

Resolution

CD61.R9

STRATEGY ON INTEGRATED EMERGENCY, CRITICAL AND OPERATIVE CARE 2025–2030

The 61st Directing Council,

Having reviewed the *Strategy on Integrated Emergency, Critical and Operative Care 2025–2030* (Document CD61/11);

Recognizing the vital role of integrated emergency, critical, and operative (IECO) care in providing comprehensive responses to a wide range of health emergencies, from acute medical conditions to complex surgical interventions;

Acknowledging the disparities in access to IECO care across the Region of the Americas and the urgent need to expand these services in underserved areas, thereby ensuring the right of all individuals to timely and effective health care;

Aware of the need to strengthen health system resilience in response to natural disasters, pandemics, and noncommunicable diseases;

Understanding the importance of strategically enhancing IECO care through the design and organization of these services within integrated health service delivery networks, through the adoption of digital health technologies for improved coordination, comprehensive training for health care professionals, and the implementation of quality and safety standards in all settings;

Emphasizing the need for IECO services to be provided as an integral part of the primary health care approach, which fosters seamless patient referrals across different levels of care, placing patients at the center of a well-coordinated health care continuum spanning primary, specialized, emergency, critical, and operative care,

Resolves:

1. To approve the *Strategy on Integrated Emergency, Critical and Operative Care 2025–2030* (Document CD61/11).
2. To urge all Member States, considering their contexts, needs, vulnerabilities, and priorities, to:

- a) implement the strategic lines of action contained in the *Strategy on Integrated Emergency, Critical and Operative Care 2025–2030* (Document CD61/11);
 - b) improve the design and enhance the integration of emergency, critical, and operative care across health service networks to ensure a seamless continuum from prehospital settings—including primary care and medical transport—to hospital care, thereby supporting universal access to IECO services with financial protection for the population;
 - c) invest in the infrastructure of health care facilities to support operational efficiency and safety in IECO care, ensuring continuous access to essential utilities and technologies, and adopt digital clinical decision support systems to optimize patient triage, waiting lists, and management of critical care resources;
 - d) utilize evidence-based tools and integrate clinical guidelines into local protocols to standardize care across different health care settings, thereby improving patient outcomes and care quality while actively engaging patients and communities in their health care journey;
 - e) adopt measures to ensure the protection of health workers in IECO care and prioritize the continuous education and training of health care professionals across all levels of care, incorporating new information and communication technologies, telehealth, online education, and learning networks to enhance response capacity and quality of performance.
3. To request the Director to:
- a) provide technical cooperation to Member States to strengthen capacities that contribute to the implementation of the strategy and the achievement of its strategic lines of action;
 - b) promote collaboration among Member States in relation to the strategy on IECO care;
 - c) report periodically to the Governing Bodies of the Pan American Health Organization on the progress made and challenges faced in the implementation of the strategy through a midterm review in 2028 and a final report in 2031.

(Seventh meeting, 3 October 2024)
