Calls on member states and WHO to strengthen national emergency mitigation, preparedness, response and recovery programmes...

Calls on member states and WHO to assess, establish and monitor integrated prehospital and facility-based emergency care systems...

Calls on member states and WHO to ensure the resilience and self-reliance of the health system, which is critical for minimizing health hazards and vulnerabilities and delivering effective response and recovery in emergencies and disasters...
FIFTY-NINTH WORLD HEALTH ASSEMBLY

Agenda item

Emergency preparedness and response

27 May 2006

SIXTIETH WORLD HEALTH ASSEMBLY

Agenda item 12.14

Health systems: emergency-care systems

23 May 2007

128th Session

Agenda item 4.5

Strengthening national health emergency and disaster management capacities and resilience of health systems

22 January 2011

SIXTY-EIGHTH WORLD HEALTH ASSEMBLY

Agenda item 17.1

Strengthening emergency and essential surgical care and anaesthesia as a component of universal health coverage

26 May 2015
EMERGENCY CARE SYSTEM FRAMEWORK

All around the world, acutely ill and injured people seek care every day. Frontline providers manage children and adults with injuries and infections, heart attacks and strokes, asthma and acute complications of pregnancy. An integrated approach to early recognition and management reduces the impact of all of these conditions. Emergency care could address over half of the deaths in low- and middle-income countries.

SCENE
- Bystander Response
- Dispatch
- Provider Response

TRANSPORT
- Patient Transport
- Transport Care

FACILITY
- Reception
- Emergency Unit Care
- Disposition
- Early Inpatient Care

www.who.int/emergency-care
Event
Emergency, Trauma and Acute Care
Department for Management of NCDs, Disability, Violence and Injury Prevention
Emergency, Trauma and Acute Care
Department for Management of NCDs, Disability, Violence and Injury Prevention

Facility-based care

(Surgical programme)

- Assessment
- Resuscitation
- Intervention
- Monitoring

ALLIED HEALTH WORKER
EMERGENCY CARE SYSTEM FRAMEWORK

All around the world, acutely ill and injured people seek care every day. Frontline providers manage children and adults with injuries and infections, heart attacks and strokes, asthma and acute complications of pregnancy. An integrated approach to early recognition and management reduces the impact of all of these conditions. Emergency care could address over half of the deaths in low- and middle-income countries.
Emergency Medical Teams Initiative

Dr. Ian Norton, WHO
EMT’s are groups of health professionals providing direct clinical care to populations affected by disasters or outbreaks and emergencies as surge capacity to support the local health system.

Medical equipment and devices for field response by emergency medical teams is specialized and rapidly evolving.
Portability and Self Sufficiency
Storage and rapid deployment
All-hazards
WHO Essential Resources for Emergency Care (EREC)

- Create a list of candidate resources for basic care of acute conditions
- Serve as a foundation for both everyday emergency care and emergency response
- Allow for rapid restoration and maintenance of basic emergency care
ERECC: Process

1 2 3

4

Emergency, Trauma and Acute Care
Department for Management of NCDs, Disability, Violence and Injury Prevention
Emergency and trauma care

Emergency care

All around the world, acutely ill and injured people seek care every day. Frontline providers manage children and adults with medical, surgical and obstetric emergencies, including injuries and infections, heart attacks and strokes, asthma and acute complications of pregnancy. Prioritising an integrated approach to early recognition and resuscitation reduces the impact of all of these conditions.

WHO’s Emergency, Trauma and Acute Care programme is dedicated to strengthening the emergency care systems that serve as the first point of contact with the health system for so much of the world, and to supporting the development of quality, timely emergency care accessible to all.

Learn more about emergency care systems

https://extranet.who.int/emt/
## ECS Framework

<table>
<thead>
<tr>
<th>Scene</th>
<th>Bystander Response</th>
<th>System Activation</th>
<th>Bystander +/- community-based training (including first aid, education on system activation and care-seeking behaviour)</th>
<th>Universal access number or activation system; centralized call processing</th>
<th>Legislative mandate for universal activation of system; legislation regarding telephone company responsibility for UAN calls</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Bystander Care</td>
<td>Patient protection at scene Limited assistance for immediate threats</td>
<td>Basic lay provider kit of local materials</td>
<td>Laws on theft/assault of the injured. Training accreditation for lay providers, Bystander protection (Good Samaritan Laws)</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Dispatch</td>
<td>Instructions to Bystanders</td>
<td>Information to aid patient</td>
<td>Dispatch operator</td>
<td>Communication technologies, including a form of centralized call processing; system should be redundant by design</td>
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</tr>
<tr>
<td></td>
<td>Dispatch of Personnel</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Provider Response</td>
<td>Scene Control</td>
<td>Patient and provider scene safety</td>
<td>Providers may include formally trained lay responders (e.g. EFAR, police); professional responders (e.g. EMT, paramedic, nurse, doctor)</td>
<td>Screening surveillance</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Scene Care</td>
<td>Initial assessment Initial resuscitation and stabilisation Packaging of patient Preliminary diagnoses</td>
<td>Basic provider kit</td>
<td></td>
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<tr>
<td></td>
<td>Field to Facility Communication</td>
<td>Field and facility based providers, technical experts</td>
<td></td>
<td>Communication structure in field unit and receiving facility</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Destination Triage</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**WHO Emergency Care Systems Framework**

[emergencycare@who.int](mailto:emergencycare@who.int)
## ECS Framework

<table>
<thead>
<tr>
<th>Site</th>
<th>Primary Function</th>
<th>Function Component</th>
<th>Detailed Activities</th>
<th>WHO Health System Building Blocks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td><strong>Human Resources and Training</strong></td>
</tr>
</tbody>
</table>

### Transfer

<table>
<thead>
<tr>
<th>Site</th>
<th>Primary Function</th>
<th>Function Component</th>
<th>Detailed Activities</th>
<th>WHO Health System Building Blocks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Transport</td>
<td></td>
<td>Transport patient</td>
<td>Driver, technical fleet director</td>
<td>Vehicle (with ambulance functionality, space to give care)</td>
</tr>
<tr>
<td>Transport Care</td>
<td></td>
<td>Positioning (airway and injury protection)</td>
<td>Provider</td>
<td>Transport care kit</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Monitoring Intervention (ABCD, OB delivery, pain control)</td>
<td></td>
<td>Minimum standards for transport care</td>
</tr>
</tbody>
</table>

### Facility

<table>
<thead>
<tr>
<th>Site</th>
<th>Primary Function</th>
<th>Function Component</th>
<th>Detailed Activities</th>
<th>WHO Health System Building Blocks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reception</td>
<td></td>
<td>Registration</td>
<td>Clerical staff</td>
<td>Information system</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Screening</td>
<td></td>
<td>Case definitions, screening criteria</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Triage</td>
<td>Administrative or provider</td>
<td>Basic evaluation kit</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Handover</td>
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</tbody>
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World Health Organization