for aid workers in emergencies.

3.3 The UK International Emergency Trauma Register (UKIETR), a register of trained personnel from the National Health Service available to be deployed globally at short notice, provided UK medical expertise for the Ebola response. The department is in discussions with UKIETR partners to review and update agreements and UKIETR capabilities, by December 2015, drawing on lessons learned from the Ebola response.

3.4 In responding to the outbreak, the department worked with new partners and organisations and accordingly now has a better understanding of organisational capability gaps. It will be important to learn lessons and retain knowledge of partners' skills to build improved capability for the future.

4: Committee of Public Accounts conclusion:

The lack of health infrastructure in Sierra Leone inhibited a quicker response to the crisis.

Recommendation:

The department should prioritise investment in local health infrastructure of developing countries in receipt of UK Aid so that there is a better capability to respond quickly to emerging public health emergencies. It should also ensure it is doing all it can to support the ability of developing countries to prevent similar disasters in the future.

4.1 The Government agrees with the Committee's recommendation.

Target implementation date: December 2015

4.2 The department's resource allocation process for 2015-16 and beyond identified the barriers to poverty reduction. This took into account the UK's comparative advantage and actions of others, including other donors and governments. Against the background of changing need, challenges and opportunities in the developing world, its portfolio is evolving to ensure that it does the right things, in the right places, in the right ways. In the current financial year, the health sector will receive over £1.6 billion, accounting for over 16% of DFID's overall spend,

4.3 By the end of 2015, the department will develop a health systems strengthening framework to inform future investments in local health infrastructure. This will help ensure that future investments contribute to the development of systems that are better able to prevent and prepare for health risks and shocks, and rapidly respond to disease outbreaks and other public health emergencies. The framework will include components of a health system essential for effective emergency preparedness and a timely response, including human resources, access to medicines and other health technologies and health information systems, surveillance systems and data sharing.

4.4 By summer 2015, the department will work alongside the Department of Health and the WHO to identify risks and priorities on the full implementation of International Health Regulations in the department's priority countries. By autumn 2015, the department will identify opportunities to mobilise UK technical capacity to build local surveillance capability and decision-making systems.

4.5 The department will work closely with other departments, in particular the Department of Health, on the Global Health Security Agenda. This aims to better understand the risks in specific countries and regions and prepare for them by improving systems and approaches to dealing with health threats.

5: Committee of Public Accounts conclusion:

Political decisions with no basis in scientific fact hampered the response of the international community, NGOs and the department to the growing crisis and led to increased cost in dealing with the outbreak.

Recommendation:

There is no scientific justification for the UK Government's decision to prevent direct flights to the affected region from the UK, which has likely increased the cost of dealing with the outbreak. Licences to fly to West Africa should be restored as soon as possible.

5.1 The Government disagrees with the Committee's recommendation.

5.2 This is a cross-government issue and not a Department for International Development lead. The response reflects the current Government position.

5.3 In responding to the Ebola outbreak in West Africa, the Government's first priority is the safety of the British people. The decision not to permit direct scheduled air services between Sierra Leone and the UK is part of the Government's overall strategy to mitigate the risk of Ebola entering the UK and a change to this strategy will only be possible once the Government is content that the risk to the British public has reduced sufficiently. On this basis the Government's strategy remains unchanged at this time.

5.4 Travel to Sierra Leone continues to be possible through a number of routes, including indirect commercial and military, which have been used by the NGO community to deliver the aid effort. The department has consulted with NGOs on these arrangements.

5.5 The Government will continue to work hand in hand with its partners to ensure that both travel of volunteers and operational needs continue to be met. Should the assessment change sufficiently for the Government to become content for direct scheduled services to resume, it would then be for the airlines to decide whether and when they wished to start operations, subject to them requesting the appropriate operating permissions from the relevant authorities. The Government will keep the situation under review.

6: Committee of Public Accounts conclusion:

There are clear lessons to learn from the department's response to the Ebola outbreak.

Recommendation:

Once the Ebola outbreak is brought under control, the department should undertake and publish a rigorous evaluation of all aspects of the UK's response to the crisis. The evaluation should make practical recommendations as to the steps the department, other government bodies, the international community and non-governmental organisations should take to prepare for future crises of this type.

6.1 The Government agrees with the Committee's recommendation.

Target implementation date: December 2015.

6.2 The department recognises that numerous government departments, the private sector, NGOs and individual volunteers have been involved in the UK's response to Ebola, domestically and internationally. In March 2015, a cross-Department for International Development working group will lead a process of lesson-learning across the department. By June 2015, the department will commission an independent rigorous evaluation of its overall response; as long as the outbreak has been brought under control. This will focus on the impact of its work in Sierra Leone and the region. Other departments will focus on the domestic aspects of the response. By May 2015, the department will set up a steering committee to work with other government departments, involved in the UK's response to Ebola, to draw out wider lessons. Relevant departments are already capturing all relevant data and information as the disease and UK efforts both decline from their peak.

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