



**LAO PEOPLE'S DEMOCRATIC REPUBLIC**  
**Peace Independence Democracy Unity Prosperity**

**Technical Report on Regional Workshop: Implementing the Asia Pacific Strategy for Emerging Diseases and Public Health Emergencies (APSED III) in the Greater Mekong Subregion— Progress to Date and Opportunities for Enhancing Regional Health Security**

**19–20 November 2018, Champasack Province, Lao P.D.R**

**I. Objectives:**

**1. General Objective of the Regional Workshop:**

To assess implementation aspects of APSED III for GMS countries to enable improved national and regional planning and knowledge for emerging infectious diseases and implementation of strategies for enhanced health security.

**2. Specific Objectives:**

- (i) To review emerging issues and the progress of implementing APSED, including the national status of IHR core capacity requirements;
- (ii) To identify required improvements to countries' plans, based on JEEs, to effectively implement APSED III;
- (iii) To assess optimal approaches to maintaining and strengthening core IHR capabilities and resources and support required;
- (iv) To identify potential for enhanced collaboration between GMS countries to confront emerging diseases and public health emergencies; and
- (v) To identify key areas of APSED improvement and to recommend practical solutions and interventions

**II. Participants**

Eighty-one (81) participants from MOH, Vientiane, Provincial Health Departments of Phongsaly, Bokeo, Houaphanh, LuangNamtha, Xiengkuang, Louangprabang, Vientiane, Boilikhambay, Khammouane, Savannakhet, Champasack, Saravanh, Sekong and Attapeu; DCD; DLF; NCLE; CHAS; Institute Pasteur Lao; Merieux Lao; Mother and Child Central Hospital; representatives from Cambodia, Thailand; Vietnam; China; and Malaysia; ADB Health Security Project; DTRA; WHO; USCDC; and FAO.

**III. Opening Ceremony**

Dr. Somkiet Vorarath, Director of Champasack Provincial Health Department, provided welcome remarks to delegates, Dr. Rattanaxay Phetsouvanh, Director General of DCDC introduced the workshop objectives and Assoc. Prof. Dr. Phouthone Muongpark, Vice

Minister of Health, Lao PDR, opened the workshop and affirmed that APSED is the common strategic framework for WHO member states of the Asia-Pacific region to strengthen capacity to detect, and respond to threats posed by emerging infectious diseases and public health emergencies. The workshop is an opportunity to review APSED implementation and to identify key issues in maintaining and strengthening IHR capacities at both national and provincial levels in CLMV countries.

#### **IV. The workshop protocols**

The workshop was organized via presentation of the objective of the workshop, country progress in implementing APSED, JEE recommendations then followed by plenary discussion, 4 Group work teams and presentations, and lastly, panel discussion and recommendations for future work

Key finding of the country presentations:

- All countries had a national strategy /work plan addressing APSED implementation
- Common gaps included: subnational multi-sectoral collaboration and coordination; lack of technical expertise, resource limitations; limited human resource capacity and need for regular update and support for plans
- Lesson learned included : critical need for capacity building; M&E; training and refresh courses very important even with SOPs; sustainable funding (government and donors) was essential; SOPs and guides were essential; and strong leadership and commitment were critical

Key findings of the plenary discussion:

- Subnational support for activities ( training, FET, RRT, etc) needed to be ongoing and sustained
- Roles and responsibilities of central and subnational levels needed to be clear and coordinated (i.e. within national work plans) - for example the CDC Law in Lao
- National regulations allowed a clear outline of responsibilities
- EOC were important in mobilizing resources

Key findings of group work:

##### **Group 1: APSED work plan**

- Surveillance and risk assessment needed to be strengthened and sustainable
- Most countries still have limited capacity in technical areas
- Information sharing among Human health and Animal Health needs to be improve
- FET is critical for lab and surveillance capacity building
- Lab capacity building need to extend to local level

##### **Group 2: Implementing APSED nationally and subrationally**

- POE at subnational levels needs to be improved specially in land crossings
- AMR all countries agree to follow WHO system and strengthen research
- Sharing information on IHR is important for rapid response and follow up
- M & E and annual reporting to IHR committee is critical for surveillance and response
- Risk assessment needs to be clear to ensure actions and responsibilities

### **Group 3: Enhanced intercountry collaboration**

- CLMV countries should apply SOP for joint outbreak response
- Thai and Malaysia need to develop SOP for joint outbreak response
- SOP joint outbreak response covering all infectious diseases
- Information sharing among twin provinces based on risk assessment results
- Information sharing can be done at two level such as national level (IHR focal point) and subnational level (cross border focal point)
- IHR focal point needed for cross border collaboration and coordination
- All countries needs to support IHR focal point and protocol

### **Group 4: APSED implementation plans**

- POE at subnational level need to develop documentation and processes for effective operations
- Need to identify priority focus area for investment
- All countries need to develop contingency plans to support outbreak response
- Need to harmonize indicators to achieve APSED indicators

### **Key findings of panel discussion:**

- Outbreak response needs to be link with stakeholders
- Needs to be investment in animal health
- Need to allocate the budget for subnational level especially outbreak response
- Need to support trainer for subnational level
- Enhance/strengthen trainer or mentor capacity building
- Need to develop protocol for training staff
- One health approach should be strengthened
- Outbreak response needs to link with another agency or Ministries
- Political commitment is critical for APSED implementation
- All countries need to advocate one another to involve APSED implementation
- APSED indicators need to be reviewed regularly
- Multi-sectoral cooperation is important for APSED implementation
- Subnational levels need to identify priority focus area and develop work plan then central level should harmonize to achieve goals
- MOH have to ensure sustainable APSED implementation
- ADB have to ensure sustainable APSED implementation

## V. Closing

Representatives from Thailand Ministry of Health expressed their sincere thanks to Lao Ministry of Health for giving good opportunity to share experience on APSED implementation and wish to apply the results of the workshop at the field as well as routine work.

Representatives from Cambodia Ministry of Health expressed sincere thanks to Lao Ministry of Health for giving good opportunity to add more information on APSED implementation and hope that knowledge and skill giants from this workshop will support APSED implementation.

Representatives from Viet Nam Ministry of Health expressed thanks to Lao Ministry of Health for the opportunity to learn and share experiences. They now know how to develop the work plan for national and subnational levels. The findings from this event will guide them to finalize work plans and also strengthen APED implementation.

Representatives from Malaysia Ministry of Health also expressed thanks for inviting them to join the event. The results of the workshop have guided them to conduct JEE in next year and wish that the APSED implementation challenges will be addressed in the near future.

Dr. Rattanaxay Phetsouvanh, Director General of DCDC, affirmed that this workshop provided a good opportunity to share experience on APSED implementation leading to developing work plans for outbreak prevention and response among GMS countries

Dr. Rattanaxay expressed sincere thanks and appreciation for the ADB Health Security Project for valuable support in organizing the workshop. Thanks to all participants from Laos, Cambodia, Vietnam, Thailand, China, Malaysia and development partners (WHO, DTRA, USCDCD and FAO) for their attendance, comments, and patience, attention towards the issues raised at the workshop including the sharing of experiences, challenges and solutions.

Director General of DCDC