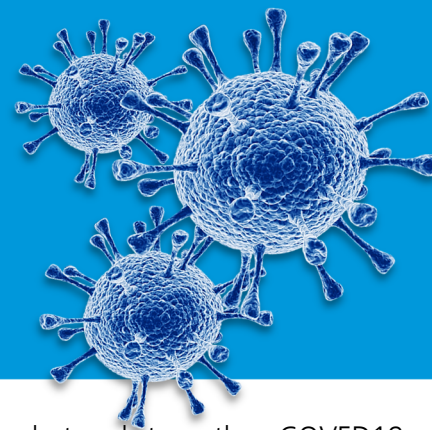


Good Practice of State Level Mobilization for COVID-19: Case Study of Kerala



The Kerala State Government have taken several pro-active measures to combat and strengthen COVID19 emergency preparedness in its cities. The following are some of the action points adopted by the state:

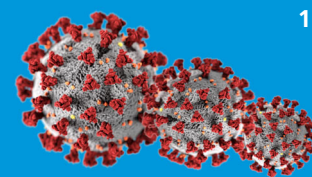
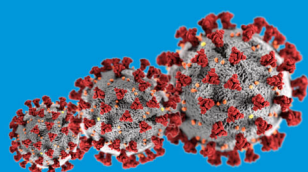
1. Screening and Testing

- a) Airports – Both domestic and international airports had health team to screen passengers. Passengers who had strong symptoms were sent to isolation wards in nearest hospitals. People who are suspected were asked to be in home quarantine and allowed to use own transportation. Later it was found problematic and govt decided to send them in ambulance to home.
- b) Foreigners, natives and non-Keralites were screened, tested, isolated, and treated for free of cost.
- c) Railway stations – Screening of people by health volunteers in all platforms to ensure 100% coverage of passengers.
- d) Bus Stations and public places were covered by health volunteers to screen people
- e) State Border points – checked passenger vehicles, drivers of goods vehicles etc.
- f) Documentation of state level screening and testing guidelines¹.

2. Public Health Infrastructure

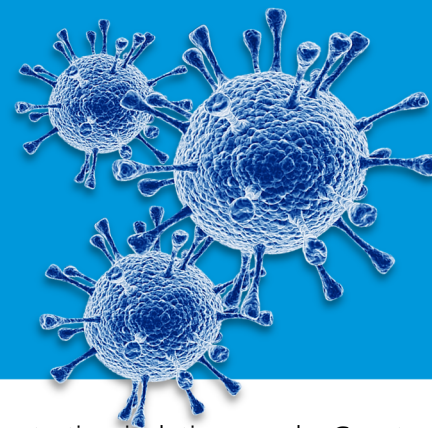
- a) In the first phase samples were sent to Pune, later asked permission to start own testing facilities in Kerala, like Alappuzha virology institute, Rajiv Gandhi Bio Tech Centre and couple of medical colleges. Now selected private hospitals were also allowed to do testing.
- b) Reserved 10% of ICU beds in private and government hospitals across the State.

¹ http://dhs.kerala.gov.in/wp-content/uploads/2020/03/interim_24032020.pdf



Good Practice of State Level Mobilization for COVID-19:

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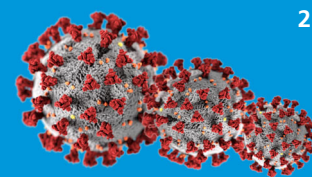
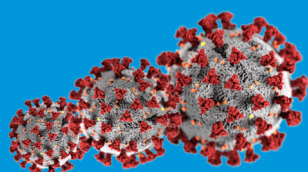
- c) District Collectors were asked to identify buildings suitable for starting isolation wards. Guest houses, rest houses, College hostels, abandoned buildings, etc. were identified and did repairing to suit it for isolation wards.
- d) Added more beds in Taluk Hospitals and started Corona care special units in all districts
- e) Reserved a small percent of ventilators in existing hospitals and ordered for new ventilators.
- f) Helpline was provided at Disha where people can call and inform about a suspected case. They will send ambulance to take the person for testing and if necessary, will transfer the person to the hospital.
- g) Appointed 400 doctors and 200 health inspectors
- h) Asked retired doctors and paramedics to be ready for availing services

3. Monitoring

- a) Health department, local self-government and Police department jointly formed teams at ward level in each Panchayath to report people with recent foreign travel history and to monitor people in quarantine.
- b) The violators were reported for criminal offence
- c) Route maps of people with COVID19 were published and each primary and secondary contacts were listed and put them in observation in home for 14 days.

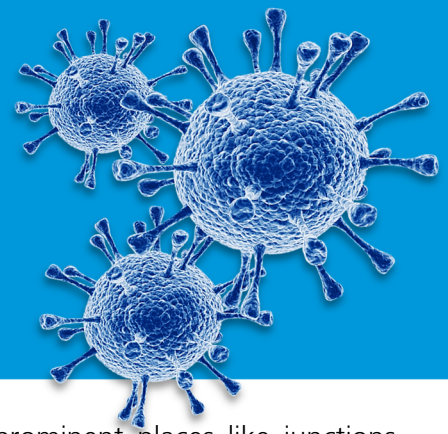
4. Institutional mechanism

- a) Ward level Emergency Medical Team was formed with the leadership of ward councilor or panchayath member. There will be health officials, LSG officials and volunteers.
- b) The team will ensure campaign and awareness in affected region.
- c) The team will facilitate food supply for people in quarantine



Good Practice of State Level Mobilization for COVID-19:

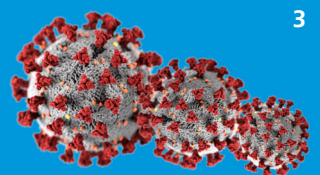
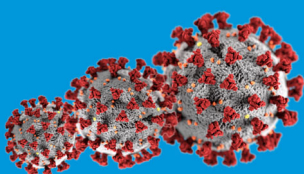
Case Study of Kerala



- d) The team will establish hand wash units in each ward at prominent places like junctions, commercial centres, markets etc.
- e) Community Kitchens were opened to ensure food supply for those who are helpless during curfew and lock down including people in observation
- f) Homeless people were listed and moved them to nearest temporary shelters and ensured food and medicines
- g) Government offices opened up help lines for people who wanted to interact with concerned departments or sections.
- h) Offices started functioning with half of the staff. While 50% of staff coordinate and work from home, 50% will be in office. This is to avoid the risk of getting all staff quarantined in any unfortunate exposure
- i) LSGs started clean ups, disinfecting of public places, establishing hand wash units and campaigns
- j) LSGs also started making hand sanitizers, face masks with cloth as there was an acute shortage of these products.
- k) Women Self Help Groups under Kudumbashree, inmates of jail, inmates of old-age homes, associations were engaged for production of masks and sanitizers.
- l) All the public events were photo / video documented
- m) Opened a helpline phone number and provision mobile app for people in quarantine to request for food and other support.

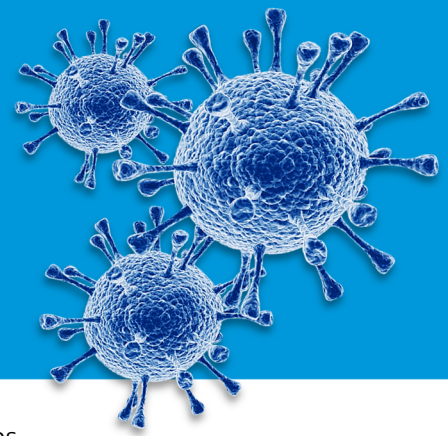
5. Welfare / Social Security

- a) State Package of 20000 Crores.
- b) One-month free ration of grains, cereals, pulses, sugar, tea etc. for every single family
- c) 2-months welfare pensions for senior citizens, widows, differently abled, farmers, artisans, etc.



Good Practice of State Level Mobilization for COVID-19:

Case Study of Kerala



- d) Rs.2000 as interest free loan through Women Self Help Groups.
- e) Fund for Community Kitchens across State.
- f) Rs.5000 per each ward for initiating hand wash units (water tank, wash basin, soap)
- g) Home delivery of food for people in quarantine
- h) People working as contract staff in government departments, municipal workers etc will get paid for the period of lock down
- i) Free COVID19 Testing and treatment including food.
- j) State level volunteer force with the leadership of local self-governments to support, monitoring, material collection, distribution and home care support.

6. Law and Order

- a) All public transports suspended
- b) No movement between districts except for goods
- c) Restricted movement within localities.
- d) Vehicles were confiscated, arrested people for violation of lock down.
- e) Essential services – fruits and vegetable stores, grocery stores, bakery, milk and meat stalls are allowed from 7 am to 5 pm.

7. Reporting / PR

- a) Chief Minister and Leader of Opposition addressed every single elected Representatives of LSGs through a special tele conferencing and explained the action plan.
- b) Prompt reporting of status of COVID19 in the State by Chief Minister on a daily basis through press conference.

