# *Report for Assessing Core Capacity Requirements at Designated Points of Entry in Taiwan, 2013*

*July, 2013*

# Report for Assessing Core Capacity Requirements at Designated Points of Entry in Taiwan, 2013

## ACRONYMS

| | |
|---|---|
| APO | Aviation Police Office |
| BAPHIQ | Bureau of Animal and Plant Inspections and Quarantine |
| DoHA | Department of Health and Ageing |
| HQ | Headquarter |
| IHR | International Health Regulations |
| ISPS | International Ship and Port Facility Security simulation |
| KCG | Kaohsiung City Government |
| NFP | National Focal Point |
| NHCC | National Health Command Center |
| OCC | Operation Control Center |
| OIE | World Organization for Animal Health |
| PHEIC | Public Health Emergency of International Concern |
| PoE | Point of Entry |
| PoK | Port of Kaohsiung |
| PPE | Personal Protective Equipments |
| TCDC | Taiwan Centers for Disease Control |
| TFDA | Taiwan Food and Drug Administration |
| TIA | Taoyuan International Airport |
| TIA Co. Ltd. | Taoyuan International Airport Corporation Limited |
| TIPC | Taiwan International Ports Corporation, Ltd. |
| VTC | Vessel Traffic Control |
| WHO | World Health Organization |

## Executive Summary

As a commitment to the global health security, Taiwan has taken many efforts in keeping with the requirements of International Health Regulations 2005 (IHR 2005). Ensuring core capacities concerning designated points of entry (PoEs), according to the Article 20 and Annex 1B of the regulations are in place, is therefore an essential part of compliance of IHR 2005. Through a strong collaboration between various stakeholders in central and PoE level, the designated Taoyaun International Airport (TIA) and Port of Kaohsiung (PoK) endeavored to improve capabilities of conducting routine prevention and control measures as well as prompt report and response to events that may constitute a public health emergency of international concern (PHEIC).

In this report, the assessment team from Australian Government Department of Health and Ageing shared observations and recommendations after their visit to the two designated points of entry in Taiwan during March 2013. The aim of this visit was to follow up the progress on core capacity development, which referenced to the report of the initial assessment undertaken in August 2011 by Dr Kiyosu Taniguchi, Japan.

Following the document review process and onsite visits, the assessment team observed significant improvements in those capacities previously identified in the 2011 assessment as not being fully met. In general, the assessment team noted that multi-sectoral cooperation and commitment, human resource capacity building, sustained maintaining routine and emergency capacities, and enthusiasm that staff contribute to their respective roles, are key for those PoEs to fulfill all the requirements of the IHR.

In addition, the assessment team identified several capacities to be further developed. The assessment team encouraged Taiwan to keep the commitment of maintaining collaborations, implementing and updating national plans, building on the existing achievements and following established procedures, for the adaption of the ever-changing environment.

# 1 Objectives of the Assessment

In order to comply with requirements described in International Health Regulations 2005 (IHR2005) provisions, Taiwan has continuously endeavored to develop, strengthen and maintain core capacities at the designated points of entry (PoE). After the self-assessment and initial assessment, which were carried out in March and August, 2011, plans of action which aimed to bridge identified gaps were therefore developed and implemented. The objective of this assessment is therefore to verify the progress at this phase to ensure all efforts for improvement can be consistent with IHR core capacity requirements.

# 2 Methodology

## *2.1 Preparedness*

### *2.1.1 Composition of the Assessment Team*

*Ms. Teresa Morahan* and *Ms. Gigi O'Sullivan* from the Australian Government Department of Health and Ageing (DoHA)were invited to serve as the external reviewers. Taiwan Centers for Disease Control (TCDC) took the responsibility of logistic arrangement.

### *2.1.2 Activity Timeframe*

The assessment was carried out during 11th to 13th of March, 2013. The evaluation of Taoyuan International Airport (TIA) and Port of Kaohsiung (PoK) were respectively conducted in the first two days. Following the assessment process for the two designated points of entry, a closing & synthesis discussion was held subsequently. Annex 1 outlines the scheme of timeframe and activity.

### *2.1.3 Assessment Protocol & Background Materials*

An assessment protocol which defined objectives and methods was established as the guidance for the preparedness and application of assessment. Furthermore, in order to facilitate the assessment process, relevant background materials were sent to the assessment team in advance. WHO published *"Assessment tool for core capacity requirements at designated airports, ports and ground crossings*", which is a checklist covering 95 assessing indicators, was applied for determining the compliance of core capacity requirements.

- *Introduction of Core Capacity Development at Designated PoEs in Taiwan*: Briefing the country progress to adopt IHR core capacity requirements into designated PoEs.

- *Report for Assessing Core Capacity Requirements at Designated PoE Taiwan during, 2011*: In this report, results of the initial assessment carried out by Dr. Kiyosu Taniguchi from Japan during 2011 were illustrated. Findings and suggestions generated from this assessment were stated as well.

- *Abstract for Current Status for IHR Core Capacities at Each Designated PoEs*: Formulated by the each designated PoE, this abstract provides the description of the current status by each core capacity indicator listed in WHO assessment tool.

## *2.2 Field Assessment*

Before the launch of formal assessment at each designated PoE, a start meeting has been held in the field. Through this meeting, current situation of the PoE which is going to be assessed was briefly introduced. Also in this meeting, sites to be visited were reconfirmed.

### *2.2.1 Document Review (2.5hr/per PoE)*

Due to considerable quantity of documents corresponding to 95 core capacity indicators, the list of documents for verification was decided by the assessment team in advance. In principle, the proportion of selection was determined as 10%, which means that 1, 5 and 7 indicators were selected from Part A, B Ⅰ and B Ⅱ, respectively. However, the assessment team was free to choose as many as indicators they were interested in. Eventually, 20 and 19 items were nominated to be reviewed in TIA and PoK (see Annex 2 as the list of verified documents at *TIA* and *PoK*).

Documents for verification were gathered from various authorities

according to the pre-determined list along with a clear bibliography for reference. Since the assessment team had read the background materials and thus had a preliminarily understanding with the IHR core capacity performance in each PoE, questions regarding current approaches, framework, procedure or any improvement since initial assessment, etc., were therefore raised. Relevant authorities at PoEs should answer questions in accordance with their professional duties. Also, they were responsible for illustrating as well as explaining the content of proof documents they prepared.

### *2.2.2 On-Site Visit (2.5 hr/per PoE)*

A list of visiting sites was pre-determined by the assessment team in advance. In the beginning, each designated PoE had individually proposed 10 sites. The assessment team hence prioritized several sites that they were expected to visit among 10 suggested alternatives prior to arrival (see Annex 3 as the visited sites in *TIA* and *PoK*).

To facilitate the process, authorities at PoE arranged the visiting routes according to location and distance, after sites were nominated by the assessment team. Staff working in these places should explain and demonstrate facilities, equipments and operation on-site.

### *2.2.3Feedback and Mutual Discussion (1.5hr)*

Since the assessment was a participatory and interactive process, opinion exchange between both the assessment team and the reviewees were very essential. The closing & synthesis discussion in the last day had therefore provided the chance for mutual feedback. Not only sharing exquisite observations, the assessment team had also proposed measures that can be conducted for further improvement at each PoE. The national

strategies which Taiwan can proceed in the future to strengthen the IHR 2005 implementation framework were also be addressed. In the mean time, authorities in central and PoE level also provided their feedback in accordance with comments made by the assessment team. Through the process, various perspectives were adequately expressed and the consensus on how to move toward in the next step was gradually formulated.

## *2.3 Data Analysis*

### *2.3.1 Result Generating*

Using the checklist of assessment tool, the assessment team can justify the implementation stage of each indicator. However, within limited stay in Taiwan, it was not feasible for the team to thoroughly judge total 95 indicators for each designated PoE as well as output the assessment report. Therefore, the assessment team was requested to provide, after returning Australia, with the manuscript of the report, and also, the WHO Spread Sheet File Model which inputs their judgment and comments for each indicator.

### *2.3.2 Score Calculation*

While results were finally determined, scores which quantitatively implied the performance of core capacities at the PoE were calculated automatically. According to *WHO*, a PoE with final score above 80% is defined as fairly consistent with requirements listed in the Annex 1 of IHR 2005.

# 3 Finding of the Assessment

## *3.1* Descriptive Results

Points of entry (PoE) provisions in the IHR are designed to minimise public health risks caused by the spread of diseases through international travel. The IHR defines a PoE as a 'passage for international entry or exit of travelers, baggage, cargo, containers, conveyances, goods and postal parcels, as well as agencies and areas providing services to them on entry or exit'.

The IHR requires the core capacities of designated PoEs to be strengthened, developed and maintained:

- at all times in relation to access to medical services for prompt assessment and care of ill travellers, a safe environment for travellers (e.g. water, food, waste), personnel for inspection and vector control functions (Annex 1B, Part A); and
- to respond specifically to events which may constitute a public health emergency of international concern (PHEIC) (Annex 1B, Part B).

This visit assessed a number of routine and emergency capacities as a follow up to the initial assessment undertaken in August 2011 by Dr Kiyosu Taniguchi, National Institute of Infectious Diseases, Japan (the 2011 assessment). This assessment identified a number of capacities for further development, which are discussed in *Report for Assessing Core Capacity Requirements at Designated Points of Entry in Taiwan*, October 2011.

In summary, these capacities are:

- Core capacities at all times (routine):
  - Appropriate number of trained personnel for inspection of conveyances
  - Capacity to ensure a safe and environment for travellers using PoE

facilities by conducting inspection programs – areas of development included inspection capacity for public health risks arising from chemical, biological, and radionuclear events, and facilities, equipment and supplies for use by inspection staff

- Core capacities for responding to events that may constitute a PHEIC:
  - Appropriate public health emergency contingency plan for chemical and radiological events, integrated with other public health response plans and other emergency operational plans, and training and/or drill exercises to familiarise with respective roles and functions
  - Capacity to apply recommended measures to disinsect, derat, disinfect, decontaminate or otherwise treat baggage, cargo, containers, conveyances, goods or postal parcels including, when appropriate, at locations specially designated and equipped for this purpose
  - Access to specifically designated equipment, and to trained personnel with appropriate personal protection, for the transfer of travellers who may carry infection or contamination.

While Australia's visit sought to observe the progress made generally in core capacity development and implementation, it focused primarily on the capacities identified for further development to assess the progress made in improving these capacities.

Coordination and communication between relevant sectors is key to successful implementation and maintenance of designated PoEs in routine and emergency situations. The 2011 assessment found the core capacity requirements for coordination and communication under Annex 1A of the IHR to be fully compliant and this visit sought to observe, rather than assess,

some of these capacities, particularly as they relate to travellers, to gain contextual understanding of the implementation of Annex 1B.

The 2011 assessment noted the strong national efforts across all government agencies and stakeholders to achieve the core capacity requirements, and this was also evident during this visit. In comparing the results of the 2011 assessment with the current state of IHR implementation, it is clear that Taiwan has made a concerted effort to meet all the requirements of the IHR.

Both the document review process and onsite visits highlighted the importance Taiwan has placed on multi-sectoral cooperation, professional development of staff and human resource capacity in building and maintaining routine and emergency capacities. The assessment team observed that the progress achieved in these areas is testament to the strong commitment, professionalism and enthusiasm demonstrated by staff in their respective roles. In both TIA and PoK, staff contribution towards IHR implementation is a major strength in Taiwan's PoE core capacity implementation (Annex 4 and Annex 5 demonstrates the summarized results generated by WHO Spread Sheet File Model).

### *3.2* General Findings

The assessing team noted that the roles and responsibilities of various stakeholders implementing the IHR core capacities had been defined. Coordination mechanisms between relevant sectors were in place and have been tested through regular exercises, which are updated as required. Communication links with conveyance operators were also in place and linkages with various service providers of food, water, and sanitation were established as part of core capacity implementation.

The document review process and onsite visits demonstrated a number of strengths for both PoEs, including the capacity for radiological and chemical

inspection and emergency response and access to, and training in the use of, PPE for all hazards.

The assessment team visited medical facilities both at TIA and PoK which were well equipped with trained staff, medical supplies, equipment and PPE to enable assessment and care of ill travellers. Communication with the travelling public was well developed through informative print materials. Vector monitoring and control measures were in place and regular drills and exercises were a prominent feature in core capacity implementation (For details of the assessment results for TIA and PoK, please refer to Appendix 1 and 2).

### *3.3* Taoyuan International Airport (TIA)

Airports generally have a large number of partners, such as the civil aviation authority, airport management and private sector service providers, and TIA is no exception. TIA is the largest airport in Taiwan, with over 25 million passengers travelling through in 2012. Its two terminals facilitate the operation of airlines, immigration, quarantine, customs, tourist services, shops and restaurants.

An IHR Implementation Team has been established, consisting of the TIA Corporation Ltd, Taiwan CDC, the National Security Bureau, the Taipei Customs Office, the Taoyuan County Government, the Bureau of Animal and Plant Health Inspection and Quarantine. The Team also includes airlines, catering services, ground services, postal services and aviation police office.

The assessment team noted the breadth of communication material, particularly print, that raised public awareness on travel health and infectious disease risks. These include general travel health brochures, such as Advice for Traveling Abroad, Information for Traveler's Health and

Tips for Protecting Yourself Against Mosquitoes While Traveling, as well as disease specific brochures, such as The Dengue and Chikungunya Fever Prevention Bible and What You Should Know About Rabies.

These materials, as well as those specifically targeting certain countries of origin, were provided to the assessment team during the document review process.

In addition to print material, other forms of communication with both arriving and departing travellers are in place, including electronic boards and inflight videos advising travellers to report illness.

The assessment team observed the arrangements in place to enable assessment and care of ill travellers. The Fever Screening and Quarantine Station is equipped with an infrared thermal scanner to detect raised temperatures in arriving passengers. Those identified are required to complete a questionnaire and undergo assessment at an onsite medical clinic.

The onsite medical clinic provides a safe and hygienic environment with adequate space and PPE to conduct private assessment and triaging of ill travellers. A 24 hour ambulance, fully equipped with testing and radiology equipment and PPE, is available to transport ill travellers to the *Taiwan Landseed Hospital* if necessary. SOPs are in place for the safe transfer of ill travellers and use of PPE. A contact list is updated and disseminated on a regular basis to all relevant personnel.

The medical personnel who manage the Fever Screening and Quarantine Station and onsite medical clinics are trained to recognise disease symptoms, perform and document onsite quarantine assessments and provide an assessment of medical issues to TIA within 24 hours. They also act as

coordination points for Immigration and Customs on public health issues.

Case management guidelines are in place for diseases of concern, including dengue, malaria, chikungunya, West Nile virus and Japanese encephalitis; some of which require mandatory reporting within 24 hours.

Vector monitoring measures are well established in TIA and procedures and protocols, both for around the perimeter of the airport as well as onboard aircraft, are articulated in SOPs. Vector monitoring is aimed at identifying disease vectors for dengue, malaria, chikungunya, West Nile virus and Japanese encephalitis. Staff are highly knowledgeable in implementing control methods for relevant vector-borne diseases and hosts. Deratting measures are also in place.

Aircraft from target countries are inspected for mosquitoes. If detected, mosquitoes are sent to the laboratory for identification. The assessment team noted that Taiwan did not require all arriving aircraft to be disinsected.

The assessment team observed that significant improvements have been achieved in those capacities previously identified in the 2011 assessment as not being fully met. This includes capacity building in the detection of radiation, chemical agents and biological pathogens in travellers and cargo, enhanced staff training and replenishment of expired PPE, particularly for radiation and toxic chemicals.

The 2011 assessment found TIA to be lacking in nuclear emergency capabilities. The assessment team observed that this shortcoming has now been addressed, and TIA is now equipped to detect primary radiation and has established plans for responding to nuclear and biological hazards.

The 2011 assessment noted the inability to apply decontamination measures to airmail parcels within TIA premises. The assessment team was of the

view that strengthening routine and emergency capacities focuses on building on existing systems and infrastructure, where possible, and advised Taiwan officials to seek advice from the World Health Organization (WHO) on the scope of this capacity requirement before investing in large-scale system or infrastructure changes.

Scenario drills are undertaken weekly for managing chemical, biological and radiological incidents, as well as diseases of risk, such as avian influenza. These drills are detailed in the SOPs.

The assessment team observed the range of PPE available to staff who handle chemical, biological and radiological emergencies, including decontamination units. Airport personnel are trained regularly on the use of PPE and appropriate stock levels are mandated by Government regulations. The TCDC biohazard PPEs are specifically stored in warehouses designated for PPE types A, B, C and D and decontamination units.

In regard to responding to PHEIC, the assessment team notes Taiwan's report indicating that significant progress has been made in establishing a disaster rescue plan and emergency response SOPs. In particular, the protocol to address chemical and nuclear emergencies was confirmed on 23 February 2013, while the protocol to address biological emergencies was confirmed on 8 March 2013. Collaborative meetings are held regularly with services and sectors operating in TIA to ensure all stakeholders are aware of the procedures during an emergency.

Resources are available to ensure rapid response during outbreaks of national or international concern. The airport emergency plan specifies the procedures for implementing surge capacity, which consists primarily of airport medical staff and the Fire Brigade who are trained in emergency

management.

Following the document process and onsite visit, the assessment team determined that the strengths of TIA are:

- communication link with travellers for health related information
- the Operation Control Center, which provides comprehensive infrastructure and management for PHEICs
- onsite medical facilities and integration of resources with Taiwan Landseed Hospital
- capacity for radiological and chemical inspection and emergency response
- access to, and training in the use of, PPE for all hazards

The assessment team identified two areas of consideration in the implementation of core capacities. Firstly, the screening of travellers is highly reliant on thermal scanners. As this approach limits detection to respiratory diseases of concern, broader surveillance parameters may be considered to enable detection of non-respiratory diseases.

Secondly, while vector surveillance and control measures were well established, no response protocol appeared to be in place to mitigate the risk of introduction of a vector when detected in aircraft.

### *3.4* Port of Kaohsiung (PoK)

PoK is the largest international seaport in Taiwan and serves as a shipping hub for international shipping lines. It encompasses 121 wharves and 19 mooring buoys that can accommodate 152 ships. Over 700,000 incoming and outgoing vessels from 300 shipping routes and more than 100,000 passengers used the port in 2012.

A Special Committee for implementing IHR core capacities at Kaohsiung Port was established in 2011, encompassing the Port of Kaohsiung Taiwan International Ports Corporation Ltd, Taiwan CDC, the Kaoshiung Customs Office, the National Immigration Agency, the Bureau of Animal and Plant Health Inspection and Quarantine, the Maritime Port Bureau, the Taiwan Food and Drug Administration, the Coast Guard Administration, the Kaoshiung City Government and the Kaoshiung Harbor police and fire brigade.

The assessment team noted that health related information is widely accessible to travellers through posters targeting different infectious diseases, with the aim of raising public awareness regarding these diseases. The arrival card issued by the National Immigration Agency at entry into PoK serves as a means to interview arriving passengers as well as contact trace in the event follow up is required.

The Regulations Governing Quarantine at Ports requires ships to report the presence of persons who have or are suspected to have infectious diseases within 72 hours of arrival. Trained personnel are dispatched to the ship on arrival to implement necessary quarantine measures. If there are public health concerns on the ship, PoK authorities may direct the vessel to be moved to a designated area to enable deratting, disinfection and decontamination measures to be applied without risk of spread of contamination to other people and the environment. SOPs are in place for these measures. Arrangements are in place with several hospitals for the diagnosis and treatment of ill travellers and isolation if required, including those affected by radiation, toxic chemicals or explosives.

The assessment team noted that the health room at the International Travel Center is well equipped with PPE and has a separate area for discrete

examination and quarantine, if necessary, of ill travellers; as well as a separate exit for ease of transfer by an ambulance, if necessary. The 2011 assessment identified the absence of wash basins in the health room. To address this issue, hand sanitisers are provided.

Taiwan CDC ensures that there is an adequate number of trained personnel to implement quarantine measures and undertake health-related functions at PoK. Following the 2011 assessment, staff training was established, focusing on ship sanitation inspection; particularly in the management of water, waste, swimming pool and medical facilities and detection and response to chemical, biological and radionuclear events.

SOPs are in place to undertake ship sanitation and inspection and quarantine measures. Over 200 ship inspections are undertaken every month, with approximately 60 extension certificates issued each year. Action plans and guidelines are in place for vector and reservoir surveillance and control. Approximately 36 ships were issued with control measures in 2012 to address vector and rodent problems.

The assessment team notes Taiwan's report, which confirms that PoK staff are trained in public health risk evaluation associated with microbiological, zoonotic and radiological events. Drills have also been established to respond to fire, marine oil pollution, bioterrorism threat and port security, and on the use of PPE. During the onsite visit, the assessment team observed the breadth of equipment and supplies used by inspection staff, including radiation inspection equipment.

The Disaster Mitigation and Prevention Program has been revised to ensure response plans from PoK authorities are integrated to handle chemical, microbiological and radionuclear emergencies. The program includes SOPs for reporting and responding to chemical incidents and radiation

contamination. Central and local authorities are immediately notified so that measures can be applied to prevent the spread of public health events.

Following the document process and onsite visit, the assessment team determined that the strengths of PoK are:

- communication link with travellers for health related information
- the Vessel Traffic Center Port Control Station, which is equipped to manage all arriving and departing vessels
- capacity for radiological and chemical inspection and emergency response
- access to, and training in the use of, PPE for all hazards

The assessment team identified a number of capacities that require further development. These include development of training courses to address risks from recreational swimming and spa areas in ships and systems for detection, assessment and applying recommended measures. Further training is planned to be delivered to increase staff knowledge on the requirements for medical facilities, bio safety procedures, equipment and environmental requirements on board ships. In the 2011 assessment, air quality management was a capacity identified as not being met. Taiwan CDC is arranging delivery of training to ensure knowledge of detection, assessment and recommended control measures for present and potential risks from air quality.

# 4 Recommendations

## 4.1 Recommendations in General

The scope and purpose of IHR implementation raises important action areas for PoEs, such as ensuring a multi-sectoral approach, facilitating collaboration and coordination, and identifying best ways to use existing human resources at the PoE. Relationships are critical, as airports and seaports are co-locations of different agencies and businesses, within a complex operating environment, performing different roles and seeking to achieve different objectives.

It is clear that the process of capacity building at PoEs has established several mechanisms for multi-agency communication, coordination and information-sharing, including operational linkages between competent authorities, government organisations, public health authorities and PoE service providers. By not limiting the application of the IHR to specific diseases, its relevance and applicability is intended to be maintained for many years to come. It is important, therefore, that these collaborations continue to be strengthened in the face of continued evolution of diseases and the factors determining their emergence and transmission. Furthermore, IHR implementation in general should be adaptable to new diseases (such as the Middle East Respiratory Syndrome coronavirus), new air pathways and new shipping destinations.

Maintaining commitment, implementing and reviewing national plans, building on the existing achievements and following established procedures are ongoing challenges. Taiwan has demonstrated its capabilities in all of these areas and it is crucial that the commitment continues into the future.

## 4.2 Recommendations for TIA

The assessment team notes that Taiwan does not require all arriving aircraft to be disinsected. While it is not expected that Taiwan expands its disinsection regime to encompass all international aircraft, it may wish to consider undertaking a risk assessment to determine whether expanded measures are warranted, and whether a response protocol should be established to mitigate the risk of introduction of vectors where detected in aircraft.

## 4.3 Recommendations for PoK

The PoK Intercontinental Container Terminal Project is underway to "enhance PoK's competitiveness as a regional and global shipping hub" and is expected to add seven million twenty-foot equivalent units to its annual handling capacity. In addition, the PoK Passenger Terminal Project is underway, with the new International Passenger Terminal to be situated in Wharves 19 and 20. This new facility is expected to increase passenger numbers exponentially.

The reinvigoration of PoK as a major hub for economic growth in the region will introduce greater challenges in ensuring IHR core capacities continue to be in place, relative to the anticipated volume and frequency of travellers, and complexity of the point of entry. For both projects, it is not clear what strategic workforce planning has been undertaken in anticipation of PoK's expansion to ensure adequate staff to implement and strengthen IHR core capacities. For example, the assessment team noted that there was only a handful of PoK staff trained to undertake ship sanitation inspections. In this context, the delivery of training to increase staff knowledge on the requirements for medical facilities, bio safety procedures, equipment and environmental requirements is critical.

***Annex 1. The Agenda of the Assessment***

| **Time** | **Period** | **Activity** |
|---|---|---|
| 11th of March (Monday) | ***Assessment in Taoyuan International Airport (TIA)*** | |
| | 09:00-09:30 | Start Meeting |
| | 10:30-12:00 | Formal Assessment -Document Review |
| | 13:00-15:30 | Formal Assessment - Onsite Visit |
| | 15:30-16:00 | Post-Assessment Meeting |
| 12th of March (Tuesday) | ***Assessment in Port of Kaohsiung (PoK)*** | |
| | 09:00-09:30 | Start Meeting |
| | 10:30-12:00 | Formal Assessment -Document Review |
| | 13:00-15:30 | Formal Assessment - Onsite Visit |
| | 15:30-16:00 | Post-Assessment Meeting |
| 13th of March (Wednesday) | 09:00-10:30 | ***Closing & Synthesis Discussion*** |
| | 11:00-11:30 | ***Courtesy Meeting*** |

***Annex 2. The List of Verified Documents***

| | **Taoyuan International Airport (TIA)** | **Port of Kaohsiung (PoK)** |
|---|---|---|
| **Part A** ***Coordination& Communication*** | 5、7 | 5 |
| **Part BI** ***Routine*** | (a)1.1、1.2、2.1<br>(b)1.1<br>(c)2.4、2.6<br>(d)2.2.2、2.2.3<br>(f)1.1、1.2 | (c)2.5、2.6、2.7、2.11、2.14、2.15<br>(d)1.2、1.4.1、2.2.2、2.2.3、2.2.4、2.2.5、2.2.10、2.2.11、2.2.12 |
| **Part BII** ***Response to PHEIC*** | (a)1、2、3<br>(c)3<br>(e)1、2、3、4 | (c)1、2<br>(f)1 |

※Please refer codes numbers to "*Assessment tool for core capacity requirements at designated airports, ports and ground crossings*" published by WHO.

*Annex 3. The List of Visited Sites*

| | **Site** | **Competent Authority/ Organization** |
|---|---|---|
| **Taoyuan International Airport (TIA)** | Operation Control Center | TIA Co. Ltd. |
| | Fever Screen & Quarantine Station | 2nd Branch, Taiwan Centers for Disease Control |
| | Medical Centers | Landseed Medical Centers |
| | Vector Surveillance & Control Station | 2nd Branch, Taiwan Centers for Disease Control |
| | Detecting & Personal Protection Equipment for Radiation Bio-pathogens and Toxic chemicals | TIA Co. Ltd. /2nd Branch, Taiwan Centers for Disease Control |
| | On-board Mosquito Surveillance | 2nd Branch, Taiwan Centers for Disease Control |
| **Port of Kaohsiung (PoK)** | VTC Port Control Station | Port of Kaohsiung, Taiwan International Ports Corporation Ltd. |
| | Mega ports Central Operation Center (Radiological Screening & Surveillance) | Kaohsiung Customs Office |
| | Equipment to Transport Affected Travelers | Kaohsiung Harbor Fire Brigade |
| | International Travel Center | Port of Kaohsiung, Taiwan International Ports Co. Ltd /Custom, Immigration, Quarantine, and Security Services |

*Annex 4. The Summarized Results of the Assessment at TIA*

| *Core Capacity Requirements* | Item | N/A | Full (%) | Partial (%) | None (%) |
|---|---|---|---|---|---|
| *Part A Coordination& Communication* | 10 | 0 | 10 (100%) | 0 (0%) | 0 (0%) |
| *Part BI Routine* | 61 | 6 | 55 (100%) | 0 (100%) | 0 (0%) |
| *Part BII Response to PHEIC* | 24 | 0 | 24 (100%) | 0 (100%) | 0 (0%) |
| *Total* | 95 | 6 | 89(100%) | 0 (0%) | 0 (0%) |

| WHO File Model Output-TIA | |
|---|---|
| *Core Capacity Requirements* | Score |
| Part A *Coordination& Communication* | 100% |
| Part BI *Routine* | 100% |
| Part BII *Response to PHEIC* | 100% |
| *Final Score* | 100% |

*Annex 5. The Summarized Results of the Assessment at PoK*

| *Core Capacity Requirements* | Item | N/A | Full (%) | Partial (%) | None (%) |
|---|---|---|---|---|---|
| *Part A Coordination& Communication* | 10 | 0 | 10 (100%) | 0 (0%) | 0 (0%) |
| *Part BI Routine* | 61 | 5 | 54(96.4%) | 2(3.6%) | 0(0%) |
| *Part BII Response to PHEIC* | 24 | 0 | 24 (100%) | 0 (100%) | 0 (0%) |
| *Total* | 95 | 5 | 88(97.8%) | 2(2.2%) | 0(0%) |

| WHO File Model Output-PoK | |
|---|---|
| *Core Capacity Requirements* | Score |
| Part A *Coordination& Communication* | 100% |
| Part BI *Routine* | 99.7% |
| Part BII *Response to PHEIC* | 100% |
| *Final Score* | 99.9% |

## *Appendix 1. Detailed Assessment Results of TIA*

### Taoyuan International Airport (TIA) – Monday, 11 March 2013

**(A) Checklist for core capacity requirements for coordination, communication of event information and adoption of measures (in regard to activities concerning designated airports, ports and ground crossings, according to Annex**

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **1. International communication link with competent authorities at other points of entry** | | | | | |
| Competent authority at each point of entry has current contact details of officers in charge of international communication with other points of entry abroad and means of communication and procedures are available to inform relevant public health measures taken pursuant to the International Health Regulations, such as:<br>- Communication with competent authorities at other points of entry, internationally, to provide relevant information regarding evidence found and control measures still needed on arrival of affected conveyances. | ■ Full<br>□ Partial<br>□ None | TCDC<br>Communicating with international PoE competent authorities through IHR FOCAL POINT.<br><br>TIA C. Ltd<br>Communication with other PoE authorities or the representatives of airline companies through TIA Alliance of Airline Companies, TIA Committee of Safety & Security, etc. | TCDC<br>Contact detail of IHR national focal point<br>TIA Co. Ltd<br>Meeting records of TIA Alliance of Airline companies, TIA Committee of Safety & Security, etc. | | ■ Full<br>□ Partial<br>□ None |
| **2. National communication link between competent authorities at points of entry and health authorities at local, intermediate and national levels.** | | | | | |
| 2.1 Local, intermediate and national levels (including National IHR Focal Point) have current contact details of competent authorities at points of entry and current, regularly updated, documented and tested procedures, including any Memorandum of Understanding – MoU and protocols are in place for routine and urgent communication and collaboration during a public health emergency of international concern with:<br>(1) the competent authority at other points of entry and health authorities at local, intermediate and national levels;<br>(2) other relevant government ministries, agencies, | ■ Full<br>□ Partial<br>□ None<br><br>Taoyuan County, TIA and TCDC should have more close communication and coordination with each other. | Using multiple methods, such as official documents, telephone, webnet, and IHR focal point to communicate with all level of health authorities for routine, urgent communication and collaboration during a public health event of international concern. | TCDC<br>Contact list which include airport, CIQS & local health authority<br><br>TIA Co. Ltd.<br>Contact list which include airport, CIQS & local health authority BAPHIQ<br>Emergency reporting procedures. | | ■ Full<br>□ Partial<br>□ None<br><br>TIA provided documented and tested procedures for routine and urgent communication at the local, intermediate and national level. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| government authorities and other partners involved | | | | | |
| 2.2 Competent authority at each point of entry has current contact details of officers within local, intermediate and national levels, including contact details of National IHR Focal Point and means of communication and procedures are available to inform relevant public health measures taken pursuant to the International Health Regulations.<br>Such as:<br>- to communicate with NFP in order to inform WHO within 24hrs of receipt of evidence, as manifested by exported or imported:<br>(a) human cases;<br>(b) vectors which many carry infection or contamination; or<br>(c) goods that are contaminated, that may cause international disease spread<br>- report all available essential information on event occurring at point of entry by competent authority to health authority at local, intermediate or national level for public health assessment, care and response.<br>- for communication with competent authorities at other points of entry, nationally, to provide relevant information regarding evidence found and control measures needed on arrival of affected conveyance. | ■ Full<br>□ Partial<br>□ None | As Above | As Above | | ■ Full<br>□ Partial<br>□ None |
| **3. Direct operational link with other senior health officials.** | | | | | |
| Current, regular, updated, documented and tested procedures, including any MoU and protocols, for direct operational link between local point of entry competent authority officer and other senior health officials, are in place for rapid decision approval, risk assessment and implementation of containment and control measures. | ■ Full<br>□ Partial<br>□ None | Offer relevant operational guide &contact list between local PoE competent authorities & national health authority for decision approval, risk assessment, and implementation of containment and controls measures. | TCDC<br>Contact detail notes of the person in charge of TW Disease Prevention and TIA services & sectors.<br>TIA Co. Ltd.<br>Contact list of TIA services and sectors.<br>APO | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of procedures and protocols for communicating |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | | Contact list of TIA services and sectors. | | between local point of entry and senior health officials for risk assessments and decision making. |
| **4. Communication link with conveyance operators** | | | | | |
| Current contact details of conveyance operators (including its agents or legal representatives at shore), means of communication and procedures are available for advance notice of application of control measures, for issuance of Ship Sanitation Certificates and for receipt of other health documents and conveyance operators provided with current contact details of competent authority. | ■ Full<br>□ Partial<br>□ None | CIQS & TIA Co. Ltd provide contact point to communicate with airline companies. | TCDC<br>Contact list of TIA services and sectors.<br><br>TIA Co. Ltd. BAPHIQ<br>Contact list of TIA services and sectors. | | ■ Full<br>□ Partial<br>□ None |
| **5. Communication link with travellers for health related information** | | | | | |
| Current contact details of competent authority at point of entry and means of communication and procedures are available for notice of application of control measures, for receipt of health documents and to provide health related information for travellers. | ■ Full<br>□ Partial<br>□ None | -TIA Medical Centre offers travellers communicable disease consultation & international vaccination and prophylaxis services to travellers,<br><br>-Quarantine Units (TCDC, BAPHIQ) provide international epidemiological information. | -Information providing for travellers such as TIA contact list book, contact person list & numbers of airport medical Centre | | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC has a range of health information for travellers, and utilised a variety of mediums to reach travellers, including leaflets, electronic noticeboards, posters and a public hotline #1922.<br>Taiwan CDC also engages with tour guides and provides training on public health issues. |
| **6. Communication link with service providers** | | | | | |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| Current contact details of service providers and means of communication and procedures are available for advance notice of application of control measures. Service providers have current contact details of competent authority. | ■ Full<br>□ Partial<br>□ None<br><br>Too many outsourcing services and shops, it may be difficult to communicate efficiently and especially during emergencies. | TIA Co. Ltd & Hygiene Safety Team: -keep close communication with all service providers (e.g. Airline Companies etc.), as well as periodically check-up & update relevant information. | TCDC<br>Contact list of TIA services and sectors.<br>TIA Co. Ltd.<br>Contact list book of TIA, Airline companies, and contracted companies. | | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan IHR implementation team has been established, which includes representatives from TIA Corporation, airlines, catering services, ground services, postal services and aviation police officers. |
| **7. Assessment of all reports of urgent events within 24 hrs** | | | | | |
| Current, regularly updated, documented and tested procedures (including any MoU and protocols) for communication and assessment within 24 hrs all reports of urgent events related to ports, airports and ground crossings, including direct operational links exist among hospitals, clinics, airports, ports, ground crossings, authorities, laboratories and other key operational areas. | ■ Full<br>□ Partial<br>□ None | Regularly update & renew operational plan and procedures in order to hold periodically the reporting process and relevant drill exercise smoothly. | TIA Co. Ltd.<br>TIA has all kinds of disaster rescue operative plan & Emergency response with operation procedure (including 3 renewed version of Radiation, Bio pathogen & Chemical agents). | | ■ Full<br>□ Partial<br>□ None<br><br>Staff outlined protocols for communication and assessment of all reports of urgent events, including notification of health services and other key operational areas. |
| **8. Communication mechanism for the dissemination of information and recommendations received from WHO** | | | | | |
| Current, regularly updated, documented and tested communication mechanism for handling WHO reports, regarding national events or events in other countries involving point of entry activities and related public health measures, for use by competent authorities at points of entry. | ■ Full<br>□ Partial<br>□ None | -Using IHR Focal Point to provide any information & recommendations from WHO.<br>-Then through TIA Hygiene Safety Team to operate the well-managed public health resources by competent | TCDC<br>Provides Contact list of "National IHR focal point" | | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC staff at point of entry have access to WHO |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | authorities. | | | reports regarding national events or events in other countries. |
| **9. Procedures and legal and administrative provisions to conduct inspections and receive reports of cases of illness and/or other evidence of public health risks on board arriving conveyances** | | | | | |
| National legislation, administrative acts, protocols and/or procedures are in place, updated and disseminated widely, empowering competent authority to conduct inspections to identify public health risks together with required control measures to be applied and providing requirements to report public health related events on board.<br>Guidance documents explaining the requirements and procedures to immediately relay reports to the competent authority to ensure that appropriate assessment, care and other public health measures are developed and disseminated to cruise lines, airlines, ground transportation and their relevant industry associations and posted on appropriate websites.<br>A standard operation procedure for competent authorities is in place to receive reports from arriving conveyances of all cases of illness indicative of an infectious disease or evidence of a public health risk on board.<br>All of the above activities should be provided on a 24 hr basis, seven days a week (24/7) or according to working hours at the points of entry, as appropriate. | ■ Full<br>□ Partial<br>□ None | Have the law in place, the empowering competent authorities 24-hour-7-day to evaluate the suspected of contagious passengers, health assessment, take care and public health related procedures. | - The CDC Act<br>- Ports Quarantine regulation<br>- Manual of Quarantine | | ■ Full<br>□ Partial<br>□ None<br><br>Staff provided legislation, protocols, procedures and SOPs for the identification, inspection and response to public health risks. |

## (B1) Core capacity requirements for TIA – at all times

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **(a) Access to (i) appropriate medical service including diagnostic facilities located so as to allow the prompt assessment of and care of ill travellers, and (ii) adequate staff, equipment and premises.** | | | | | |
| **1. Assessment and care of travellers** | | | | | |
| **1.1 Access to medical and diagnostic facilities**<br>Administrative arrangements and MoUs are in place to grant access to medical and diagnostic facilities for the assessment and care of ill or suspect travellers, in consultation with local and/or nearby health services.<br>If on-site, specialized warehouse for medicine and medical instruments and records for their use and replacement. | ■ Full<br>□ Partial<br>□ None | Quarantine station:<br>-Equipped with infrared camera for fever screening.<br><br>TIA Medical Centre:<br>-Equipped with general outpatient service, first aid to evaluate and treat immediately, and transfer to hospital if necessary. | TCDC<br>-Having the standard operating procedures of quarantine for in-bound passengers, and the contract of TIA Medical Center and the nearby hospitals. | | ■ Full<br>□ Partial<br>□ None<br><br>Assessment and initial care of ill travellers undertaken by Taiwan CDC staff or onsite medical centre staff, according to SOPs. Administrative arrangements are in place with local area health facilities for care of ill travellers. Onsite medical centre fully equipped, with records of medicine and instruments. |
| **1.2 Assessment of requirements concerning vaccination or prophylaxis**<br>Capability to do on-site assessment of proof of vaccination and prophylaxis recommended by WHO, such as for yellow fever, as applicable, and according to the epidemiological situation, risk analysis and national requirements. | ■ Full<br>□ Partial<br>□ None<br><br>The reviewer knows that TCDC staff has certain kind of capability. Yet, the Question and answer is not consistent. | -Update the latest international epidemic situation information on the TCDC website everyday, and provide information about the location of travel clinics on the website and on-site vaccination assessment within travel clinic.<br><br>-TCDC commissions TIA Medical Center to set up travel clinic for providing travelers, | TCDC<br>Contracts with hospitals providing clinic for international travel medicine. | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated capability to complete on-site assessment of proof of vaccination and prophylaxis. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | The description of this item should correspond to the IHR requirement. Maybe the writing can improve afterwards. | especially those traveling to endemic areas with yellow fever, malaria or meningococcal meningitis, and the service of travel health consultation, inoculation with vaccination and antimalarial medicines…etc. | | | |
| **1.3 Key information regarding medical and diagnostic facilities**<br>List of all facility names, and key contact information (address, phone number, distance from Point of Entry and map of routes) created, maintained and updated, disseminated, regularly tested for accuracy and accessible to all relevant personnel, to which ill or suspect travellers from the Point of Entry are to be transferred. | ■ Full<br>□ Partial<br>□ None | Regularly renew the contact details of those designated hospitals and check appropriately the routes of transportation for the ill or suspect travelers. | TCDC<br>-Quarantine SOPs<br>- the contact details of those designated hospitals, relevant departments, as well as passage map for transportation of travellers.<br>- Contact details of North (district) Medication information network | | ■ Full<br>□ Partial<br>□ None<br><br>SOPs and protocols provide detailed list of facility names, and key contact information for medical facilities to which ill travellers are transferred. Scenario drills undertaken regularly to ensure all staff are trained in processes. |
| **2. Adequate staff, equipment and premises** | | | | | |
| **2.1 Staff**<br>Sufficient personnel<br>Access to appropriate number of trained personnel assigned for these duties, in relation to volume and frequency of travellers and complexity of point of entry (regarding terminal facilities, destinations and multimodal practice in place among other factors).<br>Arrangements for translation and interpreters where needed. | ■ Full<br>□ Partial<br>□ None<br><br>It's good to see staff from other TCDC branches can support if necessary. It also shows | -Employed qualified medical staff;<br>-Regularly arrange the training courses for staffs and evaluate the SOPs for personnel.<br>-Access to appropriate number of trained quarantine officers assigned for these duties, changing by the volume and frequency of travelers. | TCDC<br>- Certificates of medical staff qualifications.<br>-Manual of quarantine, including evaluation lists of SOPs<br>TIA Co. Ltd.<br>- Medical center: certificates of medical staff qualifications e.g. ACLS, ETTC. | | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC staff demonstrated protocols and procedures for assessment and management of ill |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| Competent/qualified personnel for prompt assessment, care and reporting of ill travellers.<br>Personnel have undergone a training program to recognise disease symptoms and are familiar with procedures regarding prompt assessment, care and reporting of ill travellers. | surge capacities. | -TIA Medical Center regularly holds relevant drill, such as, 28 medical staffs passed A&E training courses;<br>held 75 times of "CPR+AED" training courses in TIA since Dec.<br>2011. | | | travellers.<br>Training program for staff to ensure all are able to recognise disease symptoms and are familiar with procedures regarding prompt assessment, care and reporting of ill travellers. |
| **2.2 Adequate space to conduct private interviews with ill travellers**<br>Hygienic and environmentally safe space(s) set aside to conduct private interviews that are of adequate size in relation to volume, type of conveyance and frequency of travellers and complexity of the point of entry (regarding terminal facilities, destinations and multimodal practices).<br>Desirable to have independent exit passage through which suspect travellers can be transported to medical care facilities, if needed, and in order to avoid infecting other persons. | ■ Full<br>□ Partial<br>□ None<br><br>It's good to see that TIA has a large space for surge capacities. | TCDC:<br>-To set up isolated consultation rooms and specimen collection areas at the quarantine station.<br>-Equipped with specific areas for preliminary interview and other quarantine measures.<br>-Outsourcing company executes cleaning and disinfection.<br>-TIA Medical Center provides services with clinical evaluation and management for travelers. | <u>TIA Co. Ltd.</u><br>-A contracts with the qualified disinfection company and performing records of the environment cleaning and disinfection<br><br><u>TCDC</u><br>-Detailed transporting routes from quarantine station to ambulance (within compulsory hospital trip SOP). | | ■ Full<br>□ Partial<br>□ None<br><br>Health Room at Fever Screening and Quarantine Station is well equipped and has designated area for discreet examination and isolation if necessary. Additional facilities are available at on-site Medical Centre if required. |
| **2.3 Personal protective equipment (PPE) for interviewing ill travellers**<br>Access to necessary equipment (e.g. PPE) for initial interview and triage. Personnel use personal protective equipment for initial interview and triage. | ■ Full<br>□ Partial<br>□ None<br><br>It's good to see that enough storehouse for PPEs exists. | TIA Medical Centre:<br>-Use appropriate PPE according to on-site situation<br>-Quarantine staffs wear masks at work.<br>-In any cases, follow the TCDC instructions of PPE. | <u>TCDC</u><br>-Instructions of personal protective equipment for PoE staff<br>- Documents of PPE management.<br>-Checklists of PPE. | | ■ Full<br>□ Partial<br>□ None<br><br>Health Room and on-site Medical Centre have equipment for interview and triage of ill travellers. |
| **(b) Provide access to equipment and personnel for the transport of ill travellers to an appropriate medical facility** | | | | | |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **1. Equipment to transport ill travellers** | | | | | |
| **1.1 Equipment for transport of ill travellers to appropriate medical facility**<br>Arrangements are in place for transporting ill travellers to appropriate medical facility by safe, hygienic means of transport. | ■ Full<br>□ Partial<br>□ None | -There are 4 ambulances stand-by within TIA.<br>-According to the regulation of ambulance formulated by DOH to provide the appropriate equipment and proper PPE for ill travelers and ensure the safety and sanitary of the delivery processes to medical or quarantine facilities. | TCDC<br>-Contract with TIA Medical Centre for the inspection of travellers suspected with communicable diseases<br>-SOP of transporting suspected travellers to the designated hospital (compulsory hospital trip).<br><br>TIA Co. Ltd<br>-Standard equipment and management of ambulance.<br>-Records of cleaning & disinfection of ambulance.<br>-Records of Maintenance of Equipment (MOFE) | | ■ Full<br>□ Partial<br>□ None<br><br>24hr ambulance, fully equipped with PPE, is available to transport ill travellers to medical facility. |
| **1.2 Access to personal protective equipment (PPE) for transport staff**<br>Transport staff has access to uses adequate personal protective equipment, when transporting ill travellers. | ■ Full<br>□ Partial<br>□ None | TIA Co. Ltd<br>-Procedure for PPE management<br>-PPE checklist<br>-SOPs of Compulsory hospital trip (personnel wear appropriate PPE and ensure the safety and sanitary of the delivery processes to medical or quarantine facilities. | TCDC<br>-Equipped with operating procedures and checked list of personal protective equipment (PPE).<br>-SOPs of Compulsory hospital trip (includes PPE instructions | | ■ Full<br>□ Partial<br>□ None |
| **2. Personnel to transport ill travellers** | | | | | |
| **2.1 Number of trained personnel**<br>Appropriate number of trained personnel available to adequately transport ill travellers, according to technical requirements. | ■ Full<br>□ Partial<br>□ None<br><br>The staff of fire brigade has certain ability to assess during | TIA Co. Ltd<br>-Employed qualified medical staffs.<br>-All members in TIA Medical centre and the Fire Department are qualified with Basic emergency<br>medical technician.（EMT-1） | -Certificates of medical staff qualifications, e.g. ACLS, ETTC, APLS, EMT1 & professional avian nursing training.<br>-Certificates of ambulance attendant qualifications. | | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | emergencies. They are all qualified EMTs. | -24 members of Fire attendants are qualified with Intermediate emergency medical technician. (EMT-2)<br>-Having appropriate numbers of personnel available to transport ill passengers. | Fire Department：<br>- Certificates of basic emergency medical technician (EMT-1)<br>- Certificates of intermediate emergency medical technician (EMT-2) | | |
| **2.2 Training of Standard operational procedures for transport of ill travellers**<br>Personnel trained and knowledgeable in infection control techniques for safe removal of ill travellers, in application of personal protective equipment and in use of key information regarding contact and accessing medical facilities in a safe and timely manner. | ■ Full<br>□ Partial<br>□ None | -Capability of communication with hospitals through Emergency & Rescue Commend Centre, Fire Bureau or Emergency Medical Services of Taoyuan county.<br>-Having training program for all staffs and EMT for Fire attendants and evaluating the SOPs of compulsory hospitals trip and PPE assessment regularly all year. | TCDC<br>- TIA operating procedures of emergency and the death.<br>- SOPs of Compulsory hospital trip. | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of infection control techniques and the use of PPE. |
| **(c ) Provide trained personnel for the inspection of conveyances** | | | | | |
| **1. Number of trained personnel** | | | | | |
| Appropriate number of trained personnel available in relation to the volume and frequency of traffic, type, size, kind of conveyance at all points of entry to ensure that conveyances are adequately and safely inspected on a timely basis and according to technical requirements. | □ Full<br>■ Partial<br>□ None | - Personnel with professional training to execute aircraft vector inspections. | -Certificates of vector control technicians. | -CDC has Vector control technicians<br>-Currently operate as incident reporting and initial control.<br>-None routine inspection on radiation and chemical. | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC has staff trained for the inspection of conveyances, appropriate to the volume and frequency of traffic and kind of conveyances. |
| **2. Training for inspectors** | | | | | |
| **2.1 Understanding of inspection standard** | ■ Full | -Staff training courses regularly. | TCDC | -CDC has Vector | ■ Full |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **operating procedures**<br>Personnel have undergone a training program, can produce certificates/ documentation and/or can demonstrate a thorough understanding of standard operating procedures set in place for the sanitary inspection of conveyances, and should demonstrate competency in the following areas, according to the assigned inspection duties. | □ Partial<br>□ None | | -Certificates of vector control technicians.<br>-Equipped with working proposal related and SOPs.<br><br>BAPHIQ<br>- Certificates of veterinary professional license. | control technicians<br>-Currently operate as incident reporting and initial control.<br>-None routine inspection on radiation and chemical. | □ Partial<br>□ None<br><br>Staff demonstrated knowledge of safe and timely inspection procedures, undertaken according to SOPs.<br>Training records are kept for all staff. |
| **2.2 Required health related documents for conveyances**<br>Demonstrable knowledge of required health related documents and the correct use of information therein for detecting, reporting, assessing and providing first control measures for public health events, according to type and kind of conveyance. | ■ Full<br>□ Partial<br>□ None | - Aircraft from affected areas would be asked for proof of disinsection.<br>- On-board quarantine measures according t | -Certificates of vector control technicians.<br>- Proof of mosquito elimination<br>- Aircraft Disinsection Certificate<br>- Certificates of medical staff qualifications. | Require Aircraft Disinsection Certificate From specified area is required. | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of SOPs, regulations and other guidance documents for use in inspecting conveyances. |
| **2.3 Epidemiological situation at the point of entry**<br>Knowledge of common public health risks detected on a routine basis and of the usual public health risks associated with type, size, kind, common origins and destinations of conveyances that use the point of entry. | ■ Full<br>□ Partial<br>□ None | - Daily update global epidemic situation<br>-detecting unusual public health events or health measures by monitoring the travellers from<br>disease-epidemic areas. | Websites related with global epidemic situation e.g. CDC, W.H.O., Medline, ProMed etc. | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of common public health risks detected on a routine basis at TIA, and a good understanding of emerging diseases. |
| **2.4 Public health events**<br>Knowledge and skills for detecting, reporting, assessing and provide first control measures to public health events. | ■ Full<br>□ Partial<br>□ None | -Periodic staff training course.<br>-Being able to monitor, inform/report and preliminarily | TCDC:<br>-Certificates of vector control technicians. -Understanding of operation procedure of SOP of | -CDC has vector control technicians<br>-Currently, any | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | control. | inspection related.<br>-Certification and license of veterinary professional.<br>-Understand operating procedure of SOP of related inspection.<br>-TIA has all kinds of disaster rescue operational plan & Emergency response operation procedure (including edited volume of Radiation, Bio pathogen & Chemical). | unusual events identified will be reported and initial control will be applied.<br>-Routine radiation and chemical inspection is absent. | |
| **2.5. Public health risks from microbiological, chemical and radiological agents**<br>Knowledge of how they can affect human health and be transmitted person to person and by food, air, water, waste, vectors, fomites and the environment. | ■ Full<br>□ Partial<br>□ None | -Periodic staff training courses including the programme of disinsection, dangerous materials, first aid, zoonotic diseases etc. | -Certificates of vector control technicians.<br>-The operating procedure of biological emergency.<br>-TIA has most kind of disaster rescue operational plan & Emergency response operation procedure (including edited volume of Radiation, Bio pathogens & Chemical).<br>- Records of personnel training programme by BAPHIQ<br>-Records of animal and plant importation management and SOPs. | TIA has been working to increase the training, knowledge of relevant chemical and radiological.<br>-Currently, any unusual events identified will be reported and initial control will be applied. | ■ Full<br>□ Partial<br>□ None |
| **2.6. Personal protective techniques and related equipment** Demonstrable knowledge of application and correct use. | □ Full<br>■ Partial<br>□ None | -Periodic professional training programme including radiation, chemical, first aid, zoonotic diseases, etc. | -Certificates of vector control technicians.<br>-Certificates of medical staff qualifications.<br>-Assessment for training course on Level C PPE.<br>-SOPs of handling dangerous material: such as: radiation protection plan and document | Relevant knowledge and training are provided to TIA personnel. | ■ Full<br>□ Partial<br>□ None<br><br>Staff from Taiwan CDC, TIA authority, service providers at TIA (e.g. cleaning staff and fire brigade) |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | | of training courses, e.g. toxic-chemical disaster seminar, response plan of radiation disaster, etc. | | and public and private corps undertake training for microbiological, chemical and radiological events, which includes use of PPE. |
| **2.7 Public health measures**<br>Demonstrable knowledge of the use of correct methods and understanding of techniques, such as: disinfection, decontamination, isolation, quarantine, contact tracing, entry and exit control. | ■ Full<br>□ Partial<br>□ None | CDC and BAPHIQ personnel own certificates related with the public health measures, such as performing the isolation, quarantine, tracing the contacting person and controlling the entry and exit. | -Certificates of vector control technicians.<br>-Certificates of medical staff qualifications. | | ■ Full<br>□ Partial<br>□ None |
| **2.8 Testing and sampling techniques**<br>Demonstrable knowledge of the use of correct testing and sampling techniques and equipment to support initial observation, detection and assessment of public health risk, e.g. water, food, vector control. | ■ Full<br>□ Partial<br>□ None | Sample water, food, vector control for further examination according to protocols and regulations made by the competent authority. | -Manual of epidemic prevention for sampling techniques.<br>-Act Governing Food Sanitation. -Quality & Safety alliance in-flight Services (QSAI)<br>-Catering Quality Assurance programme | | ■ Full<br>□ Partial<br>□ None |
| **2.9 Vector control**<br>Demonstrable knowledge of the use of correct control methods for relevant vector-borne diseases and for hosts and vectors, including disinsecting and deratting. | ■ Full<br>□ Partial<br>□ None | Trained Personnel are able to perform corrective methods on vector control. | -Certificates of vector control technicians. | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of equipment, testing and sampling techniques and control measures for vector control. |
| **2.10 Food safety management**<br>Knowledge of use of correct practices for safe food | ■ Full<br>□ Partial | Before servicing or processing on board at sky catering service, | Sky Catering services :<br>- Act Governing Food | | ■ Full<br>□ Partial |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| management, especially with regard to handling, supply, source, preparation, storage and distribution. | □ None<br><br>It's good to see that qualified personnel to inspect food serving on board. | food is inspected by qualified personnel.<br>- Staff training courses regularly.<br>-Ensure the food sanitation and safety in accordance with the SOPs | Sanitation and international standards of food hygiene, such as of SOP of QSAI. | | □ None |
| **2.11Water safety management**<br>Knowledge of correct practices of safe water management, especially with regard to source, storage, distribution, treatment and control methods. | ■ Full<br>□ Partial<br>□ None | Regular staff training course .<br>- To manage water quality according to the SOP of water quality and safety. | Sky Catering services<br>According to food sanitation regulation of local health authorities and international standards of food hygiene, such as: SOP of QSAI. | | ■ Full<br>□ Partial<br>□ None |
| **2.12 Solid and liquid waste management**<br>Knowledge of solid and liquid waste treatment, control methods and systems for detection, assessment and recommended control measures for present and potential risks from solid and liquid waste (including bilge water and ballast water for ships). | ■ Full<br>□ Partial<br>□ None | -The training courses of waste disposal<br>- To manage solid and liquid waste based on the SOPs of waste disposal related. | TIA Co. Ltd.<br>-Sky catering services: The proposal of the cleaning of kitchen waste.<br>-Waste Disposal act, the regulation of environmental facilities and the SOP of sanitation management.<br>-The contact of qualified manufacturers<br>-The regulation of environmental facilities and operating procedure of sanitation management.<br><br>BAPHIQ<br>-Waste Disposal act | | ■ Full<br>□ Partial<br>□ None |
| **2.13 Swimming pools and SPA**<br>Knowledge of present and potential risks from recreational swimming and spa areas on board and methods and systems for detection, assessment and recommended control measures. | Not Applicable | Not Applicable | Not Applicable | N/A | |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **2.14 Medical facilities**<br>Knowledge of requirements, bio safety procedures, equipment, medical chest and environmental requirements for medical facilities on board, according to the size, type and kind of conveyance and related applicable guidelines (e.g. WHO, IMO, ILO, ICAO).<br>Foreign language skills or arrangements for translation and interpreters, where needed. | ■ Full<br>□ Partial<br>□ None | Access to medical chest, first aid, health protective equipment.<br>-Flight attendants receive basic CPR training. | The operating procedure of aircraft formulated by Civil Aeronaustic Administration, Ministry of Transportation and Communications. | | ■ Full<br>□ Partial<br>□ None |
| **2.15 Air quality management**<br>Understanding of correct practices of air health quality management. Capacity for detection, assessment and recommended control measures for present and potential risks from air quality. | ■ Full<br>□ Partial<br>□ None | To measure the risk from air quality according to Federal Aviation Regulations and the management is carried out by professional | Doc. FAR 25.831 of Aircraft air quality management. | | ■ Full<br>□ Partial<br>□ None<br><br>Operations Control Centre monitors air quality throughout TIA. |
| **(d) To ensure a safe environment for travellers using point of entry facilities, including potable water supplies, eating establishments, flight catering facilities, public washrooms, appropriate solid and liquid waste disposal services and other potential risk areas, by conducting inspection programmes, as appropriate; and adequate numbers of trained staff.** | | | | | |
| **1. Safe environment for travellers using point of entry facilities** | | | | | |
| **1.1 Water**<br>A documented, tested and updated water safety programme, conducting or under supervision of competent authority; maintenance records and testing results are documented and available, including: | ■ Full<br>□ Partial<br>□ None | Management depends on water maintenance protocols & detailed regulations. | TIA Co. Ltd.<br>-Maintenance records of water safety programme<br>-Document of test results | | ■ Full<br>□ Partial<br>□ None |
| **1.1.1 Treatment**<br>Adequate treatment to remove and control public health risks | ■ Full<br>□ Partial<br>□ None | -Management depending on water maintenance protocols & detailed regulations. | -Maintenance records of water safety programme<br>-Document of test results. | | ■ Full<br>□ Partial<br>□ None |
| **1.1.2 Source**<br>Potable water sources, under surveillance and supervision, in secure places, far away from sources of pollution, approved by relevant health authority and quality considered satisfactory under national standards. | ■ Full<br>□ Partial<br>□ None | -Management depending on water maintenance protocols & detailed regulations. | -Documented, tested and updated water safety programs are either conducted or applied under supervision<br>-Records of maintenance and documents of test results | | ■ Full<br>□ Partial<br>□ None |
| **1.1.3 Water quality monitoring programme** | ■ Full | Management depending on | -Maintenance records of water | | ■ Full |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| Water quality regularly monitored, including the effect of disinfection at the points of potable water. All present and potential public health risks from water supply are detected, assessed and recommended control measures are implemented and programme agenda, dates and results of testing and inspection are recorded and accessible, covering:<br>- public distribution within point of entry boundary<br>- passenger terminals<br>- cargo and container terminals<br>- infrastructure and courtyards<br>- transport and water service providers for conveyances<br>- water supply services for food production. | □ Partial<br>□ None | water maintenance protocols & detailed regulations. | safety programme<br>-Testing results are documented. | | □ Partial<br>□ None |
| **1.2 Food**<br>Eating establishment / food suppliers / production stores approved or considered satisfactory by the relevant health administration and/or under competent authority supervision, including flight catering facilities, meals or foods and other perishable commodities that are prepared from outside the point of entry jurisdictional area, but destined for use on conveyances, are regularly monitored: all present and potential public health risk from food are detected, assessed and recommended control measures are implemented, maintenance records and testing results are documented and available, food safety, including eating and catering facilities. | ■ Full<br>□ Partial<br>□ None | -Catering services provided by qualified contracted companies, and executed under local health authority's surveillance | -Documents of annual results food hygiene audit from Public Health Bureau, Taoyuan country.<br>-Document of health standards, food safety and quality management. | | ■ Full<br>□ Partial<br>□ None |
| **1.3 Public washrooms**<br>Public washroom premises consistent with volume and frequency of travellers, in good operational condition and are regularly and hygienically cleaned with regard to the volume of passengers and personnel using the terminal and other facilities at the point of entry. | ■ Full<br>□ Partial<br>□ None | Terminal 1 :<br>-The number of male and female toilets: 91;<br>-Disabled toilets: 31.<br>Terminal 2 :<br>-The number of male and female toilets: 242;<br>-Disabled toilets: 36. | -The contract of cleaning by outsourcing company.<br>-The contract of maintenance by outsourcing companies. | | ■ Full<br>□ Partial<br>□ None<br><br>Public washrooms in good operational condition and records are kept to ensure all |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | They are cleaned and maintained by outsourcing contracted cleaning company. | | | are regularly and hygienically cleaned. |
| **1.4 Solid and liquid waste – residual water**<br>Documented, tested and updated solid waste management, liquid waste – residual water management, plans in place and under competent authority supervision, including: | ■ Full<br>□ Partial<br>□ None | Maintenance and operation management. | TIA Co. Ltd.<br>-Documents related and protocols and<br>SOPs. | | ■ Full<br>□ Partial<br>□ None |
| **1.4.1 Waste management quality monitoring**<br>Where all present and potential public health risks from solid and liquid waste are detected, assessed and recommended control measures are implemented, maintenance of records and testing results are documented and available, covering:<br>- public collection within point of entry boundary<br>- passenger terminals<br>- cargo and containers terminals<br>- infrastructure and courtyards<br>- transport and liquid waste service providers for conveyances<br>- waste services for food production<br>- especially dangerous waste (medical / infectious, chemical and other). | ■ Full<br>□ Partial<br>□ None | Qualified outsourcing companies.<br>-Access to an incinerator and sewage treatment plant.<br>-Implement operating management and maintenance related | -The contracts of qualified outsourcing companies.<br>-Surveillance plans of waste management<br>-Records of waste management<br>-Protocol of industrial waste disposal.<br>- Permission certificates of waste management related.<br>-Various audit and records document. | | ■ Full<br>□ Partial<br>□ None |
| **1.4.2 Final destination of the solid and liquid waste generated at the point of entry**<br>The above documented, tested and updated solid and liquid waste management programmes, including standard operating procedures, for safe transport and final destination of the solid and liquid waste generated and or treated at point of entry, according to its type and volume. | ■ Full<br>□ Partial<br>□ None | -Incinerator and sewage treatment plant accessed<br>-Implement operating management and relevant maintenance. | TIA Co. Ltd.<br>-Operation documents of incinerator and protocols of sewage treatment<br>-Aviation industry waste, removal and transportation<br>-Processing.<br>-Relevant contracts and certificates. | | ■ Full<br>□ Partial<br>□ None |
| **1.5 Other potential risk areas: indoor air quality**<br>A documented, tested and updated indoor air quality management plan in place, where applicable, to avoid sources of contamination and infection and under competent authority supervision, where all present | ■ Full<br>□ Partial<br>□ None | -TIA equipped central air conditioning within airport<br>-Surveillance management according to SOPs of air quality maintenance. | TIA Co. Ltd.<br>Records of air quality maintenance. | | ■ Full<br>□ Partial<br>□ None<br><br>Operations Control |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| and potential health risks from indoor air quality are detected and identified and recommended control measures are implemented, maintenance records and testing results are documented and available. | | | | | Centre monitors and manages air quality throughout TIA. |
| **1.6 Other potential risk areas: human remains**<br>Current, regularly updated, documented and tested procedures are in place for monitoring human remains departing and arriving from affected areas and for the use of specific health measures to ensure the safe handling and transport of human remains: under supervision of competent authority, such as measures of issuance of permits, proper sanitary treatment for leakage in the conveyance, records are available, assessable, traceable and retrievable. | ■ Full<br>□ Partial<br>□ None | -According to the SOP, to audit the health and safety of entry and exit human remains and to issue permission certificates.<br>-Retained relevant document for future reference.<br>-Taipei Custom grands entry permits after receiving document issued from TCDC quarantine. | TCDC<br>-Protocol of quarantine: The SOP of entry and exit human remains.<br><br>Airline Company<br>-IATA relevant requirements –SOPs cargo loading. | | ■ Full<br>□ Partial<br>□ None |
| **2. Inspection programmes** | | | | | |
| **2.1 Sufficient number of staff for inspections**<br>Access to appropriate number of trained personnel assigned for these duties, in relation to volume and frequency of travellers and complexity of point of entry (regarding terminal facilities, destinations, and multimodal practice in place among other factors). | □ Full<br>■ Partial<br>□ None | - Qualified contract outsourcing companies provide adequately relevant examinations.<br>-Periodically hold relevant education & training course for inspection staffs | TIA Co. Ltd.<br>-The contracts with qualified outsourcing companies.<br>-TIA protocols and SOP of PoE health management.<br>-Certificates of vector control technician. | Central governments which are in charge of event response believe that PoEs must have ability to report any unusual events identified and conduct initial control before dedicated unit arrive and take over. | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC staff are appropriately trained to perform inspections. Additional CDC staff from other regions, medical centre staff, and fire brigade are available where surge capacity required. |
| **2.2 Competent / qualified personnel for inspection programmes**<br>Understanding of inspection standard operating procedures – personnel have undergone a training program, can produce certificates / documentation | | -Personnel with vector control technician certificate receive regular infectious diseases training course.<br>-Understanding "TIA protocols | 1. TIA protocols of sanitary management.<br>2. TIA SOPs of sanitary management at the airport.<br>3. PoE sanitary log. | Central governments which are in charge of event response believe | ■ Full<br>□ Partial<br>□ None<br><br>All staff have |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| and/or can demonstrate a thorough understanding of standard operating procedures set in place for the sanitary inspection, and show demonstrated competency in the following areas, according to the assigned inspection duties: | | of PoE sanitary management"<br>- Understanding "TIA SOP of PoE sanitary management" | | that PoEs must have ability to report any unusual events identified and conduct initial control before dedicated unit arrive and take over. | undergone training programs and can provide certificates / documentation.<br>Staff interviewed demonstrated a thorough understanding of SOPs. |
| **2.2.1 Epidemiological situation of the point of entry**<br>Knowledge of common public health risks detected on a routine basis and of the usual public health risks associated with type, size, kind, common origins and destinations of conveyances that use the point of entry. | ■ Full<br>□ Partial<br>□ None | -TCDC daily global epidemic report.<br>-Monitoring aircrafts arriving from special endemic areas to detect public health risk | -Documents of TCDC daily global epidemic report. | | ■ Full<br>□ Partial<br>□ None |
| **2.2.2. Public health events -** Knowledge and skills for detecting, reporting, assessing and providing first control measures to public health events; | □ Full<br>■ Partial<br>□ None | -Periodic staff training course. (Including toxic chemical materials, radiation disaster, and emergency response of bio pathogen disaster.)<br>- Management by protocols and SOPs | -TIA sanitary management protocols and SOPs.<br>Warehouse operators :<br>-Protocols of managing dangerous goods.<br>- SOPs of disaster reporting<br>-Operation Control Centre, OCC SOPs. | Toxic chemical materials, bio pathogen, radiation emergency response trainings have been upgraded. | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge and skills for detecting, reporting and providing control measures in response to public health events.<br>Agreement with AEC for response to radiological events. |
| **2.2.3. Public health risks from microbiological, chemical and radiological agents**<br>– Knowledge of how they can affect human health and be transmitted person to person and by food, air water, waste, vectors, fomites and the environment | □ Full<br>■ Partial<br>□ None | -Periodic staff training course. | -Biohazard emergency SOPs<br>-Certificates of Medical staff qualifications<br>-Certificates of vector control technician | Toxic chemical materials, bio pathogen, radiation emergency | ■ Full<br>□ Partial<br>□ None<br><br>Staff have undergone |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | | - Licenses of veterinary professionals.<br>-Disaster rescue protocol<br>-Various emergency response SOPs (Including toxic chemical materials, radiation disasters, and emergency response of bio pathogen disasters) | response trainings have been upgraded. | training for microbiological, chemical and radiological agents. Records of training are kept. |
| **2.2.4 Personal protective techniques and related equipment**<br>Demonstrable knowledge of application and correct use. | □ Full<br>■ Partial<br>□ None | -Fire station owns Level A protective suit, gas detector and radiation detector.<br>-Periodic staff training course and drill exercises. | -Certificates and license of personnel.<br>-An assessment plan of practical training, such as putting on, wearing, removal Level C protective suit.<br>-Fire brigades training programme | Toxic chemical materials, bio pathogen, radiation emergency response training courses have been upgraded. | ■ Full<br>□ Partial<br>□ None<br><br>Staff from Taiwan CDC, TIA authority, service providers at TIA (e.g. cleaning staff and fire brigade) and public and private corps undertake training for microbiological, chemical and radiological events, which includes use of PPE. |
| **2.2.5 Public health measures**<br>Demonstrable knowledge of the use of correct methods and understanding of techniques, such as: disinfection, decontamination, isolation, quarantine, contact tracing, entry and exit control. | □ Full<br>■ Partial<br>□ None | Periodic personnel training to implement isolation, quarantine, contact tracing, entry and exit control. | Licenses of medical staff<br>- Certificates of vector control technicians<br>- Certificates of veterinary professional. | Central governments which are in charge of event response believe that PoEs must have ability to report any unusual events identified and conduct initial | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge and correct methods for a range of public health measures, including isolation and entry control. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | | | control before dedicated unit arrive and take over. | |
| **2.2.6 Testing and sampling techniques**<br>Demonstrable knowledge of the use of correct testing and sampling techniques and equipment to support initial observation, detection and assessment of public health risk, e.g. water, food, vector control. | ■ Full<br>□ Partial<br>□ None | -PoE water and food monitoring by local health authority.<br>-Testing & sampling according to "Manual for Infectious Specimen Collection"<br>-Periodic education training in testing and sampling for public health assessment of vector control techniques | TCDC<br>- Manual for Infectious Specimen Collection<br>- Licenses of veterinary professionals.<br>-Assessment report of TIA catering services<br>- Sampling Protocols of food poisoning events | | ■ Full<br>□ Partial<br>□ None |
| **2.2.7 Vector control**<br>Demonstrable knowledge of the use of correct control methods for relevant vector-borne diseases for hosts and vectors, including disinsecting or deratting. | ■ Full<br>□ Partial<br>□ None | -Demonstrate correct control vector-borne diseases by standard process.<br>-The implementation of education programs of vector-borne diseases prevention.<br>methods for relevant | -Certificates of vector control technicians.<br>-Certificates of disinsecting, control process and records.<br>-Qualified contracted company of vector control<br>-SOPs of vector control<br>-Records of vector control process | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of equipment, testing and sampling techniques and control measures for vector control. |
| **2.2.8 Food safety management**<br>Knowledge of use of correct practices of safe food management, especially with regard to handling, supply, source, preparation, storage and distribution. | ■ Full<br>□ Partial<br>□ None | -Qualified contracted company provides certification of food sources.<br>-Product processing SOPs.<br>-Regular sampling and testing by Public Health Bureau, Taoyuan County. | - ACT Governing Food Sanitation<br>-ISO-22000 food sanitation<br>-Protocol of Food Science and Quality Management (FSQM.) | | ■ Full<br>□ Partial<br>□ None |
| **2.2.9 Water safety management**<br>Knowledge of use of correct practices of safe water management, especially with regard to source, storage, distribution, treatment and control methods. | ■ Full<br>□ Partial<br>□ None | According to the regulation of drinking water from EPA (Environmental Protection Administration).<br>- Water tower should be cleaned, checked and recorded | -ENG-004: standard of environmental facility and the procedure of environment management<br>-QAD-012 microbiological analysis | | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | annually in order to ensure water quality.<br>-Personnel training program. | SOPs & staff training plan. | | |
| **2.2.10 Solid and liquid waste management**<br>Knowledge of solid and liquid waste treatment control methods and systems for detection, assessment and recommended control measures for present and potential risks from solid and liquid waste (including bilge water and ballast water for ships). | ■ Full<br>□ Partial<br>□ None | -Air pollution prevention and sewage treatment training courses<br>-Personnel with professional license | -Personnel professional license<br>-ENG-004: environmental facility regulation, the proposal and SOPs of sanitary management.<br>-Inspection records of liquid waste | | ■ Full<br>□ Partial<br>□ None |
| **2.2.11 Swimming pool and SPA**<br>Knowledge of present and potential risks from recreational swimming and spa areas and methods and systems for detection, assessment and recommended control measures (including on board systems). | N/A | Not applicable | Not applicable | | N/A |
| **2.2.12 Medical facilities**<br>Knowledge of requirements, bio safety procedures, equipment, medical chests and environmental requirements for medical facilities, according to the size, type and kind of conveyance and related applicable guidelines (e.g. WHO, IMO, ILO, ICAO). | ■ Full<br>□ Partial<br>□ None | -Equipped with 4 qualified ambulances, 1 vehicle for transporting supply equipments.<br>-Emergency rescue equipments available for massive injuries.<br>-Qualified medical, fire and ambulance personnel, and drill exercise regularly. | -The contract with TIA Medical Center.<br>- Protocols and equipment of fire brigade training programs.<br>-Relevant regulations of emergency rescue. | | ■ Full<br>□ Partial<br>□ None |
| **2.3 Harmful contamination other than microbial contamination**<br>Such as radio-nuclear sources, could also be found on ships but is outside the scope of this guidance. There are national and international agencies exist to deal with radio-nuclear incidents and emergencies. The National IHR Focal Point should have the contact information for these agencies. | □ Full<br>■ Partial<br>□ None<br><br>Lack of inspection capacity for chemical and radiological contaminations | -Emergency response SOPs of toxic chemical disaster<br>-Emergency response SOPs of radiation disaster<br>-Capable to report and communicate with national level authorities. | -National IHR focal point communication records<br>-Air freight of dangerous material management protocols.<br>SOP of dealing with dangerous material<br>- Personnel Training course.<br>- Operating procedure of emergency events. | In the case of public health Emergency event, communication and national Reporting system has been established.<br>IHR Focal Point to be used for reporting Pubic Health | ■ Full<br>□ Partial<br>□ None<br><br>Emergency contingency plans for TIA provide for notification of radio-nuclear events to AEC.<br>Agreement in place with AEC and |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | | | Emergency event to WHO. | Ministry of Defence to respond to radio-nuclear events. |
| **2.4 Facilities, equipment and supplies for use by inspection staff**<br>Facilities, equipment and supplies are available for use by inspection staff, according to the needs of its duties and kept in safe and hygienic conditions; including: communication devices, testing and sampling supplies and equipment, updated guidance tools and other technical information sources, personal protective equipment, vector control devices and supplies, records / data collection storage and forms etc. | □ Full<br>■ Partial<br>□ None<br><br>Same as above | -Equipped with gas detector.<br>-Radio communication equipment.<br>-Relevant sampling and protective suit for inspectors.<br>-Replace expired equipment. | -Protocol of dangerous materials handling.<br>- Instruction and video of using equipments. | -Replace expired equipment.<br>-Central governments which are in charge of event response believe that PoEs must have ability to report any unusual events identified and conduct initial control before dedicated unit arrive and take over. | ■ Full<br>□ Partial<br>□ None<br><br>TIA has facilities, equipment and supplies available for staff to respond to chemical and radiological contaminants.<br>TIA has capacity to install radiation detection equipment and personnel from AEC are available to respond to events. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **(e) to provide as far as practicable a programme and trained personnel for the control of vector and reservoirs in and near points of entry** | | | | | |
| **1. Plan for vector and reservoir control**<br>Integrated vector control programme in place, including special arrangements or agreement/ contract covering the following areas:<br>- passenger terminals<br>- cargo and container terminals<br>- infrastructure and courtyards<br>- service provider facilities at terminal and for conveyance ground support operation<br>- surrounding areas of points of entry (minimum 400m). | ■ Full<br>□ Partial<br>□ None<br><br>Staff who conducts mosquito surveillance on the aircraft is professional. | -Management protocol and operating procedure.<br>- A record of vector control from qualified outsourcing companies. | TCDC<br>-Protocols and SOPs of PoE health management.<br>-The contract with qualified vector control outsourcing company. | | ■ Full<br>□ Partial<br>□ None<br><br>TIA has a demonstrated integrated vector control programme in place. |
| **2. Trained personnel for control of vector and reservoirs**<br>Adequate number of personnel with training and knowledge to detect and control public health risks of vectors and reservoirs as well as to oversee and audit services and facilities of the point of entry. | ■ Full<br>□ Partial<br>□ None | - Provide training programme (according to protocols and SOPs.)<br>- The record of vector control from contract company.<br>-With enough qualified staff | -Certificate of vector control technicians.<br>-The contract with vector control outsourcing company. | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of equipment, testing and sampling techniques and control measures for vector control. |
| **3. Monitoring of vectors in the point of entry facilities and in the surrounding area of at least 400m from terminal**<br>Monitoring is continuous done on site: vectors and reservoirs are detected, identified, tested for pathogens and controlled. Results of the latest audit of services and facilities are available and accessible. | ■ Full<br>□ Partial<br>□ None | -Management of Protocols & SOPs<br>-The record of regular vectors monitoring is provided to related departments.<br>-The process is recorded by vector control company. | -TIA PoE sanitation Protocols<br>-TIA PoE sanitation management SOP.<br>-A record of regular vector monitoring.<br>-The contract with qualified vector control company. | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated vector monitoring process and procedure in the point of entry and in the surrounding area of terminal. |
| **4. Dedicated space, equipment and supplies for** | ■ Full | -Equipped with a sampling | -Qualified vector control | | ■ Full |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **use by vectors and reservoir control staff**<br>Dedicated and secure space/room for use by vector and reservoir control staff and for storage of public health equipment and supplies, including:<br>- insecticides, rodenticides, traps and application equipment<br>- inspection equipment<br>- workplace and supplies for staff to prepare inspections, complete reports, and to prepare, calibrate and store sampling equipment. | □ Partial<br>□ None | room and relevant inspections equipment, such as: catch cage, placement for poison bait, ovitrap, and biosafety cabinet. | license of professional technician.<br>-The contract with qualified vector control company | | □ Partial<br>□ None |
| **(f) Special capacities according to type of point of entry** | | | | | |
| **1. Airports** | | | | | |
| **1.1** Procedures in place concerning communication of events for a suspected case of communicable disease or other public health related event on board an aircraft, encompassing air traffic control, airport authorities and public health sector competent authorities. | ■ Full<br>□ Partial<br>□ None | -TIA Operation Control Centre, (OCC) is responsible for the management of emergency event and reporting process.<br>-Communication channels with all competent authorities.<br>- Provide proof of pest control as the aircraft arriving from epidemic areas. | -Emergency response SOPs of travellers suspected with communicable diseases<br>-Disaster rescue plan. | | ■ Full<br>□ Partial<br>□ None |
| **1.2** Procedures are in place to assess, monitor and safely apply aircraft disinsection and other vector control measures if required, according to WHO recommendations and guidance, as applicable (this procedure should be part of the integrated vector management control plan at the airport). | ■ Full<br>□ Partial<br>□ None | -For PoE vector control, "TIA PoE of health management SOP," suggested by W.H.O.<br>-Request pest control proof of aircraft traveling from India. | -TIA PoE health management SOPs.<br>-TIA PoE standard procedures of health management.<br>-Pest control proof of aircraft travel from India. | | ■ Full<br>□ Partial<br>□ None |
| **1.3** Procedures concerning communication with aircraft and air transport operators regarding: free pratique (including radio free pratique) request and authorisation; and health part of the General Declaration of Aircraft, if and when requested by national authorities. | ■ Full<br>□ Partial<br>□ None | Not applicable | Not applicable | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated procedures for communication with aircraft and air transport operators regarding pratique. |

## (BII) For responding to events that may constitute PHEIC (Emergencies)

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **(a) To provide appropriate public health emergency response by establishing and maintaining a Public Health Emergency Contingency Plan, including the nomination of a coordinator and contact points for relevant points of entry, public health and other agencies and services** | | | | | |
| **1. Public health emergency contingency plan**<br>An agreed, updated, documented public health emergency contingency plan, integrated with other public health response plans (national/intermediate/local levels) and other emergency operational plans at points of entry, covering relevant services at point of entry and disseminated to all key stakeholders. | □ Full<br>■ Partial<br>□ None | -Regular update the SOPs of emergency rescue and response..<br>-Establishment of PoE Health and Safety Team which functions as a communication platform. | -Relevant disaster rescue plans (including toxic chemical, radiation, and bio pathogen)<br>-SOPs of Emergency rescue and response<br>-Staff training protocol<br>-Risk management, crisis response team (including animal and zoonotic diseases) | Edited volume of nuclear, bio, chemical emergency response protocol is currently under deliberation. | ■Full<br>□ Partial<br>□ None<br><br>Disaster rescue plan and emergency response SOPS have been developed.<br><br>Protocol to address chemical and nuclear emergencies was confirmed on 23 February 2013, while the protocol to address biological emergencies was confirmed on 8 March 2013. |
| **2. Integration with other response plans**<br>A clearly structured allocation of functions within the public health emergency contingency plan, for all services and sectors involved at point of entry to carry out policy/guidance, coordination, management and evaluation functions during a public health response:<br>- coordinator/committee identified<br>- sub-sector/services contacts and plans in place<br>- sub-sector/service contact points identified<br>- contact points for key sectors/services at point of entry identified/nominated and details shared with competent authority<br>- integration with possible sectoral plans contact | □ Full<br>■ Partial<br>□ None<br><br>Protection for all staff working (including all authorities) in TIA should be taking into account in the contingency plan for emergencies. | -TIA disaster rescue plan<br>-TIA emergency response SOPs (Includes clear structures and functions of all services and departments in TIA)<br>-PoE health and safety team as a communication platform.<br>-If a traveler is suspected with communicable diseases, TIA communicates with health authorities at local and national levels through NHCC (National Health Command Center) | -TIA disaster rescue plan<br>-TIA emergency response SOPs<br>-TIA Health and Safety team<br>-National health surveillance system communicates with relevant sectors | Edited volume of nuclear, bio, chemical emergency response protocol is currently under deliberation. | ■ Full<br>□ Partial<br>□ None<br><br>Co-ordinating group has been established to ensure harmonisation of response plans.<br><br>Protocol to address chemical and nuclear emergencies was confirmed on |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| points of key sectors/services at point of entry, including public health, immigration, transportation security, public information/media<br>- identification of mechanism/system in operation and procedures in place for communication/collaboration between public health authorities, within national health surveillance system, with regard to reporting, information exchange, assessment and coordinated response, in coordination with national, intermediate and local public health alert and response plans.<br>- a reliable system for informing the local competent authority in charge to implement health measures of the pending arrival of a suspected case of a communicable disease, when traffic control or others authorities at point of entry have been notified of this by conveyance operators. | Moreover, all authorities should develop their own individual response plan towards emergencies. | | | | 23 February 2013, while the protocol to address biological emergencies was confirmed on 8 March 2013.<br><br>Protocol to address chemical and nuclear emergencies was confirmed on 23 February 2013, while the protocol to address biological emergencies was confirmed on 8 March 2013. |
| **3. Training and/or drill exercises**<br>Periodic training and/or drill exercises to familiarise contact points of key sectors/services at point of entry with the public health contingency plan and their respective roles and functions within it. | □ Full<br>■ Partial<br>□ None | -Periodic drill exercises and evaluation<br>-Establishment of crisis management panel to tackle animal and zoonotic disease problems | -Plans for all kinds of disaster training programme (including compound drills, air crash accident & radiation disaster rescue drill, etc)<br>-Relevant public health disaster response plans (SOP of Compulsory hospital trip, etc) | Edited volume of nuclear, bio, chemical emergency response protocol is currently under deliberation. | ■ Full<br>□ Partial<br>□ None<br>All staff at TIA undertake weekly emergency drills, including drills for chemical, biological and radiological incidents.<br>Protocol to address chemical and nuclear emergencies was confirmed on 23 February 2013, while the protocol to address biological emergencies was confirmed on 8 March 2013. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **(b) to provide assessment of, and care for, affected travellers or animals by establishing arrangements with local medical and veterinary facilities for their isolation, treatment and other support services that may be required** | | | | | |
| **1. Affected travellers on board** | | | | | |
| 1.1 Administrative arrangements and written procedures are in place and agreed with local authorities, conveyance operators and service providers for information sharing and coordinated intersectoral alert and response actions for affected conveyances regarding support and decision making for ill or suspect traveller on board, as part of the public health emergency contingency plan | ■ Full<br>□ Partial<br>□ None<br><br>TCDC, BAPHIQ have appropriate plans and SOPs. TIA provides necessary assistance. | - Provide appropriate care, services for affected travellers<br>-Sharing information and cooperating with local authorities and Taoyuan medical network through the emergency response system<br>-Hold at least two disaster drills with local fire stations and public health agencies per year | -The contract between Taiwan Centers for Disease Control (TCDC) and Taoyuan General Hospital for Compulsory Hospital Trip.<br>-The contract between TCDC and TIA Corporation for examining suspect travellers<br>-The contract of setting up TIA Medical Centre | | ■ Full<br>□ Partial<br>□ None |
| **2. Assessment of, and care for, affected travellers** | | | | | |
| **2.1** Access to treatment, isolation and diagnostic facilities<br>Administrative arrangements and a written, formal agreement, such as MoU, are in place with local and/or nearby hospitals, clinics, health services, to receive affected travellers from the point of entry for isolation, treatment and other support services<br>- this agreement should describe the potential nature of the risk (e.g. infectious disease, other source of contamination) and the responsibilities of each signatory;<br>- reference source, date and expiry of the agreement<br>- facilities and types of health care covered (e.g. assessment, isolation, treatment such as first aid, intensive care unit, contagious disease reference centre, etc.)<br>- competent/qualified personnel assigned for prompt assessment, care and isolation of affected travellers<br>- access to laboratory facilities<br>- access to necessary equipment, supplies and personal protective equipment (PPE)<br>- procedures in place for routine written reports of | ■ Full<br>□ Partial<br>□ None | -Fever screening stations equipped with consulting room for communicable disease assessment<br>-TIA equipped with medical centre for immediate medical services<br>-Two contracted local hospitals equipped with isolation wards for providing ill/ suspect travellers with examination and treatment | -The contract of setting up TIA Medical Center<br>-The contract between Taiwan Centers for Disease Control (TCDC) and Taoyuan General Hospital for transporting ill/ suspect travellers<br>-A Contract between TCDC and TIA Corporation for examining suspect travellers | | ■ Full<br>□ Partial<br>□ None<br><br>Health Room at Fever Screening and Quarantine Station is well equipped and has designated area for discreet examination and isolation if necessary. Additional facilities are available at on-site Medical Centre if required, which includes laboratory and diagnostic services. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| traveller transfer, follow-up care and results of laboratory analysis<br>- arrangements for translation and interpreters. | | | | | |
| **2.2 Key information regarding treatment, isolation and diagnostic facilities and transport of affected travellers**<br>List of all facilities to which affected travellers from the point of entry are to be transferred and names and key contact information (address, phone number, distance from point of entry and map of routes) created, disseminated and maintained/updated, regularly tested for accuracy and accessible to all relevant personnel.<br>Key information provided to transportation services regarding the name, address, distance and route to hospitals/clinic facility to which affected travellers from the point of entry must be taken. | □ Full<br>■ Partial<br>□ None | Regularly update the information of the designated hospitals, lists of phone number and routes of transporting suspected<br>travellers | -Route map of transporting travellers within TIA<br>-Route map of transferring travellers from TIA to a designated hospital<br>-The list of contact information | | ■ Full<br>□ Partial<br>□ None<br><br>SOPs and protocols provide detailed list of facility names, and key contact information for medical facilities to which ill travellers are transferred. Scenario drills undertaken regularly to ensure all staff are trained in processes. |
| **3. Assessment, care and isolation of affected animals** | | | | | |
| **3.1 A written, formal agreement in place with veterinary centres to provide diagnostic tests, assessment and recommended measures related to affected animals.**<br>- staff trained in infection control and available on-site or on-call to examine affected animals<br>- standby infection control plan, including adequate equipment and<br>- procedures to manage or to use other clinical care facilities to deal with heightened level of public health risk (other than routine level risk)<br>- personal protective equipment and personnel trained and available to carry out assessment, treatment and isolation of affected animals.<br>- written reports of results of affected animal diagnostic tests, follow up care and infection control. | ■ Full<br>□ Partial<br>□ None | According to animal quarantine SOPs, veterinary authority should be equipped appropriately to address high-level zoonotic diseases and relevant public health crises, and also report diagnosis, treatment and infection control results | -Certificates and licenses of animal quarantine staff<br>-Animal quarantine SOPs | | ■ Full<br>□ Partial<br>□ None |
| **3.2 Referral and transport of animals to** | ■ Full | Use personal protective | -Relevant documents of | | ■ Full |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| **designated veterinary facility through appropriate safe transport arrangements**<br>Documented administrative arrangements are in place for<br>- cleaning / disinfection equipment and supplies and personnel familiar with these procedures<br>- personal protective equipment to transport staff. | □ Partial<br>□ None | equipment to transfer in-bound animals which are required isolation in a designated location | animal Quarantine<br>-Regulations of animal quarantine<br>-Operating procedures of animal quarantine<br>-The contract of operating animal quarantine procedures. | | □ Partial<br>□ None |
| **(c) to provide appropriate space, separate from other travellers, to interview suspect or affected persons** | | | | | |
| **1. Space to interview suspect or affected travellers**<br>Hygienic and environmentally safe space(s) set aside to conduct private interviews that are of adequate size in relation to volume, type of conveyance and frequency of travellers and complexity of the point of entry (regarding terminal facilities, destinations and multimodal practice). Desirable to have independent exit passage which suspect travellers can be transported to medical care facilities, if needed, and avoid infecting other persons.<br>Arrangements for translation and interpreters where needed. | ■ Full<br>□ Partial<br>□ None | -Set up a specific area for preliminary assessment and consultation with travellers<br>-Separated consulting rooms which are equipped with HEPA vacuum seats for assessment and specimen collection<br>-If necessary, use remote gate and waiting room for anchorage quarantine and infection control. | TCDC<br>- Route map of transporting travellers within TIA<br>-Layouts of quarantine stations | | ■ Full<br>□ Partial<br>□ None<br><br>Health Room at Fever Screening and Quarantine Station is well equipped and has designated area for discreet examination and isolation if necessary. Additional facilities are available at on-site Medical Centre if required. |
| **2. Regularly updated, documented, tested on-site control measures,** including equipment and products for cleaning, disinfection and decontamination, for the purpose of elimination of all possible contamination at the facility used to interview infected travellers. | ■ Full<br>□ Partial<br>□ None | -HEPA manufacturers regularly maintain HEPA vacuum seats and keep records<br>-The contracted company dispose of infectious waste | -HEPA test results from HEPA original manufacturer.<br>-HEPA maintenance records<br>-Record of cleaning and disinfecting the waiting room<br>-The contract of infectious waste disposal | | ■ Full<br>□ Partial<br>□ None |
| **3. Personal protective equipment (PPE) for interviewing ill travellers**<br>Access to necessary equipment (e.g. PPE) for initial interview and triage. Personnel use personal protective equipment for initial interview and triage. | ■ Full<br>□ Partial<br>□ None | TCDC, 2nd branch:<br>-Quarantine staff wear masks at work<br>-According to global information on outbreaks of infectious diseases, quarantine | Quarantine SOPs :<br>-SOPs of transporting ill or suspected travelers to the designated hospital, including instructions of PoE staff using personal protective equipment | | ■ Full<br>□ Partial<br>□ None<br><br>Health Room and on-site Medical |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | staff use appropriate protective equipment, referring to SOP of transporting ill/ suspect travelers. | | | Centre have equipment for interview and triage of ill travellers. |
| **(d) to provide for the assessment and, if required, quarantine of suspected travellers, preferably in facilities away from the point of entry** | | | | | |
| **1. Assessment of suspect travellers** | | | | | |
| **1.1 Staff**<br>Appropriate number of trained personnel, proportionate to the volume and frequency of travellers, available at short notice, on or off site, to interview and provide first assessment of suspect travellers on a timely basis. | ■ Full<br>□ Partial<br>□ None | When on/off-site receiving notification, leaders assign certain medical staff to do preliminary assessment for suspect travelers | -Emergency mobilization list of 2nd branch CDC | | ■ Full<br>□ Partial<br>□ None |
| **1.2 Procedures for reporting**<br>Procedures in place for reporting to the competent authority at the point of entry events related to travellers, indicative of infectious disease or evidence of a public health risk to ensure appropriate assessment, care and other public health measures. | ■ Full<br>□ Partial<br>□ None | According to SOPs, Quarantine staff takes appropriate assessment, care and other public health measures to handle communicable diseases or public health crises. | -Quarantine SOPs<br>-Operating procedures of emergency and death reporting. | | ■ Full<br>□ Partial<br>□ None<br><br>Staff have access to, and training in, SOPs and protocols for reporting events relating to travellers. |
| **2. Quarantine of suspect travellers** | | | | | |
| **2.1 Designation of facilities**<br>Administrative arrangements and a written, formal agreement, such as an MoU, are in place with local and/or nearby hospitals, clinics, health services, or other facilities to receive suspect travellers from the point of entry for quarantine and other support services (preferably away from the point of entry).<br>- this agreement should describe the potential nature of the risk (e.g. infectious disease, other sources of contamination) and the responsibilities of each signatory<br>- reference source, date and expiry of the agreement<br>- facilities and type of support and logistics services covered<br>- competent /qualified personnel for quarantine of | ■ Full<br>□ Partial<br>□ None | The contracts with two local hospitals equipped with isolation wards for providing ill/ suspect travelers with examination and treatment | -The contract of setting up TIA Medical Center<br>-The contract between Taiwan Centers for Disease Control (TCDC) and Taoyuan General Hospital for transporting suspect travelers<br>-The contract between TCDC and TIA Corporation for examining suspect travelers | | ■ Full<br>□ Partial<br>□ None<br><br>Health Room at Fever Screening and Quarantine Station is well equipped and has designated area for discreet examination and isolation if necessary. Additional facilities are available at on-site Medical |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| suspected travellers, assigned to these duties<br>-access to laboratory facilities<br>- access to necessary equipment, supplies and personal protective equipment (e.g. PPE)<br>- procedures in place for routine written reports of traveller transfer, follow up care and results of laboratory analysis.<br>Arrangements for translation and interpreters where needed. | | | | | Centre if required, which includes laboratory and diagnostic services. Staff have developed SOPs and protocols relating to management of ill travellers. |
| **2.2 Staff**<br>Appropriate number of trained personnel at the quarantine facility to recognise disease symptoms and who are familiar with procedures and measures for suspect travellers. | ■ Full<br>□ Partial<br>□ None | -All quarantine staff are qualified with medical/nursing licenses.<br>-Periodic staff training course and SOPs for evaluation in order to ensure that staff recognize symptoms and are familiar with procedures and measures for suspect travelers. | -Relevant certificates of staff qualification.<br>-Manual of quarantine, including SOPs evaluation lists | | ■ Full<br>□ Partial<br>□ None |
| **(e) to apply recommended measures to disinsect, derat, disinfect, decontaminate or otherwise treat baggage, cargo, containers, conveyances, goods or postal parcels including, where appropriate, at locations specially designated and equipped for this purpose.** | | | | | |
| **1. Location for application of recommended measures**<br>Depending on the movement of baggage, cargo, containers, conveyances, goods and postal parcels, a specially equipped location should be designated for<br>- disinsecting<br>- deratting<br>- disinfecting<br>- decontaminating<br>The location should be properly designated to avoid possible injury /discomfort/harm to persons and damage to the environment. Factos such as wind direction and distance to human habitats should be taken into consideration. | □ Full<br>■ Partial<br>□ None<br><br>The contingency plan of TIA should take part (e) into account. | -In the case of disinfecting a contaminated aircraft in designated place, it operates according to radiation, toxic chemical, & bio pathogen disaster emergency response SOPs<br>-All designated locations are regularly disinsected, deratted, disinfected, decontaminated and maintained by the contracted company. | -The disinfection contract with TIA and outsourcing company.<br>-All kinds of disaster rescue plan (including chemical material, radiation, and bio pathogen)<br>-Animal and zoonosis quarantine SOP<br>-Layout of working area, equipment deployment and route. | -The place where dealing with airmail parcel is not located within the airport.<br>-According to related decontaminating response protocols, Central government once receive report from competent authorities at PoE, will assign | ■ Full<br>□ Partial<br>□ None<br><br>TIA emergency plans provide for specially designated and equipped location for control measures. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | | | dedicated unit to take over.<br>-Edited volume of nuclear, bio, toxic emergency response protocol is currently under deliberation. | |
| **2. Standard operating procedures**<br>Documented, updated and tested standard operational procedures are in place. | □ Full<br>■ Partial<br>□ None<br><br>The contingency plan of TIA should take part (e) into account. | Frequently update and review operating procedures | -Radiation, toxic chemical, & bio pathogen disaster emergency response SOPs<br>-Animal or zoonosis quarantine SOP | -The place where dealing with airmail parcel is not located within the airport.<br>-According to related decontaminating response protocols, central government once receive report from competent authorities at PoE, will assign dedicated unit to take over.<br>-Edited volume of nuclear, bio, toxic emergency response protocol is currently under deliberation. | ■ Full<br>□ Partial<br>□ None<br><br>TIA emergency plans provide documented, updated and regularly tested SOPs. |
| **3. Trained staff**<br>Appropriate number of trained personnel available to apply health measures according to technical requirements, adequately and in a timely manner. | □ Full<br>■ Partial<br>□ None<br><br>The contingency | -Regularly update personnel information and training courses<br>-Qualified outsourcing companies perform relevant business for four warehouses. | -Training programme of radiation, toxic chemical, & bio pathogen disaster emergency response SOPs<br>-Certificates of relevant staff | -The place where dealing with airmail parcel is not located within | ■ Full<br>□ Partial<br>□ None<br><br>Staff have SOPs and |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | plan of TIA should take part (e) into account. | | qualifications<br>-Lists of human resources<br>-Lists of rosters | the airport.<br>-According to Related decontaminating response protocols, central Government once receive report from competent authorities at PoE, will assign dedicated unit to take over.<br>-Edited volume of nuclear, bio, toxic emergency response protocol is currently under deliberation. | protocols in place for application of recommended measures; and staff undertake regular training drills. |
| **4. Personal protective equipment**<br>Equipment available and staff trained in application of personal protective equipment. | □ Full<br>■ Partial<br>□ None<br><br>The contingency plan of TIA should take part (e) into account | -Regularly examine protective equipment<br>-Periodic training courses<br>-Qualified outsourcing companies perform relevant business for four warehouses | -The contracts with all kinds of protective equipment.<br>-Documented training courses of crisis management, e.g. bird smuggling | -The place where dealing with airmail parcel is not located within the airport.<br>-According to Related decontaminating response protocols, central Government once receive report from competent authorities at PoE, will assign dedicated unit to take over.<br>-Edited volume | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated the use of a comprehensive range of PPE available, and training protocols to ensure staff are competent in their use. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | | | of nuclear, bio, toxic emergency response protocol is currently under deliberation. | |
| **(f) to apply entry or exit controls for arriving and departing travellers** | | | | | |
| **1. Entry or exit controls for travellers** | | | | | |
| A formal plan in place to apply entry exit controls at point of entry, if and when recommended, to enable a risk assessment of the individual traveller to be made during evens that may constitute a public health emergency of international concern. The plan should have:<br>- an identified staff/committee to make, coordinate and implement key decisions on entry/exit controls at point of entry<br>- a communication procedure for sharing/disseminating information to the public and travellers regarding entry/exit controls during a public health emergency<br>- a toolbox of methods for screening, including visual inspection, questionnaire / health declaration forms and temperature measurement (using thermal scanners or other suitable methods)<br>- operational standard procedures<br>- training/briefing/drills to orient staff, including public health, airlines, travel agents, security, customs and other, on additional responsibilities in carrying out entry exit control<br>- reliable equipment calibrated and maintained in accordance with the manufacturer's recommendations<br>- personnel trained in procedures and use of equipment and in the interpretation of recordings<br>- a system to incorporate the results of exit screening at airports with the national surveillance and reporting system for outbreaks of a specified illness | ■ Full<br>□ Partial<br>□ None<br><br>The plan for entry and exit control exists. | -Replace expired equipment<br>-According to the disaster rescue plans, TIA is able to conduct, coordinate and implement entry/ exit control when international-concerned public health crisis happens. With regard to communicable diseases monitoring, suspected travellers can be screened by infrared monitors and be assessed by quarantine staff; afterwards suspected travellers can be followed by the reporting system. | -Disaster rescue plans<br>-All kinds of emergency response SOPs<br>-TIA Health and Safety team SOPs<br>-The Communicable Disease Control Act<br>-Regulations Governing Quarantine at PoE<br>-The contracts of equipment maintenance<br>-Animal and zoonotic disease quarantine and control programs | | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| - logistics, especially baggage, security and customs formalities for travellers arriving from and to abroad for suspected cases and asymptomatic contacts. | | | | | |
| **(g) to provide access to specially designated equipment and to trained personnel using appropriate personal protection, for the transfer of travellers who may carry infection or contamination** | | | | | |
| **1. Provide access to special equipment** | | | | | |
| Arrangements are in place for transporting suspect travellers to appropriate medical or quarantine facilities by safe, hygienic means of transport. Transport services should have in place cleaning/disinfection equipment and supplies and personal protective equipment for transport staff. | □ Full<br>■ Partial<br>□ None<br><br>Please consider the overdue of equipments. | -Replace expired equipment<br>-According to SOPs, staff wears appropriate protective equipment to ensure that delivery processes to medical or quarantine facilities are safe and sanitary. | -Fire brigade SOPs<br>-Ambulance equipment checklist<br>-Quarantine SOPs<br>-SOP of transporting ill or suspect travellers to a designated hospital, including PPE instructions for PoE staff | | ■ Full<br>□ Partial<br>□ None<br><br>Government regulations mandate appropriate levels of PPE, and stock levels are regularly checked and recorded. Transport services have cleaning equipment and access to PPE for transport staff. |
| **2. Personnel to transport suspect travellers** | | | | | |
| 2.1 Appropriate number of trained personnel available to transport suspect travellers according to technical requirements, adequately and in a timely manner. | □ Full<br>■ Partial<br>□ None | -Regularly hold training exercises of transporting suspect travellers<br>-All ambulance staff are qualified<br>-Timely mobilize trained staff for support, based on the emergency contact list | TIA Co. Ltd.<br>Duty list and license for personnel in medical centers<br>TCDC<br>Emergency mobilization list | -Central governments which are in charge of event Response believe that PoEs must have ability to report any unusual events identified and conduct initial control before dedicated unit arrive and take | ■ Full<br>□ Partial<br>□ None<br><br>Staff undertake weekly training drills in emergency response to chemical, biological and radiological events. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Additional notes | Border Health assessment and comments |
|---|---|---|---|---|---|
| | | | | over.<br>-TIA has upgraded relevant training toward firemen with regard to chemical and radiation materials | |
| 2.2 Personnel trained in application of personal protective equipment and disinfection techniques, as applicable. | □ Full<br>■ Partial<br>□ None | -Regularly hold EMT refresher training course<br>-Regularly hold dangerous materials and protective equipment training course | TIA Co. Ltd.<br>-TIA annual training program for firemen<br>-Ambulance equipment handbook<br>-Protective equipment management<br>-Relevant manuals | | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of disinfection techniques and the use of PPE. |
| 2.3 Personnel trained in the use of key information regarding hospitals/clinics/ diagnostic facilities related to the point of entry. | ■Full<br>□ Partial<br>□ None | -Exchange medical information with hospital provided within SOPs<br>-Regularly update hospital contact lists<br>-Periodic drills and staff assessment | TIA Co. Ltd.<br>-Fire brigades annual training programme<br>-Quarantine SOPs (including transfer | | ■ Full<br>□ Partial<br>□ None<br><br>Staff have SOPs and protocols in place for the use of key information; and staff undertake regular training drills |

## *Appendix 2. Detailed Assessment Results of PoK*

**Port of Kaoshiung (PoK) – Tuesday, 12 March 2013**

**(A) Core capacity requirements for coordination, communication of event information and adoption of measures (in regard to activities concerning designated airports, ports and ground crossings, according to Annex**

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health and assessment comments |
|---|---|---|---|---|
| **1. International communication link with competent authorities at other points of entry** | | | | |
| Competent authority at each point of entry has current contact details of officers in charge of international communication with other points of entry abroad and means of communication and procedures are available to inform relevant public health measures taken pursuant to the International Health Regulations, such as:<br>- Communication with competent authorities at other points of entry, internationally, to provide relevant information regarding evidence found and control measures still needed on arrival of affected conveyances. | ■ Full<br>□ Partial<br>□ None | When there are public health events, the *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* and all related governmental agencies have to notify their respective headquarters, and contact WHO through the *Taiwan Centers for Disease Control* (*TCDC*) which serves as the National Focal Point. | None | ■ Full<br>□ Partial<br>□ None |
| **2. National communication link between competent authorities at points of entry and health authorities at local, intermediate and national levels.** | | | | |
| 2.1 Local, intermediate and national levels (including National IHR Focal Point) have current contact details of competent authorities at points of entry and current, regularly updated, documented and tested procedures, including any Memorandum of Understanding – MoU and protocols are in place for routine and urgent communication and collaboration during a public health emergency of international concern with:<br>(1) the competent authority at other points of entry and health authorities at local, intermediate and national levels;<br>(2) other relevant government ministries, | ■ Full<br>□ Partial<br>□ None | 1. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* has a "*Disaster-and-accident reporting system*" and the contact information of governmental agencies in *Kaohsiung port* to carry out routine and emergency contact and coordination.<br><br>2. When a public health event has occurred, authorities (central government administrative agencies of the port) in *Kaohsiung port* could communicate and coordinate through the *Kaohsiung International Port Health and Security Group* and evaluate if they notify authorities | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Flowchart/ Contact Details<br><br>*Taiwan Centers for Disease Control*<br>Legislations/ Protocol/ Flowchart/Duty list/ Record/ Contact Details<br><br>*Food and Drug Administration*<br>Contact Detail/ List | ■ Full<br>□ Partial<br>□ None<br><br>PoK has current and regularly updated procedures for routine and urgent communication during PHEIC.<br><br>Staff clearly demonstrated process for informing local, intermediate and national levels of PHEIC. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health and assessment comments |
|---|---|---|---|---|
| agencies, government authorities and other partners involved | | at other ports through *National Focal Point* (*NFP*).<br><br>3. The *Kaohsiung International Port Health and Security Group* holds meetings every six months, with additional meeting held as necessary. | | Disaster Mitigation and Prevention Program has been updated to include chemical, microbiological and radiological emergencies. |
| 2.2 Competent authority at each point of entry has current contact details of officers within local, intermediate and national levels, including contact details of National IHR Focal Point and means of communication and procedures are available to inform relevant public health measures taken pursuant to the International Health Regulations.<br>Such as:<br>- to communicate with NFP in order to inform WHO within 24hrs of receipt of evidence, as manifested by exported or imported:<br>(a) human cases;<br>(b) vectors which many carry infection or contamination; or<br>(c) goods that are contaminated, that may cause international disease spread<br>- report all available essential information on event occurring at point of entry by competent authority to health authority at local, intermediate or national level for public health assessment, care and response.<br>- for communication with competent authorities at other points of entry, nationally, to provide relevant information regarding evidence found and control measures needed on arrival of affected conveyance. | ■ Full<br>□ Partial<br>□ None | 1. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* has a "*Disaster-and-accident reporting system*" and the contact information of governmental agencies in *Kaohsiung port* to carry out routine and emergent contact and coordination.<br><br>2. When a public health event has occurred, authorities (central government administrative agencies of the port) in *Kaohsiung port* could communicate and coordinate through the "*Kaohsiung International Port Health and Security Group"* and evaluate if they notify authorities at other ports through *National Focal Point*.<br><br>3. The "*Kaohsiung International Port Health and Security Group*" holds meetings every six months, with additional meeting held as necessary. | Same as above. | ■ Full<br>□ Partial<br>□ None |
| **3. Direct operational link with other senior health officials.** | | | | |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health and assessment comments |
|---|---|---|---|---|
| Current, regular, updated, documented and tested procedures, including any MoU and protocols, for direct operational link between local point of entry competent authority officer and other senior health officials, are in place for rapid decision approval, risk assessment and implementation of containment and control measures. | ■ Full<br>□ Partial<br>□ None | Authorities in *Kaohsiung Port* all have the latest contact information which is updated and tested regularly. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Contact Detail/ Record<br><br>*Taiwan Centers for Disease Control*<br>Contact Detail/ Record<br><br>*Food and Drug Administration*<br>Contact Details | ■ Full<br>□ Partial<br>□ None |
| **4. Communication link with conveyance operators** | | | | |
| Current contact details of conveyance operators (including its agents or legal representatives at shore), means of communication and procedures are available for advance notice of application of control measures, for issuance of Ship Sanitation Certificates and for receipt of other health documents and conveyance operators provided with current contact details of competent authority. | ■ Full<br>□ Partial<br>□ None | 1. All agencies in *Kaohsiung Port* have the latest contact details of *Kaohsiung International Ship Owner's Association* and *Kaohsiung Shipping Agencies Association*, which are updated as necessary, so advance notice of application of control measures could be sent swiftly.<br><br>2. *Kaohsiung Customs* and *National Immigration Agency (NIA)* hold joint symposium every six months with the Associations mentioned above and advocate the government's current policies. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Contact details<br><br>*Taiwan Centers for Disease Control*<br>Contact detail<br><br>*Food and Drug Administration*<br>Contact detail<br><br>*Kaohsiung Customs*<br>Contact details<br><br>*National Immigration Agency*<br>Contact Details<br><br>*Coast Guard Administration*<br>Contact detail | ■ Full<br>□ Partial<br>□ None |
| **5. Communication link with travellers for health related information** | | | | |
| Current contact details of competent authority at point of entry and means of communication and procedures are available for notice of application of control measures, for receipt of | ■ Full<br>□ Partial<br>□ None | 1. Authorities in *Kaohsiung port* take measures to provide health related information for passengers/travelers. For example, *International Travel Center*, which | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Contact details | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health and assessment comments |
|---|---|---|---|---|
| health documents and to provide health related information for travellers. | | is the point of entry for inbound travelers, has facilities for posting health-related posters. In addition, travellers can obtain latest news health information, laws and regulations on websites established by the authorities in Kaohsiung port such as *Taiwan Centers for Disease Control* (*TCDC*) and *Bureau of Animal and Plant Health Inspection and Quarantine.*<br><br>2. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* contacts shipping agents or shipping companies to obtain the list of arrivals and health information of crews and passengers, and transfers the information to authorities as necessary.<br><br>3. Quarantine officers of *TCDC* routinely interview the inbound ill travelers at the entry of *Kaohsiung Port* to fill out the health investigation forms for follow-up, and provide health information to ill travelers.<br><br>4. Staff of *National Immigration Agency* routinely interview the inbound travelers at the entry of Kaohsiung *Port* to fill out the arrival card for further follow-up. | *Taiwan Centers for Disease Control*<br>Contact details/ Protocol Website/ Reports<br>Education Materials<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Education Materials/Websites<br><br>*Food and Drug Administration*<br>Contact detail/ Legislation<br><br>*National Immigration Agency*<br>Report | Taiwan CDC has a range of information for travellers, including generic and disease specific leaflets, and posters.<br><br>SOPs are in place for responding to ill travellers. |
| **6. Communication link with service providers** | | | | |
| Current contact details of service providers and means of communication and procedures are available for advance notice of application of control measures. Service providers have current contact details of competent authority. | ■ Full<br>□ Partial<br>□ None<br><br>Posters or other education materials for travellers are seldom found | 1. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* routinely contacts shipping agents or shipping companies to get ship's information after ships' arrival and transfers it to the authorities of *Kaohsiung Port* to institute measures.<br><br>2. Authorities in *Kaohsiung port* can check information of the ships, crews and | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Contact details<br><br>*Taiwan Centers for Disease Control*<br>Contact details | ■ Full<br>□ Partial<br>□ None<br><br>*Regulations Governing Quarantine at Ports* outlines procedures for notification and application of control |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health and assessment comments |
|---|---|---|---|---|
| | inside the travel center.<br>8/19 Note in closing meeting: After CDC 5th Branch has explained that poster and education materials will be provided as long as any travellers arriving to Travel Center of PoK. Dr. Taniguchi agreed to change the result from "Partial" to "Full". | passengers through the "*Maritime Transport Network Portal*", a service provider website-platform, built by the *Ministry of Transportation and Communications, Taiwan.*<br><br>3. All authorities in *Kaohsiung port* have the latest contact details of shipping agencies and shipping companies and update them regularly. | *Food and Drug Administration*<br>Contact details<br><br>*Kaohsiung Customs*<br>Contact details<br><br>*Coast Guard Administration*<br>Contact detail<br><br>*Kaohsiung Harbor Police Office*<br>Legislation/ Guidance | measures.<br><br>Staff demonstrated process of communicating with service providers.<br><br>Posters were displayed in the Travel Center. TCDC staff provided leaflets which are made available to arriving passengers. |
| **7. Assessment of all reports of urgent events within 24 hrs** | | | | |
| Current, regularly updated, documented and tested procedures (including any MoU and protocols) for communication and assessment within 24 hrs all reports of urgent events related to ports, airports and ground crossings, including direct operational links exist among hospitals, clinics, airports, ports, ground crossings, authorities, laboratories and other key operational areas. | ■ Full<br>□ Partial<br>□ None | 1. The *Contact Center* of the *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* has the latest contact details of authorities in *Kaohsiung port* and updates them regularly. When there are public health concerns, staff inform the competent authorities in *Kaohsiung port* according to the SOP of the *"Disaster-and-Accident Reporting System"*.<br><br>2. Authorities in *Kaohsiung port* also have the contact information of the local authorities to notify according to the SOP for reporting and responding.<br><br>3. *Taiwan Centers for Disease Control* (*TCDC*) establish a "*Communicable Disease* | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>List/ Contact Detail<br><br>*Taiwan Centers for Disease Control*<br>Flowchart/ Protocols<br>Website/ Contact Detail<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Contract/ Report<br><br>*Kaohsiung Customs*<br>Contact detail | ■ Full<br>□ Partial<br>□ None<br><br>Staff outlined protocols for communication and assessment of all reports of urgent events, including notification of health services and other key operational areas. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health and assessment comments |
|---|---|---|---|---|
| | | *Reporting System*' for receiving real-time information for reporting suspected infectious disease, and assessing, communicating, tracking and hospitalizing of cases. In addition, the quarantine officers of *TCDC* are trained and have medical licenses to implement the evaluation and reporting for ill travelers.<br><br>4. The *Bureau of Animal and Plant Health Inspection and Quarantine* established SOPs to prevent zoonotic diseases. When suspected infected animals are found during inspection and quarantine or through smuggling, inspectors will report to the headquarter and send the animal specimens to *Animal Health Research Institute, Council of Agriculture* within 24 hours for further examination. | *National Immigration Agency*<br>SOP/ Contact detail | |
| **8. Communication mechanism for the dissemination of information and recommendations received from WHO** | | | | |
| Current, regularly updated, documented and tested communication mechanism for handling WHO reports, regarding national events or events in other countries involving point of entry activities and related public health measures, for use by competent authorities at points of entry. | ■ Full<br>□ Partial<br>□ None | Authorities in *Kaohsiung Port* receive and analyze the international epidemic information at any time and spread the health information through *Taiwan Centers for Disease Control* (as *National Focal Point* in Taiwan) and communicate and coordinate through the "*Kaohsiung International Port Health and Security Group*" to institute control measures as necessary.<br><br>For example, with the radiation incident in Fukushima, Japan in 2011 and the Novel Coronavirus cases in Middle East countries reported in 2012, NFP conveyed the international information to the ministries of the *Executive Yuan*, the message was then | *Taiwan Centers for Disease Control*<br>Records/ Legislations<br>Duty List<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Website<br><br>*Kaohsiung Customs*<br>Contact detail<br><br>*National Immigration Agency*<br>Contact detail | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health and assessment comments |
|---|---|---|---|---|
| | | conveyed to related authorities to decide on control measures. The information of both events were communicated and coordinated through meetings of the *"Kaohsiung International Port Health and Security Group"*. | | |
| **9. Procedures and legal and administrative provisions to conduct inspections and receive reports of cases of illness and/or other evidence of public health risks on board arriving conveyances** | | | | |
| National legislation, administrative acts, protocols and/or procedures are in place, updated and disseminated widely, empowering competent authority to conduct inspections to identify public health risks together with required control measures to be applied and providing requirements to report public health related events on board.<br>Guidance documents explaining the requirements and procedures to immediately relay reports to the competent authority to ensure that appropriate assessment, care and other public health measures are developed and disseminated to cruise lines, airlines, ground transportation and their relevant industry associations and posted on appropriate websites.<br>A standard operation procedure for competent authorities is in place to receive reports from arriving conveyances of all cases of illness indicative of an infectious disease or evidence of a public health risk on board.<br>All of the above activities should be provided on a 24 hr basis, seven days a week (24/7) or according to working hours at the points of entry, as appropriate. | ■ Full<br>□ Partial<br>□ None | 1. Under the statutory duties of international commercial port, *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* checks public health risks and takes measures. When there are public health events, it implement emergency contact and notification procedure according to the "*Disaster Mitigation and Prevention Program*" integrated with other plans set up by authorities in *Kaohsiung port* that respond and manage events depending on their statutory obligation and SOPs.<br>2. According to the *Communicable Disease Control Act*, *Taiwan Centers for Disease Control* manages the affairs of ship quarantine, personnel quarantine, ship sanitation inspection and port sanitation. In addition, it established SOPs and system for timely reporting and responding.<br>3. The *Bureau of Animal and Plant Health Inspection and Quarantine* established SOPs to prevent zoonotic diseases. When suspected infected animals are found during inspection and quarantine or through smuggling, the inspector will report to the headquarter and send the animal specimens to *Animal Health Research Institute, Council of Agriculture* within 24 hours for examination. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Legislations/Protocol<br><br>*Taiwan Centers for Disease Control*<br>Legislations/Protocol/ Website/ Guidance/ Flowchart/ Record<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Legislations/SOP/Report<br><br>*Kaohsiung Customs*<br>Contact detail<br><br>*Coast Guard Administration*<br>Contact detail | ■ Full<br>□ Partial<br>□ None<br><br>Staff provided legislation, protocols, procedures and SOPs for the identification, inspection and response to public health risks. |

## (B1) Core capacity requirements for PoK – at all times

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| **(a) Access to (i) appropriate medical service including diagnostic facilities located so as to allow the prompt assessment of and care of ill travellers, and (ii) adequate staff, equipment and premises.** | | | | |
| **1. Assessment and care of travellers** | | | | |
| **1.1 Access to medical and diagnostic facilities**<br>Administrative arrangements and MoUs are in place to grant access to medical and diagnostic facilities for the assessment and care of ill or suspect travellers, in consultation with local and/or nearby health services.<br>If on-site, specialized warehouse for medicine and medical instruments and records for their use and replacement. | ■ Full<br>□ Partial<br>□ None | Patients who are suspected of carrying infectious diseases are sent to designated hospitals under contract (*Kaohsiung Municipal Min-Sheng Hospital* and *Kaohsiung Municipal Hsiao-Kang Hospital)*, and ill travelers who are not contagious are sent to nearby hospitals through the shipping agents. The ambulance of *Kaohsiung Harbor Fire Brigade* can send ill travelers to hospitals as needed. | *Taiwan Centers for Disease Control*<br>Contract<br><br>*Kaohsiung Harbor Fire Brigade*<br>Maps<br><br>*Kaohsiung Customs*<br>Education Materials | ■ Full<br>□ Partial<br>□ None<br><br>Arrangements are in place with local area health facilities for the assessment and care of ill travellers.<br><br>SOPs and protocols are in place for the management of ill travellers. |
| **1.2 Assessment of requirements concerning vaccination or prophylaxis**<br>Capability to do on-site assessment of proof of vaccination and prophylaxis recommended by WHO, such as for yellow fever, as applicable, and according to the epidemiological situation, risk analysis and national requirements. | ■ Full<br>□ Partial<br>□ None<br><br>TCDC quarantine staff has a capability to assess the proof of vaccination and prophylaxis (such as yellow card) provided by travellers. Requirement is the capability to do "on-site" assessment of proof of | 1. Quarantine officers of *Taiwan Centers for Disease Control* (*TCDC*) can do the on site assessment of vaccination, vaccination records check, and provide international epidemic information, consulting and health education.<br><br>2. *TCDC* commissions *Kaohsiung Municipal Hsiao-Kang Hospital* and *Kaohsiung Municipal United Hospital* to conduct *International Travel Health Clinic* which is inspected regularly. *TCDC* can allocate vaccines if vaccines are demanded. | *Taiwan Centers for Disease Control*<br>Contract/Websites/Protocol | ■ Full<br>□ Partial<br>□ None<br><br>Facilities at the International Travel Centre provide for on-site assessment of requirements<br><br>Facilities include capacity to assess proof of vaccination and prophylaxis. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | vaccination and prophylaxis, not the capacity of the travel clinic. But through the reviewer's observation, he understands that TCDC in PoK has the capability to do so. | | | |
| **1.3. Key information regarding medical and diagnostic facilities**<br>List of all facility names and key contact information (address, phone number, distance from Point of entry and map of routes) created , maintained and updated, disseminated, regularly tested for accuracy and accessible to all relevant personnel, to which ill or suspect travellers from the Point of entry are to be transferred. | ■Full<br>□Partial<br>□None | According to *Communicable Disease Control Act*, *TCDC* provides the manpower management, passenger detention and observation, ambulance dispatch, hospital contact, etc. Ambulance personnel of *Kaohsiung Harbor Fire Brigade* will contact hospitals and transport patients to nearby hospitals. The contact information are tested and updated regularly. | *Taiwan Centers for Disease Control*<br>Duty List/ Guidance/ Contract/Contact detail Map<br><br>*Kaohsiung Harbor Fire Brigade*<br>Maps | ■Full<br>□Partial<br>□None |
| **2. Adequate staff, equipment and premises** | | | | |
| **2.1 Staff**<br>Sufficient personnel<br>Access to appropriate number of trained personnel assigned for these duties, in relation to volume and frequency of travellers and complexity of point of entry (regarding terminal facilities, destinations and multimodal practice in place among other factors).<br>Arrangements for translation and interpreters where needed.<br>Competent/qualified personnel for prompt assessment, care and reporting of ill travellers.<br>Personnel have undergone a training program to recognise disease symptoms and are familiar | ■ Full<br>□ Partial<br>□ None | *Taiwan Centers for Disease Control* has sufficient trained personnel to perform the assessment, notification and evacuation of ill passengers. Staff of *National Immigration Agency* have license for English qualification, and can provide the help for translation if necessary. | *Taiwan Centers for Disease Control*<br>Duty List/ Protocol/ List | ■ Full<br>□ Partial<br>□ None<br><br>Personnel demonstrated protocols and procedures for assessment and management of ill travellers.<br><br>Training program for personnel is in place to ensure all staff are able to recognise disease symptoms and are familiar with procedures regarding |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| with procedures regarding prompt assessment, care and reporting of ill travellers. | | | | prompt assessment, care and reporting of ill travellers. |
| **2.2 Adequate space to conduct private interviews with ill travellers**<br>Hygienic and environmentally safe space(s) set aside to conduct private interviews that are of adequate size in relation to volume, type of conveyance and frequency of travellers and complexity of the point of entry (regarding terminal facilities, destinations and multimodal practices).<br>Desirable to have independent exit passage through which suspect travellers can be transported to medical care facilities, if needed, and in order to avoid infecting other persons. | □ Full<br>■ Partial<br>□ None<br><br>At present, the space in the traveler center is not well-designed to effectively prevent the cross-infection. | *International Travel Center* set up a separate room for the examination of suspected or affected travelers and for quarantine. It also has a separate exit route for transporting passengers to the designated hospitals. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Record<br><br>*Taiwan Centers for Disease Control*<br>Map/Contracts/Certificates<br>Record | ■ Full<br>□ Partial<br>□ None<br><br>Health Room at the International Travel Centre is well equipped and has a designated area for discreet examination and isolation if necessary. Health Room also has independent exit passage.<br><br>Assessment Team noted advice from 2011, that the Health Room lacked a hand basin. This has been addressed with the use of hand sanitisers. |
| **2.3 Personal protective equipment (PPE) for interviewing ill travellers**<br>Access to necessary equipment (e.g. PPE) for initial interview and triage. Personnel use personal protective equipment for initial interview and triage. | ■ Full<br>□ Partial<br>□ None | Personnel of *Taiwan Centers for Disease Control* and *Kaohsiung Harbor Fire Brigade* use personal protective equipment for interviewing ill passengers according to guidance. | *Taiwan Centers for Disease Control*<br>Guidance/Protocol/List<br><br>*Kaohsiung Harbor Fire Brigade*<br>Guidance | ■ Full<br>□ Partial<br>□ None<br><br>Health Room is well equipped with equipment for interview and triage. |
| **(b) Provide access to equipment and personnel for the transport of ill travellers to an appropriate medical facility** | | | | |
| **1. Equipment to transport ill travellers** | | | | |
| **1.1 Equipment for transport of ill travellers to appropriate medical facility**<br>Arrangements are in place for transporting ill travellers to appropriate medical facility by safe, hygienic means of transport. | ■ Full<br>□ Partial<br>□ None | Ambulances of *Kaohsiung Harbor Fire Brigade* have equipment and materials that meet the national regulations. After fulfilling paramedic's duty, paramedics carry out the disinfection of the vehicles interior and equipment and a routine disinfection at least | *Kaohsiung Harbor Fire Brigade*<br>Legislations<br><br>*Taiwan Centers for Disease Control*<br>Guidance/ Protocol/ Map | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated procedure and equipment |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | once a month. | | for transporting ill travellers to appropriate medical facility. |
| **1.2 Access to personal protective equipment (PPE) for transport staff**<br>Transport staff has access to uses adequate personal protective equipment, when transporting ill travellers. | ■ Full<br>□ Partial<br>□ None<br><br>It's good to see PoK has the negative pressure ambulance. | Paramedics wear personal protective equipment (PPE) when transporting ill travelers according to the guidance.<br>Ambulance of *Kaohsiung Harbor Fire Brigade* has PPE, including gloves, masks, goggles, etc. | *Kaohsiung Harbor Fire Brigade*<br>Guidance/Legislation<br><br>*Taiwan Centers for Disease Control*<br>Guidance/ Record | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated the use of a comprehensive range of PPE available for transporting ill travellers. |
| **2. Personnel to transport ill travellers** | | | | |
| **2.1 Number of trained personnel**<br>Appropriate number of trained personnel available to adequately transport ill travellers, according to technical requirements. | ■ Full<br>□ Partial<br>□ None<br><br>It's good to see PoK have Level 2 EMT. | *Kaohsiung Harbor Fire Brigade*'s paramedics are trained and qualified with licenses. When the number of ill patients is too large, they will request back up from *Kaohsiung City Government*. | *Kaohsiung Harbor Fire Brigade*<br>Agreement | ■ Full<br>□ Partial<br>□ None |
| **2.2 Training of Standard operational procedures for transport of ill travellers**<br>Personnel trained and knowledgeable in infection control techniques for safe removal of ill travellers, in application of personal protective equipment and in use of key information regarding contact and accessing medical facilities in a safe and timely manner. | ■ Full<br>□ Partial<br>□ None | *Kaohsiung Harbor Fire Brigade*'s paramedics all have qualified license, and are trained of SOP for transportation of ill passengers'. | *Kaohsiung Harbor Fire Brigade*<br>Flowchart/SO | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of infection control techniques and the use of PPE. |
| **(c ) Provide trained personnel for the inspection of conveyances** | | | | |
| **1. Number of trained personnel** | | | | |
| Appropriate number of trained personnel available in relation to the volume and frequency of traffic, type, size, kind of conveyance at all points of entry to ensure that conveyances are adequately and safely inspected on a timely basis and according to technical requirements. | ■ Full<br>□ Partial<br>□ None | *Taiwan Centers for Disease Control* and *Bureau of Maritime and Port* have trained personnel to inspect conveyance according to their statutory duties. | *Taiwan Centers for Disease Control*<br>Certificate/ Protocol | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| **2. Training for inspectors** | | | | |
| **2.1 Understanding of inspection standard operating procedures**<br>Personnel have undergone a training program, can produce certificates/ documentation and/or can demonstrate a thorough understanding of standard operating procedures set in place for the sanitary inspection of conveyances, and should demonstrate competency in the following areas, according to the assigned inspection duties. | ■ Full<br>□ Partial<br>□ None | *Taiwan Centers for Disease Control* (TCDC) and *Bureau of Maritime and Port* have trained personnel, and they will inspect vessels according to the statutory duties and SOPs. *TCDC* arranges the trainings for ship sanitation inspection annually. | *Taiwan Centers for Disease Control*<br>Legislation/Protocols<br>Trainings/ Certificate | ■ Full<br>□ Partial<br>□ None<br><br>Staff trained in inspection SOPs, and training recorded.<br><br>All staff interviewed had a thorough understanding of SOPs in place for sanitary inspections of conveyances, and demonstrated competency in the assigned inspection duties. |
| **2.2 Required health related documents for conveyances**<br>Demonstrable knowledge of required health related documents and the correct use of information therein for detecting, reporting, assessing and providing first control measures for public health events, according to type and kind of conveyance. | ■ Full<br>□ Partial<br>□ None | *TCDC* staff's training program includes the assessment and use of relevant health documents. | *Taiwan Centers for Disease Control*<br>Legislation/Protocols<br>Certificate/Record | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of SOPs, regulations and other guidance documents for use in inspecting conveyances.<br><br>Staff were also able to explain the process for detecting, reporting, assessing and providing first control measures. |
| **2.3 Epidemiological situation at the point of entry**<br>Knowledge of common public health risks detected on a routine basis and of the usual | ■ Full<br>□ Partial<br>□ None | *TCDC* staff 's training program includes knowledge of the surveillance of epidemics worldwide and the information of infectious epidemics is updated regularly. | *Taiwan Centers for Disease Control*<br>Website/Record | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| public health risks associated with type, size, kind, common origins and destinations of conveyances that use the point of entry. | | | | Staff demonstrated extensive knowledge of the common public health risks detected routinely at PoK. |
| **2.4 Public health events**<br>Knowledge and skills for detecting, reporting, assessing and provide first control measures to public health events. | ■ Full<br>□ Partial<br>□ None | 1. In case of contamination or leakage of toxic substances or radiation agents, the *Port of Kaohsiung,* Ta*iwan International Ports Corporation (TIPC), Ltd.* will inform the authorities in *Kaohsiung port* and take emergency control measures according to "*Disaster Mitigation and Prevention Plan*" that is set up by *TIPC, Ltd.* In addition, they also inform central and local competent authorities to institute control measure for effective inhibition of the expansion of public health events.<br><br>2. *Taiwan Centers for Disease Control* staff are trained for evaluation and notification of infectious events from time to time according to the SOPs.<br><br>3. Personnel of the *Kaohsiung Customs* are trained and have the knowledge of detection, report and assessment of radiological events. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Flowchart<br><br>*Taiwan Centers for Disease Control*<br>Legislations/Protocols<br>Flowcharts<br><br>*Kaohsiung Customs*<br>Legislations/Protocols<br>SOP/Report/List | ■ Full<br>□ Partial<br>□ None |
| **2.5. Public health risks from microbiological, chemical and radiological agents**<br>Knowledge of how they can affect human health and be transmitted person to person and by food, air, water, waste, vectors, fomites and the environment. | □ Full<br>■ Partial<br>□ None<br><br>Even though biological part seems full already, but if PoK take radiological and chemical into | Personnel at authorities in *Kaohsiung port* have professional knowledge, including public risk evaluation associated with microbiology, zoonotic diseases, and radiation according to statutory obligation. For example, personnel of *Taiwan Centers for Disease Control* and *Food and Drug Administration* have knowledge of public health risk from microbiological events. Personnel of *Bureau of Animal and Plant Health Inspection and Quarantine* have | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Flowchart<br><br>*Bureau of Maritime and Port*<br>Certificate<br><br>*Taiwan Centers for Disease Control*<br>Legislation/Websites | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC has developed SOPs and training programmes, including workshops and seminars, to ensure staff have knowledge of the public health risks arising |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | account, it seem partial right now from reviewer's viewpoints. CDC quarantine officers might have knowledge to basically detect and ask for support if any unusual things happened on the conveyance. | knowledge of zoonotic diseases.<br><br>Personnel of *Kaohsiung Customs* are trained to have knowledge of public risk of radiological events. The inspectors of *Maritime and Port Bureau* and *Kaohsiung Customs are trained to have* knowledge of microbiological, chemical and radiological agents. | Trainings<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Certificate<br><br>*Food and Drug Administration*<br>Protocol/SOP/Trainings<br><br>*Kaohsiung Customs*<br>Protocols/ List | from microbiological, chemical and radiological agents.<br><br>Ship Sanitation Inspection staff have protocol for calling in experts in management of suspected or identified events. |
| **2.6. Personal protective techniques and related equipment** Demonstrable knowledge of application and correct use. | □ Full<br>■ Partial<br>□ None | Staff of *Taiwan Centers for Disease Control* and *Bureau of Animal and Plant Health Inspection and Quarantine* have training programs and regular drills of application and correct use of personal protective techniques and related equipment for microbiological agents.<br><br>*Kaohsiung Customs* Officers institute *Megaports Initiative* to systematically enhance detection capabilities for special nuclear and other radioactive materials in containerized cargo transiting the global maritime shipping network. Staff of *Kaohsiung Customs* use personal protective techniques and related equipment that are in line with national regulations. | *Taiwan Centers for Disease Control*<br>Legislation/Guidance<br>Protocols/Websites Record<br>*Bureau of Animal & Plant Health Inspection & Quarantine*<br>Training<br><br>*Kaohsiung Harbor Fire Brigade*<br>Guidance<br><br>*Kaohsiung Customs*<br>Protocol/ List | ■ Full<br>□ Partial<br>□ None<br><br>Staff complete basic radiological training provided by the AEC, which must be updated annually.<br><br>Specialist staff undertake additional advanced training, which includes inspection and maintenance of equipment at PoK.<br><br>All staff complete PPE training specific to their work requirements, e.g. staff involved in animal quarantine undertake drills and training in animal diseases. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | | | Taiwan CDC has a training program website and documents to assist staff. |
| **2.7 Public health measures**<br>Demonstrable knowledge of the use of correct methods and understanding of techniques, such as: disinfection, decontamination, isolation, quarantine, contact tracing, entry and exit control. | □ Full<br>■ Partial<br>□ None | Training courses for *staff of Taiwan Centers for Disease Control* includes the techniques of disinfection, decontamination, quarantine, contact tracing, entry and exit control and so on.<br><br>The training courses of *Bureau of Animal and Plant Health Inspection and Quarantine* include health measures and management for smuggled animals, and technique of specimen collection, sterilization, and evacuation. Staffs of all authorities in *Kaohsiung Port* have participated in the training workshop for responding to the radiological, biochemical and explosive events. This workshop was hold by the *Office of Homeland Security, Executive Yuan* in 2011. | *Taiwan Centers for Disease Control*<br>Legislation/Protocols<br>Guidance/Flowcharts<br>Report | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC staff have an inspection manual which explains process for each method and product suitable for purpose.<br><br>Where contractors are engaged, a Quality Assurance process ensures they are using correct measure and method.<br><br>Ministry of Environment certifies pest controllers. |
| **2.8 Testing and sampling techniques**<br>Demonstrable knowledge of the use of correct testing and sampling techniques and equipment to support initial observation, detection and assessment of public health risk, e.g. water, food, vector control. | □ Full<br>■ Partial<br>□ None | *Taiwan Centers for Disease Control* (TCDC), *Bureau of Animal & Plant Health Inspection and Quarantine*, *Food and Drug Administration* and *Kaohsiung Customs* have personnel's training course on inspection and the use of correct testing and sampling techniques and equipment according to their statutory obligation. | *Taiwan Centers for Disease Control*<br>Protocols/Guidance<br>Trainings/Records<br><br>*Food and Drug Administration*<br>SOPs<br><br>*Kaohsiung Customs*<br>Legislation | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of equipment and testing and sampling techniques for vector control; and process for testing and sampling water and food. |
| **2.9 Vector control**<br>Demonstrable knowledge of the use of correct control methods for relevant vector-borne diseases and for hosts and vectors, including disinsecting and deratting. | ■ Full<br>□ Partial<br>□ None | Staff of *TCDC* have qualified technicians that are trained in Pest Control Operation (PCO) program for vector control. | *Centers for Disease Control*<br>Legislation/Protocol<br>Trainings/ List<br>Website/ Certificate | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | | | knowledge of equipment, testing and sampling techniques and control measures for vector control. |
| **2.10 Food safety management**<br>Knowledge of use of correct practices for safe food management, especially with regard to handling, supply, source, preparation, storage and distribution. | ■ Full<br>□ Partial<br>□ None | Training course of *TCDC* includes food safety management into ship sanitation inspection program. | *Centers for Disease Control*<br>Protocol/Report/Training | ■ Full<br>□ Partial<br>□ None |
| **2.11 Water safety management**<br>Knowledge of correct practices of safe water management, especially with regard to source, storage, distribution, treatment and control methods. | □ Full<br>■ Partial<br>□ None | Training course of *TCDC* includes water safety management into ship sanitation inspection program. | *Centers for Disease Control*<br>Protocol/Report/Website<br>Training | ■ Full<br>□ Partial<br>□ None<br><br>Staff utilise the WHO Ship Sanitation Guide.<br><br>Staff demonstrated extensive knowledge on inspection and control and treatment methods. |
| **2.12 Solid and liquid waste management**<br>Knowledge of solid and liquid waste treatment, control methods and systems for detection, assessment and recommended control measures for present and potential risks from solid and liquid waste (including bilge water and ballast water for ships). | ■ Full<br>□ Partial<br>□ None | Staff training of TCDC, *Bureau of Animal and Plant Health Inspection and Quarantine* and *Maritime and Port Bureau* includes solid and liquid waste management. *Port state control* (PSC) officers of *Bureau of Maritime and Port* inspect the disposal records of oil, garbage discharge, polluted water, ballast water and other wastes on the ship from time to time.<br><br>Shipmasters should make improvement if they do not meet requirements from international convention such as SOLAR (International Convention for the Safety of Life at Sea), MARPOL (International Convention for the Prevention of Pollution | *Taiwan Centers for Disease Control*<br>Protocol/Report<br>Training<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Notification<br><br>*Maritime and Port Bureau*<br>Records/Certificate | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | From Ships) under the request of PSC officers. | | |
| **2.13 Swimming pools and SPA**<br>Knowledge of present and potential risks from recreational swimming and spa areas on board and methods and systems for detection, assessment and recommended control measures. | ■ Full<br>□ Partial<br>□ None | Currently, there is limited conveyance in *Kaohsiung Port* that have swimming pool and SPA on board. In 2012, staffs of *Taiwan Centers for Disease Control* have participated in the inspection of swimming pool and SPA on a passenger liner anchored in *Port of Keelung*, Taiwan. Port –related units will arrange further training course for the knowledge of present and potential risks from recreational swimming and SPA areas on board and methods and systems for detection, assessment and recommended control measures. | None. | □ Full<br>■ Partial<br>□ None<br><br>Taiwan CDC staff continue to develop training programs for inspection and control methods for swimming pools and SPA. |
| **2.14 Medical facilities**<br>Knowledge of requirements, bio safety procedures, equipment, medical chest and environmental requirements for medical facilities on board, according to the size, type and kind of conveyance and related applicable guidelines (e.g. WHO, IMO, ILO, ICAO).<br>Foreign language skills or arrangements for translation and interpreters, where needed. | □ Full<br>■ Partial<br>□ None | *TCDC* staff's training includes medication safety management into ship sanitation inspection program. *TCDC* will arrange further training course for the knowledge of medical requirement, bio safety procedures, equipment, and environmental requirements for medical facilities on board, according to the size, type and kind of conveyance and related applicable guidelines (e.g. *WHO*). | *Taiwan Centers for Disease Control*<br>Protocol/Report | ■ Full<br>□ Partial<br>□ None<br><br>Staff have knowledge of requirements for medical facilities on board, and explained process for assessing equipment and medical chest appropriate to the size, type and kind of conveyances that arrive at PoK. |
| **2.15 Air quality management**<br>Understanding of correct practices of air health quality management. Capacity for detection, assessment and recommended control measures for present and potential risks from air quality. | □ Full<br>□ Partial<br>■ None | *TCDC* will arrange training course for the knowledge of detection, assessment and recommended control measures for present and potential risks from air quality. | None. | ■ Full<br>□ Partial<br>□ None<br>Staff demonstrated knowledge of air quality systems on vessels and process of inspection and assessment of filters and IAPP certification. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| **(d) To ensure a safe environment for travellers using point of entry facilities, including potable water supplies, eating establishments, flight catering facilities, public washrooms, appropriate solid and liquid waste disposal services and other potential risk areas, by conducting inspection programmes, as appropriate; and adequate numbers of trained staff.** | | | | |
| **1. Safe environment for travellers using point of entry facilities** | | | | |
| **1.1 Water**<br>A documented, tested and updated water safety programme, conducting or under supervision of competent authority; maintenance records and testing results are documented and available, including: | ■ Full<br>□ Partial<br>□ None | | | ■ Full<br>□ Partial<br>□ None |
| **1.1.1 Treatment**<br>Adequate treatment to remove and control public health risks | ■ Full<br>□ Partial<br>□ None | There is a contracted manufacturer for testing water quality in order to maintain the quality of water dispensers in the *International Travel Center*. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Contract/Record | ■ Full<br>□ Partial<br>□ None |
| **1.1.2 Source**<br>Potable water sources, under surveillance and supervision, in secure places, far away from sources of pollution, approved by relevant health authority and quality considered satisfactory under national standards. | ■ Full<br>□ Partial<br>□ None | The drinking water for travelers in the *International Travel Center* is treated tap water. Water for conveyances is supplied by a qualified vendor that provides examination reports regularly designated by the *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Legislation/Record | ■ Full<br>□ Partial<br>□ None |
| **1.1.3 Water quality monitoring programme**<br>Water quality regularly monitored, including the effect of disinfection at the points of potable water.<br>All present and potential public health risks from water supply are detected, assessed and recommended control measures are implemented and programme agenda, dates and results of testing and inspection are recorded and accessible, covering:<br>- public distribution within point of entry boundary<br>- passenger terminals<br>- cargo and container terminals<br>- infrastructure and courtyards | ■ Full<br>□ Partial<br>□ None | The water quality of water dispensers in the *International Travel Center* is tested by a contracted agency under national's regulation, and of potable water is inspected under guidance of *Department of Health, Kaohsiung City Government.* The results of testing and inspection are recorded. Water for conveyances is provided by the *Taiwan Water Corporation* which tests the water quality once every three months under national regulation. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Record/Report/Website<br><br>*Department of Health, Kaohsiung City Government*<br>Protocol | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| - transport and water service providers for conveyances<br>- water supply services for food production. | | | | |
| **1.2 Food**<br>Eating establishment / food suppliers / production stores approved or considered satisfactory by the relevant health administration and/or under competent authority supervision, including flight catering facilities, meals or foods and other perishable commodities that are prepared from outside the point of entry jurisdictional area, but destined for use on conveyances, are regularly monitored: all present and potential public health risk from food are detected, assessed and recommended control measures are implemented, maintenance records and testing results are documented and available, food safety, including eating and catering facilities. | □ Full<br>■ Partial<br>□ None | *The Department of Health (DOH), Taiwan*, and the *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* Have the regulations of food safety management and sanitation.<br><br>*DOH, Kaohsiung City Government (KCG)* implements superintendence and advises for food suppliers, stores and restaurants in *Kaohsiung Port* according to the guidance of food's safety. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Contract/ List<br><br>*Department of Health, KCG*<br>Protocols/ Record/ SOP<br>Lists<br><br>*Food and Drug Administration*<br>Legislation | ■ Full<br>□ Partial<br>□ None<br><br>There are no eating establishments on PoK.<br><br>All food suppliers are certified and inspected by relevant health administration to detect, assess and manage any potential public health risk. Testing and maintenance records are kept. |
| **1.3 Public washrooms**<br>Public washroom premises consistent with volume and frequency of travellers, in good operational condition and are regularly and hygienically cleaned with regard to the volume of passengers and personnel using the terminal and other facilities at the point of entry. | ■ Full<br>□ Partial<br>□ None | There are three washrooms for men and three for women in the *International Travel Center.* The washrooms are regularly cleaned twice a day, and the cleaning record is documented. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Contract/Records | ■ Full<br>□ Partial<br>□ None |
| **1.4 Solid and liquid waste – residual water**<br>Documented, tested and updated solid waste management, liquid waste – residual water management, plans in place and under competent authority supervision, including: | ■ Full<br>□ Partial<br>□ None | | | ■ Full<br>□ Partial<br>□ None |
| **1.4.1 Waste management quality monitoring**<br>Where all present and potential public health risks from solid and liquid waste are detected, assessed and recommended control measures are implemented, maintenance of records and testing results are documented and available, | □ Full<br>■ Partial<br>□ None<br><br>It's not clear whether PoK has | 1. *Port of Kaohsiung, Taiwan International Ports Corporation (TIPC), Ltd.* authorizes a qualified waste- removal company to manage solid and liquid waste in the area of *Kaohsiung Port*, including waste form the public land, marine and crew. The staff of | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Protocol/Contract/Records/List/Certificate | ■ Full<br>□ Partial<br>□ None<br><br>PoK waste collection agents are registered and |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| covering:<br>- public collection within point of entry boundary<br>- passenger terminals<br>- cargo and containers terminals<br>- infrastructure and courtyards<br>- transport and liquid waste service providers for conveyances<br>- waste services for food production<br>- especially dangerous waste (medical / infectious, chemical and other). | monitored the waste management or not. However, it's very difficult to conduct the monitoring system in practice. | *TIPC, Ltd.* monitor the operation of the waste management and records daily<br><br>2. *Bureau of Animal and Plant Health Inspection and Quarantine* has already officially informed *Port of Kaohsiung, TIPC, Ltd.* to inform ship companies that none of leftovers on board ship are allowed to be landed, and a swift action for disinfection is required when there are public health events. | *Taiwan Centers for Disease Control*<br>Contracts/ Certificates<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Notification | are required to maintain collection records, test results and staff training records.<br><br>Daily waste collection records are checked.<br><br>Designated waste disposal site and protocols for quarantine waste are in place. |
| **1.4.2 Final destination of the solid and liquid waste generated at the point of entry**<br>The above documented, tested and updated solid and liquid waste management programmes, including standard operating procedures, for safe transport and final destination of the solid and liquid waste generated and or treated at point of entry, according to its type and volume. | ■ Full<br>□ Partial<br>□ None | 1. *Port of Kaohsiung, Taiwan International Ports Corporation (TIPC), Ltd.* commissions a qualified waste removal company to treat and sort waste into non-recyclable and recyclable items. Non-recyclable waste is incinerated, and recyclable items are transported away from *Kaohsiung Port*. *TIPC, Ltd.* keeps relevant inspection records.<br><br>2. *Taiwan Centers for Disease Control* commissions a qualified vendor to treat medical waste of the *International Travel Center.* | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Protocols/ Record<br>Certificates/ Contract<br><br>*Taiwan Centers for Disease Control*<br>Record | ■ Full<br>□ Partial<br>□ None<br><br>Daily record sheets available for all PoK waste collected. |
| **1.5 Other potential risk areas: indoor air quality**<br>A documented, tested and updated indoor air quality management plan in place, where applicable, to avoid sources of contamination and infection and under competent authority supervision, where all present and potential health risks from indoor air quality are detected and identified and recommended control measures are implemented, maintenance records and testing results are documented and | ■ Full<br>□ Partial<br>□ None<br><br>Since travel center is not an open space, it should has certain indoor quality management. | 1. The *International Travel Center*'s windows and the air conditioners will open to enhance ventilation at passengers' entry.<br><br>2. The air conditioner of the *International Travel Center* is cleaned weekly. The cooling towers are cleaned monthly. All the clean records are documented.<br><br>3. To ensure proper operation and good air quality, annual maintenance of air | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Record/ Report | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| available. | | conditioners that is done every year, and the maintenance record is documented.<br><br>4. The staff of *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*. Tests the indoor air quality (CO2) of the *International Travel Center* every six months according to the national regulation and the tested record is documented.<br><br>5. *Indoor Air Quality Act* in Taiwan was carried out since 2013, *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* will take part in the related training course to enhance the management of indoor air quality. | | |
| **1.6 Other potential risk areas: human remains**<br>Current, regularly updated, documented and tested procedures are in place for monitoring human remains departing and arriving from affected areas and for the use of specific health measures to ensure the safe handling and transport of human remains: under supervision of competent authority, such as measures of issuance of permits, proper sanitary treatment for leakage in the conveyance, records are available, assessable, traceable and retrievable. | ■ Full<br>□ Partial<br>□ None | 1. *Taiwan Centers for Disease Control* implements the quarantine of human remains departing and arriving from overseas, and provides affairs-related consulting to the public. According to the *Communicable Disease Control Act*, human remains that have suspected communicable disease have to be undertaken specific health measures to ensure the safe handling and transporting.<br><br>2. At Customs, human remains can pass through quarantine after having obtained a quarantine certificate issued by *Taiwan Centers for Disease Control.* | *Taiwan Centers for Disease Control*<br>Website/Protocol<br>Flowchart/Application Form/Certificate | ■ Full<br>□ Partial<br>□ None |
| **2. Inspection programmes** | | | | |
| **2.1 Sufficient number of staff for inspections**<br>Access to appropriate number of trained personnel assigned for these duties, in relation to volume and frequency of travellers and complexity of point of entry (regarding terminal | ■ Full<br>□ Partial<br>□ None<br><br>Since Kaohsiung | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd. (TIPC)* is the core authority in *Kaohsiung Port*. *TIPC* and other port-related units have sufficient and trained staff for inspection according to the statutory | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Duty List | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| facilities, destinations, and multimodal practice in place among other factors). | Harbor bureau take the responsibility of inspecting the facilities, it seems insufficient if there's no any inspectors yet according to the checklist. Please explain the mechanism of supervision. | duty. (see the Appendix listed below) | *Taiwan Centers for Disease Control*<br>Protocol/Duty Lists<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Certificate<br><br>*Food and Drug Administration*<br>Contact detail/List/Training<br><br>*Kaohsiung Customs*<br>Reports<br><br>*Department of Health, KCG*<br>List/ Training | |
| **2.2 Competent / qualified personnel for inspection programmes**<br>Understanding of inspection standard operating procedures – personnel have undergone a training program, can produce certificates / documentation and/or can demonstrate a thorough understanding of standard operating procedures set in place for the sanitary inspection, and show demonstrated competency in the following areas, according to the assigned inspection duties: | | Personnel of authorities in *Kaohsiung Port* are adequately trained. The training programs for personnel to carry out routine work are in place and updated from time to time. | *Bureau of Animal and Plant Health Inspection and Quarantine*<br>Certificate/Legislation<br>SOPs<br><br>*Kaohsiung Customs*<br>List | ■ Full<br>□ Partial<br>□ None<br><br>Staff have undergone training programs and can produce certificates / documentation.<br><br>Staff interviewed demonstrated a thorough understanding of SOPs. |
| **2.2.1 Epidemiological situation of the point of entry**<br>Knowledge of common public health risks detected on a routine basis and of the usual public health risks associated with type, size, kind, common origins and destinations of conveyances that use the point of entry. | ■ Full<br>□ Partial<br>□ None<br><br>If Kaohsiung Harbor bureau take the responsibility of inspection. Please | 1. Staff training programs of *Taiwan Centers for Disease Control* and *Bureau of Animal and Plant Health Inspection and Quarantine (BAPHIQ)* include the surveillance of international outbreaks of infectious diseases and the information which is updated regularly.<br><br>2. Staff of *BAPHIQ* monitor international | *Taiwan Centers for Disease Control*<br>Website/Records<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Website | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated a thorough knowledge of common public health risks detected at PoK on a routine basis. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | clarify the responsibility of inspecting PoE facilities. | outbreaks of animal infectious diseases reported by World Organization for Animal Health(OIE) and update the information on *BAPHIQ*'s website.<br><br>3. *Taiwan Centers for Disease Control* and *Bureau of Animal and Plant Health Inspection and Quarantine* regularly detect and analyze international health information, and provide the information to other authorities in *Kaohsiung Port* through *"Kaohsiung International Port Health and Security Group*" for further response if necessary. | | |
| **2.2.2. Public health events -** Knowledge and skills for detecting, reporting, assessing and providing first control measures to public health events; | □ Full<br>■ Partial<br>□ None | 1. When there are public health events or security concerns, inspectors of *Port of Kaohsiung, Taiwan International Ports Corporation (TIPC), Ltd.* reports to related authorities in *Kaohsiung Port* according to SOPs.<br><br>2. When there are public health events, including human or zoonotic communicable disease, toxic chemicals leakage, and radiation contamination, TIPC conducts emergency report and communicate with relevant authorities in *Kaohsiung Port* to institute control measures immediately according to the "*Disaster Mitigation and Prevention Plan"*.<br><br>3. *Taiwan Centers for Disease Control* has SOPs for detecting and responding to infectious events and institute quarantine if necessary; in addition, *TCDC* has personnel training program for quarantine inspectors in *Kaohsiung Port*. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Flowchart<br><br>*Taiwan Centers for Disease Control*<br>Guidance/Protocols<br>Legislation<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Legislations/SOPs<br>Website/Report/List<br>Training<br><br>*Kaohsiung Customs*<br>Legislations/Protocols<br>SOP/Report/List | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge and skills for detecting, reporting, assessing and providing control measures to respond to public health risks. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | 4. Staff of *Bureau of Animal and Plant Health Inspection and Quarantine* updates and accesses domestic and international outbreak of animal infectious diseases regularly and institute animal quarantine routinely in *Kaohsiung Port*. | | |
| **2.2.3. Public health risks from microbiological, chemical and radiological agents**<br>– Knowledge of how they can affect human health and be transmitted person to person and by food, air water, waste, vectors, fomites and the environment | □ Full<br>■ Partial<br>□ None | 1. Staffs of all authorities in *Kaohsiung Port* have knowledge related to their duties. For example, *Taiwan Centers for Disease Control* have personnel training on public risk of infectious diseases. Quarantine inspectors of *Bureau of Animal and Plant Health Inspection and Quarantine* have the knowledge about zoonotic diseases. Staffs of *Kaohsiung Customs* have the knowledge of radiation. Staffs of *Food and Drug Administration* have the knowledge related to food safety.<br><br>2. Staffs of all authorities in *Kaohsiung Port* have participated in the training workshop for responding to the radiological, biochemical and explosive events. This workshop was held by the *Office of Homeland Security, Executive Yuan* in 2011.<br><br>3. Staffs of *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* have participated in radiation training course held by the *Atomic Energy Council* in 2012. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Certificate<br><br>*Taiwan Centers for Disease Control*<br>Websites/Protocol<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Education materials<br>List/ Training<br><br>*Kaohsiung Customs*<br>Legislation/Guidance<br>Protocol/ SOP/ List<br>Training<br><br>*Food and Drug Administration*<br>Trainings/ SOP | ■ Full<br>□ Partial<br>□ None<br><br>Disaster Mitigation and Prevention Program has been revised to ensure plans from PoK authorities are integrated to manage chemical, microbiological and radiological agents. Taiwan CDC and PoK authority staff have regular training for responding to radiological, biochemical and explosive events.<br><br>Staff have participated in a training workshop for responding to radiological, biochemical and explosive events. |
| **2.2.4 Personal protective techniques and related equipment**<br>Demonstrable knowledge of application and correct use. | □ Full<br>■ Partial<br>□ None | Personnel of authorities in *Kaohsiung Port*, including *Taiwan Centers for Disease Control*, *Kaohsiung Customs*, *Bureau of Animal and Plant Health Inspection and Quarantine*, *Kaohsiung Harbor Fire Brigade*, and so on, have the knowledge and | *Taiwan Centers for Disease Control*<br>Legislation/Guidance<br>Websites/Protocols<br>Record/ Training | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated the use of a comprehensive range |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | training for the use of personal protective equipment according to statutory obligation. | *Kaohsiung Customs*<br>Protocol/ List<br>Training<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Trainings/ List<br><br>*Kaohsiung Harbor Fire Brigade*<br>Guidance/Legislations | of PPE available. Training protocols ensure staff are competent in their use. |
| **2.2.5 Public health measures**<br>Demonstrable knowledge of the use of correct methods and understanding of techniques, such as: disinfection, decontamination, isolation, quarantine, contact tracing, entry and exit control. | □ Full<br>■ Partial<br>□ None | Personnel of authorities in *Kaohsiung Port* have professional knowledge for routine work and have been trained in control measures such as disinfection, decontamination, isolation, quarantine, and so on according to their statutory duty. For example, *Taiwan Centers for Disease Control* has personnel training for ship quarantine, personnel quarantine, ship sanitation and docks sanitation. When travelers have suspected communicable diseases, they are sent to designated hospitals for treatment if necessary.<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine* arranges training courses and drills for personnel every year and has epidemic prevention supplies for disinfection, isolation, decontamination, quarantine of animal with suspected communicable diseases.<br><br>The *Central Alarm Station (CAS)* of *Kaohsiung Customs* reports to *Radiation Protection Inspection Section* and *Radiation Safety Monitoring Section of Atomic Energy Council* when radiations are found. *Atomic* | *Taiwan Centers for Disease Control*<br>Legislations/ Protocols<br>Flowcharts/ Website<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Trainings/ List<br><br>*Kaohsiung Customs*<br>Protocol/ Guidance<br>List/ Training<br>(about Megaports Initiative) | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge and correct methods for a range of public health measures, including disinfection and decontamination. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | *Energy Council* carries out the decontamination for affected goods and has regular training courses for the personnel. | | |
| **2.2.6 Testing and sampling techniques**<br>Demonstrable knowledge of the use of correct testing and sampling techniques and equipment to support initial observation, detection and assessment of public health risk, e.g. water, food, vector control. | □ Full<br>■ Partial<br>□ None | According to statutory duties, *Taiwan Centers for Disease Control, Food and Drug Administration(FDA), Bureau of Animal and Plant Health Inspection and Quarantine* and *Department of Health, Kaohsiung City Government* have plans testing and sampling techniques and related training programs for the personnel. For example, *TCDC* has a training program for testing and sampling techniques for the quarantine inspectors and establishes vector monitoring stations in *Kaohsiung Port*. *BAPHIQ* has regular training courses for sampling technique. Staffs of *FDA* are trained and follow SOPs for inspection of imported food products.<br><br>Staff of *Department of Health, KCG* implements a random inspection and test of food provided by stores and catering industry in *Kaohsiung Port*. | *Taiwan Centers for Disease Control*<br>Guidance/Protocols<br>Websites/Flowchart<br>Training/Records<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>SOP/ List<br>Training<br><br>*Food and Drug Administration*<br>SOPs/ Trainings<br><br>*Department of Health, Kaohsiung City Government*<br>SOP/ Lists<br>Training | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of equipment and testing and sampling techniques for vector control; and process for testing and sampling water and food. |
| **2.2.7 Vector control**<br>Demonstrable knowledge of the use of correct control methods for relevant vector-borne diseases for hosts and vectors, including disinsecting or deratting. | ■ Full<br>□ Partial<br>□ None | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* and *Centers for Disease Control* have qualified technicians for vector control in *Kaohsiung Port*. Technicians have received training for the use of correct control methods for relevant vector-borne diseases and for hosts and vectors, including disinsecting and deratting. (The statutory duty of *TIPC, Ltd.* is vector control in *Kaohsiung Port*. The statutory duty of *Taiwan Centers for Disease Control* is monitoring of vectors in *Kaohsiung Port*) | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Certificate/List<br><br>*Centers for Disease Control*<br>Legislation/Protocol<br>Training/List/ Certificate | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of equipment, testing and sampling techniques and control measures for vector control. |
| **2.2.8 Food safety management**<br>Knowledge of use of correct practices of safe | □ Full<br>■ Partial | 1. Staff of *Port of Kaohsiung, Taiwan International Ports Corporation, Food and* | *Port of Kaohsiung, Taiwan International Ports Corporation,* | ■ Full<br>□ Partial |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| food management, especially with regard to handling, supply, source, preparation, storage and distribution. | □ None | *Drug Administration* and *Department of Health, Kaohsiung City Government* have knowledge of food safety management and have participated in related training courses.<br><br>2. *Department of Health, KCG* advises and inspects food suppliers, stores and restaurants in *Kaohsiung Port* according to the guidance of food safety. | *Ltd*<br>List<br><br>*Food and Drug Administration*<br>Legislations<br><br>*Department of Health, Kaohsiung City Government*<br>Protocols/ Trainings/SOP | □ None<br><br>All food suppliers are certified and inspected by relevant health administration to detect, assess and manage any potential public health risk. Testing and maintenance records are kept. |
| **2.2.9 Water safety management**<br>Knowledge of use of correct practices of safe water management, especially with regard to source, storage, distribution, treatment and control methods. | ■ Full<br>□ Partial<br>□ None | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* commissions a qualified vendor for the management of water safety at the point of entry. Their staffs are trained in water safety management. | None. | ■ Full<br>□ Partial<br>□ None |
| **2.2.10 Solid and liquid waste management**<br>Knowledge of solid and liquid waste treatment control methods and systems for detection, assessment and recommended control measures for present and potential risks from solid and liquid waste (including bilge water and ballast water for ships). | □ Full<br>■ Partial<br>□ None | 1. The waste removal technicians of *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* Have knowledge of solid and liquid waste treatment. They can guide relevant staff on waste management.<br><br>2. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* commissions a qualified waste removal company to treat and sort waste into non-recyclables and recyclables. Non-recyclables are incinerated, and recyclables are transported away from *Kaohsiung Port*. *TIPC* keeps relevant inspection records.<br><br>3. *Taiwan Centers for Disease Control* commissions contractors to manage medical waste collected from the *International Travel Center.* | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Lists/Record<br><br>*Taiwan Centers for Disease Control*<br>Contracts/Certificates<br>Record<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Notification | ■ Full<br>□ Partial<br>□ None<br><br>Staff have knowledge of solid and liquid waste management.<br><br>Staff manage ballast water under terms of the Convention, including inspecting records of discharge of ballast water. |
| **2.2.11 Swimming pool and SPA**<br>Knowledge of present and potential risks from recreational swimming and spa areas and | □ Full<br>■ Partial<br>□ None | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* has arranged personnel of *Food and Drug Administration* | None. | □ Full<br>■ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| methods and systems for detection, assessment and recommended control measures (including on board systems). | It is described "Knowledge of present and potential risks from recreational swimming and spa areas and methods and systems for detection, assessment and recommended control measures (including on board systems)", the question means whether competent authorities have "Knowledge" or not It should be included on-board system. | and *Department of Health, Kaohsiung city government* for inspecting swimming pool and SPA on an ocean liner in December 2012, and further training program will be arranged in the future. | | Staff have SOPs to guide inspection, and continue to develop training programs for inspection and control methods for swimming pools and SPA. |
| **2.2.12 Medical facilities**<br>Knowledge of requirements, bio safety procedures, equipment, medical chests and environmental requirements for medical facilities, according to the size, type and kind of conveyance and related applicable guidelines (e.g. WHO, IMO, ILO, ICAO). | □ Full<br>■ Partial<br>□ None<br><br>This 2.2.12 mentions about medical facilities of conveyances. | 1. The paramedics of *Kaohsiung Harbor Fire Brigade* have knowledge about the use of medical equipment.<br><br>2. The *International Travel Center* has a medicine chest that is checked every month to replace expired medication. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Record<br><br>*Kaohsiung Harbor Fire Brigade*<br>Legislation | ■ Full<br>□ Partial<br>□ None<br><br>Staff have knowledge of requirements for medical facilities on board, and explained process for assessing equipment and medical chest, appropriate to the size, type and kind of conveyances that arrive at PoK. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| **2.3 Harmful contamination other than microbial contamination**<br>Such as radio-nuclear sources, could also be found on ships but is outside the scope of this guidance. There are national and international agencies exist to deal with radio-nuclear incidents and emergencies. The National IHR Focal Point should have the contact information for these agencies. | ■ Full<br>□ Partial<br>□ None | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* has set up a "*The Disaster Mitigation and Prevention Plan*" that includes SOPs for reporting and instituting control measures of harmful chemicals and radionuclear incidents and emergencies. When an emergency of harmful chemicals or a radiation contamination occurs in *Kaohsiung Port*, *TIPC, Ltd.* reports to other relevant authorities to institute control measures immediately according the prevention plan mentioned above. In addition, the *Central Alarm Station* (CAS) of *Kaohsiung Customs* reports to *Atomic Energy Council* when radionuclear incidents and emergencies are detected. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd*<br>Protocol<br><br>*Kaohsiung Customs*<br>Protocols/Guidance | ■ Full<br>□ Partial<br>□ None |
| **2.4 Facilities, equipment and supplies for use by inspection staff**<br>Facilities, equipment and supplies are available for use by inspection staff, according to the needs of its duties and kept in safe and hygienic conditions; including: communication devices, testing and sampling supplies and equipment, updated guidance tools and other technical information sources, personal protective equipment, vector control devices and supplies, records / data collection storage and forms etc. | ■ Full<br>□ Partial<br>□ None | 1. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* authorizes a qualified company to institute control measures of the harmful pollution other than microbiological agents. This company has professional equipment and facilities.<br><br>2. According to obligation of inspecting, authorities in *Kaohsiung Port*, including *Taiwan Centers for Disease Control*, *Bureau of Animal and Plant Health Inspection and Quarantine*, *Kaohsiung Customs*, *Food and Drug Administration,* and *Department of Health, Kaohsiung City Government* have their professional facilities and equipment that are supplied and maintained regularly.<br><br>3. *Kaohsiung Customs* have 38 radiation portal monitors (RPMs), 2 Advanced Spectroscopic Portals (ASP), and various | *Taiwan Centers for Disease Control*<br>Protocol/List/Records<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Report<br><br>*Kaohsiung Customs*<br>Protocol/ Report<br><br>*Food and Drug Administration*<br>SOP<br><br>*Department of Health, Kaohsiung City Government*<br>SOP/ List | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | hand-held radiation detection equipment, including personal radiation detectors (PRD), radiation survey meters (Survey Meter), radioisotope identification device (RIID), over 40 sets of high purity Germanium detector (ORTEC), central alarm station (CAS), wireless transmission equipment, secondary workstation (SWS), TV wall, and the vehicle for second detection. These facilities and equipment are maintained regularly. | | |
| **(e) to provide as far as practicable a programme and trained personnel for the control of vector and reservoirs in and near points of entry** | | | | |
| **1. Plan for vector and reservoir control**<br>Integrated vector control programme in place, including special arrangements or agreement/ contract covering the following areas:<br>- passenger terminals<br>- cargo and container terminals<br>- infrastructure and courtyards<br>- service provider facilities at terminal and for conveyance ground support operation<br>- surrounding areas of points of entry (minimum 400m). | ■ Full<br>□ Partial<br>□ None<br><br>It is impressive that TCDC has highly professional staff to conduct this work. | 1. *Port of Kaohsiung, Taiwan International Ports Corporation (TIPC), Ltd., Taiwan Centers for Disease Control* and *Department of Health, Kaohsiung City Government* have action plans for vector and reservoir surveillance and control.<br><br>2. According to action plans, *TIPC, Ltd.* implements vector control in *Kaohsiung Port* 2-3 times per year and emergent control measures will be demanded for by abnormal activities of vectors in *Kaohsiung Port* and other authorities of *Kaohsiung Port*. The records of vector control are documented.<br><br>3. *Taiwan Centers for Disease Control* implements vector surveillance in the *Kaohsiung Port* according to the guidance, and they inform the surveillance reports to the relevant authorities and units of *Kaohsiung Port* to enhance vector control such as the control of rodents, arthropods, and reservoirs. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Protocol/Flowchart/Record/ Notification<br><br>*Centers for Disease Control*<br>Protocols/ Reports<br>Trainings<br><br>*Department of Health, Kaohsiung City Government*<br>Protocol | ■ Full<br>□ Partial<br>□ None<br><br>PoK has a comprehensive vector control programme in place. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | 4. *Department of Health, Kaohsiung City Government* implements vectors surveillance and control measures in the areas surrounding *Kaohsiung Port*. | | |
| **2. Trained personnel for control of vector and reservoirs**<br>Adequate number of personnel with training and knowledge to detect and control public health risks of vectors and reservoirs as well as to oversee and audit services and facilities of the point of entry. | ■ Full<br>□ Partial<br>□ None | *Port of Kaohsiung, Taiwan International Ports Corporation, Lt.., Taiwan Centers for Disease Control* and *Department of Health, Kaohsiung City Government* all have qualified technicians that are trained with *Pest Control Operation (PCO)* training program. The list of qualified technicians is renewed regularly. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Certificate/List<br><br>*Taiwan Centers for Disease Control*<br>Certificate/ List<br>Website<br><br>*Department of Health, Kaohsiung City Government*<br>Protocol/ List<br>Record | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated knowledge of equipment, testing and sampling techniques and control measures for vector control. |
| **3. Monitoring of vectors in the point of entry facilities and in the surrounding area of at least 400m from terminal**<br>Monitoring is continuous done on site: vectors and reservoirs are detected, identified, tested for pathogens and controlled. Results of the latest audit of services and facilities are available and accessible. | ■ Full<br>□ Partial<br>□ None | 1. *Taiwan Centers for Disease Control* conducts monitoring of vectors in *Kaohsiung Port* according to the guidance, and passes the surveillance reports to relevant units to enhance vectors control such as the elimination of rodents, arthropods, and reservoirs.<br><br>2. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* checks suspected sites in *Kaohsiung Port* according to surveillance report provided by *Taiwan Centers for Disease Control* and institute vector control measures.<br><br>3. Staff of *Department of Health, Kaohsiung City Government* conduct monitoring and control of vectors in the area within 400 meters from the terminal of *Kaohsiung Port*. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Protocol/ Flowchart<br>Notification/ Records<br><br>*Taiwan Centers for Disease Control*<br>Reports/ Protocols<br><br>*Department of Health, Kaohsiung City Government*<br>Protocol/ Report | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| **4. Dedicated space, equipment and supplies for use by vectors and reservoir control staff**<br>Dedicated and secure space/room for use by vector and reservoir control staff and for storage of public health equipment and supplies, including:<br>- insecticides, rodenticides, traps and application equipment<br>- inspection equipment<br>- workplace and supplies for staff to prepare inspections, complete reports, and to prepare, calibrate and store sampling equipment. | ■ Full<br>□ Partial<br>□ None | 1. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd., Taiwan Centers for Disease Control and Department of Health, Kaohsiung City Government* all have specified spaces for the storage of vector control equipment and supplies including insecticides, rodenticides, and traps.<br><br>2. *Taiwan Centers for Disease Control* has specified inspection equipment and workplace and laboratory for monitoring and sampling for monitoring of vectors. The equipment and facilities are maintained regularly. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>List<br><br>*Taiwan Centers for Disease Control*<br>Protocol/Record<br>Flowchart<br><br>*Department of Health, Kaohsiung City Government*<br>Protocol/ Report | ■ Full<br>□ Partial<br>□ None |
| **(f) Special capacities according to type of point of entry** | | | | |
| **2. Ports and ships** | | | | |
| **2.1** Procedures concerning communication with ship and ship industry operators regarding free pratique (including radio free pratique) request and authorisation; and the Maritime Health Declaration, if and when requested by national authorities. | ■ Full<br>□ Partial<br>□ None | 1. When a ship reaches port, it checks in to the *Vessel Traffic Center (VTC)* of *Port of Kaohsiung, Taiwan International Ports Corporation (TIPC), Ltd.* via radio. *VTC* designates the anchor position for vessels and vessels information can be checked by relevant authorities of *Kaohsiung Port* via "*Real-Time Information of Vessels system*" of *VTC*.<br><br>2. According to the "Regulations Governing Quarantine at Ports of Taiwan", shipping companies or agents are mandated by the shipmaster to have to submit the "*Ship Quarantine Application Form*" and other documents to *Taiwan Centers for Disease Control* for ship quarantine within 72-4 hours prior to arrival to *Kaohsiung Port*. After arrival, they have to submit documents such as "Maritime Declaration of Health". If there are suspected infectious travelers or | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Map<br><br>*Taiwan Centers for Disease Control*<br>Legislations<br>Flowchart<br>Protocol/ Record<br>Application Form | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated procedures for communication with ships and ship industry operators regarding free pratique. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | deaths on the ship, shipmasters should report to *TCDC* immediately, and quarantine officers of *TCDC* institute the boarding quarantine measures.<br><br>3. When there are public health concerns on the ship, the shipmaster has to report to *TIPC, Ltd*; then, the authorities in *Kaohsiung Port* will decide if this ship should move to a designated anchorage area to institute control measures. | | |
| **2.2** Arrangements in place for designated ship quarantine anchorage area, if and when requested, according to risk assessment (such as vector-borne disease, ballast water, waste and other public health risks) and safety, security and facilitation principles, as applicable. | ■ Full<br>□ Partial<br>□ None | 1. According to the "Regulations Governing Quarantine at Ports", shipmasters mandate the ship companies or agents to submit the documents such as "*Ship Quarantine Application Form*" to *Taiwan Centers for Disease Control* within 72-4 hours prior to the arrival to Port. After arriving at *Kaohsiung Port*, shipmasters have to submit documents such as "*Maritime Declaration of Health*". Shipmaster should report to *TCDC* immediately if there are suspected infectious travelers or deaths on the ship. Then, *TCDC* officers of will implement the boarding quarantine measures.<br><br>2. When there are public health events on the ship, the shipmaster has to report to *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd..*, and the authorities in *Kaohsiung Port* will decide if this ship should be moved to a designated anchorage area to institute control measures. | The same as above. | ■ Full<br>□ Partial<br>□ None<br><br>PoK has designated ship quarantine anchorage area, and protocols for directing ships to area based on risk assessment. |

## (BII) For responding to events that may constitute PHEIC (Emergencies)

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| **(a) To provide appropriate public health emergency response by establishing and maintaining a Public Health Emergency Contingency Plan, including the nomination of a coordinator and contact points for relevant points of entry, public health and other agencies and services** | | | | |
| **1. Public health emergency contingency plan**<br>An agreed, updated, documented public health emergency contingency plan, integrated with other public health response plans (national/intermediate/local levels) and other emergency operational plans at points of entry, covering relevant services at point of entry and disseminated to all key stakeholders. | ■ Full<br>□ Partial<br>□ None | 1. *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* regularly update "*the Disaster Mitigation and Prevention Program*" that integrates public health response plans of other authorities of *Kaohsiung Port* for emergency events. When there are public health events in *Kaohsiung Port*, *TIPC, Ltd.* could inform central and local authorities to institute control measures according to the program mentioned above. In addition, *TIPC, Ltd.* can communicate and coordinate through the "*Kaohsiung International Port Health and Security Group*" to institute control measures.<br><br>2. The "*Disaster Mitigation and Prevention Program*" set up by *TIPC, Ltd* includes SOPs for reporting and acting to toxic chemicals leakage and radiation contamination. When either a leakage of harmful chemicals or a radiation contamination occurs in *Kaohsiung Port*, according to the prevention program, *TIPC, Ltd.* reports to central and local authorities immediately to institute control measures to prevent the spread of public health events effectively.<br><br>3. Authorities in *Kaohsiung Port* report public health events and institute control measures according to their statutory duties and the prevention program. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Protocol/Flowchart<br><br>*Taiwan Centers for Disease Control*<br>Legislation/ SOP<br>Flowcharts/ Record<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>SOPs<br><br>*Kaohsiung Customs*<br>Legislations/Protocols<br>Guidance/SOP<br>Contact detail/Report (about Megaports Initiative) | ■ Full<br>□ Partial<br>□ None<br><br>Disaster Mitigation and Prevention Program includes emergency plans, integrated with other public health response plans. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| **2. Integration with other response plans**<br>A clearly structured allocation of functions within the public health emergency contingency plan, for all services and sectors involved at point of entry to carry out policy/guidance, coordination, management and evaluation functions during a public health response:<br>- coordinator/committee identified<br>- sub-sector/services contacts and plans in place<br>- sub-sector/service contact points identified<br>- contact points for key sectors/services at point of entry identified/nominated and details shared with competent authority<br>- integration with possible sectoral plans contact points of key sectors/services at point of entry, including public health, immigration, transportation security, public information/media<br>- identification of mechanism/system in operation and procedures in place for communication/collaboration between public health authorities, within national health surveillance system, with regard to reporting, information exchange, assessment and coordinated response, in coordination with national, intermediate and local public health alert and response plans.<br>- a reliable system for informing the local competent authority in charge to implement health measures of the pending arrival of a suspected case of a communicable disease, when traffic control or others authorities at point of entry have been notified of this by conveyance operators. | ■ Full<br>□ Partial<br>□ None<br><br>Since each authority has completed the contingency plan on their own. It's better to describe more clearly about how they integrated with each other. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* .integrates all type of response plans for public health events into the "*Disaster Mitigation and Prevention Program*". When there are public health events, *TIPC, Ltd.* can inform central and local competent authorities immediately to institute control measures according to SOP of the prevention program. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Protocol | ■ Full<br>□ Partial<br>□ None<br><br>Disaster Mitigation and Prevention Program includes emergency plans, integrated with other public health response plans. |
| **3. Training and/or drill exercises**<br>Periodic training and/or drill exercises to familiarise contact points of key sectors/services | ■ Full<br>□ Partial<br>□ None | As needed, *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* coordinates with authorities in *Kaohsiung* | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| at point of entry with the public health contingency plan and their respective roles and functions within it. | | *Port* to set up public health contingency plans and run exercises to familiarize contact points of key sectors and services, as well as their respective roles and functions . In addition, authorities in *Kaohsiung Port* hold staff training from time to time. For example, *TIPC, Ltd* has held the drill for *International Ship and Port Facility Security simulation (ISPS)* of anti-terrorism, fire event, marine oil pollution, bioterrorism threat and port security in November 2012. | Protocol/ Drills<br><br>*Kaohsiung Harbor Police Office*<br>Protocol<br><br>*Taiwan Centers for Disease Control*<br>Legislation/Protocols<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>SOP/ Training<br><br>*Kaohsiung Customs*<br>Legislations | PoK authority and staff undertake periodic training and exercises. |
| **(b) to provide assessment of, and care for, affected travellers or animals by establishing arrangements with local medical and veterinary facilities for their isolation, treatment and other support services that may be required** | | | | |
| **1. Affected travellers on board** | | | | |
| 1.1 Administrative arrangements and written procedures are in place and agreed with local authorities, conveyance operators and service providers for information sharing and coordinated intersectoral alert and response actions for affected conveyances regarding support and decision making for ill or suspect traveller on board, as part of the public health emergency contingency plan | ■ Full<br>□ Partial<br>□ None | 1. *Taiwan Centers for Disease Control* has a "communicable disease reporting system" for real-time information for case reporting, and spreads related information to local authorities and shipping associations through E-mail or health official documents for advocacy according to the magnitude of the epidemic.<br><br>2. If there is radiological emergency, *Kaohsiung Customs* has to report to "*Radiation Detection Center of Atomic Energy Council* "for further management of contaminated persons in radiation accidents.<br><br>3. For fire accident, toxic chemical leakage, or explosion in *Kaohsiung Port*, the *Kaohsiung Harbor Fire Brigade* institutes control measures according to the SOPs and | *Taiwan Centers for Disease Control*<br>Protocols/Duty list<br>Guidance/ Legislation<br>Reports/Contract<br><br>*Kaohsiung Customs*<br>Protocol (about radiation)<br><br>*Kaohsiung Harbor Fire Brigade*<br>SOP (about chemicals)<br>Flowchart<br><br>*National Immigration Agency*<br>Application Form | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | informs *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* And the *Southern Center for Emergency Response of Toxic Substance*. The staff of *Kaohsiung Harbor Fire Brigade* implements decontamination measures for affected travelers and send them to designated hospitals according to guidance. | | |
| **2. Assessment of, and care for, affected travellers** | | | | |
| **2.1** Access to treatment, isolation and diagnostic facilities<br>Administrative arrangements and a written, formal agreement, such as MoU, are in place with local and/or nearby hospitals, clinics, health services, to receive affected travellers from the point of entry for isolation, treatment and other support services<br>- this agreement should describe the potential nature of the risk (e.g. infectious disease, other source of contamination) and the responsibilities of each signatory;<br>- reference source, date and expiry of the agreement<br>- facilities and types of health care covered (e.g. assessment, isolation, treatment such as first aid, intensive care unit, contagious disease reference centre, etc.)<br>- competent/qualified personnel assigned for prompt assessment, care and isolation of affected travellers<br>- access to laboratory facilities<br>- access to necessary equipment, supplies and personal protective equipment (PPE)<br>- procedures in place for routine written reports of traveller transfer, follow-up care and results of laboratory analysis<br>- arrangements for translation and interpreters. | ■ Full<br>□ Partial<br>□ None | 1. Quarantine officers of *Taiwan Centers for Disease Control* are licensed in health-related fields and are capable of instituting quarantine measures for inbound travelers. In addition, *TCDC* annually contracts with two hospitals for the diagnosis and treatment of travelers with suspected infectious diseases, and for further isolation if needed.<br><br>2. If there is a radiological event, *Kaohsiung Customs* notifies *Radiation Detection Center of Atomic Energy Council* and requests further support to deal with contaminated people in radiation accidents.<br><br>3. *Kaohsiung Harbor Fire Brigade* paramedics transport affected travelers to the nearest hospitals or designated hospitals according to the type of public health events. | *Taiwan Centers for Disease Control*<br>Legislation/ Record<br>Duty list/Contract<br>Contact Detail/ Map<br>Protocol/ Lists<br><br>*Kaohsiung Customs*<br>Legislations/ Protocols<br><br>*Kaohsiung Harbor Fire Brigade*<br>SOP (about chemicals) | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| **2.2 Key information regarding treatment, isolation and diagnostic facilities and transport of affected travellers**<br>List of all facilities to which affected travellers from the point of entry are to be transferred and names and key contact information (address, phone number, distance from point of entry and map of routes) created, disseminated and maintained/updated, regularly tested for accuracy and accessible to all relevant personnel.<br>Key information provided to transportation services regarding the name, address, distance and route to hospitals/clinic facility to which affected travellers from the point of entry must be taken. | ■ Full<br>□ Partial<br>□ None | 1. According to the *Communicable Disease Control Act*, *Centers for Disease Control* provides the manpower management, passenger detention and observation, ambulance dispatch, hospital contact, etc. In addition, *TCDC* regularly updates the contact information of the contracted hospitals.<br><br>2. Paramedics of *Kaohsiung Harbor Fire Brigade* can transport affected travelers to the nearest hospitals or designated hospitals for the further diagnosis and management according to the type of public health events. | *Taiwan Centers for Disease Control*<br>Guidance/ Contract<br>Contact detail/ Map<br><br>*Kaohsiung Harbor Fire Brigade*<br>Maps/ SOP | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC has SOPs and protocols for emergency response to ensure facilities to which affected travellers are transferred have key information to manage potential PHEIC. |
| **3. Assessment, care and isolation of affected animals** | | | | |
| **3.1 A written, formal agreement in place with veterinary centres to provide diagnostic tests, assessment and recommended measures related to affected animals.**<br>- staff trained in infection control and available on-site or on-call to examine affected animals<br>- standby infection control plan, including adequate equipment and<br>- procedures to manage or to use other clinical care facilities to deal with heightened level of public health risk (other than routine level risk)<br>- personal protective equipment and personnel trained and available to carry out assessment, treatment and isolation of affected animals.<br>- written reports of results of affected animal diagnostic tests, follow up care and infection control. | ■ Full<br>□ Partial<br>□ None | Staff of *Bureau of Animal and Plant Health Inspection and Quarantine (BAPHIQ)* has been trained in infection control and are available on-site or on-call to examine affected animals. If there are affected animals, they can be sent by staff of *BAPHIQ* to the nearest veterinary institutions to receive assessment, treatment, isolation, and so on. *BAPHIQ* has a contract with *Animal Hospital of National Pingtung University of Science and Technology* for further management of affected animals. | *Bureau of Animal and Plant Health Inspection and Quarantine*<br>Legislations/SOPs<br>Report | ■ Full<br>□ Partial<br>□ None |
| **3.2 Referral and transport of animals to designated veterinary facility through appropriate safe transport arrangements** | ■ Full<br>□ Partial<br>□ None | Personnel of *Bureau of Animal and Plant Health Inspection and Quarantine* have to wear adequate PPEs to transport the | *Bureau of Animal and Plant Health Inspection and Quarantine*<br>SOPs/ Record | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| Documented administrative arrangements are in place for<br>- cleaning / disinfection equipment and supplies and personnel familiar with these procedures<br>- personal protective equipment to transport staff. | | affected animal to the designated animal institution according to the SOPs. | | |
| **(c) to provide appropriate space, separate from other travellers, to interview suspect or affected persons** | | | | |
| **1. Space to interview suspect or affected travellers**<br>Hygienic and environmentally safe space(s) set aside to conduct private interviews that are of adequate size in relation to volume, type of conveyance and frequency of travellers and complexity of the point of entry (regarding terminal facilities, destinations and multimodal practice). Desirable to have independent exit passage which suspect travellers can be transported to medical care facilities, if needed, and avoid infecting other persons.<br>Arrangements for translation and interpreters where needed. | □ Full<br>■ Partial<br>□ None<br><br>The current space is not enough in the case of severe emergency. | 1. The *International Travel Center* in *Kaohsiung Port* has a separate room for the investigation of suspected or affected travelers and quarantine measure taking. It also has a separate exit route to transport passengers to hospitals.<br><br>2. The staff of *National Immigration Agency* can provide an interpreter for ill travelers when interpretation is needed. | *Taiwan Centers for Disease Control*<br>Map/ Contract<br>Certificates/ Record | ■ Full<br>□ Partial<br>□ None<br><br>Health Room at the International Travel Centre is well equipped and has a designated area for discreet examination and isolation if necessary.<br><br>Contingency plans are in place should additional space be required. |
| **2. Regularly updated, documented, tested on-site control measures,** including equipment and products for cleaning, disinfection and decontamination, for the purpose of elimination of all possible contamination at the facility used to interview infected travellers. | □ Full<br>■ Partial<br>□ None | Prior to cruise ship docking, the staff of *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd* cleans up the separate room in the *International Travel Center. TIPC, Ltd.* disinfects the environment of the *International Travel Center* every three months. Whenever urgent disinfection is required, the staff of the *International Travel Center* will offer service immediately. *Taiwan Centers for Disease Control* commissions the contractors to manage medical waste collected from the *International Travel Center.* | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Records<br><br>*Taiwan Centers for Disease Control*<br>Contracts/Guidance<br>Certificates | ■ Full<br>□ Partial<br>□ None<br><br>Health Room is well equipped with equipment for cleaning, disinfecting and decontaminating.<br><br>The Assessment Team noted a new international travel centre is currently under construction at PoK. |
| **3. Personal protective equipment (PPE) for interviewing ill travellers**<br>Access to necessary equipment (e.g. PPE) for | ■ Full<br>□ Partial<br>□ None | When interviewing ill passengers, staff of *Taiwan Centers for Disease Control* and *Kaohsiung Harbor Fire Brigade* use | *Taiwan Centers for Disease Control*<br>Guidance/ Protocol | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| initial interview and triage. Personnel use personal protective equipment for initial interview and triage. | | personal protective equipment according to the guidance. | List | |
| **(d) to provide for the assessment and, if required, quarantine of suspected travellers, preferably in facilities away from the point of entry** | | | | |
| **1. Assessment of suspect travellers** | | | | |
| **1.1 Staff**<br>Appropriate number of trained personnel, proportionate to the volume and frequency of travellers, available at short notice, on or off site, to interview and provide first assessment of suspect travellers on a timely basis. | ■ Full<br>□ Partial<br>□ None | 1. *Taiwan Centers for Disease Control* has adequate trained personnel to deal with the quarantine affairs of inbound travelers and do the manpower allocation if necessary.<br><br>2. *Kaohsiung Customs* notifies and requests that *Radiation Detection Center of Atomic Energy Council* to help in dealing with contaminated people in radiation accidents.<br><br>3. *Kaohsiung Harbor Fire Brigade*'s paramedics are trained and qualified with licenses. They can provide first assessment of suspect travelers on a timely basis and transport them to nearby hospitals for further management. | *Taiwan Centers for Disease Control*<br>Guidance/Duty list<br>Protocol/ List<br><br>*Kaohsiung Customs*<br>SOP/ Guidance<br><br>*Kaohsiung Harbor Fire Brigade*<br>Flowchart/ Legislation<br>Certificate | ■ Full<br>□ Partial<br>□ None |
| **1.2 Procedures for reporting**<br>Procedures in place for reporting to the competent authority at the point of entry events related to travellers, indicative of infectious disease or evidence of a public health risk to ensure appropriate assessment, care and other public health measures. | ■ Full<br>□ Partial<br>□ None<br><br>There is a certain reporting system already. | 1. When there are public health events, *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* Will immediately inform authorities in *Kaohsiung Port* to evaluate and institute emergent control measures according to the type of incident and their statutory duties.<br><br>2. When there are serious public health concerns, authorities in *Kaohsiung Port* can immediately communicate the information through "*Kaohsiung International Port Health security Group*" and coordinate the control measures. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Contact Detail/ Legislation<br><br>*Taiwan Centers for Disease Control*<br>Duty List/ Websites<br>Flowchart/ Protocol<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Report/ SOP<br><br>*Kaohsiung Customs*<br>SOP/ Guidance | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC has SOPs and protocols for reporting events relating to travellers. |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | | *Coast Guard Administration*<br>Contact detail | |
| **2. Quarantine of suspect travellers** | | | | |
| **2.1 Designation of facilities**<br>Administrative arrangements and a written, formal agreement, such as an MoU, are in place with local and/or nearby hospitals, clinics, health services, or other facilities to receive suspect travellers from the point of entry for quarantine and other support services (preferably away from the point of entry).<br>- this agreement should describe the potential nature of the risk (e.g. infectious disease, other sources of contamination) and the responsibilities of each signatory<br>- reference source, date and expiry of the agreement<br>- facilities and type of support and logistics services covered<br>- competent /qualified personnel for quarantine of suspected travellers, assigned to these duties<br>-access to laboratory facilities<br>- access to necessary equipment, supplies and personal protective equipment (e.g. PPE)<br>- procedures in place for routine written reports of traveller transfer, follow up care and results of laboratory analysis.<br>Arrangements for translation and interpreters where needed. | ■ Full<br>□ Partial<br>□ None<br><br>There's a contract with a referral hospital already and seems enough at present. However, it seems necessary to reconsider the spare alternatives in the case of huge amount of travelers. | 1. *Taiwan Centers for Disease Control* signs contracts annually with designated hospitals (*Kaohsiung Municipal Hsiaokang Hospital* and *Kaohsiung Municipal Min-Sheng Hospital*) for the evaluation and treatment of suspected infectious passengers.<br><br>2. *Kaohsiung Customs* notifies and requests *Radiation Detection Center of Atomic Energy Council* to help in dealing with contaminated people in radiation accidents.<br><br>3. When there are public health events, staff of *Kaohsiung Harbor Fire Brigade* will transport affected travelers to the nearest hospitals or designated hospitals for further management.<br><br>4. There are three designated hospitals for the management of patients that are affected by radiation accidents, and eight ones for patients that are affected by toxic chemical leakage, or explosive accidents. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Map<br><br>*Taiwan Centers for Disease Control*<br>Legislation/Protocol<br>Contract/ List<br>Record<br><br>*Kaohsiung Harbor Fire Brigade*<br>Flowchart/ List | ■ Full<br>□ Partial<br>□ None<br><br>Arrangements are in place with local area health facilities for the assessment and care of ill travellers.<br><br>Taiwan CDC staff have developed SOPs and protocols relating to management of ill travellers. |
| **2.2 Staff**<br>Appropriate number of trained personnel at the quarantine facility to recognise disease symptoms and who are familiar with procedures and measures for suspect travellers. | ■ Full<br>□ Partial<br>□ None | 1. *Taiwan Centers for Disease Control* has adequate number of trained personnel to implement quarantine-related affairs and allocate manpower if necessary.<br><br>2. *TCDC* quarantine officers receive training as needed. In addition, they all are licensed | *Taiwan Centers for Disease Control*<br>Legislation/ Protocols<br>Duty List/ List<br>Website | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| | | in health-related fields and their licenses are updated regularly. | | |
| **(e) to apply recommended measures to disinsect, derat, disinfect, decontaminate or otherwise treat baggage, cargo, containers, conveyances, goods or postal parcels including, where appropriate, at locations specially designated and equipped for this purpose.** | | | | |
| **1. Location for application of recommended measures**<br>Depending on the movement of baggage, cargo, containers, conveyances, goods and postal parcels, a specially equipped location should be designated for<br>- disinsecting<br>- deratting<br>- disinfecting<br>- decontaminating<br>The location should be properly designated to avoid possible injury /discomfort/harm to persons and damage to the environment. Factos such as wind direction and distance to human habitats should be taken into consideration. | ■ Full<br>□ Partial<br>□ None | Depending on the severity and type of the public health events, authorities in *Kaohsiung Port* take different control measures. In mild circumstances, the control measures are instituted on the dock. For severe public health events, the ship has to dock at a designated anchor or buoy for deratting, disinfecting, decontaminating, and so on, in order to avoid further damage to persons and the environment. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Map | ■ Full<br>□ Partial<br>□ None |
| **2. Standard operating procedures**<br>Documented, updated and tested standard operational procedures are in place. | ■ Full<br>□ Partial<br>□ None | When there are public health concerns, *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.* conducts emergency report according to the *Disaster Mitigation and Prevention Plan* that is set up by *PoK, TIPC, Ltd.*<br><br>According to the type of emergency and the statutory duties, authorities in *Kaohsiung Port* including *Bureau of Animal and Plant Health Inspection and Quarantine, Kaohsiung Customs* and *Food and Drug Administration* have the SOPs of disinfection and decontamination and they update the SOPs regularly. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Protocol<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>SOPs *Food and Drug*<br><br>*Administration*<br>SOP<br><br>*Kaohsiung Customs*<br>Legislation/ Guidance<br>Protocol/ SOP (about *Megaports Initiative*) | ■ Full<br>□ Partial<br>□ None<br><br>Taiwan CDC has SOPs and protocols in place for application of recommended measures; and staff undertake regular training. |
| **3. Trained staff**<br>Appropriate number of trained personnel | ■ Full<br>□ Partial | When there are public health events, authorities including *Port of Kaohsiung,* | *Port of Kaohsiung, Taiwan International Ports Corporation,* | ■ Full<br>□ Partial |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| available to apply health measures according to technical requirements, adequately and in a timely manner. | □ None | *Taiwan International Ports Corporation, Ltd*, *Bureau of Animal and Plant Health Inspection and Quarantine*, *Kaohsiung Customs*, and *Food and Drug Administration* all have sufficient trained personnel to inform the relevant authorities and take control measures according to types of emergency events and technical requirements. | *Ltd.*<br>Protocol<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>Certificate<br><br>*Food and Drug Administration*<br>Training<br><br>*Kaohsiung Customs*<br>List/ Report | □ None |
| **4. Personal protective equipment**<br>Equipment available and staff trained in application of personal protective equipment. | | 1. *Bureau of Animal and Plant Health Inspection and Quarantine*, *Kaohsiung Customs* and *Food and Drug Administration* have adequate amounts of personal protective equipments that are maintained regularly.<br><br>2. The radiation detection operators of *Kaohsiung Customs* wear a personal radiation detector (PRD) according to the guidance to detect radiation materials.<br><br>3. The staff of authorities in *Kaohsiung Port* receives training program in application of personal protective equipment from time to time. | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Protocol/Flowcharts<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>SOP<br><br>*Food and Drug Administration*<br>Guidance<br><br>*Kaohsiung Customs*<br>Protocol | ■ Full<br>□ Partial<br>□ None |
| **(f) to apply entry or exit controls for arriving and departing travellers** | | | | |
| **1. Entry or exit controls for travellers** | | | | |
| A formal plan in place to apply entry exit controls at point of entry, if and when recommended, to enable a risk assessment of the individual traveller to be made during evens that may constitute a public health emergency of international concern. The plan should have:<br>- an identified staff/committee to make, | ■ Full<br>□ Partial<br>□ None<br><br>TCDC has a reporting database with the linkage | 1. Under the statutory obligations of commercial port, *TIPC, Ltd.* has established a plan for the "*Disaster Mitigation and Prevention Plan*" for reporting and implementation of control measures". Authorities in *Kaohsiung Port* identify the health risks and take control measures | *Port of Kaohsiung, Taiwan International Ports Corporation, Ltd.*<br>Legislations/ Protocol<br>Drills<br><br>*Taiwan Centers for Disease* | ■ Full<br>□ Partial<br>□ None<br><br>PoK has a Disaster Mitigation and Prevention Program, and other |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| coordinate and implement key decisions on entry/exit controls at point of entry<br>- a communication procedure for sharing/disseminating information to the public and travellers regarding entry/exit controls during a public health emergency<br>- a toolbox of methods for screening, including visual inspection, questionnaire / health declaration forms and temperature measurement (using thermal scanners or other suitable methods)<br>- operational standard procedures<br>- training/briefing/drills to orient staff, including public health, airlines, travel agents, security, customs and other, on additional responsibilities in carrying out entry exit control<br>- reliable equipment calibrated and maintained in accordance with the manufacturer's recommendations<br>- personnel trained in procedures and use of equipment and in the interpretation of recordings<br>- a system to incorporate the results of exit screening at airports with the national surveillance and reporting system for outbreaks of a specified illness<br>- logistics, especially baggage, security and customs formalities for travellers arriving from and to abroad for suspected cases and asymptomatic contacts. | of immigration information system for exit control. | according to the stator duties; in addition, they routinely conduct personnel's training and drills.<br><br>2. When there are public health events, authorities in *Kaohsiung Port* can communicate and coordinate through "*Kaoshsiung International Port Health Security Group*" for further control measures.<br><br>3. Under the statutory obligations, *Taiwan Centers for Disease Control*'s officers have SOP to conduct travellers quarantine, including visual inspection, health declaration forms and temperature measurement using thermal scanners, and ships sanitation inspection, and to inform other authorities in *Kaohsiung Port* to take control measures if there are specified illnesses and outbreaks detected through surveillance systems.<br><br>4. *National Immigration Agency* has established a "*The entry and exit inspection system*" that can mark arriving and departing travelers, suspected cases , or asymptomatic contacts for further application of entry or exit controls at every point of entry in Taiwan. | *Control*<br>Legislations/ Protocols<br>Duty List/ Website<br>Application Form<br><br>*Bureau of Animal and Plant Health Inspection and Quarantine*<br>SOP/ Legislations<br><br>*National Immigration Agency*<br>Website/SOPs<br>Contact Detail | emergency management protocols, to enable risk assessment and management of travellers. |
| **(g) to provide access to specially designated equipment and to trained personnel using appropriate personal protection, for the transfer of travellers who may carry infection or contamination** | | | | |
| **1. Provide access to special equipment** | | | | |
| Arrangements are in place for transporting suspect travellers to appropriate medical or quarantine facilities by safe, hygienic means of transport. Transport services should have in | ■ Full<br>□ Partial<br>□ None | The ambulances of *Kaohsiung Harbor Fire Brigade* have a number of equipment for first-aid and personal protection for transporting suspected travelers. After the | *Kaohsiung Harbor Fire Brigade*<br>Legislations/ Record | ■ Full<br>□ Partial<br>□ None |

| Core Capacities<br>Measure of Compliance | State of implementation according to Dr K Taniguchi in August 2011 | Description of Current Status<br>Updated to 15th Feb, 2013 | Proof of Document to the Description<br>Updated to 15th Feb, 2013 | Border Health assessment and comments |
|---|---|---|---|---|
| place cleaning/disinfection equipment and supplies and personal protective equipment for transport staff. | | duty, paramedics routinely carry out the disinfection of the equipment and the vehicle, and the cleaning record is documented. | | Staff demonstrated use of specialist equipment to ensure safe transport of ill travellers to local medical facilities. |
| **2. Personnel to transport suspect travellers** | | | | |
| 2.1 Appropriate number of trained personnel available to transport suspect travellers according to technical requirements, adequately and in a timely manner. | ■ Full<br>□ Partial<br>□ None | The paramedics of *Kaohsiung Harbor Fire Brigade* are trained and qualified with a qualified license. When the number of injured patients is high, *Kaohsiung Harbor Fire Brigade* asks *Fire Bureau of Kaohsiung City Government* for support the rescue. | *Kaohsiung Harbor Fire Brigade*<br>Legislation/ Agreement | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated comprehensive knowledge of management of ill travellers, including transport to local medical facilities. |
| 2.2 Personnel trained in application of personal protective equipment and disinfection techniques, as applicable. | ■ Full<br>□ Partial<br>□ None | 1. The paramedic training of *Kaohsiung Harbor Fire Brigade* includes operation and application of devices in ambulance and personal protective equipment (PPE) and the disinfection of ambulance equipment staff and vehicle after the duties.<br><br>2. *Kaohsiung Harbor Fire Brigade* has an ambulance with negative pressure for isolating and transporting patients with suspected specific infectious diseases, and the paramedics have been trained for the application of this ambulance. | *Kaohsiung Harbor Fire Brigade*<br>Training | ■ Full<br>□ Partial<br>□ None<br><br>Staff demonstrated comprehensive knowledge of the use of PPE. |
| 2.3 Personnel trained in the use of key information regarding hospitals/clinics/ diagnostic facilities related to the point of entry. | ■ Full<br>□ Partial<br>□ None | Paramedics of *Kaohsiung Harbor Fire Brigade* have been trained to transport the patients to the designated hospitals or nearest hospitals according to the guidance. | *Kaohsiung Harbor Fire Brigade*<br>Maps/ Flowchart | ■ Full<br>□ Partial<br>□ None |