

The 11st AAAH Webinar Series 2020

**Experiences with management of Health Care
Workers during COVID-19 in Kerala, India**

COVID Scenario Kerala

Parameter	Kerala	India
Total Cases	35515	2268675
Case Per Million	1063	1644
Total Active Cases	12737	639929
Case Fatality Rate	0.32	1.99
Test Per Million	29980	18320
Sample Positivity Rate (Confirmation Rate)	3.55	8.97

COVID Care Outlets

Sample Collection & Testing

Tele Health Helplines

Co-ordination & Management

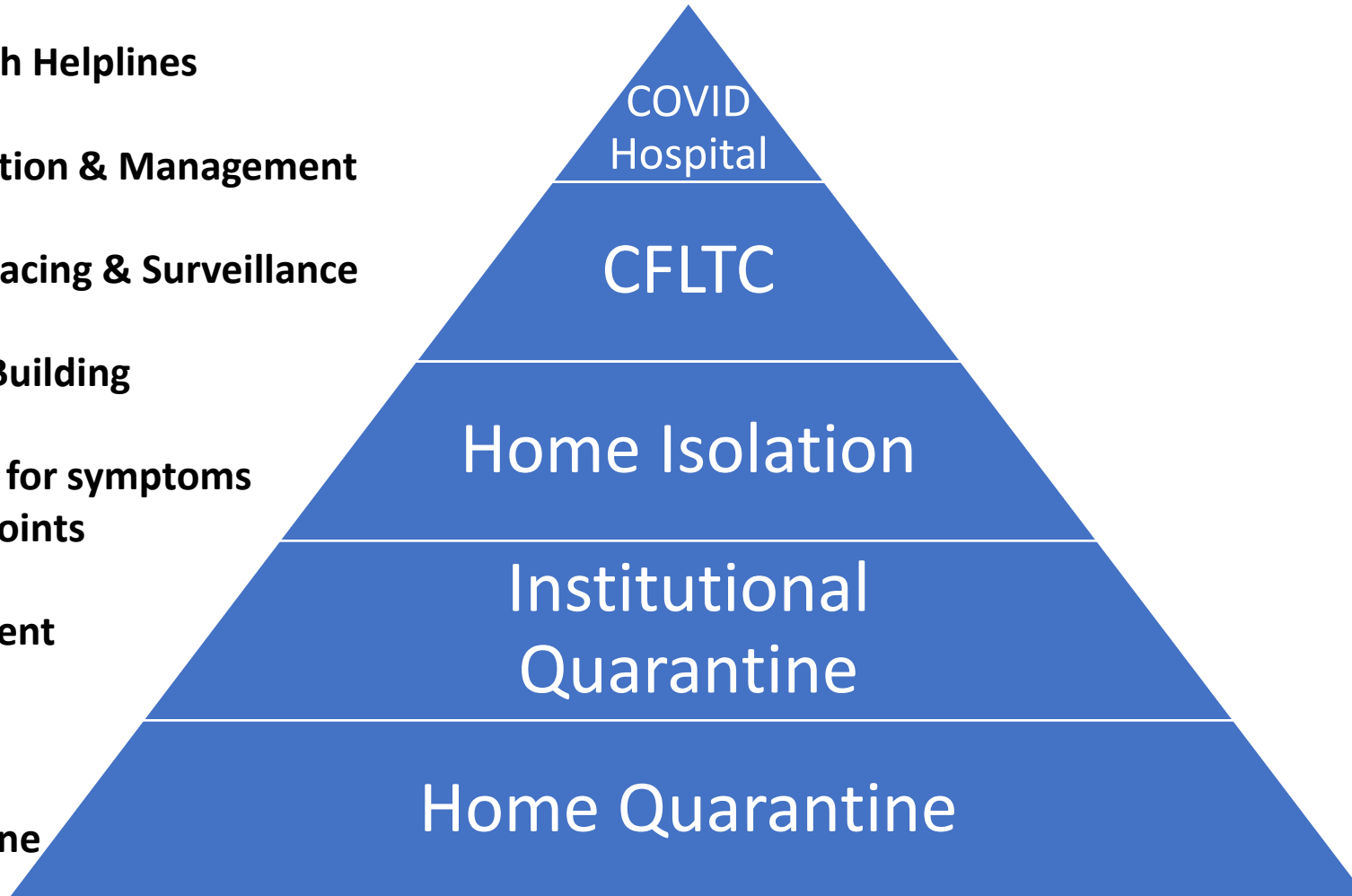
Contact tracing & Surveillance

Capacity Building

**Screening for symptoms
at entry points**

**Containment
Measures**

**Reverse
Quarantine**



Human Resource Requirement

Clinical & Administrative teams at COVID Hospitals

Clinical & Administrative Team at CFLTCs

Ensuring Home isolation, Addressing medical, non medical, psychological needs, daily monitoring

Management of IQ, Ensuring needs, daily symptom surveillance

Ensuring Home Quarantine, Addressing Medical, Non Medical, Psychological Needs. Daily Symptom Surveillance

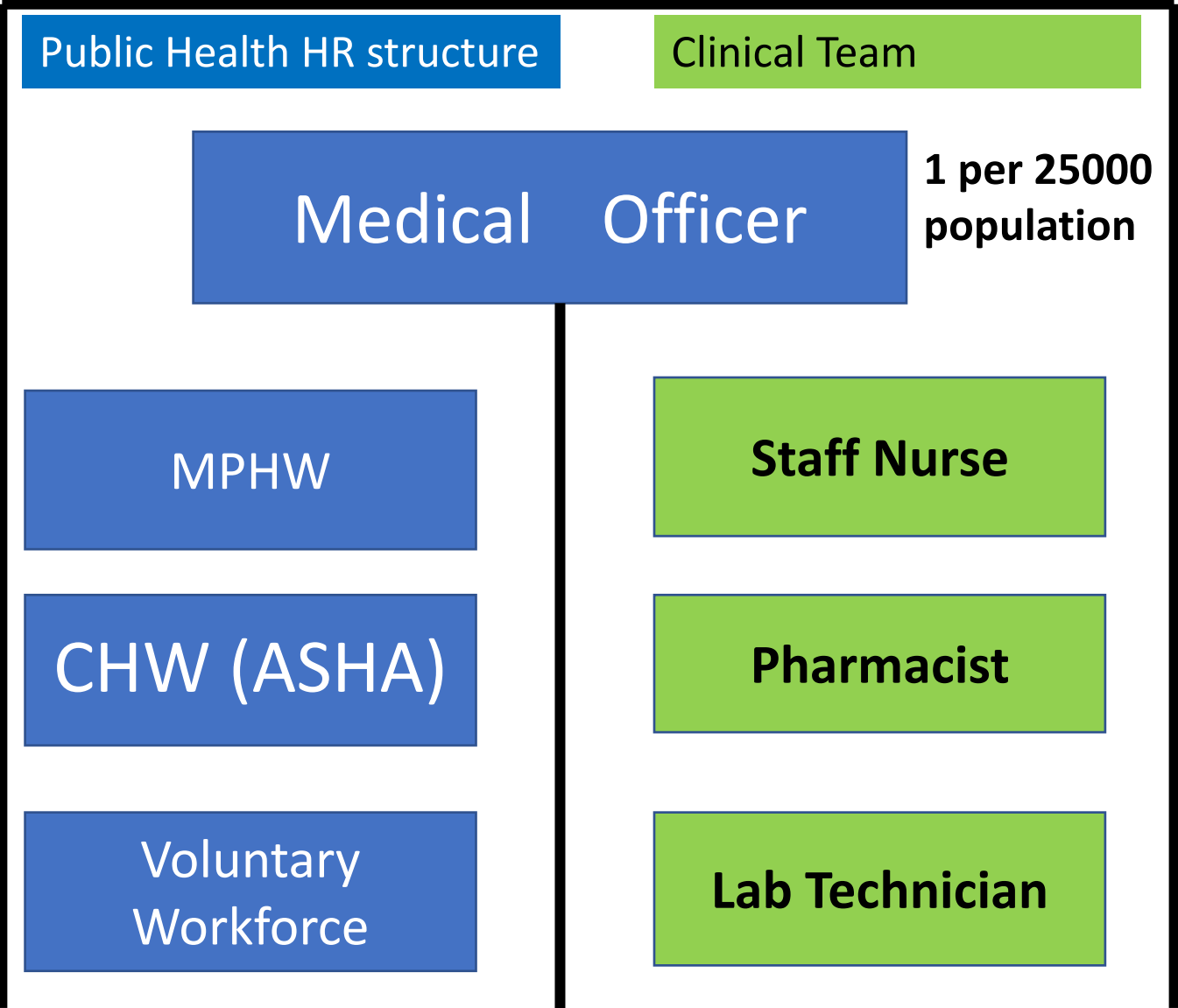
Qualified Health Workforce in Kerala

	Kerala	India
Density of Modern Medicine Doctors per 10000 population	3.2	3.4
Density of Nurses & Midwives per 10000 population	18.5	3.2
All Health Care Workers per 10000 population	31.6	9.1

WHO benchmark of 22.8 workers per 10 000 population for achieving 80% of deliveries attended by skilled personnel

Ref: NSSO 2011 data

Health Care Delivery in Kerala-Public Sector



Tertiary Care Government Facility with all super speciality
Approximately 1 per 20,00,000 population

Secondary Care Government Facility with all basic speciality
Approximately 1 per 500000 population

Role of decentralised Governance

Local Self Government – democratic decentralization

PHC centers and health institutions were brought under the jurisdiction of Local self government

This decentralized governance system & transferring ownership resulted in

- (1) HCWs and community members working together
- (2) Increased Facilities at Health centers
- (3) Ensuring accountability of HCW & social audits
- (4) Volunteer participation and community ownership
- (5) Provide additional HR from own fund based on need

Aardram Mission- Comprehensive Primary Health Care

- Transform PHCs into FHCs
- Avail the best service of the public health staff by constant skill building
- Additional HR posts created
- Extended OP hours
- Reform out-patient management procedures with state-of-the-art facilities



Strategy for Motivation to HCWs during COVID

- A motivated health care workforce is at the core of the Kerala's Response.
- “The (health) minister has talked to us directly many times over online platforms. That is our positive energy” - ASHA worker
- Many celebrities have championed health workers, taking time to learn and share about the challenges health workers are facing.
- HCW policy- Food, Accommodation, addressing psychosocial stress, adequate rest, Insurance, Free treatment, Stigma Reduction.
- These initiatives elevate and motivate health workers to strive beyond their regular responsibilities.



Strategy to Minimise Exposure of HCW

- Restricting Entry- Teleconsultations, Dispensing Medicines for longer duration
- Visitor's policy
- Physical Barriers
- Visual Alerts
- Systems for Physical Distancing
- Hand Sanitising
- Wearing Mask by patients & bystanders
- Fast Tracking
- Staff Screening Policy
- Staff Rotation & Backup teams

Infection Control Policy

Triage & Infection Control

Regular Capacity building on IPC

Adequate Supply of PPE

HCW Policy

Enhancing Health Workforce Surge Capacity

- **Dentists**
- **Nurses & Midwives**
- **AYUSH practitioners**
- **COVID Brigade**
- **Medical students**
- **Tele ICU**

Capacity building for Contact Tracing, Case Identification & Epidemiological Investigation to MPH, Medical Officers.

Epidemiology Team from Public Health Division of all Medical Colleges including Private

Volunteer Workforce - entrusted with ensuring quarantine, temperature screening, delivering medicines at door steps

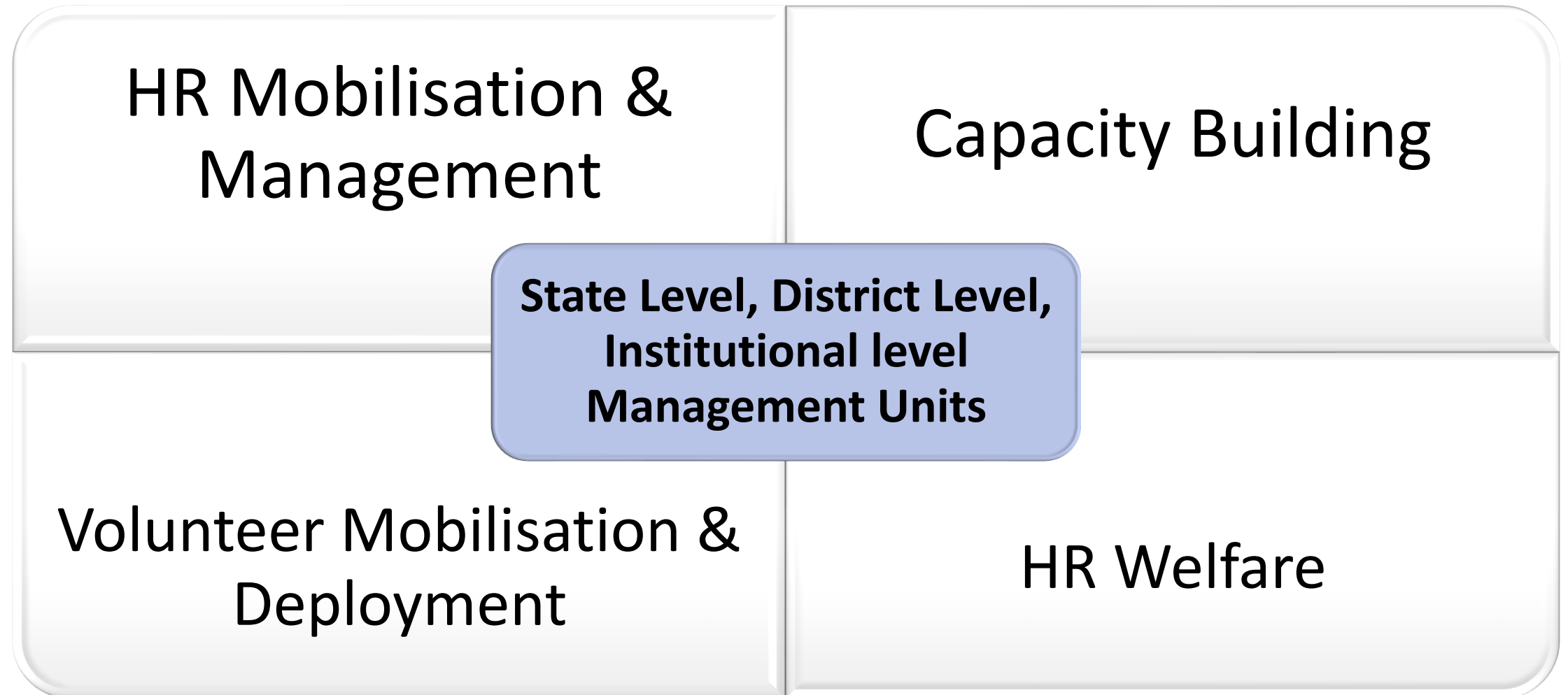
Women Self Help Groups – Proactive Care of elderly and vulnerable

Staff from other departments- Education, Local Self Government- used appropriately based on skill sets

Private Sector Engagement

- Private sector engaged as partners
- Series of meetings with Private sector management and professional organisations
- Capacity building extended to all private hospitals
- All private hospitals extending services – COVID & Non COVID care
- Scheme for Rapid empanelment of private hospitals for Insurance options

Management Structures & Governance



Thank you

