

Annex 2
Capacity Building Focus Areas

(1) Health system capacity

- Primary care will be highlighted in regional capacitation programmes. Clinical management for emerging and re-emerging disease will be part of training for physicians, at all levels.
- Gatekeeping will be necessary in the adoption and implementation of proper triage procedures to prevent overloading of hospitals or secondary/tertiary care facilities. Health information systems/digital technology will be maximized, and a health care referral system set-up.
- The health system of the AMS will also be capacitated to monitor the status of health workers, with due consideration to the needs of women, people with disabilities, indigenous groups, and the elderly among these health workers.
- Systems will be in place to monitor the stocks of critical commodities in the regional, extending to national and sub-national levels.
- There will be in place mechanisms to support joint or multi-AMS capacitation in broad areas such as surveillance, laboratory management, and risk communications, among others as subsumed by ACPHEED.
- During emergencies, the health system in AMS will have the capacity to maintain the provision of essential health care services with a minimum standard of care, according to the Business Continuity Plan (BCP) principles.

(2) Readiness of health service facilities

- There will be a system in place to ensure that all AMS facilities are able to implement infection and control procedures.
- A specialized triage system will be developed, common to all AMS, which will form part of established practices in health facilities, from health centers to the apex hospitals. In this system, patients deemed to be infectious will be separated in another designated area.
- Health facilities will address the needs of children, the elderly, women, people with disabilities, and other special populations.

(3) Health human resource training

- Resource mapping will be done to explore any existing training materials from existing mechanisms such as the ASEAN EOC Network for PHE and ASEAN Plus Three Field Epidemiology Training Network (FETN) and reproduce such training materials on different emerging infectious diseases which are gender-sensitive, and sentient of the different cultures of the AMS. These materials will include capacitation on dealing with new public health emergencies. Training will be tailored for all personnel (public and private, health and non-health) who will be involved in responding to PHE at all levels.
- The capacitation will be based on a regional and national training needs assessment.
- As part of the ACPHEED scope of work, capacitation will include areas such as incident management, biosafety and biosecurity, analytics, and others.
- Capacitate AMS to conduct risk communication through a targeted approach, identifying key groups in the community, sensitive to cultural differences among AMS.