

Guideline: Administrative & Logistic Arrangement in Supporting The Joint Multi-Sectoral Outbreak Investigation & Response in ASEAN

I. Introduction

Emerging infectious diseases respect no boundaries. Most of the known emerging diseases in the past years have emerged from the Asian region, and Avian Influenza has become regional in its course, with a potential for global pandemic. This calls for a regional response, and calls not only for national preparedness but a regional preparedness.

The leaders of the ASEAN Plus Three Countries have signed numerous documents (agreements, declarations) such as 'Declaration of the 8th ASEAN Health Ministers' Meeting: ASEAN Unity in Health Emergencies' regarding information sharing and assisting during times of crises. In the Declaration of the 8th ASEAN Health Ministers' Meeting, the Health Ministers of the ASEAN Member States had committed to:

1. Strengthening existing capabilities in each of our countries to prepare for these emergencies, by allocating necessary resources for early warning and rapid response to disease outbreaks. We realize that any effort to combat transboundary health emergencies must involve close cooperation among countries
2. Leading national and regional responses in building capacity for disease control. To this end, we shall build up strong national and regional multilevel, multi sectoral response teams and establish early warning and reporting mechanisms against potential epidemics. This includes information gathering and sharing, investigation, verification and appropriate response.

Clear guidelines and protocols either in the form of guidelines for sectors or for countries in the case of a multicountry response are however lacking to bring forward the commitments of the Health Ministers regarding mounting an effective joint outbreak investigation and response.

These minimum standards for a joint multisectoral outbreak investigation and response are meant to act as a guide/ reference document for the countries in coordinating administrative and logistical procedures in order that a clear, effective, coordinated, timely response can be mounted, resulting in containment of an outbreak before propagating into one that becomes an international concern.

It is important to recognize that the standards take into account of not only professional and technical issues but also important administrative issues- that if not

properly planned and addressed in advance can significantly delay the response to the incursion of an emerging infectious disease. Rapid response within the shortest possible time is at the heart of a country's obligations under the International Health Regulations (IHR 2005).

II. Objective

The goal of the minimum standards for joint multisectoral outbreak investigation and response is to strengthen joint outbreak investigation and response by providing guidelines/ protocols for each aspect of the investigation and response and the role of different sectors involved that need to collaborate in an efficient and sufficient manner to mount a timely and effective investigation and response.

III. Components

The Minimum Standards is subdivided into three components as follows:

- a. Sharing of information for rapid investigation and response;
- b. Primary response; and
- c. Joint outbreak investigation and response

IV. Component 1: Sharing of Information for Rapid Investigation and Response

This component deals with the sharing of information of an outbreak to those in the neighboring countries or any country that could be of concern, in order that an effective investigation and/or response could be employed in that country as necessary. The sharing of information can be done on an informal basis and/ or formal basis. Depending on the magnitude of the outbreak, this sharing of information may or may not require primary response in the neighboring or concerned country or a joint investigation and response, the action to be undertaken will be at the discretion of the recipient of the information. This sharing of information also assists in fulfilling the obligation under the International Health Regulations (IHR2005).

A. INFORMAL sharing of information for rapid investigation and response

This informal sharing of information between countries within the region is meant to lead to an appropriate primary investigation and response if necessary. This informal sharing of information relates to diseases of potential public health importance, and should relate to the specifics of the outbreak and the initial action already undertaken.

Sharing of information can be by several means such as telephone calls, text messaging, email or facsimile.

Each country coordinator/ decision maker/ communication focal point assigned for that country needs to inform the coordinator, decision maker, or communication focal point of the neighboring country/ country concerned:

- a. At the national level, IHR Focal Point/ ASEAN Plus Three Communication Focal Point shall be responsible, and the list of the focal points shared with the counterparts of the neighbouring/ concerned countries, and updated every 6 months through the website (ASEAN PlusThree EID website).
- b. At the level of primary response (province or regional depending on country), a focal point for sharing of information should be assigned, this person should preferably be the leader of the core rapid response team, and the list shared with the counterparts of the neighbouring countries (as appropriate, and as agreed between the bordering countries).

B. FORMAL information sharing

Every action should be taken to ensure that information is shared in a timely manner with those countries that may be affected. The formal information sharing should be done by an official letter and a narrative report, between the Ministries/departments of Health.

The IHR Focal Point/ ASEAN Plus Three Communication Focal Point shall be responsible for formal information sharing. The National broadcasters of the ASEAN Member States shall establish a mechanism, in consultation with the IHR Focal Points/ ASEAN Communication Focal Points to transmit any breaking news of any infectious disease outbreaks in the respective countries.

V. Component 2: Primary Response

The Primary Response includes rapid assessment and response to any unusual/ unexpected event that may be considered as a potential threat to public health. The level (province/ district/ township) who will be responsible for the primary response should be determined within the country. The primary response should be carried out by the rapid response team.

1. Role of Rapid Response Team

- a. Conduct primary assessment and response as per the country's protocol/ guideline, that include:

- i. Descriptive analysis, collecting samples, assessing the magnitude of the outbreak, coordinating for laboratory testing (either within the same country or in the neighboring country). Health education of the communities including dissemination and announcement of necessary information for appropriate action by the community in the concerned area. Coordinating for case management Containment of outbreak coordinating with Local Authorities Reporting to the National level.
 - ii. Request for assistance from national level or neighboring country based on initial assessment. Share information (see section IV A and B) directly, as permitted, or through focal point at national level to the counterpart of the neighboring country.
2. Administrative arrangements
 - a. In the case of an outbreak in a border area, when an affected¹ country requests a neighbor country to conduct a joint primary response, there should be agreed procedures in place that should facilitate the entry of assisting response team.
3. Logistics arrangements
 - a. Logistics (such as medical supplies, transport- car, motorbike, boat, communication equipment required in the rapid response) should be allowed to enter the Host Country² through border crossings. There needs to be agreed procedures between the province levels or central level.
 - b. The Host Country should facilitate the assisting team with necessary coordination and movement with regard to transport in- country, accommodation, and communication for the duration of the stay to assist with the response. Assisting Country should also find the ways and means for necessary logistics arrangement.
 - c. All official team members should be trained and be familiar with all operating procedures and protocols involved in primary response.

VI. Component 3: Joint Outbreak Investigation and Response

Joint outbreak investigation and response comes into play when one country requests the assistance of another country to assist in the outbreak investigation and response. The Host Country is the lead coordinator of all responses. The joint outbreak investigation and response is appropriate to: Reduce the public health threat of unusual/ unexpected even from spreading to neighboring countries Stop the cross

border/ international spread of the outbreak Provide technical support and learning opportunities.

1. NATIONAL RESPONSE TEAM

National response team refers to the response team assembled from the national level, who will assist the rapid response team at the local level.

For a joint outbreak investigation and response, the following is required for a national response team:

- a. Coordinator/ Supervisor at National level (who may be director of epidemiology, director of Centre of Disease Control Division, etc, depending on the nature of the event and the country).
- b. Team members- comprising of epidemiologist, clinician, laboratory technician, veterinarian, environmental health officer, administrator/logistic officer, public health officer, infection control officer, communication officer, one of whom is designated as the team leader of the national response team in the field.

A. Role of National Response Team

- a. Role of Coordinator/Supervisor
 - Share information (informal) to the counterpart (IHR Focal Point) of the neighboring/ assisting countries, as permitted.
 - Organize and coordinate the national and local/rapid response teams including assigning the role of the team members.
 - Organize and coordinate with the relevant ministries for the administrative and logistics support of the national team and assisting teams before and during deployment.
 - Coordinate with technical agencies such as WHO and other partners for technical and logistic support.
 - Regularly update the progress report for decision makers/ policy makers.
 - Request for a Joint Investigation and Response (if necessary) to the counterpart of the neighboring/ assisting country (IHR Focal Point).
 - Coordinate with the counter-part (IHR Focal Point) of Assisting Country for deployment of Assisting Teams.
 - Coordinate the briefing and debriefing of the Assisting response teams.

- Upload the outbreak report on the ASEAN Plus Three EID website for sharing of experience in coordination with the EID Communication Focal Point.

b. Role of National Response Team Members

The national response team should follow the country guideline/protocol such as:

- Conduct outbreak investigation (supplementary to that done by local response team) jointly with the Assisting Team, and/ or local team.
- Coordinate with local authority and relevant agencies to respond to the outbreaks.
- The team leader of the National Response Team is to coordinate all response efforts in the field assisted by technical agencies.
- Give recommendations/advice to the local teams for proper response to the outbreak.
- Give recommendations and feedback to the Supervisor/Coordinator for additional technical, medical, laboratory and logistical support required for mobilization.
- Assist the Coordinator/Supervisor on regular updating of the information, preparing of the final narrative report.

B. Administrative Arrangements

- a. Mission order/ authorization in the form of official letter from the relevant authority for national team to be deployed to outbreak site, and should be issued in a timely manner.
- b. This should be informed to the local rapid response team and local authorities.

C. Logistics arrangement

- a. Rapid Response Team (RRT) kits/ medical bags should be supplied according to the number necessary to coordinate with other organizations such as WHO.
- b. Transport to and from the outbreak site including flights, car, boat, and other means of transport should be provided through coordination by the National coordinator/ supervisor.
- c. Medical- Immunization and other protective medical supplies (such as mosquito repellent, mosquito nets, malaria prophylaxis- if needed) should be provided for all the response team members (ministry/department in charge of health).
- d. Other accessory equipment such as mobile generators, fuel for the generators, cars, computers, stationeries, printer, should also be provided

- e. Insurance depending on the country's specific policy.
- f. Food –ensure that the team has access to food and potable water when in field.
- g. Access to adequate communication facilities should be made available at least to the team leader, and may consider using radio communication such as walkie-talkie/ two-way radio on special events. Global Positioning System (GPS) may also need to be supplied if available, (this may need to be coordinated with the ministries in charge of telecommunications/ information / military/ local authorities) and should be used based on the country regulation/policy. For those equipment not under the regulation, specific arrangements are to be made between the countries.
- h. Survival kits should also be provided to all team members.
- i. Country and local maps should be provided to the team members.

2. RESPONSE TEAMS FROM ASSISTING COUNTRY

A. Role of Response Team from Assisting Country

- a. Assist the National Response Teams in conducting scientific investigation supplementary to that done by local response team) as requested.
- b. Give recommendations and feedback (in collaboration with the national response team) to the Coordinator/ Supervisor of own country for additional technical assistance and supplies required for mobilization such as medical supplies, laboratory and logistical support etc.
- c. Report to Coordinator/ Supervisor of own country on progress/ update (in consultation and upon agreement with the National Response Team)
- d. Provide debriefing report (for lessons learnt, obstacles, and good practices) to the Supervisor/ Coordinator of the Host Country before return to own country.

Note: The raw data and any specimens collected remain the property of the Host Country, and transfer of these requires permission from the relevant authorities of the Host Country.

B. Administrative Arrangements

- a. Request from the Host Country to the Assisting Country should be initiated by the relevant ministry through the Ministry/ Department of Foreign Affairs.
- b. Both Host and Assisting Countries shall coordinate with relevant ministries/ authorities for the timely issuance of official travel documents and speedy issuance of entry permits for the assisting team members

C. Logistics Arrangements

- a. Rapid Response Team (RRT) kits/ medical bags for the assisting team should be supplied by the Assisting Country. (to coordinate with other organizations such as World Health Organization, ministry/department responsible for health).
- b. Arrangement for transportation of the team from Assisting Country should be coordinated between the two countries.
- c. Medical- Immunization and other protective medical supplies (such as mosquito repellent, mosquito nets, malaria prophylaxis- if needed) for the assisting team should be supplied/ supported by the assisting country.
- d. Other accessory equipment such as mobile generators, fuel for the generators, cars, computers, stationeries, printer, should be provided by the Host Country.
- e. Insurance of the Assisting Team Members- to be supported by the Assisting Country.
- f. Food –ensure that the team has access to food and potable water when in field.
- g. Communication equipment- such as satellite phones for use by the Assisting Team should be supplied by both Assisting and Host Country, as permits.
- h. Survival kits should also be provided to all team members by the Assisting Country.

VII. Sectors to be involved in Joint Outbreak Investigation and Response

Mounting an effective joint outbreak investigation and response is a truly multisectoral activity and coordination and cooperation between the following sectors is required for such an effective joint outbreak investigation and response. The ministry responsible may differ from country to country.

In any response to outbreaks whereby the Ministry of Health plays the leading role in the mitigation of public health impacts, coordination and assistance from the following sectors in terms of logistics and administrative assistance are essential:

1. Human Health –Ministry/ department in charge of health.
2. Animal health/zoonosis-Ministry/ department in charge of Agriculture/ Livestock and Fisheries
3. Security- Ministry/ department in charge of Security
4. Transport- Ministry/ department in charge of any means of transport (land, sea, air)
5. Telecommunications- Ministry/ department in charge of telecommunications and information
6. Health education of population through media- Ministry/ department in charge of health education, information
7. Finance, Customs, Insurance- Ministry/ department in charge of finance, customs, insurance

8. Consular, diplomatic - Ministry/ department in charge of immigration, foreign affairs.
9. Inspection of product quality and safety- Ministry / department in charge of trade, commerce.
10. Prime Minister's office or equivalent Government offices
11. Provincial and local authorities

It is important that all the ministries and agencies are fully informed in advance of the importance of their roles in providing such assistance in any response plan.

The roles of the Ministries may differ to differ from one country to another. However, in response to an outbreak, the assistance required from different ministries is outlined in Annex. Some of these roles are already incorporated in the legislations and protocols but these also differ from one country to another. These roles cited in the Annex should serve as a basis for identifying the gaps to further develop in- country intersectoral legislations in times of emergencies, standard operating procedures, protocols and should also facilitate in obtaining such assistance requested by the sector in charge.

In addition to the national ministries, the following international/ intergovernmental organizations are required either for logistical and/or technical support.

1. World Health Organization (WHO) - national/ regional
2. Food and Agriculture Organization (FAO)
3. World Organization for Animal Health (OIE)
4. ASEAN Secretariat
5. United Nations Children's Fund (UNICEF)

Annex

Roles of Sectors to be involved

1. Security

- a. Security for response teams in conflict areas (landmines).
- b. Enforcement of quarantine.
- c. Coordinate for control of cross border (response teams and supplies).
- d. Coordinate for control of border crossing.
- e. Provision of detailed map to response teams.
- f. Support to response teams through radio communication.
- g. Provision of demographic statistics (local government).
- h. Support to response teams through provision of necessary transport such as helicopters as necessary.

2. Animal health/zoonosis

- a. Investigation of outbreak in collaboration with Health personnel in case of zoonosis, including risk assessment
- b. Intensify surveillance
- c. Culling based on the country's protocol and compensation policy.
- d. Control of movement of animals, including at points of entry/ checkpoints, in collaboration with relevant agencies.
- e. Confinement / Quarantine of animals in affected areas.
- f. Disinfection including proper disposal of carcasses and contaminated materials/ vehicles.
- g. Briefing and debriefing with health and other personnel involved in response teams.
- h. Report to the Ministry of Agriculture on updates.
- i. Implementation of preventive measures.
- j. Risk Communication
 - i. For public awareness/ stakeholders (including Information, Education and Communication)
 - ii. Operational risk communication for relevant collaborating agencies
- k. Coordinate with relevant international agencies for technical and logistic support.
- l. Facilitate the transportation of specimens and laboratory diagnosis.
- m. Provide authority with relevant personal protective equipment.\

3. Transport

- a. Clean/Disinfect vehicles
- b. Quarantine vessels/ aircraft/cargo
- c. Control at cross border sites as applicable

- d. Support / facilitate the provision of supplies/equipment through provision of means of transport in coordination with Ministry of Health

4. Telecommunications

- a. Provide/authorize use of adequate equipment for the response teams and involved personnel during the period of outbreak investigation and response, or as available.
- b. Provide authority with relevant personal protective equipment.

5. Health education of population through media

- a. Provide free broadcasting of health education, press conference; provide news updates in consultation with Ministry of Health.
- b. Provide technical support/advice to the Spokesperson in terms of risk communication in collaboration with Ministry of Health.
- c. Coordinate with/manage the media/journalists for organized press conferences.

6. Customs, Insurance, Emergency Fund

- a. Finance
 - i. Allocate funding for preparedness for an outbreak (this may include emergency funds, compensations if applicable).
 - ii. Provide budget required for outbreak investigation and response through a speedy process.
 - iii. Tax exemption of materials imported for use in outbreak investigation and response, to be deliberated beforehand between the Ministry of Health, Ministries in charge of finance and customs.
- b. Customs
 - i. Facilitate the clearance of materials imported for use in outbreak investigation and response, to be deliberated beforehand between the Ministry of Health, Ministries in charge of finance, trade and other relevant ministries/ authorities
- c. Insurance
 - i. Develop insurance scheme for the response teams deployed to field/outbreak area (regardless of in-country or on

mission abroad), through Memorandum of Agreement/Understanding.

7. Consular, Diplomatic

- a. Coordinate for/ facilitate the provision of official document such as passport or travel document (with a long-term validity, as necessary) for response team members deployed internationally.
- b. Coordinate for/facilitate provision of visa for the approved response team members to enter the country.
- c. Provide information to international community (in collaboration with Ministry of Health).
- d. Embassy in Host Country- to coordinate for briefing and debriefing sessions of response teams with the host ministry/department in charge of health and ministry/department in charge of foreign affairs.
- e. Embassy in Host Country- Provide support to own country's response team members deployed to the Host Country during their stay in the Host Country.

8. Inspection of product quality and safety

- a. Coordinate for clearance of materials imported in preparedness of an outbreak.
- b. Coordinate for clearance of materials imported for use during the outbreak investigation and response.
- c. Coordinate with the Ministry of Health in implementing measures to control /trading in-country/ import/ export of products implicated in outbreaks.

9. Human Health

- a. Deploy response teams to outbreak areas.
- b. Outbreak investigation and response.
- c. Coordinate with other relevant sectors on a regular/ ad- hoc basis, as mentioned.
- d. Provide authority with relevant personal protective equipment.
- e. Intensify surveillance at points of entry/checkpoints.
- f. Facilitate the transportation of specimens for laboratory diagnosis.
- g. Coordinate with international organizations as relevant for technical and logistical support.
- h. As cited under sub-sections 1- 4 of Section VI.

10. Prime Minister's office or equivalent Government office

- a. Inform other ministries on outbreak and give authorization for multisectoral investigation and response.
- b. Facilitate for the collaboration between provincial and central levels.

11. Provincial and local authorities

- a. Facilitate the entry permits/cross border of the Assisting team, as necessary.
- b. Assist in logistics and administrative arrangements for the joint outbreak response team, including coordination with relevant local authorities/agencies.
- c. Ensure the security and safety of the outbreak investigation and response teams.