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Healthcare organization management — Pandemic response (respiratory) — Guidance on medical support for socially vulnerable groups

Management des organisations de soins de santé — Réponse en cas de pandémie (respiratoire) — Recommandations relatives au soutien médical pour les groupes socialement vulnérables

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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO document should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

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For an explanation of the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT), see www.iso.org/iso/foreword.html.

This document was prepared by Technical Committee ISO/TC 304, *Healthcare organization management*.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

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Introduction

Coronavirus disease 2019 (COVID-19) is the infectious disease caused by the most recently discovered coronavirus that is currently affecting many countries around the world. The World Health Organization (WHO) declared the outbreak of the novel coronavirus "a public health emergency of international concern" on 30 January 2020 and a global pandemic on 11 March, 2020.

Public health crises pose a threat to lives, escalate socioeconomic crises, and jeopardize survival. These crises affect all members of society, but pose a greater threat to those already affected by structural inequalities. If the dignity of socially vulnerable groups is compromised due to a pandemic resulting from an infectious disease, such an infringement constitutes the violation of the dignity of all individuals who are equal as human beings.

Caring for socially vulnerable groups is important as it can strengthen social structures. According to *Strengthening and adjusting public health measures throughout the COVID-19 transition phases, policy considerations for the WHO European Region*, published by the WHO Regional Office for Europe, strengthening social structures needs to be considered as a way of reducing socioeconomic damage, which can contribute to the reinforcement of social cohesion and engagement while ensuring that no one is left behind. In doing so, society can also meet the need for medical and social services, thereby ensuring the health and recovery of its members.

Thus, this document provides guidance to enable humanitarian aid providers and local communities to plan, establish and support a set of minimum multi-sectoral responses in terms of essential social welfare services and medical support for socially vulnerable groups, in an effort to respect human rights based on the dignity of all members of society in the event of a respiratory epidemic disaster.

The implementation of this document requires comprehensive cooperation among various actors involved in humanitarian aid. In the midst of a global pandemic of an infectious disease, it is difficult to expect that any single local community or organization has the capability to implement all necessary minimum responses on its own. This document can be utilized by all humanitarian aid actors to coordinate and organize the necessary forms of support. It is particularly important for local communities and authorities to actively engage at all levels; and their engagement is essential in order to successfully adjust and implement support measures, enhance local capacity, and ensure sustainable support.

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Healthcare organization management — Pandemic response (respiratory) — Guidance on medical support for socially vulnerable groups

1 Scope

This document provides guidance on essential social welfare services and medical support for socially vulnerable groups, who are likely to be in greater danger in the event of a respiratory epidemic disaster.

This document applies to those:

a) providing essential social welfare services for socially vulnerable groups in the event of a respiratory epidemic disaster;

b) providing essential medical support for socially vulnerable groups in the event of a respiratory epidemic disaster.

2 Normative references

There are no normative references in this document.

3 Terms and definitions

For the purposes of this document, the following terms and definitions apply.

ISO and IEC maintain terminology databases for use in standardization at the following addresses:

— ISO Online browsing platform: available at https://www.iso.org/obp

— IEC Electropedia: available at https://www.electropedia.org/

3.1
coronavirus
virus that is part of a large family of viruses that can cause illness in animals or humans

Note 1 to entry: In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The coronavirus discovered in 2019 causes the coronavirus disease COVID-19.

[SOURCE: ISO 5472:2022[13], 3.3]

3.2
respiratory epidemic disaster
disaster in which the spread of a respiratory infectious disease causes increasing damage and ends slowly with the development of vaccines, cures or herd immunity

[SOURCE: Korean Society for Traumatic Stress Studies[12]]

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