WHO Standards Health Emergency kits - Overview

April 2021
What the WHO standard kits?

WHO standard emergency health kits

IEHK 2017
Interagency Emergency Health Kit (IEHK) 2017
Each kit serves 10,000 people for 3 months

Cholera kits 2020
Each kit serves 100 patients

TESK 2019
Trauma and Emergency Surgery Kit (TESK) 2019
Each kit serves 50 hospitalized trauma patients

NCDK 2016
Non communicable diseases kit (NCDK) 2016
Each kit serves 10,000 people for 3 months

Pneumonia kit 2020
Each kit serves 100 cases

PED/SAM 2020
Sick Children (including SAM)
Each kit serves

https://www.who.int/emergencies/emergency-health-kits
Development of WHO standard kits

- Each WHO kit is owned by the corresponding technical units (initiating update, revision, changes, communications, etc)

- Each WHO kit has been developed in close collaboration/consultation with other organisations

- Communication material and training is organised within WHO for better understanding of our WHO kit and the complementarity of partners' kit to respond to emergencies
TIPS for quantifying / ordering WHO kits

- Pay attention to **the target population versus number of interventions**. While some kits are designed for blanket coverage of populations, others are designed for a specific number of interventions.

- A kit addresses **only certain types of health conditions**. It may be necessary to order different kits/modules to be used in conjunction.

- When quantifying kits to address needs, **consider ordering less modules containing equipment versus those containing medicines and supplies** (especially for repetitive orders).
TIPS for quantifying/ordering WHO kits

- All WHO kits can be ordered by module therefore, **target the modules needed**

- IEHK-2017 or PED/SAM2020 kit **include malaria modules** align with the national protocols and prevalence before ordering those modules

- **The lead time** for receiving a kit varies, depending on quantity and type of kits ordered

- Bear in mind that emergency health kits are a complete set of items to address a specific situation **and not for replenishment of specific medical items in the kit**.

- To ease the transition after the acute phase anticipate the **transition to bulk items** at an early stage
IEHK (2017)

Structure:
Basic module (PHC)
Supplementary module (SHC)

Purpose: The IEHK is intended for use only in the early phase of an emergency. The complete kit provides the essential medicines and medical devices (renewable and equipment) urgently needed in a disaster situation.

Target: covers a population of 10’000 / 3 months

The kit is neither designed nor recommended for re-supplying existing health-care facilities. It is not designed for immunization, nutritional programmes, resuscitation/surgical activities and management of communicable diseases such as HIV/AIDS, tuberculosis or leprosy. Supplies related to these diseases should be identified on the basis of a need assessment.
Modules of the IEHK-2017

- **Basic modules** to serve a population of 1’000 person at primary health care settings
- **Supplementary modules** to serve a population of 10’000 person at hospital care settings

*It means that the kit is design to serve a catchment area of 1’000 or 10’000 persons*

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IEHK-2017 structure

**Basic module**
- Basic module: 10
- Malaria unit: 10
  - 1,000 people
  - 10,000 people

**Supplementary module**
- Medicines
- Medicines (controlled)
- Medicines (cold chain)
- PEP unit
- Malaria unit
- Equipment
- Renewable
  - 10,000 people

**Interagency Health Kit 2017**
- Medicines and medical items for 10,000 people for 3 months
- Approx. Weight: 1,200 kg
- Approx. Volume: 6.5 m3
### IEHK (2017) Technical background of the medicine modules

#### Basic module medicine & supply & equipment
- Only 1 antibiotics – Amoxicillin 250mg
- Can be handled by non-qualified health care worker (PHC-community)

No medicines for NCD, HIV or TB
NCD medicines are in the NCDkit

#### Basic malaria
- ACT to treat 150 baby, 30 children, 30 toddlers, 180 adults
- Includes PQed RDTs : 800 tests

Co Artem might NOT be the first line treatment in the country

#### Supplementary medicines
- Essential medicines for the hospital care : tablets and injectables (painkiller, antibiotics and NCD medicines)
- Few IV fluids

#### Supplementary controlled medicines
- Contains medicines that require an import permit (morphine, ketamine, diazepam, ect)

#### Supplementary Malaria
- Contains only one medicine artesunate 60mg
- To treat complicated malaria ONLY estimated prevalence of 1-5%
- To be used in Hospital setting ONLY

If ACT treatments are needed for OPD, please add the basic module malaria and adjust the quantity according to expected external consultations.
Before ordering, make sure that the health care workers are familiar with the use of DTG for PEP.
NCD (2016)

Structure:
1a Basic module medicines
1b Basic module cold chain medicines
1c Basic module supply & renewable
1d Basic module supply for equipment
1e Basic module equipment

Purpose: Focus primarily on most common NCD amenable to PHC management: hypertension/CVD, Diabetes, Chronic respiratory diseases plus selected mental health and neurological conditions

Target: covers a population of 10’000/3 months
NCDK 2016

For Primary health care setting ONLY

**Basic module medicines**

- Medicines to treat diabetes, hypertension, cardiovascular disease, and chronic lung disease (Oral form only- no injectable)
- Contains also some drugs for Mental health and epilepsies
- Do not contain anti-cancer medicines

**Cold chain medicines**

- 3 types of insulin (long, rapid and mix 70/30)
- Glucagon hypo kit
- Insulin syringes

Upon arrival check the data logger inside to ensure the quality of the medicines

**Equipment**

- Contains a Glucometer. Depending on the supplier you might receive different brand. However all the glucometers and accessories are available on the WHO catalogue
- Stethoscope, otoscope, ophthalmoscope, peak flow meter, thermometer.

**Equipment supply**

- Contains the blood strip. As brand tied it is better to re-supply as bulk through the catalogue.
Structure:
Module 1: SAM medicines
Module 2: Oral medicines
Module 3: Injectable medicines
Module 4: Controlled medicines
Module 5: Malaria medicines
Module 6: Renewable
Module 7: Equipment

Purpose: The PED/SAM kit is especially designed to treat the most common childhood illness including severe acute malnutrition with medical complications. It contains child-size medicines.

Target:
✓ Module 1: to treat 50 SAM children (same as the old SAM kit)
✓ Module 2 & 3 for children's outpatient or at hospital (paediatric ward of 10-15 beds for 3 months)
Structure:
Module 1: medicines
Module 2: supply & equipment

Purpose:
The new Pneumonia kit 2020 is specially designed to provide sufficient child-size antibiotics to treat pneumonia, targeting children under 5 years of age. It aims to provide life-saving treatment based on the WHO protocols. WHO treatment guidance for pneumonia should be treated with antibiotics.

Target:
To treat 100 cases of pneumonia among which 60 cases of children ≥ 5 years old and 40 cases of children < 5 years old and adults.
CHOLERA kits (2020)

Structure:
kit 1: Central reference kit
Kit 2: Periphery kit
Kit 3: community kit
Kit 4: hardware kit
Kit 5: Investigation kit 2020
Kit 6: Laboratory kit 2020

Purpose: designed to support the first month of initial cholera outbreak response (kits 1-4) and/or support alert and surveillance (kits 5-6).

Target: to support **EXISTING** structures at central, peripheral and community level with case management of 100 cases

Calculation tool: https://openwho.org/courses/cholera-kits
What’s new? What changed

Cholera kits 2020

KIT, CHOLERA CENTRAL REFERENCE (1), complete
KIT, CHOLERA PERIPHERY (2), complete
KIT, CHOLERA COMMUNITY (3), complete

Minor adjustments were made to round up quantities, no addition or removal

KIT, CHOLERA HARDWARE (6), complete

✓ Module shelter
✓ Module Water
✓ Module sanitation
✓ Module support
✓ Module fencing
✓ Module motor pump
✓ Module water tool box, basic
What’s new? What changed

KIT, CHOLERA LABORATORY (4), 100 samples, complete

✓ The content of the laboratory kit has been completely revised by the Global Task Force on Cholera Control Laboratory working group.

✓ The word “checklist” was removed as it is a fixed kit with items to support the laboratory analysis of 100 samples.

The only KIT, CHOLERA INVESTIGATION (5), complete

✓ The only change to the investigation kit was the addition of a second box of RDTs. (WHO recommends that RDT positive samples be sent for culture, so it makes sense to have more RDTs than culture transport medium)

✓ Development of Job aids (French/english) (https://www.who.int/emergencies/emergency-health-kits/revised-cholera-kits)
Online presentation of the Cholera kit 2015 is still valid

Video lecture: Background on revised cholera kits

https://openwho.org/courses/cholera-kits/items/16c602fOZaw5oKJ4QNIvYE
Structure: TESK-2019

Module 1: Drugs & Renewables,
- Sub-Module 1A: 7 sets of medicines
- Sub-Module 1B: 11 sets of renewable commodities
- Sub-Module 1C: 3 sets supplementary renewables/equipment

Module 2: Surgical Instruments
- 24 Sets of surgical instruments

Purpose: WHO TESK is intended to provide the resources needed for surgical procedures in operating theatres. This kit is intended for use by health care providers who are trained in appropriate management of emergent surgical issues and are acting within their scope of practice.

Target: For 50 patients requiring surgical care in emergency situations assuming 2 operations per patient (100 interventions)

The composition of TESK has been revised in collaboration with the International Committee of the Red Cross to meet the dynamic requirements of emergency situations.
## Modules of the TESK 2019

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# Surgical instrument sets

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Thank you

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