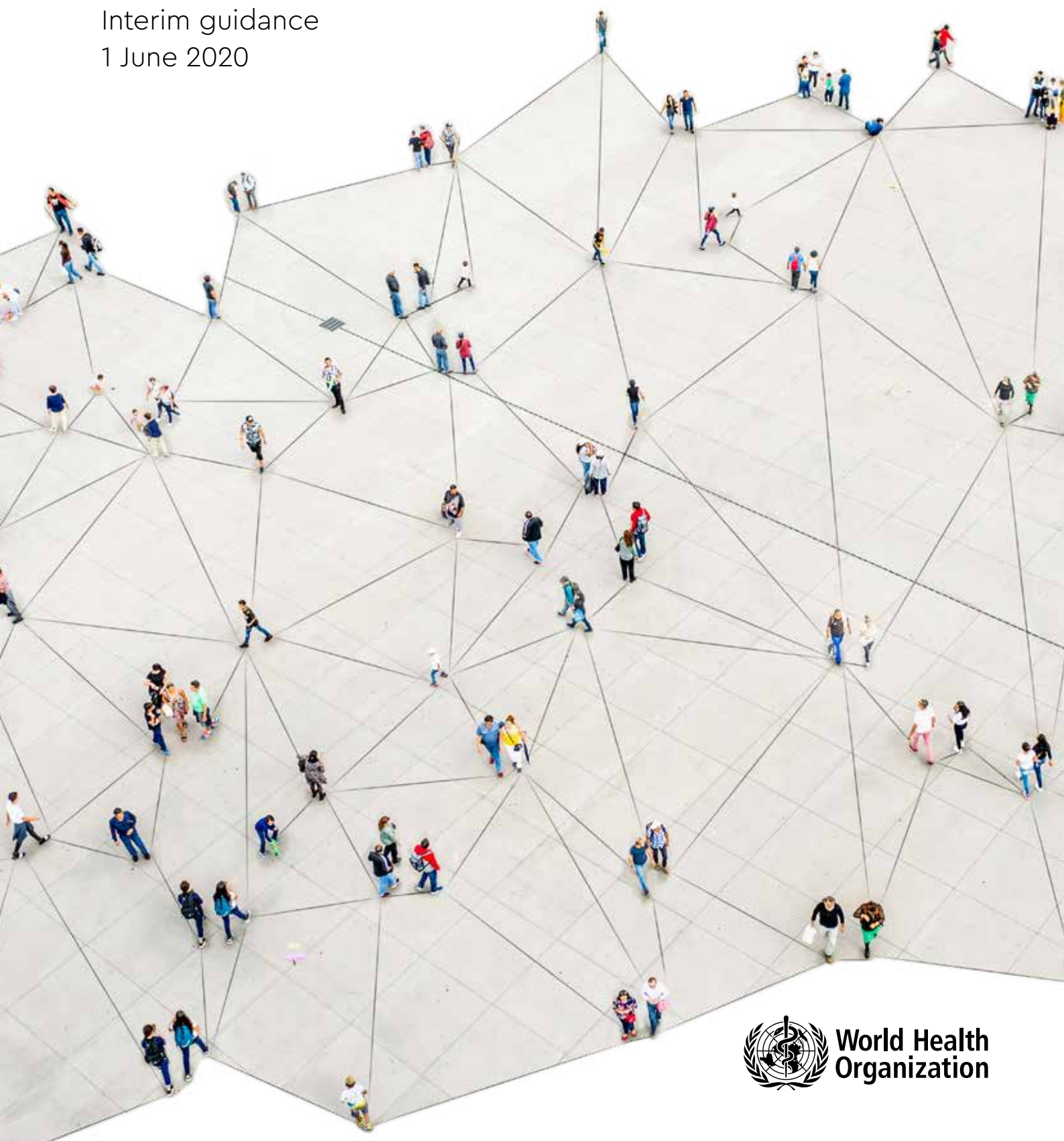


# Maintaining essential health services: operational guidance for the COVID-19 context

Interim guidance  
1 June 2020



World Health  
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## Part 1. Operational strategies for maintaining essential health services





## 1.1 Overview

Health systems around the world are being challenged by increasing demand for care of people with COVID-19, compounded by fear, stigma, misinformation and limitations on movement that disrupt the delivery of health care for all conditions. When health systems are overwhelmed and people fail to access needed care, both direct mortality from an outbreak and indirect mortality from preventable and treatable conditions increase dramatically (1, 2, 3). Maintaining population trust in the capacity of the health system to safely meet essential needs and to control infection risk in health facilities is key to ensuring appropriate care-seeking behaviour and adherence to public health advice.

Any system's ability to maintain the delivery of essential health services will depend on its baseline burden of disease, the local COVID-19 transmission scenario (classified as no cases, sporadic, clusters or community transmission) and the health system capacity as the pandemic evolves (4). Recent investments in primary health care for universal health coverage provide a critical foundation for adapting to the pandemic context. A well organized and prepared health system has the capacity to maintain equitable access to high-quality essential health services throughout an emergency, limiting direct mortality and avoiding indirect mortality.

In the early phases of the COVID-19 outbreak, many health systems have been able to maintain routine service delivery in addition to managing a relatively limited COVID-19 case-load. As demands on systems have surged and health workers themselves have increasingly been affected by COVID-19 infection and the indirect consequences of the pandemic, strategic adaptations have become urgent to ensure that limited public and private sector resources provide the maximum benefit for populations.

Countries are making difficult decisions to balance the demands of responding directly to the COVID-19 pandemic with the need to maintain the delivery of other essential health services. Establishing safe and effective patient flow (including screening for COVID-19, triage and targeted referral) remains critical at all levels. Many routine and elective services have been suspended, and existing delivery approaches are being adapted to the evolving pandemic context as the risk-benefit analysis for any given activity changes. When the delivery of essential health services comes under threat, effective governance and coordination mechanisms, and protocols for service prioritisation and adaptation, can mitigate the risk of outright system failure.

As the outbreak is brought under control and restrictive public health measures are gradually eased, some adaptations in service delivery may need to be reversed, others continued for a limited time, and yet others that are found to be effective, safe and beneficial can be incorporated into routine post-pandemic practice. The course of the outbreak is likely to wax and wane, and the strategic response will need to be dynamic and calibrated. Decision-makers should anticipate the need to start, stop and restart adaptations. Decisions should be aligned with relevant national and subnational policies and should be re-evaluated at regular intervals.

Successful implementation of these strategic shifts will require the active engagement of communities and public and private stakeholders, specific measures to ensure access for socially vulnerable populations, transparency and frequent communication with the public and a high degree of cooperation from individuals.

All adaptations should be made in accordance with ethical principles, such as equity in the allocation of resources and access, self-determination, non-abandonment, and respect for dignity and human rights (5). Overall, the failure to protect vulnerable groups subjects them to higher risk and undermines the COVID-19 response and broader public health goals. In all cases, infection prevention and control (IPC) measures should be strictly followed based on up-to-date guidance (6) and relevant policies.

This document expands on the content of the essential health services and systems pillar of the *COVID-19 strategic preparedness and response plan: operational planning guidelines to support country preparedness and response* (4), supersedes the earlier *Operational guidance for maintaining essential health services during an outbreak* (7), and complements the recently released *Community-based health care, including outreach and campaigns, in the context of the COVID-19 pandemic* (8). It supports country implementation of targeted actions at the national, subnational and local levels to reorganize and maintain access to safe and high-quality essential health services. It outlines the adaptations needed to keep people safe and maintain continuity of essential health services during the response to the COVID-19 pandemic. It is intended for decision-makers and managers at the national and subnational levels.

Part 1 outlines basic principles and practical recommendations that support decision-making to ensure the continuity of select essential health services, highlighting key actions that countries should consider.

Part 2 contains brief sections addressing specific adaptations and considerations for life course and disease programmes in the context of COVID-19. These sections are intended to be used in conjunction with — and do not replace — existing WHO programme guidance in these areas.

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