

Feedback on the ECDC project “Updating Core Competencies in Applied Infectious Disease Epidemiology” from the EPIET Alumni Network

27 October 2021

To: Head of the ECDC Public Health Training Section - Carmen Varela Santos
To: Jeanine Pommier - leading the UCCAIDE Project

Cc: TSF members and observers
Cc: National Focal Points for Training and alternates
Cc: Scientific Coordinators
Cc: the UCCAIDE steering group

Prof John Middleton, ASPHER President; **Prof Mary Codd**, University College Dublin; **Dr Arnold Bosman**, Transmissible BV, Netherlands; **Prof Kasia Czabanoskwa**, Maastricht University; **Prof Nadav Davidovitch**, Ben Gurion University, Israel; **Prof Ralf Reintjes**, Hamburg University of Applied Sciences; **Prof Darren Shickle**, University of Leeds; **Prof Patrick Wall**, University College Dublin; **Dr Robert Otok** and **Ms. Lore Leighton**, ASPHER Secretariat; **Ms Julia Barry**, **Mr Karl Conyard** and **Dr. Shiraz Syed**, Project Support Team, University College Dublin

Dear colleagues,

The EPIET Alumni Network (EAN) was approached by ASPHER to distribute their online survey on the updated core competencies for mid-career field epidemiologists to EAN members. We value that EAN members have the opportunity to give input into a project that touches the core of our profession and may be used by many of us in the future. Many of our members have provided detailed feedback via the online survey. With this letter, the EAN board shares a consolidated view on core competencies for European Field Epidemiology in the next decade.

The current core competencies document still lacks clarity about how these competencies will be used. Several national and international public health institutions are now updating their frameworks, for example by framing these in the One Health context. Therefore, an EU-led approach to this work is very welcome, but should articulate clear expectations about future use. For example, a competency framework for mid-career field epidemiologists could:

- Inform curricula of professional training programmes targeted at operational/field epidemiologists (FETPs) and public health microbiologists;
- Inform curricula of academic programmes focussed on public health;
- Provide a tool for international alignment of credentials and competencies for positions
- Be used as a hiring and assessment tool (job description);
- Support learning and development pathways for junior and mid-career epidemiologists
- Be applied for the external accreditation of FETPs and other related programmes.

During the current pandemic, we have observed epidemiologists with diverse credentials speaking on scientific and operational issues. We believe it is critical that a competency framework such as this will help to distinguish between the roles and competencies of academic and operational/ field epidemiologists working in infectious diseases and public health. Field epidemiologists work in applied public health environments. While their roles encompass epidemiological research, they are primarily involved in essential public health operations, such as surveillance activities and outbreak investigations, with a focus on translating field evidence to public health policy and practice.

A considerable amount of the currently suggested competencies are more fitting for managerial roles in public health. Although field epidemiologists frequently rise to these positions, mid-career field epidemiologists are likely to be deemed useful in their own capacity as professionals who demonstrate competencies that are not exclusively managerial. We suggest that ECDC considers differentiating between generic public health competencies (among which managerial tasks) and core competencies specific for intervention epidemiology. In the latter category, managerial competencies certainly belong, yet should be specific for managing processes and teams in crisis response situations.

The above comment is an example of a more generic concern by our EAN members, namely that the survey does not focus on the CORE competencies of a field epidemiologist. In addition, it was felt that this competency set conveys the message that a mid-career field epidemiologist should be able to “do everything”. Our professional experiences have shown that one of the most important competencies of a field epidemiologist is to be part of an interdisciplinary team and understand how different disciplines lead to more successful interventions. In such a context, the field epidemiologist is not expected to cover all these competencies independently, but to add value in the collaborative setting.

Field epidemiologists typically interact with other professionals, e.g. clinicians, anthropologists, statisticians, disease modellers, public health microbiologists, communication specialists, public health management, and policy makers. Leading such collaboration is, in our view, a possibility for an epidemiologist, but not necessary. Therefore the ability to self-organise work is perhaps more specific to field epidemiology, than management in the classic sense.

We welcome the survey’s inclusion of multidisciplinary competencies, but would suggest that these be explicitly grouped together, or that the wording is adapted to demonstrate a desired behaviour, e.g. add terms such as “collaborate with ABC”, “exchange with XYZ”, “support LMN” in order to emphasize that the epidemiologists do not have to do everything on their own and alone.

The survey’s use of a scale from “very important” to “not important at all” for each of the competencies listed made it difficult to opt for an appropriate answer. Certain competencies can be important yet might not be “core” to a mid-career field epidemiologist.

Is it possible to consider framing the competencies as core (or required), desirable, and specialist?

We feel that a network-discussion on what would be considered core competencies (ie epidemiological methods) vs specialization specific competencies would be very helpful at this stage, before ECDC decides on the definitive set of competencies for the next decade. This should preferably be done with inclusion of the Training Site Forum and the National Focal Points for Training, in a separate consultation. The EAN Board would be delighted to participate in such a meeting.

Signatures - on behalf of the EPIET Alumni Network:

Amrish Baidjoe, MSc, PhD., current EAN board president, EUPHEM C2015

Stine Nielsen, current vice-president of the EAN board, EPIET C2008.

Amy Mikhail, current EAN board member, EUPHEM C2012, and former UK FETP scientific coordinator

Anna Maisa, current EAN board member, EPIET C2016

Timothee Dub, current EAN board member, EPIET C2017

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