



SASOP

STANDARD OPERATING PROCEDURE
FOR REGIONAL STANDBY ARRANGEMENTS
AND COORDINATION OF JOINT DISASTER RELIEF
AND EMERGENCY RESPONSE OPERATIONS



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LIST OF ACRONYMS & ABBREVIATIONS

A	AADMER	- ASEAN Agreement on Disaster Management and Emergency Response
	AHA Centre	- ASEAN Coordinating Centre for Humanitarian Assistance on disaster management
	ARDEX	- ASEAN Regional Disaster Emergency Response Simulation Exercises
C	CA	- Competent Authorities
	CIQ	- Customs, Immigration and Quarantine
D	DELSA	- Disaster Emergency Logistics System for ASEAN
	DMRS	- Disaster Monitoring and Response System
E	ERAT	- Emergency Response and Assessment Team
I	INSARAG	- International Search and Rescue Advisory Group
	ICLT	- In-Country Liason Team
J	JOCCA	- Joint Operation and Coordination Centre of ASEAN
N	NFP	- National Focal Point
O	OCHA	- Office for the Coordination of Humanitarian Affairs
	OSOCC	- On-site Operations and Coordination Centre
S	SAR	- Search and Rescue
	SOP	- Standard Operating Procedure
	UN	- United Nations
	UNDAC	- United Nations Disaster Assessment and Coordination
	USAR	- Urban Search and Rescue
W	ASEAN WebEOC	- ASEAN Web Emergency Operation Centre

I. INTRODUCTION

1. ASEAN Member States signed the ASEAN Agreement on Disaster Management and Emergency Response (AADMER) on 26 July 2005 in Vientiane, Lao PDR. The Agreement seeks to provide effective mechanisms to achieve substantial reduction of disaster losses in the social, economic, and environmental assets of the Parties, and to jointly respond to disaster emergencies through concerted national efforts and intensified regional and international cooperation.
2. To ensure preparedness for effective response, the Agreement requires for the establishment of the ASEAN Standby Arrangements for Disaster Relief and Emergency Response where Parties, on a voluntary basis, shall identify and earmark assets and capacities which may be made available and mobilised for disaster relief and emergency response¹.
3. The Agreement also requires the preparation of this Standard Operating Procedure that shall guide the actions of Parties and the ASEAN Coordinating Centre for Humanitarian Assistance on disaster management (AHA Centre) in implementing (i) the regional standby arrangements for disaster relief and emergency response; (ii) the utilisation of military and civilian personnel, transportation and communication equipment, facilities, good and services, and the facilitation of their trans-boundary movement; and (iii) the co-ordination of joint disaster relief and emergency response operations².
4. This Standard Operating Procedure (SOP) provides (i) the guides and templates to initiate the establishment of the ASEAN Standby Arrangements for Disaster Relief and Emergency Response, (ii) the procedures for joint disaster relief and emergency response operations, (iii) the procedures for the facilitation and utilisation of military and civilian assets and capacities, and (iv) the methodology for the periodic conduct of the ASEAN Regional Disaster Emergency Response Simulation Exercises (ARDEX) which shall test the effectiveness of this procedure.

¹ AADMER, Article 9

² AADMER, Article 8.2

II. INSTITUTIONS

A. Parties

5. The Parties in this Agreement are ASEAN Member States who have ratified and consented to be bound by the Agreement. They shall cooperate in developing and implementing measures to reduce disaster losses; immediately respond to a disaster occurring within their territory; promptly respond to a request for assistance from an affected Party; and take legislative, administrative and other measures as necessary to implement their obligations under the Agreement.

B. AHA Centre

6. The AHA Centre shall facilitate co-operation and co-ordination among the Parties, and with relevant United Nations and international organisations, in promoting regional collaboration³.

C. ASEAN Emergency Response and Assessment Team (ERAT)

7. ASEAN-ERAT is a rapidly deployable response team to support the Parties during major sudden and slow on-set disasters. Within 24-hours upon request/approval from the Party affected by the disaster, ASEAN-ERAT can be mobilised to support in the initial phase of emergency. ASEAN-ERAT is collectively owned by the Parties and managed by the AHA Centre.

D. Joint Operations and Coordination Centre of ASEAN (JOCCA)

8. The Joint Operations and Coordination Centre of ASEAN (JOCCA) is an on-site coordination system to enhance ASEAN collective response particularly during large- scale disaster emergencies in the ASEAN region to support the government of the Party affected by the disaster. The JOCCA will provide direct coordination interface between an ASEAN response and the NDMO/ local disaster management office of the Party affected the disaster. This coordination system allows ASEAN entities to effectively support the affected government's response efforts. In the spirit of solidarity and collective response, JOCCA is a functional symbol of the “home” of the ASEAN on the ground. JOCCA will be primarily focusing on facilitating international assistance from within ASEAN region.

³ AADMER, Article 20.1

III. DISASTER PREPAREDNESS

9. The quality and efficiency of joint disaster relief and emergency response operations require constant preparedness, planning, capacity building, and testing of the response plans, systems and mechanisms at national and regional levels. Hence Parties shall, jointly or individually, develop strategies and contingency/response plans to reduce losses from disasters⁴, and each Party shall regularly inform the AHA Centre of its available resources for the regional standby arrangements for disaster relief and emergency response⁵.

A. Designation of National Focal Points and Competent Authorities

10. The NFP is an entity designated and authorised by each Party to receive and transmit information pursuant to the provision of the Agreement⁶. NFP therefore plays an important role in facilitating communication with other Parties and the AHA Centre, and serves as the single point of contact for the country. The NFP is also required to coordinate with the Competent Authorities (CAs), for example with regard to approval for processing request and offer of assistance, and on other matters not within their jurisdiction. Hence each Party shall designate a NFP and one or more CAs⁷, and inform other Parties and the AHA Centre of its NFP and CAs, and of any subsequent changes in their designations⁸.
11. In addition to the above, the NFP shall provide contact details of the national operation centre that shall work on 24/7 basis (24 hours 7 days a week). These operation centres will help the NFPs, among others, in receiving or transmitting initial updates/situation updates from/to the AHA Centre or other Parties, particularly off-duty hours and days. Regular exercises shall be conducted by the AHA Centre to test connectivity with the national operation centres.
12. Each Party shall use ANNEX A to provide the above information and update it every January and July of the year, or whenever there are any significant changes.

B. Inventory of Earmarked Assets and Capacities⁹¹⁰

13. The Disaster Emergency Logistics System for ASEAN (DELSA) is a key mechanism for the swift provision of relief items to ASEAN countries facing post-disaster emergency situations. Launched on 7 December 2012, DELSA was established to develop a regional relief item stockpile and to support capacity enhancements of the AHA Centre and among the Parties in emergency logistic operations. Out of various aspects of logistics, DELSA focuses on three main elements – regional stockpiles, institutional capacity building, and communications. Regional stockpiles, which are warehoused in Subang, Malaysia, allow the

4 AADMER, Article 8.1

5 AADMER, Article 8.4

6 AADMER, Article 1

7 AADMER, Article 22.1

8 AADMER, Article 22.2

9 AADMER, Article 9.1

10 The AHA Centre will co-ordinate with the Parties to consolidate, update and disseminate the information for the standby arrangements for disaster relief and emergency response with the other Parties in this Agreement.

Parties to immediately access DELSA relief goods as soon as, or even before disaster strikes. The AHA Centre coordinates with the NFP of the Party affected by the disaster to distribute those relief goods as needed to support emergency response efforts.

14. Each Party shall use the ASEAN Joint Disaster Response Plan (AJDRP) modules to update information on earmarked assets and capacities every January and July of the year, or whenever there are any significant changes. These modules were identified and categorised based on initial concept note of the AJDRP endorsed by the ACDM, practices from other region (i.e. European Union), the UN's cluster system and also from the inputs from practitioners and government representatives that participated in the AJDRP workshop in February 2016. Each items in the modules should be capable of working self-sufficiently for a given period of time, be quick to deploy, and interoperable. In order to enhance the interoperability of modules, further standardisation will be needed at regional and country levels by using existing international standards as reference.
15. The AJDRP Modules consist of :
 - i. Search and Rescue (ANNEX B)
This module includes: Urban Search and Rescue (USAR) Team, fire fighting teams and equipment, Chemical Biological Radiological and Nuclear (CBRN), and flood response teams.
 - ii. Water, Sanitation, and Hygiene Services (ANNEX C)
This module includes: high capacity pumps, water treatment unit, water bladder, wash team toolkit set, rapid larine set and family hygiene kit.
 - iii. Health and Medical Services (ANNEX D)
This module includes: EMT type 1,2,3, Medical tents/field hospital, aerial evacuation, body bags for cadavers, and Disaster Victim Identification (DVI) unit.
 - iv. Food Assistance (ANNEX E)
This module includes: any type of ready-to-eat food.
 - v. Non Food Items (NFIs) (ANNEX F)
This module includes: tarpauline, family tent, family kit, and kitchen kit.
 - vi. Early Recovery (ANNEX G)
This module includes: structural/civil engineers and waster/debris management specialist.
 - vii. Logistics (ANNEX H)
This module includes: generator, tents for mobile office, Unmanned Aerial Vehicle (UAV), air, sea, and land transport, temporary tent storage, procurement officer, warehouse manager, transport and fleet management, ground handling capacity at the airport, and customs.
 - viii. Emergency Telecommunications (ANNEX I)
This module includes: Information Technology officer and Emergency telecommunication team and equipments.

ix. Expertise (ANNEX J)

This module includes: humanitarian coordination, Incident Command System (ICS) expert, information management, civil-military coordination, communication, and camp coordination and camp management specialist.

IV. ASSESSMENT AND MONITORING

16. The provision of updates by the NFP of the Party affected by a disaster emergency to the AHA Centre will allow close monitoring of disaster situation in the region and facilitate quick mobilisation of regional standby assets and capacities for joint disaster relief and emergency response operations. Hence, the AHA Centre shall periodically receive and consolidate data on identified hazards and risks levels from the NFPs and analyse possible regional-level implications of their prevalence, occurrence or likely disaster impact.

A. Notification of Disaster

17. The NFP of the Party affected by a disaster shall immediately provide an initial update to the AHA Centre within 3 hours of the occurrence of the incident using “Update” to the AHA Centre form (see ANNEX K) or any other means available according to internal procedures of the Party affected by the disaster such as through official situation update disseminated through website or through official social media accounts such as official Facebook page or official Twitter. These include breaking news of disasters, even if these incidents do not require follow-up actions for assistance. The following are the contact details of the AHA Centre that can be used to transmit the updates:

- a. Telephone (Direct Line : +62-21-21012278 ext 114
- b. Email : operationroom@ahacentre.org

18. The AHA Centre shall analyse the update received from the NFP of the affected Party and then prepare and notify the other Parties of the disaster situation using “Update” from the AHA Centre form (see ANNEX L). The AHA Centre may also use other sources of information, such as the Disaster Monitoring and Response System (DMRS), ASEAN WebEOC, and UN Virtual On-Site Operations and Coordination Centre (Virtual OSOCC), to gather facts on the developing situation of the disaster.

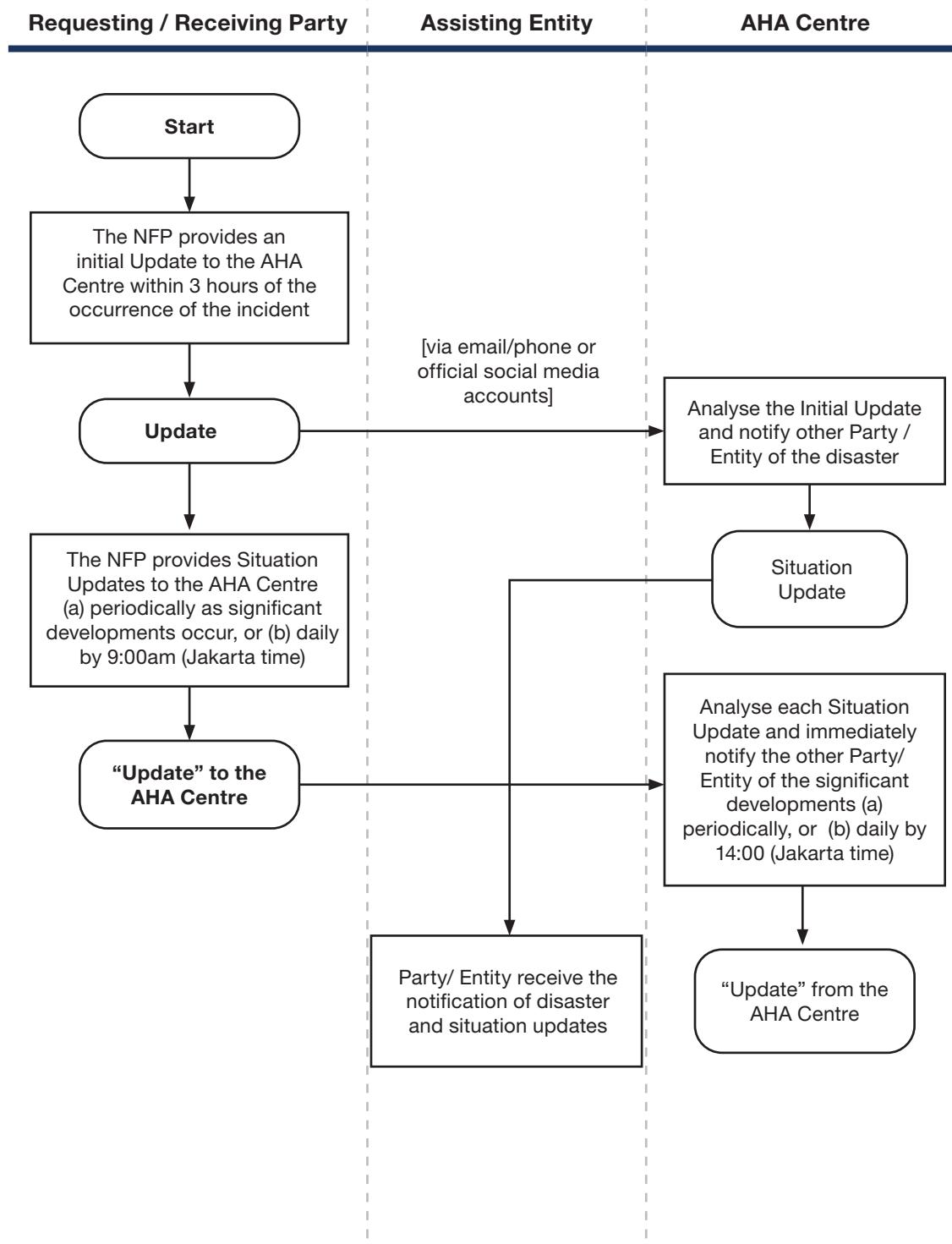
B. Situation Updates

19. The NFP of the Party affected by the disaster shall, as the disaster situation develops, continue to use “Update” to the AHA Centre form to periodically update the AHA Centre of any significant developments to the disaster. The frequency of the situation updates from the NFP of the Party affected by the disaster to the AHA Centre would depend on the development of events arising from the disaster. Ideally, a regular Situation Update should reach the AHA Centre daily by 9:00 am Jakarta time.

20. The AHA Centre shall analyse each Situation Update received from the NFP of the Party affected by the disaster or other reliable secondary sources of information and then immediately notify the other Parties of significant developments using “Update” from the AHA Centre form through regular Situation Updates to the other Parties daily by 14:00 Jakarta time. The above steps are described in Flowchart 1. Where appropriate, the AHA Centre may also use some information

contained in “Update” from the AHA Centre form to inform other entities, particularly through the relevant ASEAN website, ASEAN WebEOC and Virtual OSOCC, to update the international community of the ongoing disaster situation in the ASEAN region.

Flowchart 1: Notification of Disaster & Situation Updates



V. EMERGENCY RESPONSE

A. Request for Assistance/Offer of Assistance¹¹

21. The NFP of the affected Party shall, if it needs assistance in the event of a disaster emergency within its territory, request such assistance from any other Party, directly or through AHA Centre, or, where appropriate, from other entities¹². The NFP of the affected Party may reflect this in the “Update” to the AHA Centre form to request for assistance or through published national situation updates, direct correspondence (email) or a general declaration on welcoming international assistance. The Assisting Entity shall acknowledge or respond to the request immediately, preferably within 6 to 12 hours.
22. An Assisting Entity may also initiate an offer of assistance to mobilise its earmarked assets and capacities and other resources not previously earmarked for disaster relief and emergency response but being made available by submitting the “Offer” of Assistance form(see ANNEX M) directly to the Receiving Party or through the AHA Centre. The Receiving Party shall acknowledge or respond to the offer of assistance immediately, preferably within 6 to 12 hours. The above steps are described in Flowchart 2 and Flowchart 3.
23. The AHA Centre shall work on the basis that the Party will act first to manage and respond to disasters. In the event that the Party requires assistance to cope with such a situation, in addition to the direct request to any Assisting Entity, it may seek assistance from the AHA Centre to facilitate such a request¹³. When this happens, the AHA Centre shall provide critical coordination information and recommend courses of action to facilitate mobilisation of these standby assets and capacities for disaster relief and emergency response. This will include the mobilisation of ASEAN ERAT upon consent from the Party affected by the disaster.¹⁴

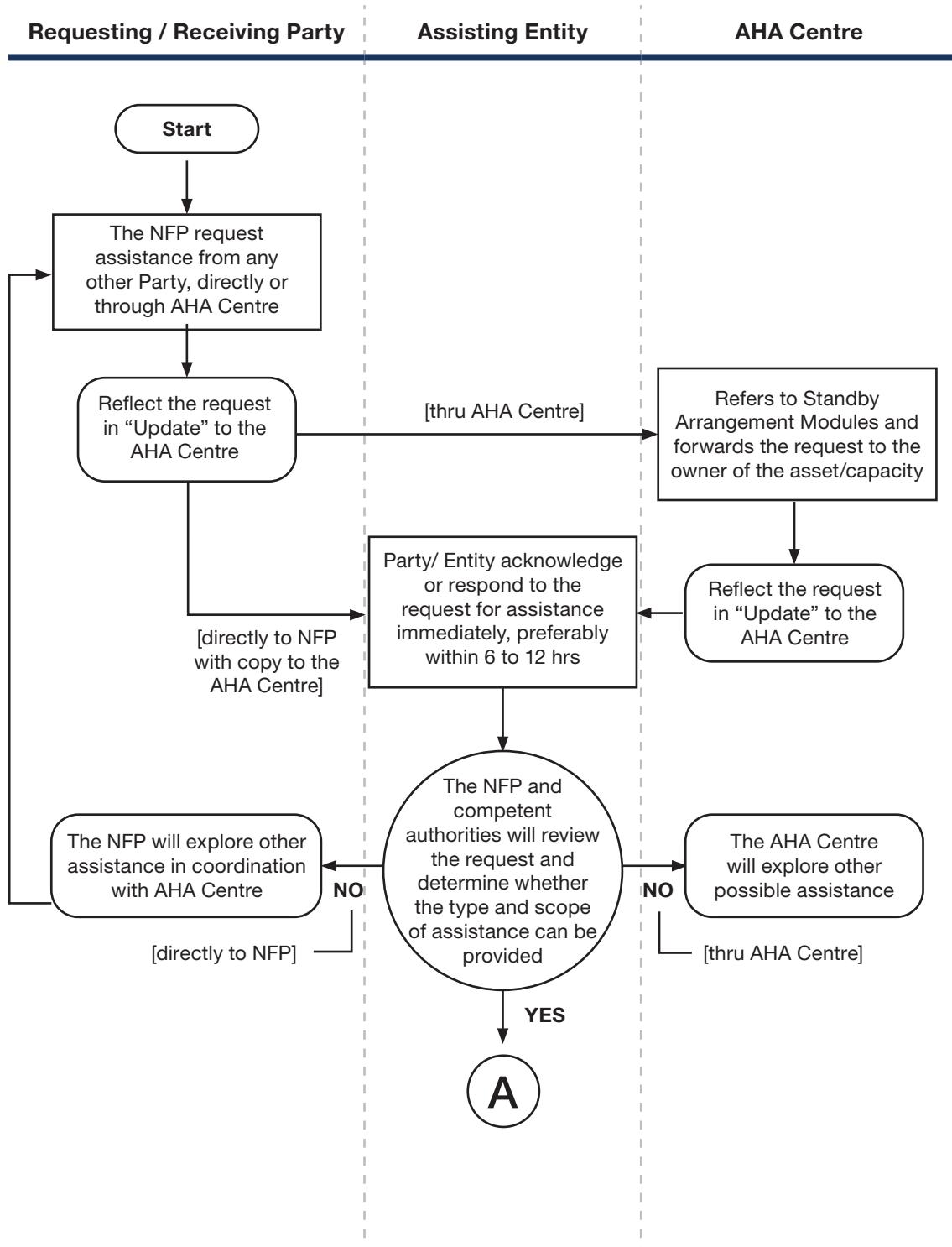
¹¹ The trigger point for the action to request for assistance/offer of assistance will vary between countries as resources and internal capacities to handle a disaster differ. By actively monitoring and updating the disaster situation using “Update” form to and from the AHA Centre, the affected Party, AHA Centre and other Parties can be regularly updated on the developments of the disaster and monitor the capacity of response the affected Party has to handle the disaster. The trigger for activation of the assistance shall occur when the following set of forms is released.

¹² AADMER, Article 11.1

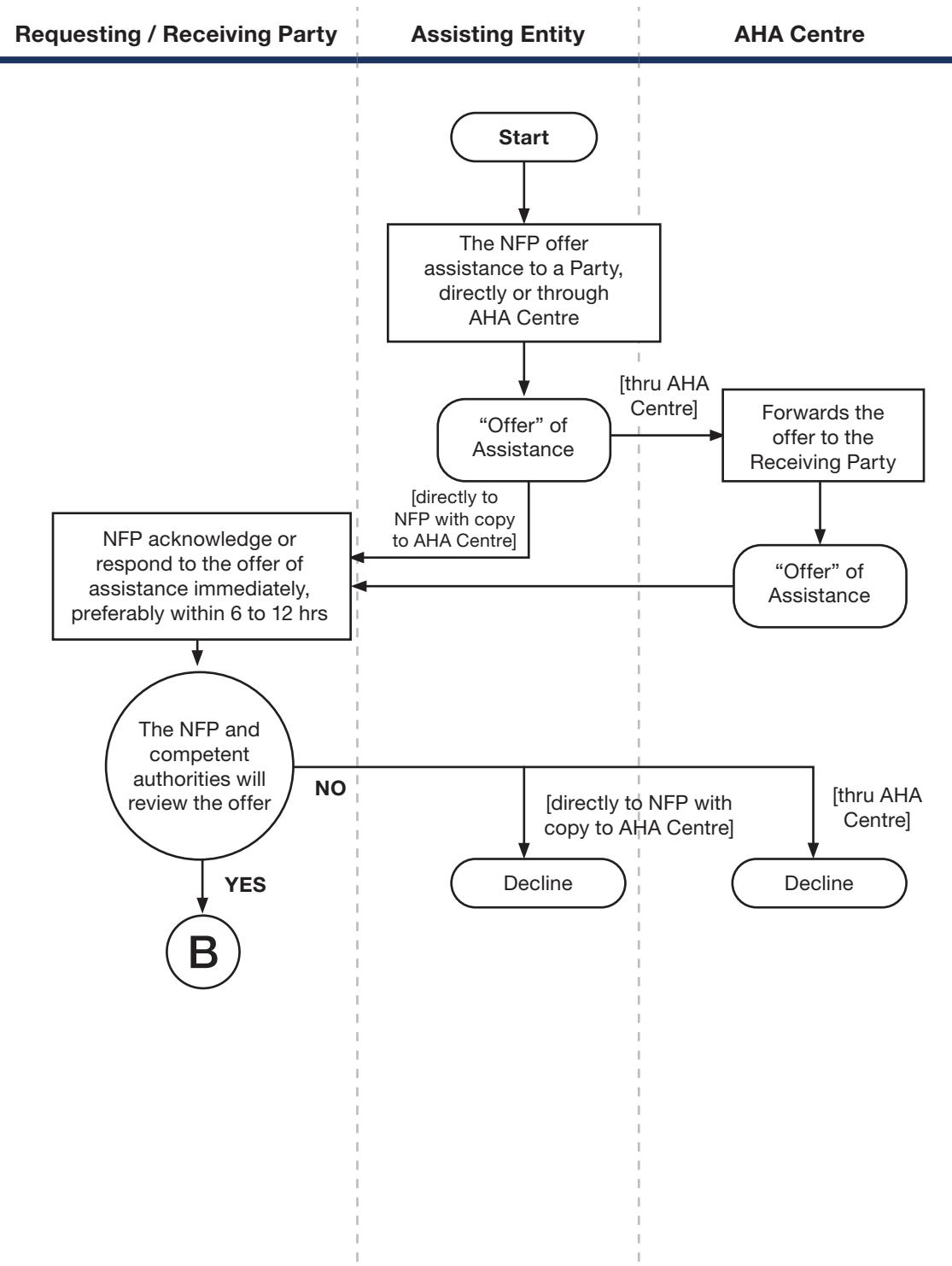
¹³ AADMER, Article 20.2

¹⁴ AADMER, Annex (ix) – (x) to Article 20.3

Flowchart 2 : Request for Assistance



Flowchart 3 : Offer of Assistance



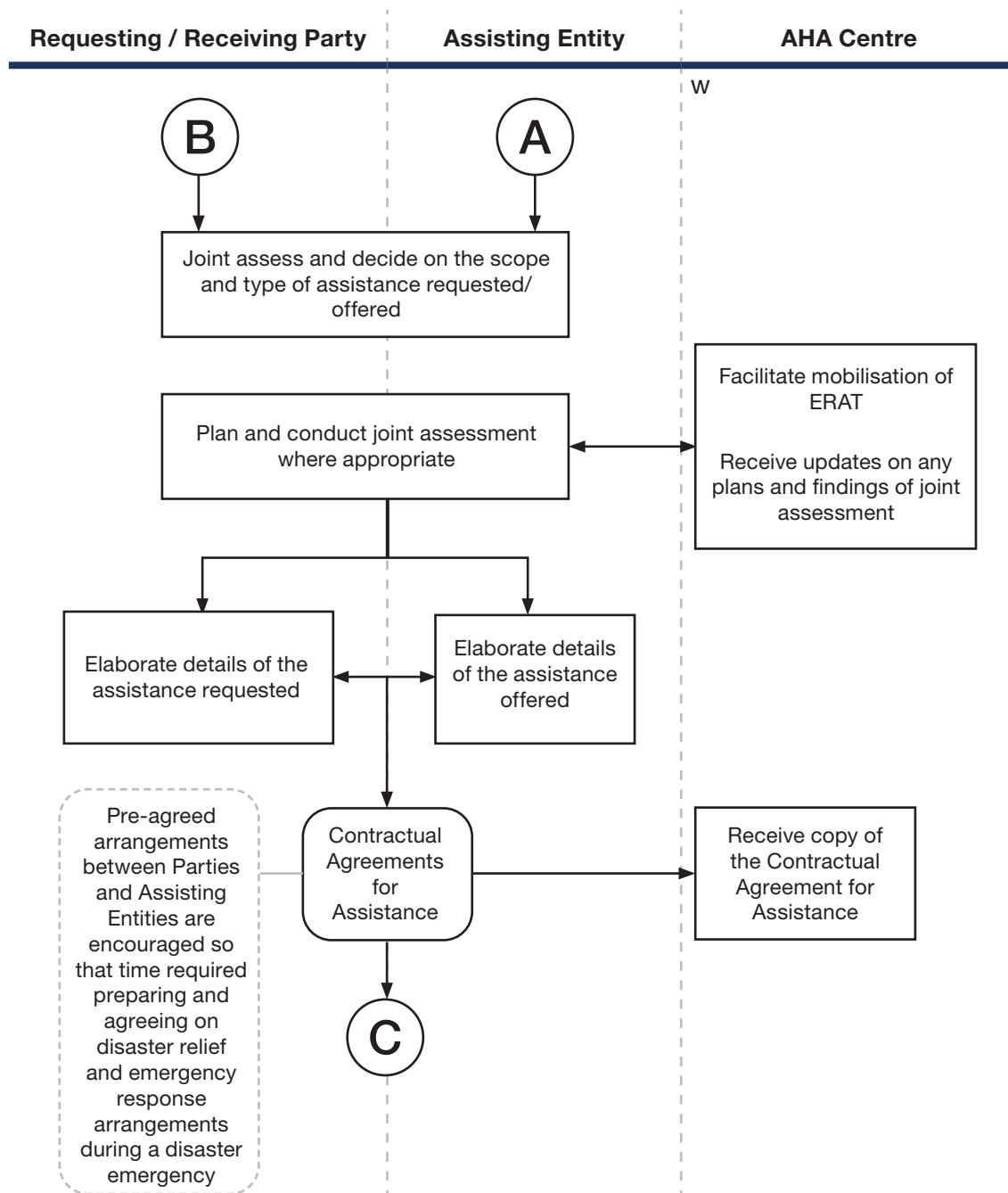
B. Joint Assessment of Required Assistance

24. Assessment shall be conducted to primarily ascertain the impact and severity of the disaster, the evolving emergency situation that may likely to arise from the disaster, the type of assistance required to save lives or alleviate sufferings, and the level of co-ordination required to ensure resources mobilised are effective in the disaster relief and emergency response operations.
25. The Requesting Party shall specify the scope and type of assistance required and, where practicable, provide the Assisting Entity with such information as may be necessary for that Party to determine the extent to which it is able to meet the request. In the event that it is not practicable for the Requesting Party to specify the scope and type of assistance required, the Requesting Party and Assisting Entity shall, in consultation, jointly decide upon the scope and type of assistance required¹⁵. Upon the request and consent of the Requesting or Receiving Party, the AHA Centre could also facilitate the deployment of the ASEAN stockpile and the ASEAN-ERAT to support in coordinated assessments and to facilitate incoming support from the Parties¹⁶.
26. Where appropriate the AHA Centre shall be updated by the Parties on any plans and findings of joint assessments so that the AHA Centre could ensure that any multiple assessments can be coordinated and organised systematically without gaps and duplication and that all sectors of activity are competently assessed. (to clarify with the WG in line with the ERAT guidelines where coordinated assessment is recommended)
27. Any arrangements agreed and consented upon by the Parties concerned shall be finalised by accomplishing and signing the Contractual Arrangements form (see ANNEX N) prior to the deployment of any assistance to ensure that both Parties agree to expected responsibilities. The AHA Centre shall be notified by the Assisting Entities of the agreed arrangements in this form. Otherwise, the AHA Centre can facilitate this process on behalf of the Parties.
28. The signing of the Contractual Arrangements form between the Party affected by the disaster through the NFP or his/her designated representative and the Assisting Entities are encouraged so that the confusion and misinterpretation of responsibilities can be avoided. Any plan for new deployment of assets and capacities by the Assisting Entities shall be informed to and agreed by the Requesting or Receiving Party through submission of the new Contractual Arrangements form. The above steps are described in Flowchart 4.

¹⁵ AADMER, Article 11.3

¹⁶ The operational procedure for the establishment and deployment of the ASEAN ERAT is being developed and will eventually be linked to the SASOP.

Flowchart 4 : Joint Assessment of Required Assistance



C. Mobilisation of Assets and Capacities

29. The Assisting Entity shall ensure that the assets and capacities provided to the Requesting or Receiving Party meet the standards for quality and validity requirements for consumption and utilisation¹⁷. Assisting Entities shall also ensure that responding capabilities assisting in the joint disaster relief and emergency response are self-sufficient with their subsistence requirements so as not to further burden the Requesting or Receiving Party in the course of operating within its territory.

30. The AHA Centre, upon request or acceptance of offer of assistance, can mobilise its stockpile to support the Requesting or Receiving Party. The type and quantity of stocks that will be deployed will be based on the priorities identified by the Requesting or Receiving Party. Various transport modalities will be explored by the AHA Centre to ensure that the relief items reach the intended beneficiaries the soonest time possible.

(i) Response Time

31. To ensure the effective and timely response, upon confirmation of the request for assistance/offer of assistance, the Assisting Entity shall coordinate directly with the Requesting or Receiving Party or through the AHA Centre for the immediate deployment of its assets and capacities.

32. The mobilisation of an Assisting Entity's heavy capacity Urban Search and Rescue (USAR) team, which is set up based on United Nations (UN) Office for the Coordination of Humanitarian Affairs (OCHA) International Search and Rescue Advisory Group (INSARAG) guidelines, shall be in accordance with INSARAG guidelines.

33. For any other type of response to support humanitarian relief or support USAR operations i.e. assisting with only specific USAR response components of technical search, canine search, specialist rescuers, field medical capability or supply of Search and Rescue (SAR) equipment, Parties are requested to specify the response timings they can achieve to the best of their ability to ensure the effective and timely deployment of the assistance.

(ii) Customs, Immigration and Quarantine

34. The Assisting Entity arriving in the territory of the Requesting or Receiving Party via air, land or sea entry checkpoints shall immediately proceed to the Customs, Immigration and Quarantine (CIQ) facility for the necessary immigration procedures, customs clearance and quarantine checks. The arrangements agreed by the Parties in the Contractual Arrangement form shall be used as the primary document to facilitate the CIQ procedures for entry/exit of assets and capabilities from the territory of the Assisting Entity into the territory of the Requesting or Receiving Party. Signed copies of the Contractual Arrangement form shall be used by the Assisting Entity or Requesting or Receiving Party for verification of the movement of assets and capabilities. In this regard, the NFP or his/her authorised representative of

¹⁷ AADMER, Article 12.4

the Requesting or Receiving Party shall provide the entry checkpoints with the signed copies of the Contractual Arrangement form and alert them of incoming assistance. The NFP of the Assisting Entity shall also provide the signed copies of the Contractual Arrangement form to its team leader.

35. The Assisting Entity shall be required to have for its members, for the purpose of entry and departure from the territory of the Receiving Party an individual or collective movement order issued by or under the authority of the Head of the assistance operation or any appropriate authority of the Assisting Entity; and a personal identity card issued by the appropriate authorities of the Assisting Entity¹⁸.
36. The Assisting Entity may use the registration and easily identifiable licence plates of aircraft and vessels without tax, licences and/or any other permits¹⁹. These aircraft and vessels shall have the appropriate insurance coverage for use in the territory of the Requesting or Receiving Party.
37. The Requesting or Receiving Party shall in accordance with its national laws and regulations accord the Assisting Entity (i) exemption from taxation, duties and other similar charges of a similar nature on the importation and use of equipment including vehicles and telecommunications, facilities and materials brought into the territory of the Requesting or Receiving Party for the purpose of assistance; and (ii) entry into, stay in and departure from its territory of personnel and equipment, facilities and materials involved or used in the assistance. The Requesting or Receiving Party shall also cooperate with the AHA Centre, where appropriate, to facilitate the processing of exemptions and facilities in respect of the provision of the assistance²⁰.
38. The Requesting or Receiving Party shall also ensure that the Operational Focal Points are available on standby at the CIQ facility during this process to facilitate the clearance of the arriving assets and capacities. Where necessary and appropriate, the AHA Centre shall facilitate the processing of exemptions and facilitate the process for transit or personnel, equipment, facilities and materials in respect of the provisions of the assistance²¹. In this regard, the AHA Centre should deploy an In-Country Liaison Team (ICLT) to facilitate coordination between the Assisting Entity and Requesting or Receiving Party. The ASEAN-ERAT shall, as appropriate, coordinate with the on-site UN Disaster Assessment and Coordination (UNDAC) team to help the Requesting or Receiving Party in the above process²².

¹⁸ AADMER, Article 15.2

¹⁹ AADMER, Article 15.3

²⁰ AADMER, Article 14

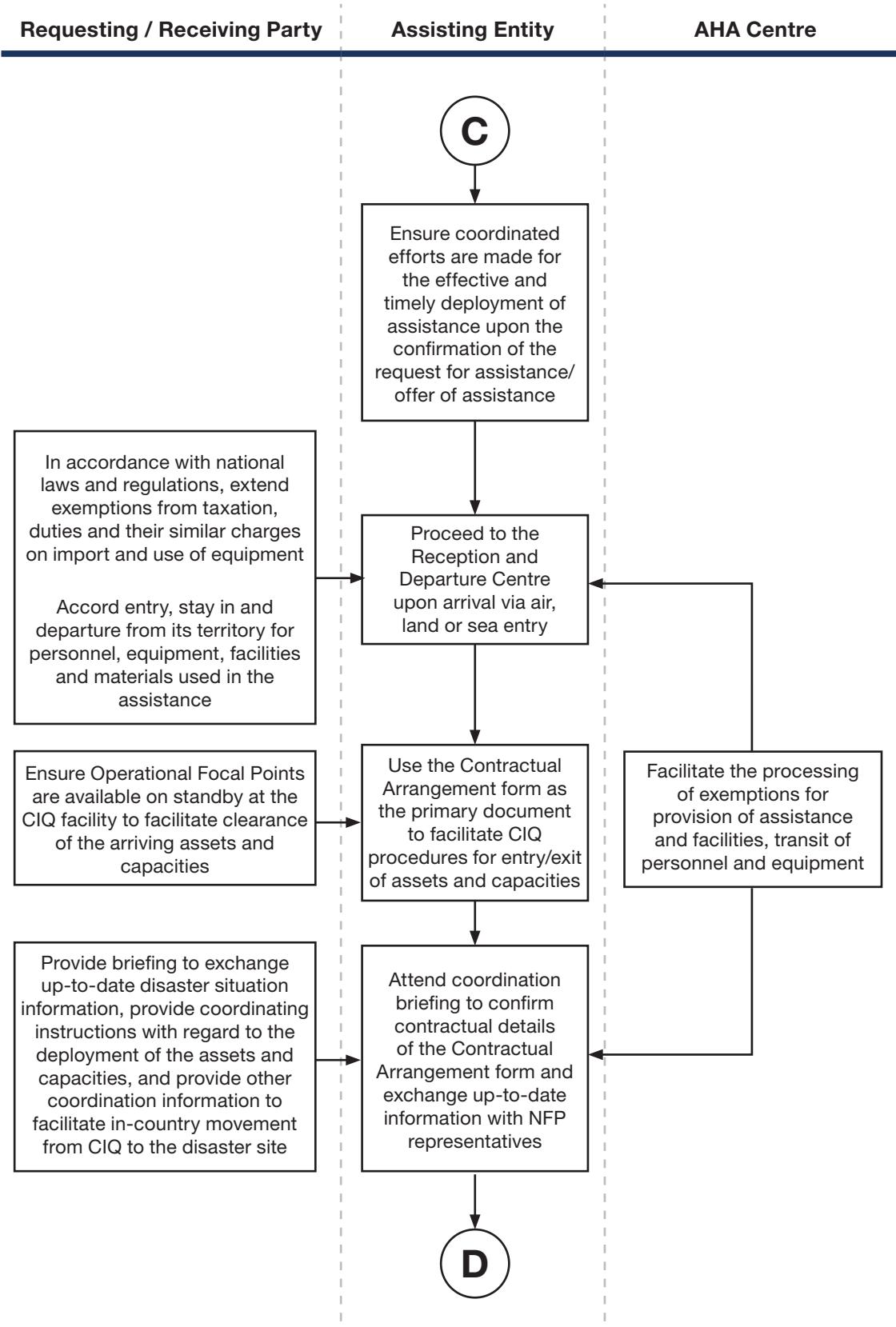
²¹ AADMER, Annex (xi) – (xii) to Article 20.3

²² AHA Centre shall make arrangements with UNOCHA to specify coordination between AHA Centre and UNDAC team in helping the local authorities during the entry/exit of assistance and the movement of assisting teams to the disaster site.

(iii) Briefing and Coordination

39. The NFP of the Requesting or Receiving Party shall designate representatives, where possible, to provide an initial briefing to the Assisting Entity at the Reception and Departure Centre (RDC) immediately after the completion of the CIQ processes. The briefing shall among others confirm details of the contractual agreements of the assistance as specified in the Contractual Arrangement form; provide up-to-date information with regard to the development of the disaster situation; give co-ordinating instructions with regard to the deployment of the assets and capacities from the Assisting Entity; and provide other coordination information that the Assisting Entity must be aware of and assistance e.g. location maps, communications equipment, liaison personnel, interpreter, security and mobile escorts etc. that will facilitate the in-country movement for the Assisting Entity from the CIQ to the disaster site. Upon the request of the Requesting or Receiving Party, the ICLT deployed by the AHA Centre or the ASEAN-ERAT could help provide the initial briefing to the Assisting Entity, in coordination with the on-site UNDAC team, as appropriate. The above steps are described in Flowchart 5.
40. Upon consent by the Party affected by the disaster, the AHA Centre can establish the Joint Operations and Coordination Centre of ASEAN (JOCCA) to support the Requesting or Receiving Party to coordinate the ASEAN response. The JOCCA will provide direct coordination interface between ASEAN response teams and the NFP of the Requesting or Receiving Party. Essentially, JOCCA aims to support the coordination role of the NFP with regard to the ASEAN response entities.

Flowchart 5 : Mobilisation of Assets and Capacities

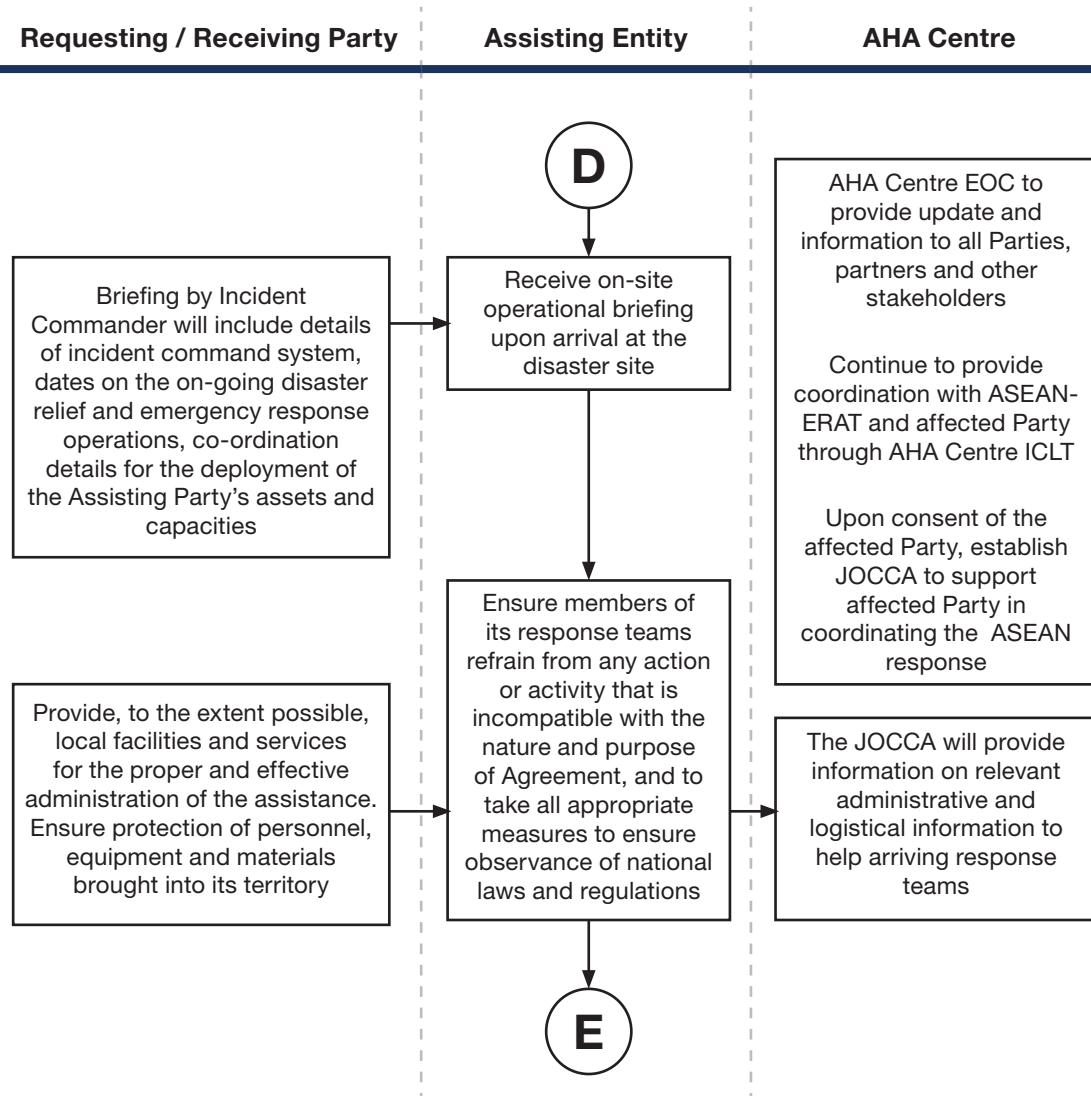


D. On-site Deployment of Assets and Capacities

41. The Incident Commander or his/her representative of the Requesting or Receiving Party shall, upon the arrival of the Assisting Entity at the disaster site, conduct an on-site operational briefing to the incoming teams. The briefing shall include details of the incident command system, updates on the on-going disaster relief and emergency response operations, co-ordination details for the deployment of the Assisting Entity's asset and capabilities to support the on-going disaster relief and emergency response efforts.
42. The Requesting or Receiving Party shall provide, to the extent possible, local facilities and services for the proper and effective administration of the assistance. It shall also ensure the protection of personnel, equipment, and materials brought into its territory by or on behalf of the Assisting Entity for such purposes. Alternatively, the responding teams may get the logistics information from the JOCCA.
43. The Assisting Entity shall ensure that all members of its response team refrain from any action or activity that is incompatible with the nature and purpose of this Agreement, and take all appropriate measures to ensure observance of national laws and regulations²³. The above steps are described in Flowchart 6.

²³ AADMER, Article 13

Flowchart 6 : On-Site Deployment of Assets and Capacities



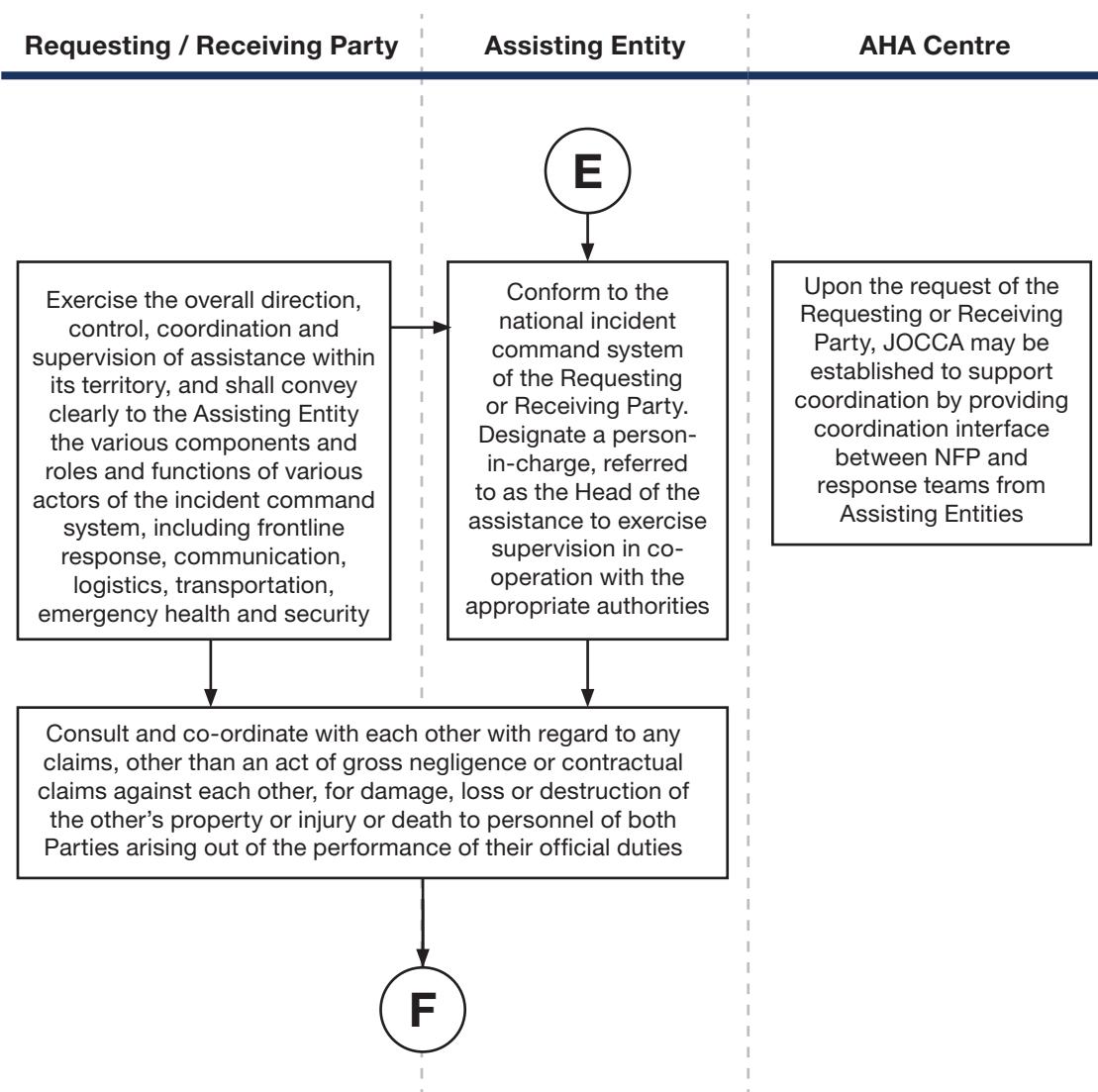
E. Direction and Control of Assistance

44. The Requesting or Receiving Party shall exercise the overall direction, control, coordination and supervision of the assistance within its territory. The Requesting or Receiving Party, however, shall convey clearly to the Assisting Entity the various components and roles and functions of various actors of the incident command system, including frontline response, communication, logistics, transportation, emergency health and security. The Requesting or Receiving Party may task the JOCCA to provide the coordination interface between the NFP of the Requesting or Receiving Party and the response teams from the Assisting Entities.
45. The incoming response teams from Assisting Entity shall conform to the national incident command system of the Requesting or Receiving Party. It is essential that the Assisting Entity designate a person who shall be in charge of and shall retain immediate operational supervision over the personnel and the equipment provided by it. The designated person, referred to as the Head of the assistance operation, shall exercise such supervision in co-operation with the appropriate authorities of the Requesting or Receiving Party²⁴. The AHA Centre shall be

informed by the Assisting Entity of the name and contact details of the Head of the Assisting Entity in the field.

46. The Assisting Entity and the Requesting or Receiving Party shall consult and co-ordinate with each other with regard to any claims, other than an act of gross negligence or contractual claims against each other, for damage, loss or destruction of the other's property or injury or death to personnel of both Parties arising out of the performance of their official duties²⁵. The above steps are described in Flowchart 7.

Flowchart 7 : Direction and Control of Assistance

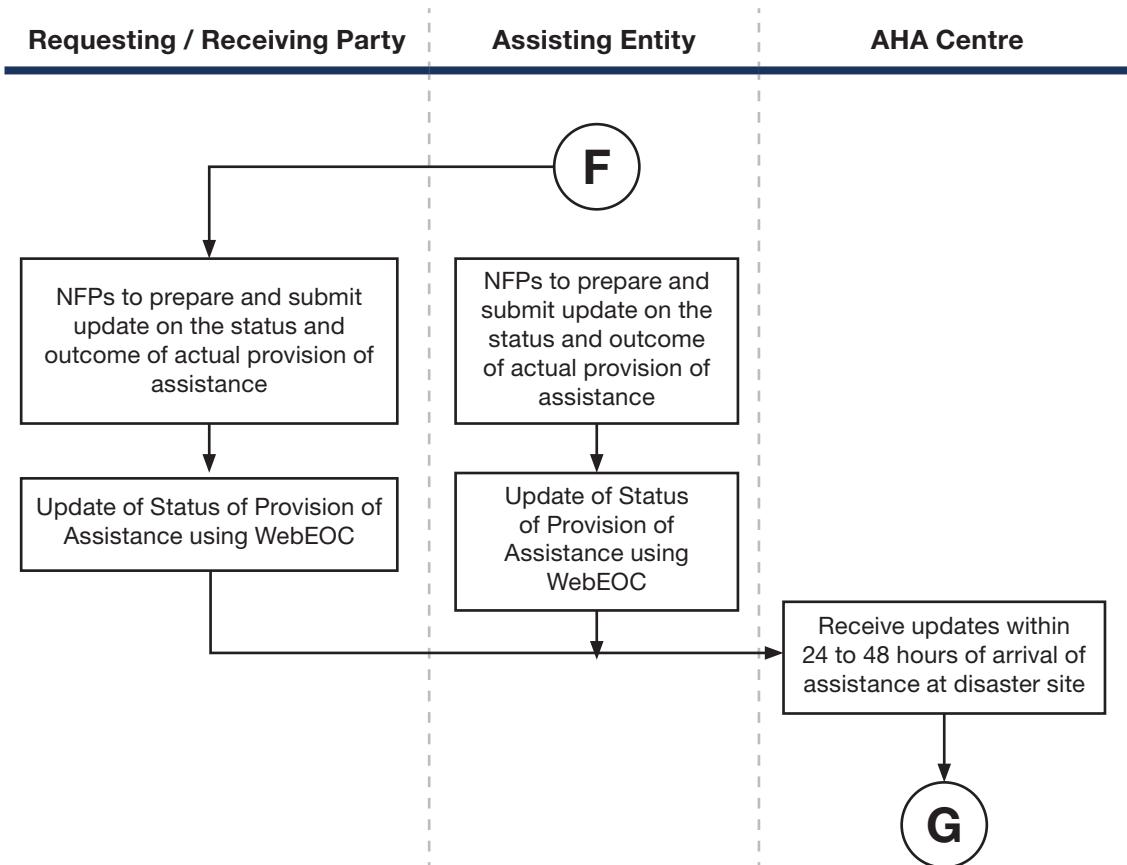


²⁵ AADMER, Article 12.3

F. Disaster Situation Update

47. The Requesting or Receiving Party and the Assisting Entity, through their designated NFPs, shall prepare and submit to the AHA Centre and other AMS an update on the status and outcome of actual provision of assistance using ASEAN WebEOC within 24 to 48 hours of their arrival at the site of the disaster. The above steps are described in Flowchart 8.

Flowchart 8 : Disaster Situation Update



G. Demobilisation of Assistance

48. The Assisting Entity shall begin the withdrawal process from the disaster site when the Incident Commander of the Requesting or Receiving Party has determined and declared that emergency phase is over and that national capacities can fully manage the situation.

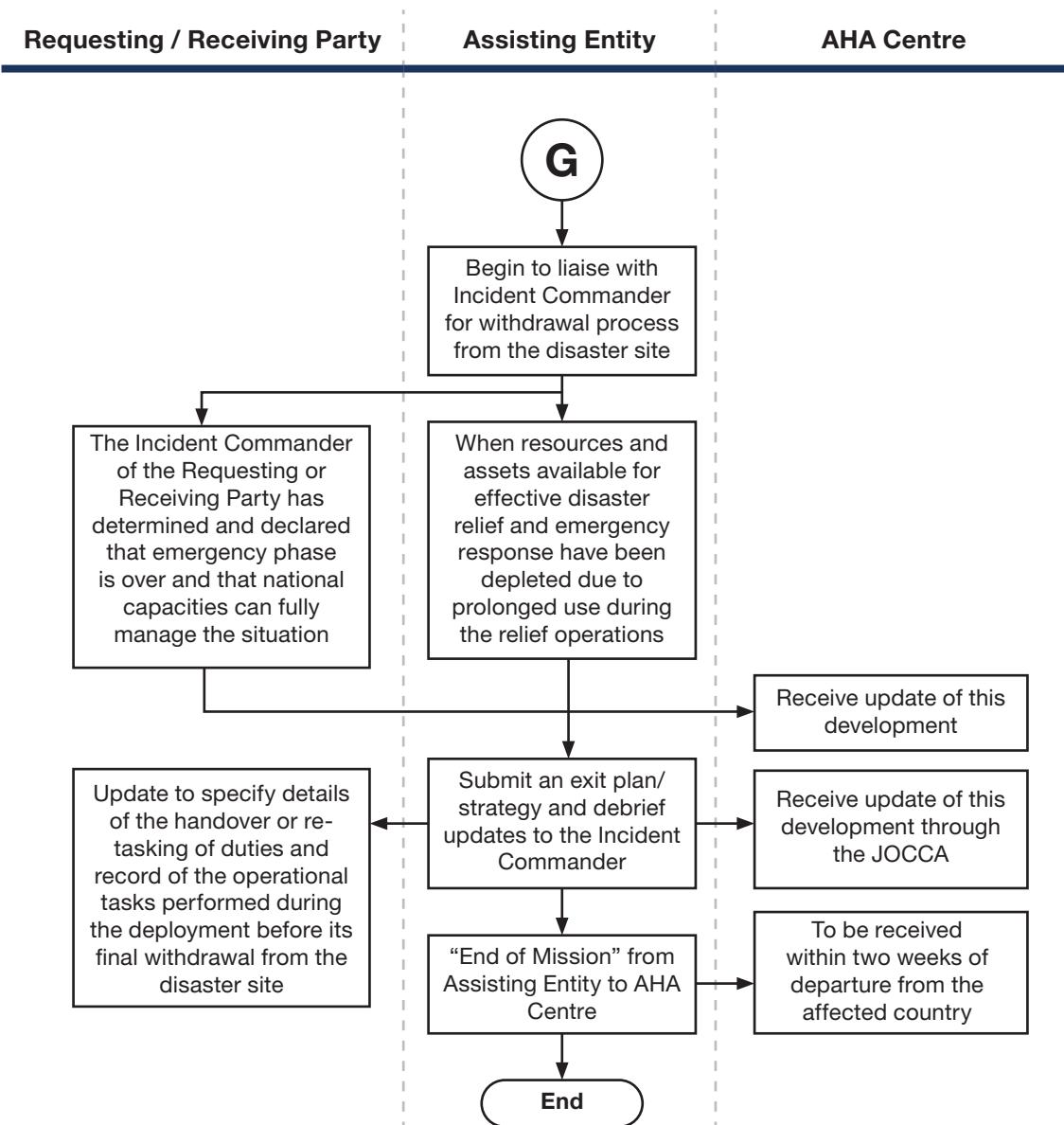
49. The response teams from the Assisting Entities shall also inform the AHA Centre through the JOCCA of its plan to demobilise to ensure that the withdrawal process is properly documented.

H. Updating

50. The response teams from Assisting Entities shall where applicable submit to the Incident Commander of the Requesting or Receiving Party an exit plan/strategy and debrief updates to specify the details of the handover or re-tasking of duties and record of the operational tasks performed during the deployment before its final withdrawal from the disaster site. Whenever possible, the response teams from Assisting Entities shall also furnish the AHA Centre through the JOCCA a copy of their respective exit plans.

51. The Assisting Entity shall also upon final withdrawal prepare their final update using the “End of Mission” form(see ANNEX O) and furnish them to the AHA Centre for consolidation within two weeks of departure from the affected country. The above steps are described in Flowchart 9.

Flowchart 9 : Demobilisation of Assistance & Updating



I. Review of Operations, Experiences and Lessons Learnt

52. The AHA Centre shall, in the case of mobilisation of regional standby arrangements, resources and facilities, prepare a comprehensive update of the deployment with inputs from all Parties that responded to the operations. The update should indicate the following main details:

- Introduction
- Chronology of Significant Events
- Details of Disaster Coordination Activities
- Details of Operations Conducted
- Lessons Learnt
- Recommendations
- Attachments

53. After completing this process, the AHA Centre shall compile the lessons learnt from the operations for dissemination in future regional meetings, forum, capacity-building activities, and planning for simulation exercises. The review shall also serve as inputs for the periodic review of regional standard operating procedures²⁶.

54. Any changes in SASOP will be tested every two years during ARDEX

VI. FACILITATION AND UTILISATION OF MILITARY ASSETS AND CAPACITIES

55. This SOP sets out the principles and procedures to governing the use of military assets in the provision of Humanitarian Assistance and Disaster Relief (HADR) and is based on AADMER. Should any part of these procedures contravene the AADMER, the latter shall prevail.

56. This SOP was developed by the ASEAN Defence Senior Officials Meeting (ADSOM) and endorsed by the 9th ASEAN Defence Ministers' Meeting (ADMM) on 16 March 2015 in Langkawi, Malaysia "as a constructive input for Chapter VI of SASOP in providing for a more systematic utilisation of militaries capacities in joint disaster relief operations". The SOP has also incorporated inputs from the ACDM and endorsed by the 27th ACDM Meeting on 14 December 2014 in Cambodia.

A. Over-Arching Principles

57. In the provision and receipt of military assets and assistance, the following principles shall be adhered to:

- a. The sovereignty, territorial integrity and national unity of States must be fully respected in accordance with the Charter of the UN and the Treaty of Amity and Cooperation in Southeast Asia. In this context, HADR shall only be provided upon the request or with the consent of the Receiving or Requesting Party.
- b. Foreign military assets involved in HADR operations remain under their own national command and control. They must be relevant to the scope and scale of the disasters.
- c. The militaries of states assisting in HADR operations shall not carry arms as well as vehicles and items or substances that are non-compliant with the customs, rule and the law of the Receiving or Requesting Party.
- d. Humanitarian principles shall be adhered to in the provision of HADR:
 1. Humanity: Human suffering shall be addressed wherever it is found, with particular attention to the most vulnerable in the population, such as children, women and the elderly. The dignity and rights of all victims must be respected and protected.
 2. Neutrality: HADR shall be provided without engaging in hostilities or taking sides in controversies of a political, religious or ideological nature.
 3. Impartiality: HADR shall be provided without discrimination as to ethnic origin, gender, nationality, political opinions, race or religion. Relief of the suffering must be guided solely by needs, and priority must be given to the most urgent cases of distress.
 4. Do No Harm: The militaries of Assisting Parties shall be aware of the possibility that the provision of HADR which is intended to produce positive outcomes can have unintended negative effects. Assisting militaries shall strive to avoid harmful unintended consequences.

- e. Assisting Parties shall support purely immediate needs and shall avoid creating long-term dependence on foreign military assets by the Affected State's Requesting or Receiving Party's population and civilian humanitarian organisations because this may impact long term recovery and development
- f. Assisting Parties shall pave the way for civilian agencies to take over following the initial critical phases of HADR.

B. Role Of The Requesting or Receiving Party

- 58. Prior to any disaster, the Receiving or Requesting Party, through its NFP, should have developed a national disaster plan, including mechanisms to establish a Local Emergency Management Authority (LEMA).
- 59. The Receiving or Requesting Party will exercise authority for the overall direction, coordination and supervision of disaster response within its territory and normally does so through its NFP. The NFP will, through its LEMA, activate or establish an EOC, immediately prior to or during a disaster. The On-Site Operations Coordination Centre (OSOCC) and Civil-Military Operations Centre (CMOC) support the LEMA and work under its direction. The EOC shall be the focal point for coordinating all national relief efforts including international assistance. A Multi-National Coordination Centre (MNCC) could be established by the Requesting or Receiving Party's military as a coordinating platform to facilitate assistance from militaries of the Assisting Parties. The MNCC shall support the EOC and work under the direction of the NFP.
- 60. Consistent with the International Law, the Guiding Principles for the Affected State are that it:
 - a. Has the responsibility to take care of victims of disasters occurring within its territory,
 - b. Has the right and primary role in initiating, organising, coordinating, implementing, regulating and monitoring HADR to include international assistance within its territory and
 - c. Can request (or when offered) consider assistance from the international community.
- 61. In the event that the Receiving or Requesting Party makes a request for international assistance, it can be directed by its NFP directly or through the AHA Centre, reflected in the "Update" form, or, where appropriate, from other entities.
- 62. The Receiving or Requesting Party shall specify the scope and type of military assistance required and, where practicable, provide the Assisting Party with such information as may be necessary to determine the extent to which it is able to meet the request. In the event that it is not practicable for the Receiving or Requesting Party to specify the scope and type of assistance required, the Receiving or Requesting Party and Assisting Party shall, in consultation, jointly assess and decide upon the scope and the type of assistance required. In line with Chapter V of SASOP, the AHA Centre could also facilitate the mobilisation of a joint ASEAN-ERAT, which may include ERAT-trained military personnel.

63. The Receiving or Requesting Party should facilitate HADR operations by the militaries of Assisting Parties by simplifying, as appropriate, the customs and administrative procedures related to entry, transit, stay and exit as well as utilisation of airspace, use of communications, equipment, certification of specialist personnel as required, etc. The rapid and efficient CIQ process is a critical component to the success of the provision of HADR. The Receiving or Requesting Party can be supported by AHA Centre, in line with Article 14 (c) and Article 16 (2) of AADMER, to facilitate CIQ process for the militaries of Assisting Parties.

64. The Receiving or Requesting Party shall provide, where possible, local facilities and services for the proper and effective administration of the HADR operation. It shall also ensure the protection of personnel, equipment, and materials brought into its territory by or on behalf of the Assisting Party for such purposes. The Receiving or Requesting Party may include stipulations indicating the settlement of disputes or the right of claims exemption in case of damages, losses, injuries or deaths caused by the operations.

C. Role of the Assisting Party's Military

65. The focus of the Assisting Party military will be the emergency phase of the HADR with the provision of military assets that the Receiving or Requesting Party may not have.

66. All militaries of Assisting Parties will conduct designated HADR operations with the full consent and knowledge of the Receiving or Requesting Party. If required, Liaison Officers from the Requesting or Receiving Party can be deployed to assist in the coordination of tasks to be undertaken for the HADR operation.

67. The Assisting Party shall:

- Respect the culture and religious sensitivities of the Receiving or Requesting Party,
- Abide by the principle of "Do No Harm,"
- Through its NFP, coordinate its HADR operations with the Receiving or Requesting Party's NFP in accordance with their national disaster plan,
- Be self-supporting for the duration of the HADR operation in terms of transport, fuel, food rations, water and sanitation, maintenance and communications in order to avoid placing additional stress on the Receiving or Requesting Party's local authorities.
- In coordination with the Receiving or Requesting Party, take into account the environmental impact of its HADR operation, and
- Provide HADR without seeking to:
 - Obtain financial reimbursement,
 - Further a political or religious viewpoint,
 - Intervene in the internal affairs of the Receiving or Requesting Party,
 - Gain a commercial advantage, or
 - Gather sensitive political, economic or military information irrelevant to the HADR operation.

D. Use of Military Assets

68. In the ASEAN region, military forces are often required to provide HADR. When required to do so, the Assisting Party's military should seek advice from and work closely with the Receiving or Requesting Party's NFP and relevant Competent Authorities. The Receiving or Requesting Party's NFP would be the lead but Receiving or Requesting Party could also appoint any other relevant authorities or subject matter expert to work on the HADR situation.

69. HADR operations by the military can be divided into three broad categories:

- a. Direct Assistance - face to face distribution of goods and services,
- b. Indirect Assistance - is at least one step removed from the population and involves such activities as transporting relief goods or relief personnel, and
- c. Infrastructure Support - Involves providing general services, such as road repair, airspace management and power generation that facilitate relief efforts.

Cognizant that there are various types of military support for HADR operations, the Assisting Party and the Receiving or Requesting Party will refer to ADMM implementing mechanisms, including the ADMM Logistics Support Framework and future ASEAN initiatives related to HADR operations.

E. Identification and Vehicle Markings

70. Military personnel involved in the HADR operation shall be permitted to wear uniforms with distinctive identification while performing official duties.

71. For the purpose of entry into and departure from the territory of the Receiving or Requesting Party, members of the HADR operation shall be required to have:

- a. An individual or collective movement order issued by or under the authority of the Head of the HADR operation or any appropriate authority of the Assisting Party.
- b. A personal identity card issued by the appropriate authorities of the Assisting Party.
- c. Foreign military personnel involved in HADR operations must have official permission for entry from national authority and any movements must be under authority of the Receiving or Requesting Party.

72. Aircraft and vessels used by the military personnel the Assisting Party will be allowed to use its registration and easily identifiable license plate without tax, licenses and/ or any other permits. All authorised foreign military aircraft will be treated as friendly aircraft and will receive open radio frequencies and Identification Friend or Foe (IFF) by the Receiving or Requesting Party's authorities. These vehicles (aircrafts and vessels) involved in the HADR operations must get official permission for entry and exit from the Receiving or Requesting Party and any movements must be under authority of the Receiving or Requesting Party.

F. Guidelines for Medical Assistance

73. Medical assistance guidelines in HADR operations should be, where practicable, in accordance to the Receiving or Requesting Party's policy for the provision of healthcare and assistance. All medical assistance rendered would require the Assisting Party's military medical team to maintain proper records so that appropriate follow-up could be rendered upon its departure. The ASEAN Centre of Military Medicine (ACMM) may facilitate military medical activities in HADR operation among AMS by supporting medical information, developing joint plans, as well as coordinating other military medical services and activities.

G. Respect of National Laws and Regulations

74. Members of HADR operation shall refrain from any action or activity incompatible with the nature and purpose of AADMER and this SOP.

75. Members of the HADR operation shall respect and abide by all national laws and regulations. In this regard, the Head of the HADR operation shall take all appropriate measures to ensure observance of national laws and regulations. The Receiving or Requesting Party shall cooperate to ensure that members of the HADR operation observe national laws and regulations.

H. Assessment

76. Assisting Parties deploying military forces in support of HADR should seek initial and on-going assessments from the Receiving or Requesting Party and/or the AHA Centre. Where appropriate, any assessment conducted by the Assisting Parties should be shared with other Assisting Entities; likewise, military response to any Request for Assistance (RFA), should be coordinated with the militaries of other Assisting Parties and AHA Centre to minimise duplication, confusion and gaps in support. Joint military assessments, including participation in Receiving or Requesting Party's assessments, if possible, are strongly recommended.

77. Planning should be conducted from the onset of HADR operations to ensure a successful disengagement from or transition to the Receiving or Requesting Party, as soon as they can fully resume or assume the required tasks. Such time and/or condition based transition should be planned and jointly agreed upon by the Receiving or Requesting Party and Assisting Parties.

78. Assessments should be needs driven, complementary to and coherent with HADR operations.

I. Coordination With Requesting or Receiving Party

79. The Receiving or Requesting Party shall exercise overall direction, control, coordination and supervision of the HADR operation within its territory. The Assisting Parties shall conform to the national incident command system of the Receiving or Requesting Party and designate, in consultation with the Receiving or Requesting Party, a person who shall be in charge of and retain immediate operational supervision over the personnel and the equipment provided by it. The Head of HADR operation shall exercise such supervision in cooperation with the appropriate authorities of the Receiving or Requesting Party or through the AHA Centre.

80. Militaries from the Assisting Parties shall inform the respective NFP and/or AHA Centre on assistance provided and actions taken.

J. Military-to-Military Coordination

81. Information sharing and coordination with all Assisting Entities should be initiated as soon as possible, even before Assisting Party's military assets are deployed. Where there are multiple militaries from Assisting Parties, they are expected to liaise, communicate and coordinate with the Receiving or Requesting Party's NFP and military, civilian Assisting Entities, and with each other to develop and utilise one common set of practices and procedures. In large-scale emergencies, the militaries of Assisting Parties coordinate through the MNCC.

82. The military-to-military coordination is usually undertaken by the Receiving or Requesting Party's military in support of the Receiving or Requesting Party's NFP. It is encouraged that liaison officers and/or planning teams be placed at the MNCC and AHA Centre.

K. Military-to-Civilian Coordination

83. Military-to-civilian coordination will be led by the Receiving or Requesting Party's NFP. The military will work with civilian partners through the civil-military coordination cell of the MNCC.

VII. STANDARD OPERATING PROCEDURE (SOP) FOR COORDINATION OF EMERGENCY MEDICAL TEAMS (EMTs) IN ASEAN (WORKING TITLE)

Version 3.1
Date: 25 March 2021

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List of Acronyms & Abbreviations

A	AADMER	ASEAN Agreement on Disaster Management and Emergency Response
	ACDM	ASEAN Committee on Disaster Management
	AHA Centre	ASEAN Coordinating Centre for Humanitarian Assistance on disaster management
	AJDRP	ASEAN Joint Disaster Response Plan
	AMS	ASEAN Member States
	ASEAN-ERAT	ASEAN Emergency Response and Assessment Team
C	CIQ	Customs, Immigration and Quarantine
D	DOH	Department of Health
E	EMTs	Emergency Medical Teams
	EMTCC	Emergency Medical Team Coordination Cell
H	HNA	Health Needs Assessment
I	I-EMT	International Emergency Medical Team
J	JOCCA	Joint Operations and Coordination Centre of ASEAN
M	MDS	Minimum Dataset
	MOH	Ministry of Health
	MOPH	Ministry of Public Health
N	N-EMT	National Emergency Medical Team
	NDMO	National Disaster Management Organisation
O	OAOR	One ASEAN One Response
	OSOCC	On-Site Operations Coordination Centre
P	PHEOC	Public Health Emergency Operations Centre
R	RDC	Reception and Departure Centre
S	SASOP	Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response Operation
V	VOSOCC	Virtual On-Site Operations Coordination Centre

I. Introduction

1. ASEAN Member States (AMS) have been committed to provide effective mechanisms to achieve substantial reduction of disaster losses, and to jointly respond to disaster emergencies through concerted national efforts and intensified regional and international cooperation as stipulated in the ASEAN Agreement on Disaster Management and Emergency Response (AADMER) under the vision of “One ASEAN, One Response” (OAOR) as adopted in the ASEAN Declaration on One ASEAN, One Response: ASEAN Responding to Disasters as One in The Region and Outside The Region on 6 September 2016.
2. Emergency medical responses provided by Emergency Medical Teams (EMTs) have a critical role to play in saving lives and reducing mortality and morbidity. To ensure that EMT operations are reliable and trustworthy and their operations meet the needs of the affected populations, concerted and explicit coordination and collaboration among both international and national EMTs directed by the Ministry of Health of the affected country is indispensable.
3. This Standard Operating Procedure (SOP) aims to (i) ensure the quality and consistency of EMT operations in the affected country in order to contribute to the vision of OAOR and (ii) complement the operating procedures and protocols developed by the international community and the ASEAN and East Asia regions.
4. As the health sector’s contribution to the vision of OAOR, this SOP is a component of the ASEAN Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response Operations (SASOP).
5. This SOP applies specifically to civilian EMTs with no consideration whether civilian EMTs might utilize military assets and capacities to support team operations. The facilitation and utilization of military assets and capacities including military EMTs is set out in Chapter VI of SASOP.

II. Institutions

A. Ministry of Health/Ministry of Public Health/Department of Health

6. The terms Ministry of Health (MOH)/ Ministry of Public Health (MOPH) and Department of Health (DOH) in this SOP will collectively be referred as Ministry of Health (MOH). The MOH shall be the primary entity responsible for the overall coordination of National Emergency Medical Teams (N-EMTs) and International Emergency Medical Teams (I-EMTs) which are deployed to support N-EMTs.

B. Public Health Emergency Operations Centre (PHEOC)

7. A public health emergency operations centre (PHEOC) is a central location for coordinating operational information and resources for strategic management of public health emergencies and events. PHEOCs provide communication and information tools and services and a management system during a response to an emergency or event. PHEOCs also provide other essential functions to support decision-making and implementation, coordination, and collaboration²⁷.

27 WHO, A Systematic Review of Public Health Emergency Operations Centre (EOC), 2013.

PHEOCs can be established and managed by both national and local authorities (which is referred to in this SOP as local PHEOC), depending on the administration of the MOH of the affected country.

C. Emergency Medical Team Coordination Cell (EMTCC)

8. The core purpose of the Emergency Medical Team Coordination Cell (EMTCC) is the overall coordination of the surge of responding EMTs (both National and International) to best meet the excess healthcare needs resulting from increased morbidity due to the emergency, or from damage to existing capacity. The EMTCC should be activated, managed and staffed by trained and experienced personnel.
9. Integration of the EMTCC within the existing national PHEOC is ideal for an effective integration of the I-EMTs with existing national health services. The EMTCC can be established and managed in the local level (which is referred to in this SOP as Sub-EMTCC) if the local PHEOC is activated.

D. Emergency Medical Team (EMT)

10. The Emergency Medical Team (EMT) refers to groups of health professionals and supporting staff aiming to provide direct clinical care and public health services to populations affected by disasters or outbreaks and emergencies as surge capacity to support the local health system²⁸. In this SOP, EMTs include government civilian and non-governmental EMTs and they can be subclassified as either National (N-EMT) or International (I-EMT) depending on area of response.

E. AHA Centre

11. The AHA Centre shall facilitate cooperation and coordination among the relevant entities including the affected and assisting countries, and with relevant United Nations and international organizations, in promoting regional collaboration.

III. Disaster Preparedness

A. National Focal Units for Emergency Medical Team (EMT) Coordination

12. The MOH shall identify the first contact point responsible for managing offers and requests for EMT deployments. The national focal units for EMT coordination in times of disaster should be officially designated in MOH structure. The list of contact information is provided in **Annex 1**.

B. Inventory of Emergency Medical Team (EMT) Assets and Capacities

13. The inventory of EMT assets and capacities is managed by the AHA Centre as part of ASEAN Standby Arrangements. The AHA Centre requests the ASEAN Committee on Disaster Management (ACDM) Focal Units or Heads of National Disaster Management Office (NDMO) to earmark all resources for the ASEAN Standby Arrangements including EMT assets and capacities in the form of List of Modules of ASEAN Joint Disaster Response Plan (AJDRP).

14. The MOH shall identify EMT assets and capacities and submit relevant information and data on EMT assets and capacities to respective NDMO in a timely manner when required.

C. Emergency Medical Team (EMT) Capacity Building and Strengthening

15. The MOH shall ensure that the EMTs achieve and maintain the EMT minimum standards as set out in the Classification and Minimum Standards for Foreign Medical Teams in Sudden Onset Disasters (WHO, 2013) and other relevant existing national and regional standards and requirements.
16. The MOH shall take necessary measures to enhance EMT assets and capacities and to facilitate the EMT organizations to register their EMTs within existing national coordinating structure or on the EMT Global Classification.

IV. Emergency Response

A. Request for Assistance/Offer of Assistance and Registration of EMTs

17. The MOH shall send the request for assistance or initiate the offer of assistance through the NDMO, following the procedures stipulated in the existing SASOP.
18. Information sharing and coordination with all assisting entities should be initiated as soon as possible.

B. Mobilisation of Emergency Medical Teams (EMTs)

19. When mobilising EMTs, the organizations which deploy EMTs shall ensure that the assets and capacities of EMTs provided to the affected country meet the standards set out in Classification and Minimum Standards for Foreign Medical Teams in Sudden Onset Disasters (WHO, 2013) and other relevant existing standards and requirements of the affected country. The organizations shall also ensure that EMTs are self-sufficient with their subsistence requirements so as not to further burden the affected country in the course of operating within its territory.
20. The I-EMTs shall obtain essential information for mobilisation including registration requirements, visa and customs procedures and other information as provided in **Annex 2** or AHA Centre's mechanisms such as ASEAN WebEOC or National Focal Units of the affected country. For information sharing, I-EMTs may also inform their deployment via V-OSOCC.
21. The I-EMTs shall submit the EMT Registration Form to their respective NDMO. The NDMO of assisting countries will then include the EMT Registration Form in the submission of SASOP Forms: Offer of Assistance and Contractual Arrangement. The registration and official clearance from the Affected State shall be obtained prior to departure from origin country.
22. To ensure the effective and timely response of assistance upon the confirmation of the request for assistance, the EMTs shall ensure coordinated efforts are made with the MOH for the immediate response.

23. The I-EMTs arriving in the territory of the receiving country via air, land or sea entry checkpoints shall immediately proceed to the Customs, Immigration and Quarantine (CIQ) facility for necessary immigration procedures, customs clearance and quarantine checks. In this regard, the MOH shall coordinate with relevant entities to facilitate the CIQ processes and also ensure that the National focal units or their designated representatives are available on standby during the clearance process of the medical supplies and equipment brought to the territory of the requesting country.
24. The MOH shall designate official(s) to provide an initial briefing to the I-EMTs at a staging point or Reception and Departure Centre (RDC), where ASEAN-ERAT will support the process, immediately after the completion of the CIQ processes, to ensure seamless on-site coordination. The incoming I-EMTs shall be registered at the staging point or RDC and shall obtain essential information including the EMTCC location and contact details, and coordination meeting locations and times.
25. The I-EMTs shall report to the EMTCC to complete EMT registration and submit required documents including **EMT Registration Form (Annex 3)**, copies of passport of each team member and other registration requirements as referred in Annex 2.
26. Regarding the authorization to practice for medical professionals, I-EMT registration needs an approval from relevant Health Professional Regulatory Authorities through National Focal Points facilitating mechanism. The I-EMTs shall follow the regulation of the receiving country. If the I-EMTs would like to receive the authorization prior to their deployment, the I-EMTs can request the receiving country, through National Focal Units, to facilitate the approval process.
27. The EMTCC shall liaise with the EMTs to match and task them to an identified area based on the EMT type and capabilities and the identified needs or gaps. The EMTCC shall also facilitate in-country movement of I-EMTs to disaster sites.
28. Full registration, authorization to practice for medical professionals, and tasking processes may be conducted at the RDC if the affected country has enough capabilities.

C. On-Site Operations of Emergency Medical Teams (EMTs)

29. The I-EMTs shall report to the local PHEOC, if existing and activated, to receive their assignment and essential information for on-site operations.
30. The EMTCC or Sub-EMTCC, if established shall provide the I-EMTs essential information for on-site operations such as situation update to the extent known, secured access to operating grounds and others as provided in **Annex 4**.
31. The EMTCC or Sub-EMTCC, if established, shall support the operations of the I-EMTs such as providing local medical coordinator, language interpreters and others as provided in **Annex 5**.

32. The EMTCC or Sub-EMTCC, if established, shall organize EMT coordination meetings for information sharing and effective and efficient coordination among EMTs and relevant entities.
33. If EMTCC is not established, the I-EMTs shall organize regular meetings with other EMTs to share information and resources and also to collectively plan EMT operations such as setting up Patient Referral System.
34. All the EMTs operated in the affected area shall utilize standard triage system.
35. The EMTs shall maintain adequate patient notes and discharge and referral documents after starting its operations. For the ease of compiling Emergency Medical Team - Minimum Dataset (MDS) Daily Reporting Form (Annex 10), the EMTs shall use the standardized **Medical Record Form (Annex 6)** and **EMT-MDS Tally Sheet (Annex 7)**. Also, in case of patient referral, the EMTs shall use **Patient Referral Form (Annex 8)**. All these forms need to be submitted to EMTCC.
36. The EMTs shall prepare and confirm its Operational Plan and Exit Strategy and inform the EMTCC or Sub-EMTCC of anticipated transition or departure date.
37. If JOCCA is activated, information sharing will be established with EMTCC, and I-EMTs if necessary.

D. Health Needs Assessment

38. The I-EMTs shall provide additional Health Needs Assessment when requested by the EMTCC **[Annex 9]**.

E. Direction and Coordination of Assistance

39. The MOH through the EMTCC or Sub-EMTCC shall conduct the overall direction, coordination and supervision of the EMTs operations within its territory.
40. The EMTCC or Sub-EMTCC shall map in real-time all EMT deployments and keep track of all anticipated EMT transition and departure; establish and maintain regular contacts with EMTs and local authorities; and conduct field quality assurance and support visits to EMTs.

F. Periodic Reporting/Daily Report

41. The EMTs shall submit **Minimum Dataset (MDS) Daily Report Form (Annex 10)** to the EMTCC or Sub-EMTCC to report their activities on daily basis.
42. The EMTCC or Sub-EMTCC shall submit **EMTCC Situation Report (Annex 11)** to the PHEOC of the MOH at the end of the first day and the third day. Thereafter, a reporting frequency shall be determined by context and need. Also, EMTCC shall send feedback form to I-EMTs in timely manner.

G. Demobilisation of Assistance

43. The EMTs shall inform the EMTCC or Sub-EMTCC the anticipated end-of-operation date as early as possible, or at least 1 to 2 weeks prior to that date if different from the one initially communicated at the time of the registration.
44. The EMTs shall implement an exit strategy including plans for handover of all medical documentation, donation of any medical equipment, transfer of care for any residual inpatient and others in accordance to the affected country by liaising with the EMTCC for the withdrawal of the team from the operations.

H. Reporting (Handover and Exit Phase)

45. The EMTs shall submit to the EMTCC or Sub-EMTCC with **Emergency Medical Team Exit Report (Annex 12)** which contains transferred patients at exit list, donated medication list and donated equipment or supply list to specify the details of the handover or re-tasking of duties and record of the operational tasks performed during the deployment before its final withdrawal from the site.
46. The I-EMTs shall also upon final withdrawal prepare their final report using Annex 'O' of SASOP as reference and furnish them to the AHA Centre via their MOH and the NDMO for consolidation within two weeks of departure from the affected country.

I. Review of Operations, Experiences and Lessons Learnt (Post-deactivation Phase)

47. I-EMTs shall conduct Operational reviews of EMT response and share the report (Annex 13) to all AMS to support learning as well as revision.

V. Review

48. SOP for Coordination of Emergency Medical Teams (EMTs) in ASEAN shall be revised and updated concurrent with SASOP and/or as necessary.

VI. ANNEXES

		Note
Annex 1	List of National Focal Units for EMT Coordination and Information on PHEOC	Information will be collected by the Project to complete the list.
Annex 2	List of Essential Information for Mobilisation	-
Annex 3	Emergency Medical Team Registration Form	WHO EMTCC Handbook
Annex 4	List of Essential Information for On-site Operation	-
Annex 5	List of Supporting Functions of the EMTCC or Sub-EMTCC	-
Annex 6	Medical Record Form	-
Annex 7	Emergency Medical Team (EMT) - Minimum Dataset (MDS) Tally Sheet	WHO EMT MDS Working Group Report
Annex 8	Patient Referral Form	WHO EMTCC Handbook
Annex 9	Forms for (Rapid) Health Needs Assessment	-
Annex 10	Emergency Medical Team - Minimum Dataset (MDS) Daily Reporting Form	WHO EMTCC Handbook
Annex 11	EMTCC Situation Report	WHO EMTCC Handbook
Annex 12	Emergency Medical Team Exit Report	WHO EMTCC Handbook
Annex 13	AMS I-EMT Lessons Learnt Report Template	-

Reference

- Standard Operating Procedure for Regional Standby Arrangements and Coordination of Joint Disaster Relief and Emergency Response Operations (SASOP) (ASEAN, 2010)
- Emergency Medical Team Coordination Cell (EMTCC) Coordination Handbook (Version 0.12) (WHO, June 2017)

Additional Note

The forms/contents of the Annex, which have been developed under the WHO EMT initiative are subject to change according to its revision process, while the rest shall be revised based on the endorsement by SOMHD through ASEAN Health Cluster2.

List of Essential Information for Mobilisation

Topic
1. Registration requirements <ul style="list-style-type: none">- EMT Registration Form- Copies of passport of each team member- Authorization to practice for medical professionals- Malpractice insurance- etc.
2. Visa and customs procedures
3. Authorization to practice for medical professionals
4. Situation overview to the extent known
5. Identification of health services which assistances might need
6. General information of incident area including geography, weather, language, politics and government, religion, culture and prohibited activities
7. Essential information on the arrival and registration procedures at RDC
8. Airport/port procedures and services
9. EMTCC/OSOCC location
10. National Focal Units and Contact information
11. Primary and secondary risks associated with the event in each location
12. Available communication channels

ANNEX 4

List of Essential Information for On-site Operations

Topic
1. Situation update to the extent known
2. Secured access to operating grounds
3. Status of health facilities in the affected area
4. Details on the coordination with local hospitals for patient referral
5. EMTs in operations
6. Meeting schedule and venue
7. Details on the coordination with EMTCC
8. Medical waste management
9. Management of dead bodies in disaster
10. Provincial medical incident command system and local authorities
11. Maps and information on incident sites, operation sites, law enforcement station, drug store, shops, patrol stations.
12. Contact person/focal units/liaison personnel/interpreter
13. Available channels of communication
14. Sanitation concern including epidemic disease, endemic disease, sporadic disease, tap water purification, excretion and toilet management
15. Security and mobile escort
16. Reporting mechanism / information management system for EMT

ANNEX 5

List of Supporting Functions of the EMTCC or Sub-EMTCC (if existing and capable)

Topic
1. Provide language interpreters
2. Oversee securities
3. Set up communication channels
4. Facilitate patient referral to local hospitals
5. Provide local medical coordinator
6. Facilitate authorization to practice for foreign medical professional
7. Conduct quality assurance of EMT operations
8. Other functions stipulated in the WHO EMTCC Handbook

ANNEX A:
Designation of National Focal Point and Competent Authorities

NATIONAL FOCAL POINT	
Name	
Designation	
Institution	
Address	
Phone / Fax	
Mobile Phone	
E-mail	

24/7 OPERATIONS CENTRE	
Institution	
Address	
Phone / Fax	
Mobile Phone	
E-mail	

The contact details provided for this segment should be for the Duty Officer that is on standby at the 24/7 Operations Centre.

COMPETENT AUTHORITIES	
1.	Institution
	Contact Person
	Designation
	Address
	Phone / Fax
	Mobile Phone
	E-mail
2.	Institution
	Contact Person
	Designation
	Address
	Phone / Fax
	Mobile Phone
	E-mail

3.	Institution	
	Contact Person	
	Designation	
	Address	
	Phone / Fax	
	Mobile Phone	
	E-mail	

ANNEX B:
AJDRP Module 1. Search and Rescue

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	Medium USAR teams				
2.	Heavy USAR teams				
3.	Fire fighting equipment and personnel				
4.	Flood rescue personnel and equipment				
5.	Flood containment				
6.	Flood pumps				
7.	Hazardous Material detection and handling (HAZMAT)				
8.	Search and Rescue in HAZMAT environment				
9.	Chemical, biological, radiological and nuclear (CBRN) detection and handling				
10.	Equipment for livestock and animal rescue and handling				

NOTES :

Contact Details Indicate the agency name, name, designation, address, phone/fax, mobile phone and e-mail address.

Remarks Indicate the highest decision making body, the National Focal Point, Competent Authorities and other information as necessary.

ANNEX C:
AJDRP Module 2. Water, Sanitation, and Hygiene Services

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	High Capacity Pumps				
2.	Water treatment units				
3.	Water Bladders				
4.	WASH team toolkit set				
5.	Rapid Latrine Set				
6.	Hygiene parcel (kit)				

ANNEX D:
AJDRP Module 3. Health and Medical Services

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	Specialised health teams for assessments, surveillance, and coordination				
2.	Emergency Medical Teams Type 1 for Outpatient Emergency Care				
3.	Emergency Medical Teams Type 2 for Inpatient Surgical Emergency Care				
4.	Emergency Medical Teams Type 3 for Complex Inpatient Referral Care				
5.	Medical tents/ health posts and field hospitals				
6.	Medical aerial evacuation of disaster victims				
7.	Body bags for cadavers				
8.	Disaster Victim Identification Team				

ANNEX E:
AJDRP Module 4. Food Assistance

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	Ready to eat food				

ANNEX F:
AJDRP Module 5. Non-Food Items (NFIs)

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	Tarpaulin / plastic sheet				
2.	Family tent				
3.	Family kit parcel				
4.	Kitchen kit parcel				

ANNEX G:
AJDRP Module 6. Early Recovery

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	Structural/Civil Engineers				
2.	Waster and Debris Management Specialist				

ANNEX H:
AJDRP Module 7. Logistics

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	Generator				
2.	Tent for Mobile Office				
3.	Mini / Micro Unmanned Aerial Vehicle (UAV) / Drones				
4.	Air Transport				
5.	Sea Transport				
6.	Land Transport				
7.	Tent for temporary storage				
8.	Procurement Officer				
9.	Warehouse Manager				
10.	Transport and Fleet Management				
11.	Ground Handling at the airport				
12.	Import and Export (Customs)				

ANNEX I:
AJDRP Module 8. Emergency Telecommunications

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	Information Technology Officer				
2.	Emergency Telecommunication Team and equipment				

ANNEX J:
AJDRP Module 9. Expertise

S/NO	ITEMS	CAPACITY	AGENCY	CONTACT DETAILS	REMARKS
1.	Humanitarian Coordinator				
2.	Incident Command System				
3.	Information Management				
4.	Civil Military Coordination				
5.	Communications				
6.	Camp Coordination and Camp Management including tracking and monitoring displacement and family reunification				

ANNEX K



“UPDATE” NO_____#
TO AHA CENTRE

1. General Information

Office Reference Number :
 From :
 To :
 Day / Date / Time :
 Disaster Event Name/ Location(s) :

2. Submitting Authority

National Focal Point
 Name :
 Designation :
 Institution :
 Address :
 Phone/ Fax :
 Email :

3. General Description of Disaster Event (Please state briefly the type(s) of hazard, the specific location(s), date, time and duration of impact, and the factors or circumstances that triggered or brought about the disaster event.)

Delete where applicable.

4. Impact on Human Lives (Please state briefly the estimated number of people affected, estimated number of people evacuated, the updated number of dead, injured and missing persons, per disaster event location as appropriate.)

5. Impact on Housing, Property and Livelihoods (Please state briefly the estimated number of houses completely destroyed and damaged houses, the estimated cost of losses in housing, property and sources of livelihoods.)

6. Impact on Lifelines and Public Infrastructures (For lifelines, please state briefly the present state of water sources, power generation, telephone and other communication services, transportation services, among others. For public infrastructures, please indicate the condition of roads and bridges, major irrigation facilities, schools, hospitals and community health facilities, among others.)

7. Impact on the Environment (Please describe any immediate, short-term or long-term impacts or consequences of the disaster event on the environment.)

8. Immediate Needs (Please list in order of priority the specific needs to manage or cope with the current emergency. This may include emergency response teams or expertise, emergency logistics, equipment and supplies, and water and sanitation facilities, among others.)

9. Actions Taken (Please state the specific actions or steps taken by the Government to respond to the emergency situation, including any declaration of state of emergency. Indicate the national, local and international agencies or organisations and their respective resources that have been mobilised for disaster response.)

10. Relevant Maps (Please attach the location maps of the disaster site(s). Indicate any websites where the maps could be viewed.)

Signed by

signature

(Name)
[National Focal Point], [Party]

ANNEX L

ONE ASEAN
ONE RESPONSE

SITUATION “UPDATE” NO_____#
FROM THE AHA CENTRE

1. General Information

Office Reference Number :
 From :
 To :
 Day / Date / Time :
 Disaster Event Name/ Location(s) :

2. Summary of Disaster Event (Please state briefly the type(s) of hazard, the specific location(s), date, time and duration of impact, the factors or circumstances that triggered or brought about the disaster event, and the general extent of losses.)

See attachment. (Please attach relevant information.)
 # Delete where applicable.

3. Assessment of Disaster Impact (Please assess and summarise the impact of the disaster event on human lives, housing and property and livelihoods, lifelines and public infrastructures, and the environment.)

See attachment. (Please attach relevant information.)

4. Assessment of Needs (Please assess the current and anticipated needs of the updating Parties to respond to the disaster situation.)

See attachment. (Please attach relevant information.)

5. Actions Taken and Resources Mobilised (Please summarise the actions taken and resources mobilised by Parties concerned, including any request for or offer of humanitarian assistance.)

See attachment. (Please attach relevant information.)

6. Others (Please provide relevant information received from third party, i.e. other countries, international organisations, media, etc., that may be useful for the National Focal Points to know.)

See attachment. (Please attach relevant information.)

7. Recommendations (Please provide assessments of possible or anticipated resource requirements of the Parties concerned and the necessity to mobilise earmarked assets and capacities of Parties under the Regional Standby Arrangements.

(Name)
AHA Centre

THE REQUEST FOR ASSISTANCE FORM is DELETED and the request for assistance will be indicated in situation update or through email

ANNEX M



“OFFER” OF ASSISTANCE

1. General Information

Office Reference Number :
From :
To :
Day / Date / Time :
Disaster Event Name/ Location(s) :

2. Assisting Entity

National Focal Point / :
Country / Organisation :
Name :
Designation :
Institution :
Address :
Phone/ Fax :
Email :

Head of Assistance Operation:

(Please inform the name and contact details of the Head of Assistance Operation in the field, in line with paragraph no. 43)

Name :
Designation :
Institution :
Address :
Phone/ Fax :
Email :

3. General Description of Assistance Offered (Please indicate the type and scope of assistance being offered)

4. Offered Resources (Please indicate the type, specification and scope of assistance offered)

Add additional sheets as necessary.

5. Administrative arrangements (Please indicate information on the administrative arrangements)

a. Maximum duration of assistance

b. Funding Arrangement (Please indicate the funding arrangements, such as whether the Assisting Party will shoulder the costs related to the use of the resources or whether the Receiving Party will need to shoulder some/ all of the costs, etc)

c. Terms and Conditions (Please indicate the conditions for the Receiving Party to use the personnel and equipment/ materials, such as arrangement for maintenance/ usage of the equipment, limits of liability, protection of personnel and equipment, local services and facilities for personnel, etc.)

Signed by

signature

(Name)
[Focal Point], [Entity]

ANNEX N



ONE ASEAN
ONE RESPONSE

CONTRACTUAL ARRANGEMENTS FOR ASSISTANCE

1. General Information

Office Reference Number :
 From :
 To :
 Day / Date / Time :
 Disaster Event Name/ Location(s) :

2. Resources to be Mobilised

a. Personnel				
No	Name/ID number	Designation/ Institution	Description (Please indicate the skills, qualification and specific task personnel assigned)	Destination locations
1	2	3	4	5

b. Equipment and Materials				
No	Type	Description (Please indicate the specification and type of resource to be mobilised, its capabilities and purpose and its use for the incident)	Quantity	Destination Locations
1	2	3	4	5

Add additional sheets as necessary.

3. Transportation of Assisting Resources

3a. Mobilisation (Please indicate details on transportation method, time of departure and arrival, and port of arrival of the assisting resources)

Date		Time		Transportation Method	Port of Arrival
Depart	Arrive	Depart	Arrive		

3b. Demobilisation (Please indicate details on transportation method, time of departure and arrival, and port of departure of the assisting resources)

Date		Time		Transportation Method	Port of Departure
Depart	Arrive	Depart	Arrive		

4. Customs and Immigrations (Please indicate agreed arrangements for customs and immigration, such as exemptions and facilities for the personnel, exemptions from taxation, duties and other charges on the equipment and materials, etc.)

5. Logistic Support (Please indicate logistic support to be given by the Requesting/Receiving Party to assist the assisting personnel, such as food, accommodation, transportation, communication arrangements, local contacts and hosting authorities, the consignee and retrieval of the equipment and materials if they are sent through cargo, etc.)

6. Other Support (Please indicate other support to be given by the Requesting/Receiving Party to assist the assisting personnel, such as security of personnel, handling and protection for equipment and materials, etc.)

7. Funding Arrangements (Please describe funding arrangements for the assistance)

8. Others (Please indicate other details that do not fall into the above categories)

9. Contact Person (Please indicate Contact Person that will be in-charge of the overall operation as well as personnel, equipment and materials)

<u>Requesting/Receiving Party:</u>	<u>Assisting Entity:</u>
Name:	Name:
Designation:	Designation:
Institution:	Institution:
Address:	Address:
Office Phone:	Office Phone
Facsimile:	Facsimile:
Mobile Phone:	Mobile Phone:

Requesting/Receiving Party

signature

(Name)
[National Focal Point], [Country]

Assisting Entity

signature

(Name)
[Focal Point], [Entity]

ANNEX O



ONE ASEAN
ONE RESPONSE

“END OF MISSION” FORM FROM ASSISTING ENTITY TO THE AHA CENTRE

1. General Information

Office Reference Number : _____

From : _____

To : _____

Day / Date / Time : _____

Disaster Event Name/ Location(s) : _____

2. General Description of Disaster Event (Please describe the disaster event, what happened, the cause of event, location of the event, size of affected area, casualties, etc.)

3. Actions Taken (Please describe disaster response and impact mitigation activities)

4. Evaluation of the Role of AHA Centre and/or Other Party (Please evaluate the role of the AHA Centre and/ or the other party in the facilitation of resource mobilisation)

5. Analysis of Resource Mobilisation and Utilisation (Please provide analysis of the relevance and utility of resources mobilised, whether the resources were adequate and effective to respond to the situation, whether resources provided by the Assisting Entities could fill the gaps/ needs by the Requesting/Receiving Party)

6. Problems and Constraints (Please indicate problems and constraints in mobilising/ demobilising the resources, and in handling the situation using the resources)

7. Other Observations (Please provide other observations that do not fall into the above categories)

8. Recommendations (Please provide recommendations for future actions and improvements)

Signed by:

Signature

(Name)
[Focal Point], [Entity]

ANNEX P

ANNEX TO CHAPTER VI: HUMANITARIAN ASSISTANCE AND DISASTER RELIEF (HADR) MULTINATIONAL COORDINATION CENTRE (MNCC)

This annex was developed through relevant activities by the ADMM-Plus EWG on HADR co-chaired by the Lao PDR and Japan between 2014 and 2016. It was endorsed by the ASEAN Defence Senior Officials' Meeting (ADSOM) on 05 April 2017 in Cebu, Philippines and adopted by the 11th ASEAN Defence Ministers' Meeting (ADMM) on 23 October 2017 in Clark, Pampanga, Philippines.

1. SCOPE

This document intends to prescribe a model of the purposes and roles of the MNCC so that the Affected State may amplify HADR activities by the militaries of the Assisting States in more practical way. The final body of the MNCC should be flexibly designed based on the Affected State's decision considering the actual HADR activities, types of assets available and the Affected State's own domestic circumstances.

2. SITUATION

- a. During any HADR response, coordination and common situational understanding are key aspects to an effective and efficient effort. These key aspects not only apply to the Affected State's internal response, but also for the external humanitarian and military responses. While most ASEAN Members States have established a National Disaster Response mechanism and organisation, the ASEAN region has also established the ASEAN Coordination Centre for Humanitarian Assistance on disaster management (AHA Centre) and its associated ASEAN ERAT and DELSA, and the United Nations (UN) has the Cluster system, military support requires separate and distinct consideration to best utilise the unique military resources allocated to support a response.
- b. Like the rest of disaster response, coordination and support remain the responsibility of the Affected State. Within the national military response context, the MNCC acts as a key interface between the Affected and Assisting States' militaries to close those last gaps in the response. When the affected State establishes the MNCC to support coordination of foreign military assistance and the AHA Centre is assigned by the affected State to support the coordination of assistance provided by the humanitarian community, the AHA Centre will provide support for civil-military coordination as required;
 - i. *To facilitate such a civil-military coordination, the AHA Centre will send its liaison officer/s to the civil-military cell of the MNCC;*
 - ii. *The liaison officer/s of the AHA Centre will be either:*
 - a. *The AMRG on HADR Military representative to the AHA Centre*
 - b. *ASEAN Civil-Military Coordination Specialist.*

- c. A typical request flow at the national level is similar to APPENDIX 1.
 - 1. The Affected State disaster response organisation uses all its national resources including military, and then asks the Humanitarian Community.
 - 2. Anything that still cannot be filled would go into the MNCC for analysis and coordination with the Assisting States to accommodate the need.

3. ASSUMPTIONS

The following assumptions should be confirmed and adjusted as required when considering the operation and construct of an MNCC:

- a. The Affected State maintains and exercises its sovereignty over its entire territory and its government continues to function in order to lead the response
- b. The Affected State prioritises and coordinates requirements, and makes these requirements known to international disaster response agencies and other nations, even if the capacities of the Affected State may be degraded due to the damage brought about by the disaster.
- c. The militaries of the Assisting States comply with the requirements of the Affected State, operate using accepted humanitarian principles regulated in Chapter VI and are willing to participate in the MNCC for as long as the Affected State determines that the MNCC is required.
- d. The militaries of the Assisting States support immediate needs and avoid creating long-term dependence on foreign assets by the Affected State's population and civilian humanitarian organisations in order not to hamper the Affected State's long-term development.

4. MISSION

Where the Affected State and the Humanitarian Community resources and abilities are exceeded and foreign military capacity exists, the MNCC will support the Affected State's disaster response efforts by coordinating the Assisting States Militaries (ACDM) to promote efficient military support for the overall disaster response which aims to save lives and mitigate the conditions of suffering.

5. EXECUTION

a. Intent

(1) Purpose

Establish a multinational coordination centre that facilitates coordination, cooperation and common situational awareness between the Assisting States' militaries, the Affected State and the Humanitarian Community to support HADR operations.

(2) Method

- (a) Construct the MNCC using the same capabilities as those deployed by the military forces from Assisting States and other common capabilities that enable focused coordination and processes while minimising mission creep.

- (b) Promote the sharing and coordination of military activities and information throughout the military community and with the Humanitarian Community, to provide a conduit for multinational military coordination and staffing in support of the Affected State disaster response.
- (c) Facilitate cooperation and integration of Assisting States' military support efforts through multinational analysis, coordination and collaboration to optimise the use of military assets.
- (d) Coordinate the phased transition of Assisting States' militaries that are no longer needed by the Affected State.

(3) End State

The MNCC end state will be confirmed by the Affected State during analysis but will likely be where the need for military coordination by Affected State and Assisting States' militaries is no longer required.

b. Concept for Operations

The MNCC is the mechanism used by the Affected State military to coordinate all Assisting States' militaries.

- (1) The Affected State is responsible for establishing, and setting the parameters for, the MNCC. Ideally, the MNCC should be co-located with, or located as close as possible to, the national disaster coordination organizations and mechanisms to facilitate active coordination and cooperation, and should be established as soon as possible after the Affected State has requested assistance from other nations and it looks likely that foreign military capabilities will be deployed.
- (2) The Assisting States should be prepared to contribute to any coordination mechanisms established by the Affected State's military, including the continued manning augmentation until MNCC closure, possibly after a national contingent redeploys. In fact, many Assisting States' militaries stand ready to deploy specific staff capabilities and subject matter experts (SME) early to assist the Affected State in developing and establishing the MNCC.
- (3) The construct of the MNCC Teams will be tailored based on the Assisting States' militaries deployed to support the relief effort. While the Affected State should provide the core members of all the staff sections, it is encouraged to request and accept the Assisting States' representation with at least a liaison presence. The Assisting States are encouraged to contribute to the MNCC staff in functional areas where their deployed military capabilities could be applied or they have a specific and unique capability.
- (4) The MNCC does not command forces nor conduct execution planning, and shall have no tasking authority over the Assisting States' militaries unless bilaterally agreed upon between governments, or by regional agreement regulated in Chapter VI.
- (5) The MNCC is established under the auspices of the task force or other organization of the Affected State's military. As there is no command and control relationship between the armed forces of the Affected State and the Assisting States, the MNCC remains a coordination mechanism not a command and control structure, unless bilaterally agreed upon between governments or by regional agreement regulated in Chapter VI.

- (6) In some cases, some militaries of the Assisting States might not choose to participate in an MNCC but to respond through bilateral arrangement with the Affected State. The MNCC must be aware of the arrangement and relevant coordination accordingly.
- (7) An MNCC should be at first established at the national-level organization, and other MNCCs may be also established at the regional and lower-level organizations.

c. HADR MNCC Tasks

- (1) Facilitate planning for future multinational military support to HADR activities and tasks, including help in identifying the Assisting States' Military deployment areas and reception requirements.
- (2) Coordinate HADR support operations with the Affected State and Humanitarian Community, while ensuring to:
 - (a) De-conflict support in order to optimize the use of military assets and avoid duplication of military capabilities.
 - (b) Coordinate assessments and Request For Assistance (RFA) among the Affected State, Assisting States' militaries, United Nations, and other assisting humanitarian organizations. This includes identifying appropriate Assisting State validation authorities and facilitating the validation process for RFAs.
 - (c) Assist in prioritizing military support based on Affected State prioritised requirements. This may include assisting and supporting Humanitarian Community efforts as requested by the Affected State.
- (3) Facilitate shared situational awareness of HADR operations in the Affected State.
- (4) Coordinate military Public Affairs messaging including social media, and information sharing with the Affected State military to align and promote shared understanding of HADR support operations and promote a positive image of the relief effort.
- (5) Join and help establish the Affected State's unclassified Local Area Network (LAN), internet including social media, and email network to facilitate communication and information sharing among Affected and Assisting States' militaries, the Affected State government, and the Humanitarian Community.
- (6) Establish liaison with appropriate Affected State civil, military, and relief agencies; Assisting State militaries; the Humanitarian Community; and other parties as required and authorized by the Affected State.
- (7) In conjunction with the Affected State and Humanitarian Community, coordinate appropriate engagement, transition, and disengagement criteria to include maintaining visibility on and aligning transition plans of the Assisting States' militaries.
- (8) Monitor and assess the effectiveness of MNCC activities and multinational military support to HADR operations.
- (9) Capture and process including dissemination of Lessons Learned and Best Practices on MNCC operations and activities for improvement of the MNCC concept and SOPs.

d. Organization and Structure

The MNCC should remain dynamic and flexible in its organisational structure. While the composition is ultimately the decision of the Affected State, experience has indicated that a functionally organized MNCC has been most successful. During initial planning for the MNCC, the Affected State may request subject matter experts on MNCC from one or some nations to provide advisor support. The critical consideration is that the MNCC must cover the coordination requirements of the military capabilities requested by the Affected State and dispatched by the Assisting States. While the size of each cell may vary with each response, the Affected State should request experienced MNCC personnel during the request process. **APPENDIX 2 and 3** are suggested functional constructs for HADR MNCCs based on the most commonly requested military support capabilities:

(1) MNCC Executive

The MNCC Executive is designed to be the decision-making body for accepting coordination recommendations from the Working Groups (WG) tasked to study support coordination issues. These people, particularly the Director and Deputy Director, represent the MNCC to the Affected State government and military where required. The MNCC Executive consists of:

- (a) The MNCC leadership consisting of a Director normally from the Affected State military and a Deputy Director from a contributing nation chosen by the Affected State who is usually a military SME in MNCC and HADR, or the largest Assisting State's contributor.
- (b) Assisting States' National Representatives could be assigned as Liaison Officers (LOs) or as part of the MNCC staff. Each nation must clearly identify their senior representative to the MNCC leadership. If a representative is not specifically identified, then the LO shall be assigned those duties by default. The national representative should be enabled to speak on behalf of their military contingent commanders.

(2) Operations Group

The operations group will function as the clearing house and overall management for monitoring and coordinating effective MNCC operations by establishing and maintaining a daily rhythm or cycle within the MNCC. The Ops Group will normally manage activities used by more than one group to provide commonality in process, products and look:

- (a) Coordination Team performs the role similar to a command post duty watch or current operations branch in a traditional military HQ. They will be the normal entry point for activities and act as the organizer to manage work flow by assigning lead and supporting teams to coordination problems for consideration based on the nature of the problem.
- (b) Request For Assistance (RFA) Team monitors the processing of requests for assistance from all sources. Their mandate is to ensure the right groups and teams are brought together to coordinate a request, manage and track the progress of RFA in the MNCC, and ensure responses are processed back to the appropriate requesting agency. This team will also manage Requests For Information (RFI), both to the MNCC from outside, or from within the MNCC for external response. See **APPENDIX 4 and 5**.

- (c) Information and Knowledge Management (IM/KM) Team enables orderly, effective communications between the Affected State, the Humanitarian Community, and the MNCC by establishing LAN and internet connectivity, web site development, and information file maintenance.
- (d) Common Operating Picture (COP) Team will coordinate and maintain a shared military COP to complement existing Affected State response sites. Should no Affected State tool exist, the COP team could include the capability to establish and maintain a common military website or pages. This COP will include environmental risks and potential threat areas for Force Protection. See **APPENDIX 6**.
- (e) Strategic Communications (SC) and Public Affairs (PA) Team manages the alignment and coordination of SC/PA activities to support the Affected State themes and messages with the Assisting States' militaries. This team can also act as coordinators for common issues of Public Affairs but will not be the spokespeople for the individual national efforts.

(3) Support Group

The Support Group comprises specialist teams for the coordination of capability-specific support to fulfil support demands that are beyond the capacity of the Affected State and Humanitarian Community including the Affected State military. This group also provides coherent and coordinated analyses to make recommendations on how Assisting States' assets might be best used to fill gaps, minimise duplication of effort and contribute to the strategic picture. Typically, teams would be formed by capability such as:

- (a) Logistics Team coordinates support requirements like resource sharing, infrastructure coordination and use, Air Port of Departure (APOS) and Sea Port of Departure (SPOS) throughput issues, warehousing and contracting optimisation. See **APPENDIX 7 and 8**.
- (b) Engineering Team optimises requests for engineering activities such as assessments, route clearances and construction critical to support responses efforts.
- (c) Movements Team coordinates all movement tasks regardless of domain or mode. Their mandate is to optimise lift, coordinating spare capacity after nationally assigned tasks are met and support the movement of goods, equipment and personnel.
- (d) Medical Team identifies the military medical needs and support requirements for each area of the Affected State under closer coordination and cooperation with the ASEAN Centre of Military Medicine (ACMM), in order to ensure the efficient coordination on medical care including preventative assessments, medical evacuation, health care trends, treatment requirement authorities and regulations, and medical support and supplies. While primarily concerned with coordinating military medical support, this team could also coordinate similar HADR medical support activities.
- (e) Communications Team is to coordinate communications needs within the military contributors and to also support the Affected State in establishing communications capabilities for HADR coordination. This could include the conduct of communication assessments and supporting plan development to re-establish Affected State communication networks.

(f) MNCC Support Team will coordinate and manage the support required to run the MNCC such as personnel affairs, maintenance of the infrastructure in the MNCC except for those tasked to the other groups and teams. Normally, this will be staffed by the Affected State as the nation responsible for MNCC support but this function may be performed by an Assisting State as coordinated by the Affected State military. See **APPENDIX 9**.

(4) Planning Group

The MNCC planning group will coordinate and align future efforts like transition and assessment, or identifying potential future coordination activity requirements by analysing Affected State and Assisting States' military plans and creating common awareness.

- (a) Transition Team coordinates with Assisting States' militaries to develop and align transition conditions, and maintains visibility on Affected State and Humanitarian Community capabilities, needs, and trends. This will facilitate the transition of assistance support from the Assisting States' militaries to the Humanitarian Community and/or Affected State.
- (b) Assessment Team assists in the maintenance of a common operating picture of HADR efforts to enable assessment, and monitors the effectiveness of MNCC operations. This team does not assess the Affected or Assisting States' performance other than meeting MNCC requests.
- (c) Lessons Learned (LL) and Historical Team focuses on LL for improving the function of the MNCC and its interface with outside agencies. It will also assist the Affected State in their LL process for management of the MNCC. A secondary role could be the maintenance of the MNCC historical record.

(5) Liaison Group

This group provides the interface capability between the MNCC, the Affected State Government and the humanitarian community including the United Nations to pass information and coordinate requests at the national level. The focus of this group is to improve the sharing of information and interface between all the actors. This group may interface with the international humanitarian community including relevant Clusters (such as Logistics cluster) and the humanitarian Civil–Military Coordination personnel to exchange information and coordinate request and information requirement through agreed methods. The liaison group will normally represent the collective military body of the Assisting States to offer a consolidated single conduit for information sharing, reducing individual nation military presence requirements at each humanitarian cluster. This group will also host incoming LOs from the Affected State military and/or disaster management organization, the AHA Centre, the United Nations and others key humanitarian organizations. There are typically two types of liaison engagement during HADR. Regarding registration of the LOs, see **APPENDIX 10**:

- (a) Civil–Military Engagement facilitates engagement, information sharing and common understanding with the Affected State, and Humanitarian Community at the national level.

(b) Military-Military Engagement facilitates engagement between the Affected State and Assisting States' militaries to enhance the best use of resources and capabilities.

(6) Other Teams

Other Teams and/or Groups can be created as determined by the Affected State to address common issues such as a policy/legal team for the coordination of customs clearance requirements and facilitation of understanding by the militaries of the Assisting States on the domestic/local security situation as well as on the provision of Affected State security arrangements, Status of Forces, a cultural and language team for facilitation of understanding by the Assisting States' militaries on the various cultural, religious and linguistic backgrounds in the Affected State, and so on.

e. Coordinating Mechanism

(1) Conditions

(a) Establishment Conditions. Rather than traditional timings, conditions should trigger Affected State actions towards creating, maintaining and disbanding an MNCC:

1. Start MNCC organizational planning as soon as the Affected State government requests and accepts support from international partners, and that assistance includes military capabilities.
2. Establish MNCC construct to incorporate military capabilities as soon as identified.
3. Formally stand-up the core MNCC upon arrival of the first military partners.

(b) Modification Conditions. These conditions apply after the MNCC is established and during operations when the force is evolving to meet emerging needs:

1. Adapt MNCC construct to incorporate new military capabilities as soon as identified.
2. Close MNCC Teams as the military capability is no longer required, releasing or reallocating staff.

(c) Transition Conditions. These conditions apply when the requirement for military support is reducing, leading to potential redeployment or withdrawal of military capabilities:

1. The Affected State and Humanitarian Community meet the humanitarian need without outside military assistance.
2. The Assisting States' militaries are no longer required to fill key humanitarian gaps.
3. The Assisting States' militaries have started their redeployment to home nations.

(2) Operational Rhythm

The MNCC Operational Rhythm must be flexible to meet the needs of, and align with, the Affected State leadership. It should include communication with the Affected State National Focal Point, coordination briefs to maintain common situational awareness and visibility on priority work status, executive board decisions to approve and forward recommendations. See **APPENDIX 11**.

(3) Coordinating with Assisting States

The Affected State will determine the methods for effecting coordination with the Assisting States. These methods are not exclusive so it remains key that information be passed quickly and effectively. Note that the MNCC acts only as a coordination mechanism and not a tasking authority, which remains a national responsibility.

(4) MNCC Layout

The layout and location of the MNCC will be dependent on the intent of the Affected State. The MNCC should be co-located with, or in close proximity to the Affected State national lead organization operations cell. For the MNCC itself, the layout will depend on the available facilities and the size of individual rooms and tents. APPENDIX 12 portrays potential centralised and dispersed layouts as examples. The nexus of the MNCC is the operations coordination centre where the Common Operating Picture (COP), Operations Group and National Representatives normally reside. It is here that all requests and the bulk of physical coordination and sharing occur in support of the Affected State.

(5) External RFA/Task Process

See **APPENDIX 1**.

(6) Internal MNCC Processes

Cooperation and coordination is key to the successful operation of the MNCC. While there are many ways to affect an effective process, a few have been proven during previous experiences and are detailed here to allow for efficient MNCC operations as soon as possible:

(a) Task Assignment and Definition. A key enabler in the effectiveness of an MNCC is the timely processing of all requests. To achieve this, a process must be developed and well-known across MNCC and military communities. Through experience and analysis, it has been found that having a central, single point of entry for task coordination offers great efficiencies. Ideally, this process should be executed within a one to two hours for high priority RFAs, up to six hours for RFA with more lead-time. Given the MNCC structure noted above, the following process demonstrates how a task might come into the MNCC, how it is coordinated and analysed for a solution, and how it might be transmitted out for execution:

1. Situation and task request arrives at MNCC for coordination.
2. Operations Group evaluates the task to identify which Team should lead the task analysis, which needs to support and provide input, and identify a timeline for analysis completion.

3. Operations Group announces the task, lead and supporting groups and timeline to the entire MNCC for common awareness, ensuring the task is formally logged into the MNCC task tracker.
4. Assigned Team leads an analysis to answer:
 - i. What further information is needed and from whom?
 - ii. Who from the Affected State and Humanitarian Community is already supporting that function and activity that might help or lead?
 - iii. Confirm the participation of supporting Teams and identify other support requirements.
 - iv. What military capabilities are appropriate to do the task?
 - v. What countries have the appropriate resources?
 - vi. Are the potential resources available within the requested time? Confirm with the Assisting States' representatives at the MNCC.
5. Develop COAs and recommendations for MNCC Director Decision through a brief.
6. MNCC Director selects the COA and confirms acceptance with the Assisting States' representatives.

(b) Decision Brief. Timely decision-making is a key component to MNCC operations. Therefore, the goal to keep briefs concise and to enable this premise, the following simple briefing format is proposed:

1. State the tasking number and Title, lead analysis group and date.
2. Task Background: What is the situation; what is the task; where it is; what other friendly capabilities are in the area; and is there a security concern or requirement.
3. Possible Courses of Action: Identify the different potential capabilities that can perform the task; what nations have those capabilities and are available; identify the different ways to complete the task using the available resources.
4. Recommendation: Present the recommended COA and force package to reduce tactical execution coordination, try to use the fewest nations required for task completion.

(c) Assisting States' Liaison Officer (LO) Responsibilities. Wherever possible, Assisting States will dispatch a LO to affect coordination and represent national interests. While they may contribute to staff work, their primary function is to act as a facilitator between the MNCC and the deployed national military force. Typically, LOs will also act as the national representatives to the MNCC unless other arrangements are made.

(d) Information Management. The Affected State is responsible to establish a system for managing the MNCC information processes to ensure that data and requests are staffed in an effective manner. While there are any number of potential tools and systems available, ideally any system should be compatible with the greater Affected State government management policy as the ultimate owners of the information.

- (e) Information Sharing. The free sharing of information is a critical enabler to effective response coordination. All information should be unclassified and releasable as much as possible to promote the greatest sharing. Additionally, sharing will depend greatly on having compatible communication and information technology systems.
- (f) Lessons Learned. Observations by staff and leadership are a key element to the future improvement of the MNCC. Every opportunity should be leveraged to ensure staffs know of the process and are comfortable in submit honest observations that lead to improvement of the organization and processes. The LL Team will coordinate the development and execution of a process with all staff, including an orientation during in-clearance and observation submission on out-clearance.

(7) Roles of WG meetings

- (a) Morning Briefing will be held to provide director, staffs and LOs with operations progress and situational update.
 - 1. Chair: MNCC Director
 - 2. Facilitator: Operations WG lead
 - 3. Member: Deputy Director, WG leads and LOs
 - 4. Frequency: 0800-0830 daily
 - 5. Input: updated briefs from the Teams, additional guidance from higher HQs and additional input from relevant actors
 - 6. Output: Director's guidance and daily intention message
 - 7. Key task: review past 24-hrs operations and reconfirm next 24-hrs actions
- (b) Civ-Mil Coordination meeting will be held to coordinate with civilian agencies or organisations.
 - 1. Chair: MNCC Deputy Director
 - 2. Facilitator: Liaison WG lead
 - 3. Member: Deputy Director, those from Operations and Support Group and LOs
 - 4. Frequency: 1000-1030 daily
 - 5. Input: Updates on issues, concerns and requests from civilian actors for Director
 - 6. Output: priority list of civilian request (PLCR) and updated contact list of civilian stakeholders.
 - 7. Key task: coordinate MNCC support that may be required by civilians and resolve any pending issue or concerns between MNCC and civilian actors
- (c) Media WG meeting will be held to assess public opinions and prepare for daily Press Event.
 - 1. Chair: MNCC Deputy Director
 - 2. Facilitator: SC / PA Team lead
 - 3. Member: Deputy Director and those from Operations, Support and Planning Group
 - 4. Frequency: 1000-1030 daily

- 5. Input: daily media update
- 6. Output: daily media report and drafted statement or press release
- 7. Key task: review public opinions upon ongoing foreign military operations and draft statement and press release for daily media event

(d) Planning WG meeting will be held to finalize drafted plans compiled as assigned.

- 1. Chair: MNCC Deputy Director
- 2. Facilitator: Planning WG lead
- 3. Member: Deputy Director and those from Operations, Support and Planning Group
- 4. Frequency: 1300-1330 daily
- 5. Input: prioritized tasking assignment list (PTAL), Director's planning guidance, situation updates and drafted plans
- 6. Output: coordinated drafted plans for Director's approval
- 7. Key task: review Director's planning guidance, review drafted plan, resolve prevailing issues, seek concurrence from relevant actors and confirm the draft

(e) SITREP Sync WG meeting will be held to synchronize MNCC daily SITREP & assessment.

- 1. Chair: MNCC Deputy Director
- 2. Facilitator: Operations WG lead
- 3. Member: Deputy Director and those from Operations, Support and Planning Group
- 4. Frequency: 1430-1500 daily
- 5. Input: Updates on situations and drafted SITREP & assessments for Director
- 6. Output: integrated drafted SITREP for Director's approval
- 7. Key task: review Director update brief, review operational progress, review & synchronise input for SITREP & assessment, review drafted SITREP & assessment and confirm the draft

(f) RFA WG meeting will be held to allocate resources to RFAs in accordance with determined priority.

- 1. Chair: MNCC Deputy Director
- 2. Facilitator: RFA Team lead
- 3. Member: Deputy Director, those from Operations, Support and Planning Group, and LOs. The core members will be from Operations and Support Group.
- 4. Frequency: 1600-1630 daily
- 5. Input: updated weather, RFAs & Priority List of Civilian Request (PLCR), updated force list and Director update brief & decision brief
- 6. Output: prioritized tasking assignment list (PTAL) with concurrence of all relevant actors
- 7. Key task: collect, screen, validate & prioritise RFAs from concerned stakeholders, allocate resource based on prioritised tasks and seek concurrence from relevant actors

- (g) Movement WG meeting will be held to arrange transportation in accordance with prioritised tasking assignment list (PTAL).
 - 1. Chair: MNCC Deputy Director\
 - 2. Facilitator: Movements Team lead
 - 3. Member: Deputy Director, those from Operations, Support and Planning Group, and LOs. The core members will be from Operations and Support Group.
 - 4. Frequency: 1630-1700 daily
 - 5. Input: updated weather, prioritized tasking assignment list (PTAL), updated status of transportation assets, Director update brief and Director decision brief
 - 6. Output: packaged movement including PAX manifest and cargo load list if applicable, and daily movement schedule
 - 7. Key task: assign, schedule & synchronise transportation assets to PTAL, de-conflict usages of assets and compile daily movement schedule or plan
- (h) Logistics WG meeting will be held to coordinate & synchronise logistical support for operations.
 - 1. Chair: MNCC Deputy Director
 - 2. Facilitator: Logistics Team lead
 - 3. Member: Deputy Director, those from Operations, Support and Planning Group, and LOs. The core members will be from Operations and Support Group.
 - 4. Frequency: 1700-1730 daily
 - 5. Input: Director update brief, updated PTAL, updated status of transportation assets and updated logistics status
 - 6. Output: priority list of logistical shortfalls (PLLS) and prioritised logistics allocation list (PLAL)
 - 7. Key task: review logistics requirement for operations, determine & refer logistics shortfall to appropriate parties, and prioritise, allocate and synchronise available logistics support for operations
- (i) Decision Briefing will be held to discuss planning and operational issues, provide guidance, and make decisions to guide future planning.
 - 1. Chair: MNCC Director
 - 2. Facilitator: Planning WG lead
 - 3. Member: Deputy Director, leaders from Operations, Support and Planning Group Teams, and LOs.
 - 4. Frequency: 1800-1830 daily
 - 5. Input: situation update brief, decision brief for assigned planning and decision brief on other issues requiring Director's decision
 - 6. Output: Director's planning guidance and Director's decision
 - 7. Key task: review progress of planning efforts and propose planning decisions requiring Director's approval

6. MNCC SUPPORT

a. General Concept

Ideally, the Affected State should provide the facilities, infrastructure and support for the MNCC wherever possible and include the MNCC into their integral support

scheme as another Affected State military element for real-life sustainment such as food and water, and support like power, workspace, and HADR communications and information technology. Assisting States that participate in the MNCC should be self-sustaining for administration, and national communications and information technology. With consensus among all contributors and the Affected State, an Assisting State may be appointed as the lead nation for MNCC support in order to organise internal sustainment on behalf of the MNCC, but this function is normally provided by the Affected State.

b. Rations

The Assisting States' personnel assigned to the MNCC will normally arrive with a limited number of day's rations. Thereafter, the Affected State will be responsible to provide messing, rations and water for the MNCC staff unless other arrangements are formally agreed to. The type of rations provided will typically be hard rations, at least initially and then transition to fresh rations at the discretion of the providing nation but should be consistent across the staff.

c. Transportation

Transportation and movement for staff to conduct their MNCC functions shall normally be provided by the Affected State. Typically, some nations will provide their own national vehicles; the MNCC Director should negotiate their use within the MNCC pool whenever practical.

d. Maintenance

The MNCC will be responsible for the maintenance of the equipment and vehicles provided by the Affected State.

e. Common Supplies

The provision of common supplies like petroleum oil (POL), maps, pens, stationery shall be the responsibility of the Affected State.

f. Accommodations

The MNCC of the Affected State is responsible for providing accommodations for all MNCC members. The types of accommodations will be at the discretion of the Affected State based on the availability and resources, and the MNCC should strive to provide a uniform standard accommodations.

g. Medical Support

The provision of medical support to the MNCC personnel will normally be provided by the Affected State but is dependent on Status of Forces Agreement and other agreements that allows for the treatment of foreign personnel, and for practicing in another country. Participating nations may also elect to have their personnel supported by national resources but this should not impede with the operation of the MNCC mandate.

h. In and Out Clearances

To effectively track personnel joining or leaving the MNCC as staff, an in and out clearance process will be developed to ensure that:

- (1) Arriving people are briefed on activities, processes and administration during their task.
- (2) Departing personnel complete a handover, return MNCC equipment and submit Lessons Observed during their task period.

ANNEX Q

Standard Operating Procedure (SOP) for Coordination of Emergency Medical Teams (EMTs) in ASEAN (Working Title)

Ver: 3.1

Date: 22 March 2021

VI. ANNEXES

1. “Click the link on the name of each annex to access the contents”

		Note
Annex 1	List of National Focal Units for EMT Coordination and Information on PHEOC	Information will be collected by the Project to complete the list.
		Contents to be confirmed
Annex 2	List of Essential Information for Mobilisation	
Annex 3	Emergency Medical Team Registration Form	WHO EMTCC Handbook (Ver. used at 4th AMS/EMTCC training, 2019)
Annex 4	List of Essential Information for On-site Operation	
Annex 5	List of Supporting Functions of the EMTCC or Sub-EMTCC	
Annex 6	Medical Record Form	(Original Excel File Name) “Medical Record Form(27-11-2018”)
Annex 7	Emergency Medical Team (EMT) - Minimum Dataset (MDS) Tally Sheet	WHO EMT MDS Working Group Report (Ver. 2019 WHO) https://www.mdsgateway.net/
Annex 8	Patient Referral Form	WHO EMTCC Handbook (Ver. used at 4th AMS/EMTCC training, 2019)
Annex 9	Forms for (Rapid) Health Needs Assessment	Ver. Updated
Annex 10	Emergency Medical Team - Minimum Dataset (MDS) Daily Reporting Form	WHO EMTCC Handbook (Ver. 2019 WHO) https://www.mdsgateway.net/

Annex 11	<u>EMTCC Situation Report</u>	WHO EMTCC Handbook
		(Ver. used at 4th AMS/ EMTCC training, 2019)
Annex 12	<u>Emergency Medical Team Exit Report</u>	WHO EMTCC Handbook
		(Ver. used at 4th AMS/ EMTCC training, 2019)
Annex 13	<u>AMS I-EMT Lessons Learnt Report Template</u>	-

**ASEAN REGIONAL DISASTER EMERGENCY
RESPONSE SIMULATION EXERCISE (ARDEX)
PLEASE REFER TO THE ARDEX HANDBOOK**

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