



GOVERNMENT OF KERALA

Abstract

Disaster Management Department – Establishment and management of COVID Firstline Treatment Centre – Roles, Responsibilities and Financial Provisions – General Administrative Sanction accorded - Orders issued.

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DISASTER MANAGEMENT (A) DEPARTMENT
G.O.(Rt)No.440/2020/DMD **Thiruvananthapuram, Dated 30.04.2020**

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- Read:-
- 1 GO (Ms) No. 9/2020/DMD dated 17-3-2020
 - 2 Minutes of the daily Covid-19 meeting chaired by the Hon'ble Chief Minister dated 20-3-2020
 - 3 GO (Ms) No. 12/2020/DMD dated 26-3-2020
 - 4 Minutes of the daily Covid-19 meeting chaired by the Hon'ble Chief Minister dated 28-3-2020
 - 5 Notes of Health Department No. 31/2020/Health dated 3-04-2020
 - 6 Minutes of the 14th meeting of the Crisis Management Group chaired by the Chief Secretary held on 7-4-2020
 - 7 Minutes of the 15th meeting of the Crisis Management Group chaired by the Chief Secretary held on 8-4-2020
 - 8 Email direction dated 14-4-2020 from the Member Secretary, National Disaster Management Plan
 - 9 Note from the Principal Secretary, Local Self Government dated 15-4-2020
 - 10 Email No. DM/233/2020/SDMA dated 13-4-2020 from the Member Secretary, Kerala State Disaster Management Authority (KSDMA)

ORDER

As per Government Order read as 3rd paper above, Kerala was notified as COVID-19 affected. The Kerala State Disaster Management Authority (KSDMA) was directed to prepare protocols for containing contingencies of Covid-19. As per e-mail read as 10th paper above, the Member Secretary, KSDMA has submitted a report in this regard as detailed below:-

(2) KSDMA worked on multiple Covid19 Spread Scenarios and presented before the Crisis Management Group on 08.04.2020 and Hon'ble Chief Minister on 09.04.2020.

(3) The model output proposes continuing the Break the Chain campaign, enforcing social distancing, quarantine and self-isolation and strict boarder screening. Without any intervention/restrictions, the total existing hospital capacity will be reached in 50 days even with the assumption of closed population. Effective interventions will help reduce the peak of infections to flatten the curve and move the curve to the right giving time to enhance capacity and effectively manage any contingencies. Accordingly KSDMA prepared a contingency plan for handling any upsurge of Covid19 cases in the State in association with Local Self Government Department, Public Works Department, Health and Family Welfare Department and IT Department with the aim of protecting the existing health care system by ring fencing it with Covid Firstline Treatment Centres (CFTCs). CFTCs are temporarily created medical facilities. Aim of CFTC is to manage any sudden outbreak of Covid in any local area without affecting the business continuity of the State's health care network (both public and private). Objective of CFTC is to be the firstline of hospital care for Covid-19 patients or Covid-19 suspected individuals.

(4) The roles and responsibilities of departments for establishing CFTCs as envisaged are:

i. Local Self Government - may issue necessary guidelines for financial utilisation from Plan Funds or Own Funds for the establishment of CFTCs

ia. Setup CFTCs in three phases

- Phase 1 (urban and peri-urban areas) - 50,000 beds

- Phase 2 (places with large number of home isolation or possibility of community spread)

- Phase 3 (remaining areas)

ib. Local non-medical human resource

ic. Local non-medical equipment and cosumables for sanitation

id. Food and water

ie. Waste Management

if. Management guidelines of CFTCs (Non-medical)

ig. Field inventory tracking

ih. General administration of CFTCs

ii. Health - may utilise Plan Funds or Non-plan funds for necessary procurement of health care equipment

- ii. Management guidelines of CFTCs (Medical)
- ii. Identification of spare medical human resources for operating CFTCs
- ii. Procurement of medical equipment, medicines and medical consumables
- ii. Part financial support
- ii. Medical administration of CFTCs

iii. PWD

- iiia. Inspection of infrastructure
- iiib. Minor modifications to infrastructure

iv. War Room - Inter-district supply chain

v. IT Mission

- va. IT Support for supply chain, patient tracking and ambulance management in CFTC
- vb. Database management and human resource support for field inventory collection

vi. KSDMA

- via. Overall coordination
- vib. Data analytics
- vic. Part financial support from SDRF for IT, Health and Local Self Governments

For the purpose, KSDMA pooled information regarding the following:

1. Infrastructure assets that has the potential for converting into CFTCs
2. List of medical equipment, expendables and drugs required for CFTC and tentative costing
3. List of non-medical equipment, sanitation and water plan for CFTC and tentative costing
4. List of human resource - medical and non-medical for operating CFTC

The details were shared with PWD, Health & Family Welfare Department, IT Department, Local Self Government Department and Finance Department.

(5) PWD conducted inspections of the identified infrastructure and assessed the suitability of such infrastructure to set up CFTC. In addition, PWD also identified other suitable entities which could be used for setting up CFTCs. Based on the report of PWD, a master Geospatial database was created at KSDMA and the same were shared with Local Self Government Department.

(6) The Local Self Government has informed that additional funding will be required for setting up CFTCs. It is proposed that

1. For setting a CFTC of less than 100 beds, Rs. 25 lakhs will be needed
2. For setting a CFTC of 100 to 200 beds, Rs. 60 lakhs will be needed
3. For setting a CFTC of greater than 200 beds, Rs. 60 lakh will be needed
4. The cumulative cost of setting-up CFTCs in the LSGs for adding 50,000 beds would be around Rs 430 Cr (Rs. 429.17 Cr – assuming 250 LSGs have a centre with 100 beds and 834 have 50 beds each). A part of this requirement can be met from funds available with LSG's under Plan. Additional assistance of Rs. 300 crores will be needed for Local Self Governments from State Government to set-up these centres.

(7) The Health and Family Welfare Department and Finance Department proposed that the operationalisation of CFTCs should be in a phased manner based on an epidemiological assessment by the State Expert Committee. Health and Family Welfare Department agreed to coordinate the health related activities in CFTC. KSDMA has informed that an amount of upto Rs. 100 crores may be utilised from SDRF of 2020-21 for the purpose of operationalising these additional quarantine and treatment facilities.

(8) Government have examined the matter in detail and are pleased to order as follows:-

1. Sanction is accorded, in principle, for establishing Covid Firstline Treatment Centres (CFTCs) as a contingency measure
2. The Roles and Responsibilities of the Departments/Agencies given in Para 4, i to vi are approved

3. The CFTCs will be operationalised in a phased manner based on epidemiological assessments by the State Expert Committee
4. All Departments/Agencies will remain in a state of high readiness to create and operationalise CFTCs with a prior notice of one week
5. The provision of funds for setting up CFTCs will be considered as and when the requirement arises.

(9) The Departments concerned shall take urgent necessary action in this regard.

(BY ORDER OF THE GOVERNOR)

Dr. VENU V.

Principal Secretary to Government

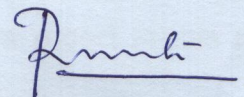
To

The Commissioner, Land Revenue, Thiruvananthapuram
The Member Secretary, KSDMA, Observatory Hills, Vikas Bhavan P.O.,
Thiruvananthapuram
The Principal Accountant General (Audit), Kerala, Thiruvananthapuram
The Accountant General (A&E), Kerala, Thiruvananthapuram
Health and Family Welfare Department
Local Self Government Department
Public Works Department
General Administration Department
IT Mission
Finance Department
Web & New Media (I & PRD) Department
Stock File / Office Copy

Copy to :- PS to Additional Chief Secretary, Finance Department

CA to Principal Secretary, GAD
CA to Principal Secretary, (Revenue & DMD)
CA to Principal Secretary, H&FWD
CA to Principal Secretary, LSGD
CA to Secretary, PWD
CA to Additional Secretary, DMD

Forwarded / By Order



Section Officer