

# Strategic directions to integrate emergency care services into primary health care in the South-East Asia Region

Originally developed during Expert Group meeting on  
"Regional Strategy to integrate Emergency and Trauma Care into Primary Health Care (PHC) in SEAR",  
23–25 August 2018, Bangkok, Thailand

Revised by the Expert Group at its virtual meetings held on 7 May 2020 and 27 May 2020



REGIONAL OFFICE FOR

**World Health  
Organization**  
**South-East Asia**



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(The first Expert Group meeting was held from 23–25 August 2018 at Thai Health Premises, Bangkok, Thailand. Subsequently, on 7 May 2020 and 27 May 2020, virtual meetings were held with the experts to revise strategic directions, during which a small group worked to collate the recommendations and produce the revised draft.)

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## Foreword

Emergency care systems (ECS) are an essential part of health service delivery. Well-designed emergency care facilitates the timely recognition, treatment and, when needed, continued treatment of acutely ill people at the appropriate level of the health system. Though most primary care initiatives are characterized by a focus on longitudinal and preventive care, many people seek care only when acutely ill or injured, especially where there are logistical or financial barriers to accessing health care. Frontline providers manage children and adults with a wide range of emergency conditions, including acute injuries, infections, complications of pregnancy and exacerbations of noncommunicable diseases.



In 2019 the Seventy-second World Health Assembly recognized that many proven health interventions are time dependent and that an integrated ECS provides an effective platform for the delivery of accessible, quality and time-sensitive healthcare services for acute illnesses and injury throughout the life-course. The provision of integrated ECS will help achieve Sustainable Development Goal 3 and reduce health inequalities by ensuring access for all people to well organized, safe and high-quality ECS.

All people in the WHO South East Asia Region must have access to evidence-based, timely, life-saving, free-of-cost emergency care. This document, which is primarily the result of a WHO-convened meeting of global and regional experts, senior government officials and WHO collaborating centres, provides Member States strategic guidance on how to integrate ECS into existing primary health care structures. The strategic directions contained herein aim to convert fragmented emergency care into care that is integrated into primary level services and, where appropriate, at secondary and tertiary levels.

The COVID-19 pandemic has exposed the challenges that Member States face with regard to ECS and deficiencies in emergency preparedness. To help overcome such challenges, this document identifies and addresses key weaknesses that the outbreak has revealed and incorporates additional recommendations made by the virtual meeting of experts, held in May 2020. The document outlines how the implementation of quality ECS can strengthen the COVID-19 response and enhance preparedness for other global or local disasters in future.

I urge all stakeholders to make full use of this resource to achieve a Region in which quality ECS are accessible to all and in which health systems more efficiently coordinate emergency care at all levels. By strengthening ECS, countries will have greater capacity to respond effectively to day-to-day emergencies and will be better prepared to prevent and mitigate the impact of acute public health events from all hazards.

Together we must act.

A handwritten signature in black ink, appearing to read 'P. Khetrpal'.

**Dr Poonam Khetrpal Singh**  
Regional Director  
WHO South-East Asia Region

## Disclaimer and acknowledgements

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The role and contribution of the WHO Collaborating Centre for Emergency and Trauma Care in South-East Asia, at the Department of Emergency Medicine, JPN Apex Trauma Centre of the All India Institute of Medical Sciences (AIIMS) in New Delhi, in conducting, coordinating and providing the expertise for the meeting is gratefully acknowledged. The role of Thai Health Promotion Foundation, Bangkok, Thailand, in providing the logistical support to the Expert Group Meeting on the Regional Strategy to Integrate Emergency and Trauma Care into Primary Health Care in the SEA Region, in Bangkok in 2018, is also acknowledged.

Dr Sanjeev Bhoi, Head of the WHO Collaborating Centre for Emergency & Trauma Care, AIIMS, New Delhi, Dr Tej Prakash Sinha, Associate Professor at the Department of Emergency Medicine of AIIMS, and Dr Vivek Chauhan, Assistant Professor for Medicine, Indira Gandhi Medical College, Shimla, formed the core writing and coordination team.

The production of the publication was coordinated for WHO by Dr Patanjali Dev Nayar, Regional Adviser, Disability & Injury Prevention and Rehabilitation, under the overall guidance of Dr Thamarangsi Thaksaphon, Director of the Department of Healthier Populations and Noncommunicable Diseases, at the WHO Regional Office for South-East Asia.

Several experts participated in the meeting and contributed actively to its results. They include: Dr Teri Reynolds, Dr Sagar Galwankar, Dr Witaya Chandbunchachai, Dr S. Rajesh, Dr Tanu Jain, Dr Somprasong Tongmeesee, Dr Chanchai Janworachai, Dr Veerasak Ponpudtha, Dr AKM Fazlur Rahman, Dr Buland Thapa, Dr Rakesh Kumar Srivastava, Dr Bobby John, Dr Samiddhi Samarakoon, Dr Aruna Munasinghe, Ms Oratai Pochaisan, Mrs Thanyarasami Piyawatchwela, Dr Seathapong Thanoorat, Ms Kwannak Kulleab, Ms Eaung Kaewwilai, Ms Watchara Poomiprabu and Ms Watchara Sriharat. The agenda for the first expert group meeting is provided as Annex -1, and list of participants for all the three meetings are provided as Annexes 2,3, & 4.

预览已结束，完整报告链

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