

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

	No Cases	Sporadic Cases	Clusters of Cases	Community Transmission
Transmission scenario	No reported cases.	One or more cases, imported or locally acquired.	Most cases of local transmission linked to chains of transmission.	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).
Aim	Stop transmission and prevent spread.	Stop transmission and prevent spread.	Stop transmission and prevent spread.	Slow transmission, reduce case numbers, end community outbreaks.
Priority areas of work				
Emergency response mechanisms	Activate emergency response mechanisms.	Enhance emergency response mechanisms.	Scale up emergency response mechanisms.	Scale up emergency response mechanisms.
Risk communication and public engagement	Educate and actively communicate with the public through risk communication and community engagement .	Educate and actively communicate with the public through risk communication and community engagement .	Educate and actively communicate with the public through risk communication and community engagement .	Educate and actively communicate with the public through risk communication and community engagement .
Case finding, contact tracing and management	Conduct active case finding , contact tracing and monitoring; quarantine of contacts and isolation of cases.	Enhance active case finding , contact tracing and monitoring; quarantine of contacts and isolation of cases.	Intensify case finding , contact tracing, monitoring, quarantine of contacts , and isolation of cases.	Continue active case finding, continue contact tracing where possible, especially in newly infected areas, quarantine of contacts , and isolation of cases; apply self-initiated isolation for symptomatic individuals.
Surveillance	Consider testing for COVID-19 using existing respiratory disease surveillance systems and hospital-based surveillance.	Implement COVID-19 surveillance using existing respiratory disease surveillance systems and hospital-based surveillance.	Expand COVID-19 surveillance using existing respiratory disease surveillance systems and hospital-based surveillance.	Adapt existing surveillance systems to monitor disease activity (e.g. through sentinel sites).
Public health measures	Hand hygiene, respiratory etiquette, practice social distancing .	Hand hygiene, respiratory etiquette, practice social distancing .	Hand hygiene, respiratory etiquette, practice social distancing .	Hand hygiene, respiratory etiquette, practice social distancing .
IPC	Train staff in IPC and clinical management specifically for COVID-19.	Train staff in IPC and clinical management specifically for COVID-19.	Train staff in IPC and clinical management specifically for COVID-19.	Retrain staff in IPC and clinical management specifically for COVID-19.
	Prepare for surge in health care facility needs, including respiratory support and PPE.	Prepare for surge in health care facility needs, including respiratory support and PPE.	Advocate for home care for mild cases , if health care systems are overwhelmed, and identify referral systems for high risk groups.	Implement health facilities surge plans.

<p>Laboratory testing¹</p>	<p>Test all individuals meeting the suspected case definition</p> <p>Test a subset of samples from SARI/ILI surveillance for COVID-19</p> <p>Test patients with unexpected clinical presentation or an increase in hospital admissions in a specific demographic group that could be COVID-19</p>	<p>Test all individuals meeting the suspect case definition</p> <p>Considerations in the investigation of cases and clusters of COVID-19</p> <p>Clinical management of severe acute respiratory infections when novel coronavirus is suspected.</p> <p>SARI/ILI surveillance for COVID-19 and reporting: see Interim operational considerations for COVID-19 surveillance using GISRS.</p>	<p>Test all individuals meeting the suspected case definition</p> <p>Considerations in the investigation of cases and clusters of COVID-19.</p> <p>Clinical management of severe acute respiratory infections when novel coronavirus is suspected.</p> <p>SARI/ILI surveillance for COVID-19 and reporting: see Interim operational considerations for COVID-19 surveillance using GISRS.</p>	<p>If diagnostic capacity is insufficient, implement prioritized testing and measures that can reduce spread (e.g. isolation), including priority testing of:</p> <ul style="list-style-type: none"> • people who are at risk of developing severe disease and vulnerable populations, who will require hospitalization and advanced care for COVID-19 (see Clinical management of severe acute respiratory infections when novel coronavirus is suspected). • symptomatic health workers (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) • the first symptomatic individuals in a closed setting (e.g. schools, long term living facilities, prisons, hospitals) to quickly identify outbreaks and ensure containment measures
<p>Case management strategy²</p>	<p>Set up screening and triage protocols at all points of access to the health system;</p> <p>Prepare to treat COVID-19 affected patients;</p> <p>Set up COVID-19 hotline and referral system;</p> <p>Ready hospitals for potential surge.</p>	<p>Screen and triage patients at all points of access to the health system;</p> <p>Care for all suspected and confirmed patients according to disease severity and acute care needs;</p> <p>Ready hospitals for surge;</p> <p>Ready communities for surge, including by setting up community facilities for isolation of mild/moderate cases.</p>	<p>Screen and triage patients at all points of access to the health system;</p> <p>Care for all suspected and confirmed patients according to disease severity and acute care needs;</p> <p>Activate surge plans for health facilities.</p>	<p>Screen and triage patients at all points of access to the health system;</p> <p>Care for all suspected and confirmed patients according to disease severity and acute care needs;</p> <p>Scale up surge plans for health facilities and ad-hoc community facilities, including enhancement of COVID-19 referral system.</p>
<p>Case management recommendations by case severity and risk factors²</p>	<p>Test suspect COVID-19 cases according to diagnostic strategy¹</p> <p>Mild cases and moderate cases with no risk factors: Isolation/cohorting in:</p> <ul style="list-style-type: none"> • Health facilities, if resources allow; • Community facilities (i.e. stadiums, gymnasiums, hotels) with access to rapid health advice (i.e. adjacent COVID-19 designated health post, telemedicine); • Self-isolation at home according to WHO guidance <p>For moderate cases with risk factors, and all severe/critical cases: Hospitalization (in-patient treatment), with appropriate isolation and cohorting.</p>			

Societal response	Develop all-of-society and business continuity plans.	Implement all-of-society resilience, repurpose government and ready business continuity plans.	Implement all-of-society resilience, repurpose government, business continuity, and community services plans.	Implement all-of-society resilience, repurpose government, business continuity, and community services plans.
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1 For full details, see WHO's guidance Laboratory testing strategy recommendations for COVID-19 available here: https://apps.who.int/iris/bitstream/handle/10665/331509/WHO-COVID-19-lab_testing-2020.1-eng.pdf

2 For full details, see: WHO Guidance: Operational considerations for case management of COVID-19 in health facility and community, available here: https://apps.who.int/iris/bitstream/handle/10665/331492/WHO-2019-nCoV-HCF_operations-2020.1-eng.pdf