

Form an implementation team

1. Put a team together

The implementation team should include:

- A **coordinating epidemiologist** who also functions as the project coordinator with overall responsibility for technical competence, project implementation, and communication with focal points
- National epidemiologist(s)** specializing in communicable diseases and laboratory to provide input on adherence to national standards, insight into local epidemiology, and a link with laboratory services
- NGO health coordinators** for technical input and advice on real-time implementation (typically including representatives from organizations supporting primary health care including International Federation of the Red Cross and Red Crescent, International Rescue Committee, Médecins Sans Frontières, Save the Children, etc.)
- Data management lead** responsible for the design or adaptation of a data management system to merge IBS and EBS reporting and verification functions into a functional data hierarchy
- Application specialist** with expertise in developing and implementing real-time electronic surveillance systems
- Technical advisor(s)** from the WHO/HQ/HEP to backstop for technical assistance in surveillance and electronic data collection.

The implementation team thus represents the needs of not only WHO and the MoH, but also humanitarian partners who will input into the system. The team should meet frequently throughout the design, development, training, and implementation phases to ensure technical coherence in the approach, and smooth implementation among the different organizations represented.