EVD Webinar

Continuity of Essential Health Services in Emergencies

Health Systems Strengthening Cluster – WHO

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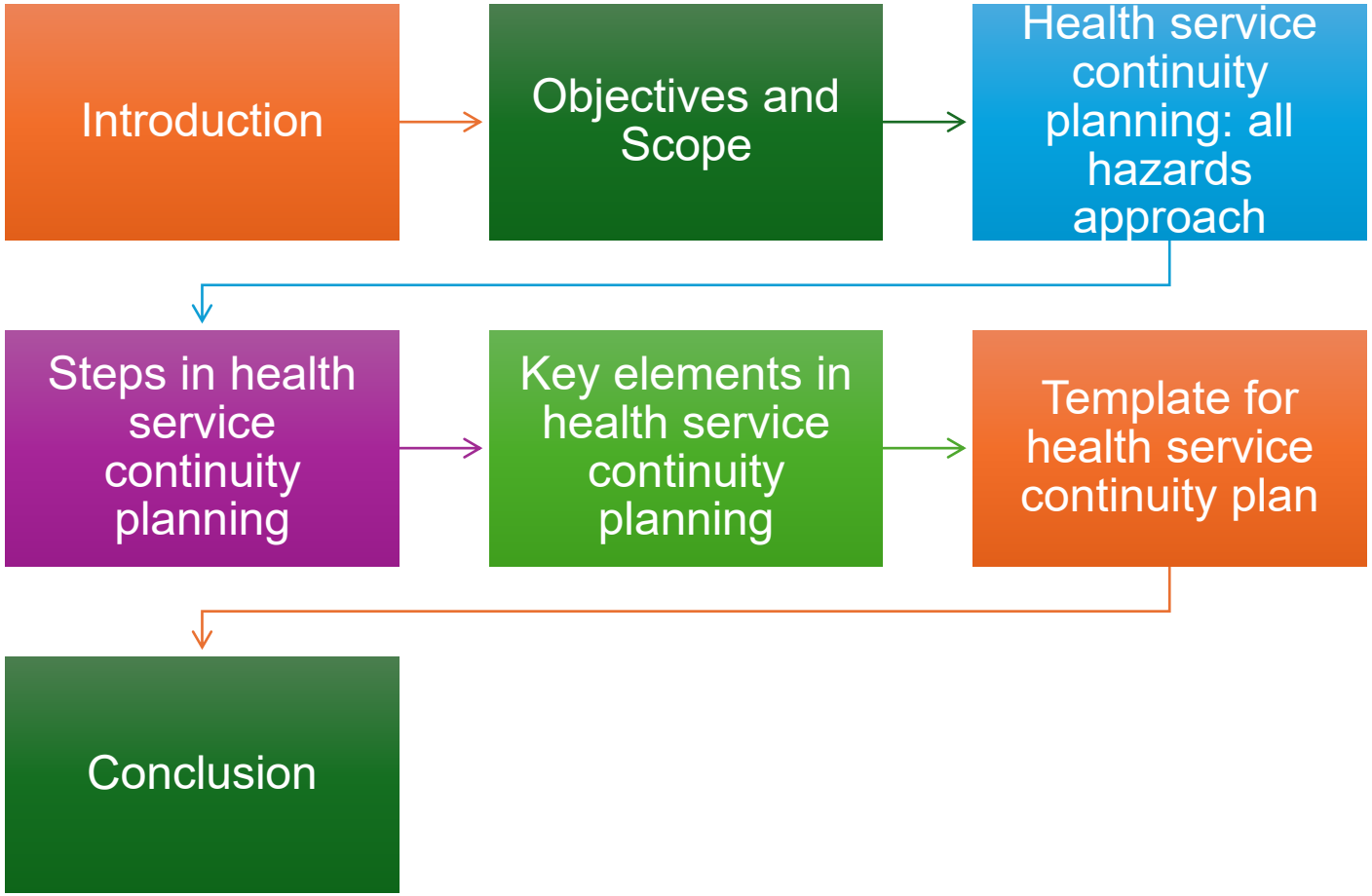
Outline



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Introduction (1)

Public health emergencies disrupt routine health services due to increased demand, staff shortages, supply diversion, and facility damage.

Continuity of essential health services is critical for health security and universal health coverage.

Disruptions lead to increased morbidity, mortality, and secondary emergencies.

Service continuity planning identifies critical functions and ensures their maintenance during crises.

Plans must be documented (e.g., business continuity plans) and detail actions, roles, and timing.

Many institutions have emergency plans, but continuity planning remains a gap.

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Introduction (2)

Continuity plans complement emergency response plans by focusing on routine service maintenance.

Health facilities play a key role across prevention, preparedness, response, and recovery.

Planning enhances stakeholder coordination, surge capacity, and service utilization.

Plans should be aligned with national strategies and integrated into broader health system resilience efforts.

Service continuity planning is a process, not just a document.

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Objective and Scope

- The handbook addresses the lack of facility-level guidance for health service continuity during public health emergencies.
- It provides step-by-step instructions and a planning template to help health facilities develop continuity plans.
- The guidance is applicable to all types of emergencies, promoting a proactive and preparedness-based approach.
- Target users include health facilities, managers, workers, and authorities responsible for emergency and continuity planning.
- It supports users in raising awareness, reviewing existing plans, and developing new service continuity strategies.

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Health service continuity planning: all hazards approach (1)

Promoted by IHR (2005) and Sendai Framework (2015–2030) for integrated emergency management.

Focuses on critical capacities across a wide range of emergencies and disasters.

WHO guidance recommends all-hazards approach for business continuity and contingency planning.

Applied at national, subnational, and health facility levels.

Requires risk assessment to identify, stratify, and prioritize potential hazards.

Planning is based on worst-case scenarios and evidenc e-based assumptions.

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Health service continuity planning: all hazards approach (2)

Encourages consultation with experts and realistic resource planning.

Supports a unified, flexible plan adaptable to specific hazards.

Avoids siloed planning; integrates hazard-specific guidance where needed.

Prioritizes high-risk hazards based on local assessments.

Enhances cost-effectiveness and efficiency in emergency planning.

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Steps in health service continuity planning

1 Form a collaborative planning team.

2 Conduct risk assessment and prioritize risks.

3 Determine overall objectives and operational priorities.

4 Conduct capacity assessment.

5 Develop the service continuity plan.

6 Test and update the plan.

7 Implement the plan and monitor implementation.

8 Conduct post-event review and update/improve the plan.

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Key elements in health service continuity planning (1)

1. Governance & Coordination

- Clear communication and coordination structures (e.g. Incident Management Systems)
- Defined roles for all stakeholders
- Partnerships with private sector, military, and non-health actors

2. Information Management

- Internal & external data sharing protocols
- IT systems and data tools for decision-making
- Coordination with local authorities and partners

3. Human Resources

- Staffing needs and surge capacity planning
- Staff safety, training, and mental health support
- Engagement with private and military health sectors

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Key elements in health service continuity planning (2)

4. Medical Supplies & Equipment

- Ensure availability of essential medicines and equipment
- Strengthen supply chains and stockpiling strategies

5. Infrastructure & Amenities

- Safe spaces for service delivery (e.g. triage, isolation)
- Alternative care sites if needed
- Ensure utilities: water, electricity, sanitation, waste management

6. Administration, Finance & Logistics

- Emergency budgeting and financial access
- Logistics for transport, supplies, and operations continuity

7. Risk Communication & Community Engagement

- Real-time, transparent communication
- Community involvement in planning and response
- Tailored messaging for vulnerable populations

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Key elements in health service continuity planning (3)

8. Prioritized Essential Health Services

- Identify and maintain critical services during emergencies
- Use national guidelines to reprioritize routine services
- Ensure quality and clear referral pathways

9. Adaptations for Vulnerable Populations

- Address needs of high-risk groups (e.g. elderly, displaced, uninsured)
- Tailor services to overcome access barriers

10. Safety and Security

- Ensure safety of staff, patients, and infrastructure
- Implement infection control, medication safety, and facility protection

11. Monitoring and Evaluation

- Develop M&E framework with indicators before implementation
- Use existing data systems to track progress and inform decisions

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Template for health service continuity plan (1)

Section A: Situation Analysis

- Facility Profile: Services, location, population served; emergency organigram and linkages.
- Risk Assessment: Identify critical risks, hazards, vulnerabilities, and resource gaps using national/subnational registers.

Section B: Planning Essentials

- Assumptions: Worst-case scenarios to guide planning.
- Objectives & Priorities:
  - Maintain essential services.
  - Relocate or suspend non-critical services.
- Supporting Functions & Personnel:
  - Identify essential operations (e.g. logistics, communication).
  - Designate key staff and funding sources.

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Template for health service continuity plan (2)

Section C: Emergency Operations

- Activation & Deactivation: Define triggers and responsible persons.
- Response Activities: SOPs for governance, HR, infrastructure, security.
- Roles & Responsibilities: Assign staff, partners, and surge capacity.

Section D & E: Evaluation & Monitoring

- Post-Emergency Review: Update plan based on lessons learned.
- Monitoring & Evaluation:
  - KPIs to track effectiveness.
  - Methods for data collection and decision-making.

Template can be downloaded through the link https://cdn-auth-cms.who.int/media/docs/default-source/integrated-health-services-(ihs)/hsr/health-service-continuity-guide/template-for-health-service

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Conclusion

Health systems are often overwhelmed during public health emergencies due to limited preparedness.

Continuity planning is essential to maintain routine health services during crises.

Emergency management in health facilities must include flexible, all-hazard service continuity plans.

Such planning strengthens health system resilience across all stages of emergencies.

The WHO handbook supports health workers in developing and applying these continuity plans effectively.

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