

# Critical preparedness, readiness and response actions for COVID-19

Interim guidance

4 November 2020



## Key points

- Countries should continue to take all necessary measures to slow further spread of COVID-19, to prevent infections, especially in people vulnerable to severe disease or death, and avoid having their health systems overwhelmed.
- There are four community transmission scenarios for COVID-19: no cases, sporadic cases, clusters of cases and community transmission. The community transmission scenario is the most intense and has four sub-categories. Countries should assess the transmission scenario at sub-national levels.
- Countries should prepare to respond to all transmission scenarios.
- Prioritization of resources for each technical area will depend on which transmission scenario(s) a country is managing and the response capacity.
- There is still much to understand about COVID-19 and its impact in different contexts. Preparedness, readiness and response actions will continue to be driven by rapidly accumulating scientific and public health knowledge.

## Introduction

This document is an update to the interim guidance entitled 'Critical preparedness, readiness and response actions for COVID-19', published on 22 March 2020 and last updated on 24 June 2020. This version provides further sub-classifications of transmission scenarios within the community transmission category; and updated guidance on contact tracing, laboratory testing, infection prevention and control, public health and social measures and health services. The full list of WHO technical guidances available for COVID-19 has also been updated.

## Background

During the past nine months, the scientific knowledge on SARS-CoV-2 (the virus that causes COVID-19), how it spreads, and the public health, economic and social impacts of the COVID-19 pandemic have continued to evolve. Many countries continue to demonstrate that SARS-CoV-2 transmission can be controlled. These actions have saved

lives and provided countries with more time to enhance emergency response systems; to increase capacity to detect and care for patients; to ensure hospitals have the necessary staff, supplies, structure and system; and to develop life-saving medical interventions and preventive measures.

This document outlines critical preparedness, readiness and response actions that are necessary, depending on the SARS-CoV-2 transmission scenario. Where possible, the transmission scenario should be assessed at the lowest administrative level (e.g., province, state, district, community) within each country.

Countries should continue to take all necessary measures to slow further spread, to avoid having their health systems overwhelmed and to prevent infections, especially among elderly persons and those with co-morbidities who are at higher risk of severe outcomes and death.

The overarching aim of the [Strategic Preparedness and Response Plan for COVID-19](#) continues to be to slow down transmission of SARS-CoV-2 and prevent associated illness and death. The global strategic objectives are:

- Mobilize all sectors and communities to ensure that every sector of government and society takes ownership of and participates in the response and in preventing cases through hand hygiene, respiratory etiquette and individual-level physical distancing.
- Control sporadic cases and clusters and prevent community transmission by rapidly finding and isolating all cases; providing them with appropriate care; and tracing, quarantining, and supporting all contacts.
- Suppress community transmission through context-appropriate infection prevention and control (IPC) measures, population level physical distancing measures and appropriate and proportionate restrictions on non-essential domestic and international travel.
- Reduce mortality by providing appropriate clinical care for individuals affected by COVID-19, ensuring the continuity of essential health and social services and protecting frontline workers and vulnerable populations.
- Develop safe and effective vaccines and therapeutics that can be delivered at scale and that are accessible based on need.

All countries have increased their level of preparedness, alert and response to implement strong national plans, recognizing that there is no one-size-fits-all approach to managing cases and outbreaks of COVID-19. Each country has worked to assess its risk and rapidly implement the necessary measures at the appropriate scale to reduce both COVID-19 transmission and economic, public and social impacts.

## Scenarios

WHO previously defined four transmission scenarios to describe the dynamic of the epidemic: no reported cases

(including both zero transmission and the absence of detected and reported cases), sporadic cases, clusters of cases and community transmission. The community transmission (CT) classification is now divided into four levels, from low incidence (CT1) to very high incidence (CT4). Consequently, there are now seven categories.

Further explanation of these categories can be found in WHO guidance on [Considerations in adjusting public health and social measures in the context of COVID-19](#).

**Table 1: Definition of the categories for transmission classification**

Category name	Definition
	<i>Countries/territories/areas with:</i>
No (active) cases	No new cases detected for at least 28 days (two times the maximum incubation period), in the presence of a robust* surveillance system. This implies a near-zero risk of infection for the general population.
Imported / Sporadic cases	Cases detected in the past 14 days are all imported, sporadic (e.g. laboratory acquired or zoonotic) or are all linked to imported/sporadic cases, and there are no clear signals of further locally acquired transmission. This implies minimal risk of infection for the general population.
Clusters of cases	Cases detected in the past 14 days are predominantly limited to well-defined clusters that are not directly linked to imported cases, but which are all linked by time, geographic location <b>and</b> common exposures. It is assumed that there are a number of unidentified cases in the area. This implies a low risk of infection to others in the wider community if exposure to these clusters is avoided.
Community transmission – level 1 (CT1)	<b>Low incidence</b> of locally acquired, widely dispersed cases detected in the past 14 days, with many of the cases not linked to specific clusters; transmission may be focused in certain population sub-groups. Low risk of infection for the general population.
Community transmission – level 2 (CT2)	<b>Moderate incidence</b> of locally acquired, widely dispersed cases detected in the past 14 days; transmission less focused in certain population sub-groups. Moderate risk of infection for the general population.
Community transmission – level 3 (CT3)	<b>High incidence</b> of locally acquired, widely dispersed cases in the past 14 days; transmission widespread and not focused in population sub-groups. High risk of infection for the general population.
Community transmission – level 4 (CT4)	<b>Very high incidence</b> of locally acquired, widely dispersed cases in the past 14 days. Very high risk of infection for the general population.

\* Note that in situations where COVID-19 surveillance is not robust, a lack of identified cases should not be interpreted as an absence of transmission.

Countries could experience one or more of these scenarios at the sub-national level and should define the transmission scenario and response actions at the lowest administrative level. Transmission scenarios may also move in both directions, such that “No cases” includes both never having had a COVID-19 case and having no active cases.

Countries should prepare to respond to all transmission scenarios, following the framework laid out in the [Strategic Preparedness and Response Plan for COVID-19](#). Prioritization of resources for each technical area will depend on which transmission scenario(s) a country is managing.

There is still much to understand about COVID-19 and its impact in different contexts. Preparedness, readiness and response actions will continue to be driven by rapidly accumulating scientific and public health knowledge. Table 2 describes the preparedness, readiness and response actions for COVID-19 for each transmission scenario. Hyperlinks to WHO technical guidance are provided. All technical guidance for WHO can be found on the [WHO website](#).

**Table 1. Critical preparedness, readiness and response actions for each transmission scenario for COVID-19**

	No Cases	Sporadic Cases	Clusters of Cases	Community Transmission
<b>Transmission scenario</b>	No reported cases.	One or more cases, imported or locally detected, without evidence of local transmission.	Cases limited to well-defined clusters, related by time, geographic location and common exposures	Outbreaks with the inability to relate confirmed cases through chains of transmission for a large number of cases, or by increasing positive tests through sentinel samples (routine systematic testing of respiratory samples from established laboratories).
<b>Aim</b>	Stop transmission and prevent spread.	Stop transmission and prevent spread.	Stop transmission and prevent spread.	Slow transmission, reduce case numbers, end community outbreaks.
<b>Priority areas of work</b>				
<b>Emergency response mechanisms</b>	Activate <a href="#">emergency response</a> mechanisms.  Review and maintain <a href="#">emergency response</a> mechanisms.	Scale up <a href="#">emergency response</a> mechanisms.	Scale up <a href="#">emergency response</a> mechanisms.	Scale up <a href="#">emergency response</a> mechanisms.
<b>Risk communication and community engagement (RCCE) and infodemic management</b>	Engage the public through <a href="#">RCCE</a> and ensure people and communities participate in sharing trustworthy information, lead community actions and nurture trust in public health and social measures, through two-way communication.  <ul style="list-style-type: none"> <li>- Establish/revise RCCE working group</li> <li>- Assess situation and develop detailed RCCE plan, including resources, clear roles and responsibilities</li> <li>- Assess RCCE capacity and prepare training</li> <li>- Prepare risk perception assessment (formative research)</li> <li>- Prepare feedback loop mechanism</li> <li>- Set up monitoring system</li> <li>- Address rumours and misinformation with trustworthy information and facts shared through trusted channels and sources</li> </ul>	Engage the public through <a href="#">RCCE</a> and ensure people and communities participate in sharing trustworthy information, lead community actions and nurture trust in public health and social measures, through two-way communication.  <ul style="list-style-type: none"> <li>- Assess and revise RCCE plan according to situation with RCCE working group.</li> <li>- Provide training for surge staff</li> <li>- Engage communities as needed, with a focus on enhancing community dialogue and trust</li> <li>- Assess initial risk perception assessment (formative research)</li> <li>- Implement feedback loop mechanism</li> <li>- Monitor process</li> </ul>	Engage the public through <a href="#">RCCE</a> and ensure people and communities participate in sharing trustworthy information, lead community actions and nurture trust in public health and social measures, through two-way communication.  <ul style="list-style-type: none"> <li>- Assess and revise RCCE plan according to situation with RCCE working group.</li> <li>- Reinforce community-led activities to motivate individual and social responsibility to slow down transmission, alleviate stretched health systems and protect the most vulnerable</li> <li>- Provide training for surge staff</li> <li>- Engage communities as needed, with a focus on enhancing community dialogue and trust</li> </ul>	Engage the public through <a href="#">RCCE</a> and ensure people and communities participate in sharing trustworthy information, lead community actions and nurture trust in public health and social measures, through two-way communication.  <ul style="list-style-type: none"> <li>- Assess and revise RCCE plan according to situation with RCCE working group</li> <li>- Reinforce community-led activities to motivate individual and social responsibility to slow down transmission, alleviate stretched health systems and protect the most vulnerable</li> <li>- Continue risk perception assessment (formative research)</li> <li>- Implement feedback loop mechanism</li> </ul>

	No Cases	Sporadic Cases	Clusters of Cases	Community Transmission
	<ul style="list-style-type: none"> <li>- Engage people and communities in designing strategies on how to take up and sustain the recommended public health measures.</li> </ul>	<ul style="list-style-type: none"> <li>- Address rumours and misinformation with trustworthy information and facts shared through trusted channels and sources</li> <li>- Engage people and communities in designing strategies on how to take up and sustain the recommended public health measures.</li> </ul>	<ul style="list-style-type: none"> <li>- Assess initial risk perception assessment (formative research)</li> <li>- Implement feedback loop mechanism</li> <li>- Monitor process to guide implementation of RCCE plan</li> <li>- Address rumours and misinformation with trustworthy information and facts shared through trusted channels and sources; amplify information and support from trusted community leaders and influencers including through trusted media</li> <li>- Engage people and communities in designing strategies on how to take up and sustain the recommended public health measures.</li> </ul>	<ul style="list-style-type: none"> <li>- Engage communities as needed, with a focus on enhancing community dialogue and trust</li> <li>- Monitor process to guide implementation of RCCE plan</li> <li>- Address rumours and misinformation with trustworthy information and facts shared through trusted channels and sources; amplify information and support from trusted community leaders and influencers including through trusted media</li> <li>- Engage people and communities in designing strategies on how to take up and sustain the recommended public health measures.</li> </ul>
<b>Surveillance</b>	<p><a href="#">Actively test for COVID-19 among suspected cases</a>; rapid isolation of cases.</p> <p>Implement testing for COVID-19 using <a href="#">existing community-based surveillance</a>, respiratory disease surveillance systems, hospital-based surveillance, event based surveillance and investigation of clusters.</p> <p>Implement or maintain <a href="#">enhanced surveillance for residential facilities and for vulnerable groups</a>.</p>	<p><a href="#">Actively test for COVID-19 among suspected cases</a>; rapid isolation of cases.</p> <p>Implement COVID-19 surveillance using <a href="#">existing community-based surveillance</a>, respiratory disease surveillance systems, hospital-based surveillance, event based surveillance and investigation of clusters.</p> <p>Implement <a href="#">enhanced surveillance for residential facilities and for vulnerable groups</a>.</p>	<p><a href="#">Actively test for COVID-19 among suspected cases</a>; rapid isolation of cases.</p> <p>Expand COVID-19 surveillance using <a href="#">existing community-based surveillance</a>, respiratory disease surveillance systems, hospital-based surveillance, event based surveillance and investigation of clusters.</p> <p>Implement <a href="#">enhanced surveillance for residential facilities and for vulnerable groups</a>.</p>	<p><a href="#">Actively test for COVID-19 among suspected cases</a>; where possible, especially in newly infected areas; rapid isolation of cases and apply self-initiated isolation for symptomatic individuals.</p> <p>Adapt <a href="#">existing surveillance systems to monitor disease activity</a>. Continue event based surveillance and investigation of clusters.</p> <p>Implement <a href="#">enhanced surveillance for residential facilities and for vulnerable groups</a>.</p>
<b>Contact tracing and management</b>	<p>Prepare for surge in <a href="#">contact tracing</a> needs</p>	<p>Conduct <a href="#">contact tracing</a> and monitoring; <a href="#">quarantine of contacts</a>.</p>	<p>Conduct <a href="#">contact tracing</a>, monitoring; <a href="#">quarantine of contacts</a>. Conduct cluster investigations.</p>	<p>Conduct <a href="#">contact tracing</a> and monitoring where possible; <a href="#">quarantine of contacts</a>. Conduct cluster investigations.</p> <p><a href="#">Contact tracing capacity</a> may be stretched and should therefore prioritize the identification and investigation of clusters, high risk settings and those at risk of severe disease.</p>

	No Cases	Sporadic Cases	Clusters of Cases	Community Transmission
<b>Public health and social measures</b>	<p>Prepare to <a href="#">adjust public health and social measures based on an analysis of the level of transmission, the capacity of the health system to respond and other contextual factors</a>.</p> <p>Ensure universal access to <a href="#">hand hygiene facilities</a> in front of all public buildings and transport hubs (e.g. markets, shops, places of worship, educational institutions, train or bus stations). Functioning handwashing facilities with water and soap should be available within 5 m of all toilets, both public and private.</p>	<p><a href="#">Adjust public health and social measures based on an analysis of the level of transmission, the capacity of the health system to respond and other contextual factors</a>.</p> <p>Ensure universal access to <a href="#">hand hygiene facilities</a> in front of all public buildings and transport hubs (e.g. markets, shops, places of worship, educational institutions, train or bus stations). Functioning handwashing facilities with water and soap should be available within 5 m of all toilets, both public and private.</p>	<p><a href="#">Adjust public health and social measures based on an analysis of the level of transmission, the capacity of the health system to respond and other contextual factors</a>.</p> <p>Ensure universal access to <a href="#">hand hygiene facilities</a> in front of all public buildings and transport hubs (e.g. markets, shops, places of worship, educational institutions, train or bus stations). Functioning handwashing facilities with water and soap should be available within 5 m of all toilets, both public and private.</p>	<p><a href="#">Adjust public health and social measures based on an analysis of the level of transmission, the capacity of the health system to respond and other contextual factors</a>.</p> <p>Ensure universal access to <a href="#">hand hygiene facilities</a> in front of all public buildings and transport hubs (e.g. markets, shops, places of worship, educational institutions, train or bus stations). Functioning handwashing facilities with water and soap should be available within 5 m of all toilets, both public and private.</p>
<b>Infection prevention and control (IPC) – health care setting</b>	<p>Identify national and facility level IPC focal points. (Re)train staff in <a href="#">IPC</a> and <a href="#">clinical management</a> specifically for COVID-19.</p> <p>Implement <a href="#">IPC strategies</a> to prevent or limit transmission in health care settings.</p> <p>Use <a href="#">appropriate (personal protective equipment) PPE</a> by health workers providing direct care to COVID-19 patients. In care settings in which aerosol generating procedures are performed, health workers should wear a respirator.</p>	<p>Identify national and facility level IPC focal points. (Re)train staff in <a href="#">IPC</a> and <a href="#">clinical management</a> specifically for COVID-19.</p> <p>Implement <a href="#">IPC strategies</a> to prevent or limit transmission in health care settings.</p> <p>Use <a href="#">appropriate PPE</a> by health care workers providing direct care to COVID-19 patients. In care settings in which aerosol generating procedures are performed, health workers should wear a respirator.</p> <p>Implement guidance on <a href="#">mask use for health facilities</a>.</p>	<p>Identify national and facility level IPC focal points. (Re)train staff in <a href="#">IPC</a> and <a href="#">clinical management</a> specifically for COVID-19.</p> <p>Implement <a href="#">IPC strategies</a> to prevent or limit transmission in health care settings.</p> <p>Use <a href="#">appropriate PPE</a> by health care workers providing direct care to COVID-19 patients. In care settings in which aerosol generating procedures are performed, health workers should wear a respirator.</p> <p>Implement guidance on <a href="#">mask use for health facilities</a>.</p>	<p>Identify national and facility level IPC focal points. Retrain staff in <a href="#">IPC</a> and <a href="#">clinical management</a> specifically for COVID-19.</p> <p>Reinforce <a href="#">IPC strategies</a> to limit transmission in health care settings.</p> <p>Use of <a href="#">appropriate PPE</a> by health workers providing direct care to COVID-19 patients. In care settings in which aerosol generating procedures are performed, health workers should wear a respirator.</p> <p>Implement guidance on <a href="#">mask use for health facilities</a> in community transmission.</p>
	<p>Prepare for surge in <a href="#">health care facility needs</a>, including respiratory support, IPC, <a href="#">PPE supplies</a>, screening of health workers for infection and mental health support for health workers.</p> <p>Implement environmental and engineering controls, including adequate ventilation and environmental cleaning.</p>	<p>Prepare for surge in <a href="#">health care facility needs</a>, including respiratory support, IPC, <a href="#">PPE supplies</a>, screening of health workers for infection and mental health support for health workers.</p> <p>Implement environmental and engineering controls, including adequate ventilation and environmental cleaning.</p>	<p>Prepare for surge in <a href="#">health care facility needs</a>, including respiratory support, IPC, <a href="#">PPE supplies</a>, screening of health workers for infection and mental health support for health workers.</p> <p>Implement environmental and engineering controls, including adequate ventilation and environmental cleaning.</p>	<p>Implement <a href="#">health facilities</a> surge plans, including respiratory support, IPC, <a href="#">PPE supplies</a>, screening of health workers for infection and mental health support for health workers.</p> <p>Implement environmental and engineering controls, including adequate ventilation and environmental cleaning.</p>

	No Cases	Sporadic Cases	Clusters of Cases	Community Transmission
	Review surge in <a href="#">health care facility needs</a> , including respiratory support, IPC and <a href="#">PPE supplies</a> .	Review surge in <a href="#">health care facility needs</a> , including respiratory support, IPC and <a href="#">PPE supplies</a> .	Surge <a href="#">health care facility needs</a> , including respiratory support, IPC and <a href="#">PPE supplies</a> .	In CT4, encourage <a href="#">home care for mild cases</a> .
<b>IPC – general public</b>	Anyone with symptoms suggestive of COVID-19 and those caring for sick patients at home should use <a href="#">medical masks</a> .	Anyone with symptoms suggestive of COVID-19 and those caring for sick patients at home should use <a href="#">medical masks</a> . Further mask guidance for general public can be found <a href="#">here</a> .  Avoid three C settings: Crowded places with many people nearby; close-contact settings, especially where people have close-range conversations; and confined and enclosed spaces with poor ventilation. Increase access to outdoor air through natural ventilation.  Maintain physical distancing of at least 1 m, or wear a mask when physical distance cannot be maintained. Perform frequent hand hygiene with alcohol-based hand sanitizer or soap and water.	Anyone with symptoms suggestive of COVID-19 and those caring for sick patients at home should use <a href="#">medical masks</a> . Further mask guidance for general public can be found <a href="#">here</a> .  Avoid three C settings: Crowded places with many people nearby; close-contact settings, especially where people have close-range conversations; and confined and enclosed spaces with poor ventilation. Increase access to outdoor air through natural ventilation.  Maintain physical distancing of at least 1 m, or wear a mask when physical distance cannot be maintained. Perform frequent hand hygiene with alcohol-based hand sanitizer or soap and water.	Anyone with symptoms suggestive of COVID-19 and those caring for sick patients at home should use <a href="#">medical masks</a> .  Encourage the use of <a href="#">medical mask</a> by vulnerable populations (people aged >60 years and/or with comorbid conditions); use of <a href="#">fabric mask</a> for the general public where physical distancing cannot be achieved.  Avoid three C settings: Crowded places with many people nearby; close-contact settings, especially where people have close-range conversations; and confined and enclosed spaces with poor ventilation. Increase access to outdoor air through natural ventilation.  Maintain physical distancing of at least 1 m, or wear a mask when physical distance cannot be maintained. Perform frequent hand hygiene with alcohol-based hand sanitizer or soap and water.
<b>Laboratory testing</b>	Nucleic acid amplification testing (NAAT), for example RT-PCR, is the method of choice to reliably <a href="#">detect active SARS-CoV-2 infections</a> .  Testing can have different objectives (see other boxes for details on individuals who	Nucleic acid amplification testing (NAAT), for example RT-PCR, is the method of choice to reliably <a href="#">detect active SARS-CoV-2 infections</a> .  Testing can have different objectives (see other boxes for details on individuals who	Nucleic acid amplification testing (NAAT), for example RT-PCR, is the method of choice to reliably <a href="#">detect active SARS-CoV-2 infections</a> . <sup>1</sup>  Testing can have different objectives (see other boxes for details on individuals who	Nucleic acid amplification testing (NAAT), for example RT-PCR, is the method of choice to reliably <a href="#">detect active SARS-CoV-2 infections</a> . <sup>1</sup>  Testing can have different objectives (see other boxes for details on individuals who

<sup>1</sup> Nucleic acid amplification based diagnostic tests (NAAT) are preferred but antigen detecting rapid diagnostic tests (Ag-RDTs) may be considered to investigate clusters of cases and when there is widespread community transmission, when NAAT is either unavailable or turnaround times for results are prolonged.

No Cases	Sporadic Cases	Clusters of Cases	Community Transmission
<p>are included in the different testing objectives). Objectives include clinical care (see Case management strategy, below), <a href="#">contact tracing</a> and surveillance (see Surveillance, above).</p>	<p>are included in the different testing objectives). Objectives include clinical care (see Case management strategy, below), <a href="#">contact tracing</a> and surveillance (see Surveillance, above).</p>	<p>are included in the different testing objectives). Objectives include clinical care (see Case management strategy, below), <a href="#">contact tracing</a> and surveillance (see Surveillance, above).</p>	<p>are included in the different testing objectives). Objectives include clinical care (see Case management strategy, below), <a href="#">contact tracing</a> and other forms of surveillance (see Surveillance, above).</p> <p>If diagnostic capacity is insufficient, implement prioritized testing and measures that can reduce spread (e.g. isolation), including priority testing with Ag-RDTs or (wherever possible) with RT-PCR of:</p> <ul style="list-style-type: none"> <li>- people who are at risk of developing severe disease and vulnerable populations, who will require <a href="#">hospitalization and advanced care for COVID-19</a></li> <li>- <a href="#">health workers</a> (including emergency services and non-clinical staff) regardless of whether they are a contact of a confirmed case (to protect health workers and reduce the risk of nosocomial transmission)</li> <li>- the <a href="#">first symptomatic</a> individuals in a closed setting (e.g. schools, long term living facilities, prisons, hospitals) or fragile settings (e.g. humanitarian operations, refugee/migrant camp and non-camp settings) to quickly identify outbreaks and ensure containment measures</li> </ul>

	No Cases	Sporadic Cases	Clusters of Cases	Community Transmission
<b>Case management strategy</b>	<p>Set up or maintain <a href="#">screening and triage protocols</a> at all points of access to the health system.</p> <p>Prepare to <a href="#">treat</a> COVID-19 affected patients.</p> <p>Set up or maintain COVID-19 <a href="#">hotline and referral system</a>; ready hospitals for potential surge.</p>	<p><a href="#">Screen and triage patients</a> at all points of access to the health system.</p> <p><a href="#">Care</a> for all suspected and confirmed patients according to disease severity and acute care need.</p> <p>Ready hospitals for surge; ready communities for surge, including by setting up <a href="#">community facilities</a> for isolation of mild/moderate cases; establish protocol for home isolation.</p>	<p><a href="#">Screen and triage patients</a> at all points of access to the health system.</p> <p><a href="#">Care</a> for all suspected and confirmed patients according to disease severity and acute care needs.</p> <p>Activate surge plans for health facilities, activate <a href="#">community facilities</a>; activate protocols for home isolation.</p>	<p><a href="#">Screen and triage patients</a> at all points of access to the health system.</p> <p><a href="#">Care</a> for all suspected and confirmed patients according to disease severity and acute care needs.</p> <p>Activate and continue to scale up surge plans for health facilities, <a href="#">community facilities</a> and home care, including enhancement of COVID-19 referral system.</p>
<b>Case management recommendations by case severity and risk factors</b>	<p>Test suspect COVID-19 cases according to <a href="#">diagnostic strategy</a>.</p> <p>For mild and moderate cases with no risk factors, there are <a href="#">three options for care and isolation</a>:</p> <ul style="list-style-type: none"> <li>- Health facilities, if resources allow</li> <li>- Community facilities (i.e. stadiums, gymnasiums, hotels) with access to rapid health advice (i.e., adjacent COVID-19 designated health post, telemedicine)</li> <li>- Self-isolation at home according to WHO guidance with consideration of alternative delivery platforms such as telemedicine or community outreach teams.</li> </ul> <p>For moderate cases with risk factors, and all severe/critical cases: hospitalization (in-patient treatment), with appropriate isolation/ cohorting.</p> <p>The decision of location should be made on a case-by-case basis and will depend on the clinical presentation, requirement for supportive care, potential risk factors for severe disease and conditions at home, including the presence of vulnerable persons in the household.</p>			
<b>Health services</b>	<p>Maintain all health services.</p> <p>Prepare or review health system capacity and surge strategies.</p> <p>Designate an essential health services (EHS) focal point to the national COVID-19 incident management team (IMT).</p> <p>Generate a country-specific list of core EHS and map to (HR and material) resource needs.</p> <p>Establish triggers or thresholds for phased reallocation of capacity and dynamic adaptation of services as the pandemic evolves.</p>	<p>Maintain all health services, with strategic shifts in service delivery to limit transmission (e.g. limiting facility-based encounters where appropriate, modifying patient flow for safety).</p> <p>Implement health system capacity and surge strategies.</p> <p>Generate and complete a country-specific list of core EHS and map to (HR and material) resource needs. Evaluate readiness to shift to priority EHS.</p> <p>Establish <a href="#">mechanisms of coordination</a> and communication among the IMT and service providers.</p>	<p>Maintain all health services, with strategic shifts in service delivery to limit transmission (e.g. limiting facility-based encounters where appropriate, modifying patient flow for safety).</p> <p>Enhance health system capacity and surge strategies.</p> <p>Prepare to initiate strategic shifts for prioritization.</p> <p>Implement <a href="#">protocols for targeted referral and counter-referral pathways</a>.</p> <p>Schedule appointments, limit visitors and create unidirectional patient and staff flow to ensure sufficient distancing.</p>	<p>Maintain all health services as possible. In CT4, or whenever service capacity is overwhelmed, implement strategic shifts to prioritize EHS.</p> <p>Intensify health system capacity and surge strategies.</p> <p>Continue to <a href="#">monitor delivery of EHS</a> at community and facility level, identify barriers to access and anticipate restoring suspended services based on changing needs.</p> <p>Establish weekly reporting from major distribution points on critical products that may be at risk of shortages.</p>

	No Cases	Sporadic Cases	Clusters of Cases	Community Transmission
	<p>Establish or review mechanisms to monitor the ongoing <a href="#">delivery of EHS</a>.</p> <p>Initiate rapid trainings to expand health worker capacity in key areas (including screening triage and emergency care).</p> <p>Maintain and reinforce surveillance for vaccine-preventable diseases; develop or review strategies for delivering <a href="#">immunization services</a>.</p>	<p>Ensure that 24-hour acute care services are available at all first-level hospital emergency (or similar) units and ensure public awareness.</p> <p>Conduct rapid capacity assessments (HR and material resources).</p> <p>Suspend user fees at the point of care for EHS for all patients.</p> <p>Maintain and reinforce surveillance for vaccine-preventable diseases; implement strategies for delivering <a href="#">immunization services</a>.</p>	<p>Implement tools and information systems to support teleconsultations.</p> <p>Coordinate additional funding for health workers to ensure timely payment of salaries, overtime, sick leave and incentive or hazard pay.</p> <p>Maintain and reinforce surveillance for vaccine-preventable diseases; implement strategies for delivering <a href="#">immunization services</a>.</p>	<p>Coordinating primary care support, adjust hospital admission and discharge protocols as appropriate to limit duration of inpatient stays.</p> <p>Document adaptive responses implemented during the pandemic phase that should be considered for longer-term integration into health system operations.</p> <p>Maintain surveillance for vaccine-preventable diseases; implement strategies for delivering <a href="#">immunization services</a>.</p>
<b>Societal response</b>	<p>Develop all-of-society and business continuity plans.</p> <p>Review and update all-of-society and business continuity plans as evidence becomes available.</p>	<p>Implement all-of-society plans, repurpose government and ready business continuity plans.</p>	<p>Implement all-of-society plans, repurpose government, business continuity and community services plans.</p>	<p>Implement all-of-society plans, repurpose government, business continuity and community services plans.</p>

## WHO Technical Guidance for COVID-19

### Country-level coordination, planning, and monitoring

- [Draft operational planning guidance for UN country teams](#)
- [COVID-19 Partners Platform based on Operational Planning Guidance](#)
- [Training modules: Operational Planning Guidelines and COVID-19 Partners Platform](#)
- [National capacities review tool for a novel coronavirus](#)

### Critical preparedness, readiness and response actions for COVID-19

- [Responding to community spread of COVID-19](#)
- [Overview of Public Health and Social Measures in the context of COVID-19](#)
- [Considerations for implementing and adjusting public health and social measures in the context of COVID-19](#)
  - [Considerations for public health and social measures in the workplace in the context of COVID-19](#)
  - [Considerations for school-related public health measures in the context of COVID-19](#)
  - [Considerations for mass gatherings in the context of COVID-19](#)
- [Preparedness for cyclones, tropical storms, tornadoes, floods and earthquakes during the COVID-19 pandemic](#)
- [Investing in and building longer-term health emergency preparedness during the COVID-19 pandemic](#)
- [Practical actions in cities to strengthen preparedness for the COVID-19 pandemic and beyond](#)
- [Guidance for conducting a country COVID-19 intra-action review \(IAR\)](#)

### Surveillance, rapid response teams, and case investigation

- [Public health surveillance for COVID-19](#)
  - [COVID-19 Case definition](#)
  - [Global surveillance of COVID-19: WHO process for reporting aggregated data](#)
- [Considerations in the investigation of cases and clusters of COVID-19](#)
- [Considerations for quarantine of contacts of COVID-19 cases](#)
- [Surveillance strategies for COVID-19 human infection](#)
- [Contact tracing in the context of COVID-19](#)
  - [Digital tools for COVID-19 contact tracing](#)
  - [Ethical considerations to guide the use of digital proximity tracking technologies for COVID-19 contact tracing](#)
- [Operational considerations for COVID-19 surveillance using GISRS](#)
- [Medical certification, ICD mortality coding, and reporting mortality associated with COVID-19](#)

### Guidance for national laboratories

- [Diagnostic testing for SARS-CoV-2](#)
- [Laboratory testing strategy recommendations for COVID-19](#)
- [Laboratory biosafety related to coronavirus disease \(COVID-19\)](#)
- [WHO reference laboratories providing confirmatory testing for COVID-19](#)

- [Guidance for laboratories shipping specimens to WHO reference laboratories that provide confirmatory testing for COVID-19 virus](#)
- [Antigen-detection in the diagnosis of SARS-CoV-2 infection using rapid immunoassays](#)
- [COVID-19 Target product profiles for priority diagnostics to support response to the COVID-19 pandemic](#)
- [Assessment tool for laboratories implementing SARS-CoV-2 testing](#)
  - [Laboratory assessment tool for laboratories implementing SARS-CoV-2 testing](#)

### Clinical care for COVID-19 patients

- [Clinical management of COVID-19](#)
- [Corticosteroids for COVID-19](#)
- [Clinical care of severe acute respiratory infections – Tool kit](#)
- [Home care for patients with suspected or confirmed COVID-19 and management of their contacts](#)
- [Operational considerations for case management of COVID-19 in health facility and community](#)
- [Severe Acute Respiratory Infections Treatment Centre](#)
- [Recommendations: Prehospital Emergency Medical Services \(EMS\) COVID-19](#)
- [Use of chest imaging in COVID-19](#)
- [Maintaining a safe and adequate blood supply during the pandemic outbreak of coronavirus disease \(COVID-19\)](#)
- [Global COVID-19 Clinical Characterization Case Record Form](#)
  - [Rapid core case report form](#)
  - [Pregnancy case report form](#)
  - [Case Report Form for suspected cases of multisystem inflammatory syndrome \(MIS\) in children and adolescents temporally related to COVID-19](#)

### Infection Prevention and Control for COVID-19

- [Infection prevention and control during health care when COVID-19 is suspected or confirmed](#)
- [Rational use of personal protective equipment for coronavirus disease \(COVID-19\) and considerations during severe shortages](#)
- [Advice on the use of masks in the context of COVID-19](#)
- [Advice on the use of masks for children in the community in the context of COVID-19](#)
- [Water, sanitation, hygiene and waste management for COVID-19](#)
- [Infection prevention and control for the safe management of a dead body in the context of COVID-19](#)
- [Infection prevention and control for long-term care facilities in the context of COVID-19](#)
- [Cleaning and disinfection of environmental surfaces in the context of COVID-19](#)
- [Surveillance protocol for SARS-CoV-2 infection among health workers](#)
- [Prevention, identification and management of health worker infection in the context of COVID-19](#)
- [Health workers exposure risk assessment and management in the context of COVID-19 virus](#)

## Essential resources planning

- [COVID-19 Essential Supplies Forecasting Tool](#)
- [FAQ: COVID-19 Essential Supplies Forecasting Tool \(COVID-19 ESFT\)](#)
- [Adapt Surge Planning Support Tool](#)
- [Health Workforce Estimator](#)
- [Reagent calculator for portal](#)
- [Emergency global supply chain system catalogue](#)
- [List of priority medical devices for COVID-19 case management](#)
- [Technical specifications for invasive and non-invasive ventilators for COVID-19](#)
- [Oxygen sources and distribution for COVID-19 treatment centres](#)
- [Technical specifications for Pressure Swing Adsorption \(PSA\) Oxygen Plants](#)

## Essential health services

- [Maintaining essential health services: operational guidance for the COVID-19 context](#)
- [Community-based health care, including outreach and campaigns, in the context of the COVID-19 pandemic](#)
- [Harmonized health service capacity assessments in the context of the COVID-19 pandemic](#)
  - [Rapid hospital readiness checklist](#)
  - [Biomedical equipment for COVID-19 case management - inventory tool](#)
  - [Diagnostics, therapeutics, vaccine readiness, and other health products for COVID-19](#)
  - [Ensuring a safe environment for patients and staff in COVID-19 health-care facilities](#)
  - [Infection prevention and control health-care facility response for COVID-19](#)
  - [Continuity of essential health services: Facility assessment tool](#)
- [Recommendations to Member States to improve hand hygiene practices to help prevent the transmission of the COVID-19 virus](#)
- [Guiding principles for immunization activities during the COVID-19 pandemic](#)
  - [FAQ: Immunization in the context of COVID-19 pandemic](#)
- [Framework for decision-making: implementation of mass vaccination campaigns in the context of COVID-19](#)
- [Preventing and managing COVID-19 across long-term care services: Policy brief](#)
  - [Preventing and managing COVID-19 across long-term care services: Web annex](#)
- [Considerations for implementing mass treatment, active case-finding and population-based surveys for neglected tropical diseases in the context of the COVID-19 pandemic](#)
- [Considerations for the provision of essential oral health services in the context of COVID-19](#)

## Risk communication and community engagement

- [Risk communication and community engagement readiness and response to coronavirus disease \(COVID-19\)](#)
- [Mental health considerations during COVID-19 outbreak](#)
- [COVID-19 risk communication package for healthcare facilities](#)
- [A guide to preventing and addressing social stigma associated with COVID-19](#)
- [COVID-19 message library](#)

## Guidance for COVID-19 in schools, workplaces and institutions

- [Key messages and actions for COVID-19 prevention and control in schools](#)
- [IASC: COVID-19 prevention and control in schools](#)
- [Getting your workplace ready for COVID-19](#)
- [COVID-19 and Food Safety: Guidance for competent authorities responsible for national food safety control systems](#)
- [COVID-19 and food safety: Guidance for food businesses](#)
- [Operational considerations for COVID-19 management in the accommodation sector](#)
- [Preparedness, prevention and control of COVID-19 in prisons and other places of detention](#)
- [Rights, roles and responsibilities of health workers, including key considerations for occupational safety and health](#)

## Humanitarian operations, camps and other fragile settings

- [IASC: Scaling-up COVID-19 Outbreak in Readiness and Response Operations in Camps and Camp-like Settings \(jointly developed by IFRC, IOM, UNHCR and WHO\)](#)
- [Preparedness, prevention and control of coronavirus disease \(COVID-19\) for refugees and migrants in non-camp settings](#)
- [Public health and social measures for COVID-19 preparedness and response in low capacity and humanitarian settings](#)
- [Preparedness for cyclones, tropical storms, tornadoes, floods and earthquakes during the COVID-19 pandemic](#)

## Operational support and logistics

- [Disease commodity package](#)

## Travel, points of entry and border health

- [Management of ill travellers at Points of Entry – international airports, seaports and ground crossings – in the context of COVID-19 outbreak](#)
- [Operational considerations for managing COVID-19 cases/outbreak on board ships](#)
- [Operational considerations for managing COVID-19 cases or outbreak in aviation](#)
- [Controlling the spread of COVID-19 at ground crossings](#)
- [Promoting public health measures in response to COVID-19 on cargo ships and fishing vessels](#)

## Mass gatherings

- [Key planning recommendations for Mass Gatherings in the context of the current COVID-19 outbreak](#)
- [Mass gatherings COVID-19 risk assessment](#)
  - [Risk assessment tool](#)
  - [Decision tree](#)
  - [Considerations for risk assessment for sports federations/sports event organizers](#)
  - [Risk assessment tool for sports events](#)
- [Practical considerations and recommendations for religious leaders and faith-based communities in the context of COVID-19](#)
  - [Risk assessment tool](#)
  - [Decision tree](#)
- [Safe Ramadan practices in the context of the COVID-19](#)
- [Safe Eid al Adha practices in the context of COVID-19](#)

## Reducing animal-human transmission of emerging pathogens

- [Origin of SARS-CoV-2](#)
- [Recommendations to reduce risk of transmission of emerging pathogens from animals to humans in live animal markets or animal product markets](#)

## Early investigation protocols (the Unity Studies)

- [The First Few X \(FFX\) Cases and contact investigation protocol for COVID-19 infection](#)
- [Household transmission investigation protocol for COVID-19 infection](#)
- [Prospective cohort protocol for assessment of potential risk factors for COVID-19 infection among health care workers in a health care setting](#)
- [Case-control protocol for assessment of potential risk factors for COVID-19 infection among health care workers in a health care setting](#)

- [Population-based age-stratified seroepidemiological investigation protocol for COVID-19 virus infection](#)
- [Surface sampling of coronavirus disease COVID-19 virus: A practical “how to” protocol for health care and public health professionals](#)

## Online training courses available for COVID-19

- [Introduction to COVID-19](#)
- [eProtect Respiratory Infections](#)
- [Critical Care for Severe Acute Respiratory Infections](#)
- [WHO Medical emergency checklist](#)
- [Severe Acute Respiratory Infection \(SARI\) treatment facility design](#)
- [Resuscitation area designation tool](#)
- [Infection Prevention and Control for COVID-19](#)
  - [Infection Prevention and Control core components and multimodal strategies](#)
  - [Standard precautions: Hand hygiene](#)
  - [Standard precautions: Waste management](#)
  - [Standard precautions: Environmental cleaning and disinfection](#)
  - [Standard precautions: Injection safety and needle-stick injury management](#)
  - [Decontamination and sterilization of medical devices](#)
  - [How to put on and remove personal protective equipment](#)
- [Country preparedness and response planning](#)
- [Mass gatherings risk assessment training](#)
- [Occupational health and safety for health workers in the context of COVID-19](#)
- [Long-term care facilities in the context of COVID-19](#)
- [Controlling the spread of COVID-19 at ground crossings](#)
- [Operational considerations for managing COVID-19 cases and outbreaks in aviation](#)
- [Operational considerations for managing COVID-19 cases and outbreaks on board ships](#)
- [Management of ill travellers at point of entry in the context of the COVID-19 outbreak](#)

WHO continues to monitor the situation closely for any changes that may affect this interim guidance. Should any factors change, WHO will issue a further update. Otherwise, this interim guidance document will expire 2 years after the date of publication.