Novel Corona Virus (COVID 19) Control and Prevention State Cell
Government of Andhra Pradesh

TOR for District Level Committees

The District Collectors are requested to constitute the following teams for containment, control and prevention of Novel Corona Virus (COVID 19) in the districts and follow these references for the steps to be taken to control COVID 19. The respective committee may co-opt the officers necessary for carrying out the activities and compiling the reports. They shall ensure that the specific activities are conducted, data collated and presented in specific format in the checklist attached and submit the same to the State Control Room, mail Id: controlroom.dhap@gmail.com. The following teams should work independently with their respective teams according to the following TOR under the direct supervision of District Collector.

District Level Corona Virus Control Teams

1. Inter Departmental Coordination, Documentation, Finance Management Committee.
2. Surveillance, Call Centre Management, Sample Tracing, Data Management Committee
3. HR Management, Trainings, Material Management Committee
4. Transportation and Ambulance Management, Expert Study Coordination, Infrastructure Management (Isolation Ward and Facilities) Committee
5. Media Surveillance, IEC & BCC & Awareness Generation Committee
6. Community Level Volunteer Coordination, Psychological support Committee

Scope /Activities of various teams

1. Inter Department Coordination, Documentation, Finance Management Committee
   a) Inter Department Coordination Team
      i) This is the most important committee which will work under direct supervision of District Collector.
      ii) There should be regular coordination between Health Department and all line departments such as School Education, Higher Education, Women & Child Welfare, Endowments, YSR Aarogyasri (for private hospitals), Drugs Control Administration,

b) **Documentation Management**
   i) Document all the minutes of the meeting related to COVID 19
   ii) Ensure proper communication of all decisions taken in the meetings
   iii) Proper communication to various teams of control room regarding meetings, guidelines, SOPs etc.
   iv) Compilation of activity reports by various teams regularly

c) **Finance Management**
   i) The district team for finance should discuss and foresee various areas of fund requirement and pool resources for all possible needs arising from time to time.
   ii) The decision regarding fund expenditure should be prepared timely and all the measures should be kept in place for smooth flow of funds.

2. **Surveillance, Call Centre Management, Sample tracing, Data Management Committee**

   **Surveillance**

   a) **Hospital surveillance**
      i) The condition of symptomatic patients admitted at isolation wards of hospitals will be closely scrutinized and reports will be sent to surveillance team
      ii) Analysis of reports

   b) **Private hospital surveillance team**
      i) Team should compile the data regarding the general public visiting private hospitals in the district and identify any missed-out contacts of suspect cases reaching private facilities
      ii) Good rapport should be ensured with the private hospitals/associations

   c) **Field surveillance**
      i) Those patients discharged from hospitals will be monitored by field workers in their corresponding PHC area.
ii) Asymptomatic travelers /contacts in home isolation will also be monitored for 28 days by field workers and report will be sent to DSO / State Cell

d) **Lab Surveillance**

   i) The DSO and District nodal officers entrusted for sample collection will inform the lab surveillance team before sample collection

   ii) Sample requisition forms will be scrutinized before sending to Virology Lab at Gandhi Medical College, Hyderabad

   iii) Liaison with districts and sample collection point

   iv) Preparation of guidelines for Surveillance and Management of COVID-19 infection

   v) Support and supervise surveillance activities at district level

   vi) Establish support system with SMO (WHO), to strengthening district IDSP surveillance system.

    vii) Identifying areas for inter-sectoral action & steps for the same.

e) **Call Center Management Team:** Control room call center should be set up in district.

The call center should be setup with mobile / landline telephone facility.

   Mandates for Call Centre

   i) Maintenance of discipline

   ii) Time Management

   iii) Call Centre will be operational 24X7

   iv) Documentation of all the activities happening in Call Centre

   v) Daily consolidation of report at 4:30 p.m.

   vi) To answer medical queries, logistics, and administrative issues regarding health and health related problems

    vii) Daily maintenance of second and third level call referral

f) **Sample Tracing Team**

   i) The team should keep a watch on sample sent to lab from the districts and answer all queries regarding the sending of samples in coordination with the public health labs.

   ii) The team should hand hold the district in transportation of samples, filling formats, collecting reports and intimate the authorities regarding the status of results, monitor and facilitate sample collection.
iii) All sample test results to be reported to the respective Superintendent of MCH, District Collector, DHS, DME, and Pr. Secretary on daily basis

g) **Data Management**
i) District Demographer and his team in should utilize all tools available to compile all the said above data formats and assist presentation of teams in daily control room meeting.

ii) The technical support of data manager IDPS should be utilized for the same.

iii) For all these parameters, district profile sheets with auto consolidated compilation sheets should be made.

iv) The sheets should be dynamic and compilation should be given access to all the District and State team leaders, MD-NHM and Spl. Chief Secretary, Health.

3. **HR Management, Trainings, Material Management Committee**

a) **HR Management**
i) Human resource management taken at district level but at any point if district needs any additional support, the needs can be communicated to state

ii) The team should have a thorough knowledge of all district HR distribution

iii) The team should also communicate the district regarding the optimum redistribution policies according to the needs

iv) Management of HR at isolation facilities and support from State Control Room can be taken for timely decisions, if necessary.

v) HR data of isolation facilities / nodal centers should be compiled on daily basis and ensure there is no shortage in any category

b) **Trainings**
i) District should train all necessary cohort timely

ii) District Level training will be done between 11th To 13th March 2020.

iii) The data should be compiled and shared with State in the required format

iv) The training materials will be disseminated by control room mail ID to all concerned, agencies, groups, IMA etc.

v) Training to Call Centre duty staff

c) **Material Management Team**
i) Material management should be done at the institution level using all possible resources under the control of Superintendent. However, there might be higher
degree of needs arising in certain situations, these needs and activities should be compiled in the District and coordinated with State team. The District team is expected to compile the activities and challenges on day to day basis and submit to the State.

The primary responsibility of the material management team is:

i) Prepare the list of items required at hospital for providing health care
ii) Monitor inventory position institution wise
iii) Ensure supply chain management of healthcare and other items requirement

4. Transportation and Ambulance Management, Expert Study Coordination, Infrastructure Management (Isolation Ward and Facilities) Committee

a) Transportation and Ambulance Engagement team

i) The team should compile the data regarding the availability, spacing, training of ambulances drivers and vehicles carrying patients from home isolation to the hospital isolation facilities and back. It should be ensured that there should be continuous availability of vehicles in all districts.
ii) The data should be compiled in the prescribed format in all the districts. All possible challenges at the district should be addressed there itself and decision taken at the State could be compiled and addressed during control room presentation.

b) Expert Study Coordination Team

They should work with DM&HO who will arrange and facilitate the visits of expert agencies provided they are coming with:

i) Approval from Head of the Institution
ii) Letter of Spl. Chief Secretary, HM&FW, for the sanction of the same
iii) Their own logistic support
iv) Should be ready to give their input regarding the present scenario and work with the current state and district team

The team should brief the District Collector and the Spl. Chief Secretary, HM&FW, regarding the feasibility, pros and cons of approval in each case after studying their backgrounds.
c) **Infrastructure Management - Isolation ward and facilities**
   i) Identify isolation place in each district for at least for 50 patients
   ii) Insure all required things in the isolation ward of these facilities
   iii) Set-up dedicated team in each district
   iv) Train the dedicated team and other health functionaries
   v) Ensure strict protocol of infection control is followed in each district
   vi) Ensure and compile the referral of contacts from field / call centers to isolation facilities in the district
   vii) Verify and compile needs of additional isolation places if the number of cases is increasing in each district
   viii) The data should be collected in the prescribed format at the District level and submitted to the State.

5. **Media Surveillance, IEC & BCC & Awareness Generation Committee**
   a) **Media Surveillance team**
      i) Print, visual and social media surveillance with the support of district team.
      ii) Collection of information regarding demand and supply of logistics, HR etc. circulated in the media, and addressing the needs by bridging the gaps after validating the information.
      iii) Validate the information collected from Media on negative outcomes and execute timely prevention and control measures by issuing rejoinder.
      iv) Reply queries to the general public regarding health-related events and information through phone numbers circulated at state level.
      v) District level compilation of Media surveillance data should also happen regularly.

   b) **IEC & BCC Awareness generation**
      i) Dissemination of prepared IEC materials including audio visual aids / training materials to health workers / volunteers / public / media.
6. Community level volunteer coordination, Psychological support Committee

a) Community level volunteer coordination team

i) The field level activity monitoring should be done by this team.

ii) Grass route level support including food kit management when more people are at quarantine should also be done with the help of SHGs and Village / Ward Secretariat should review these activities and gaps on daily basis and present it to control room meeting.

iii) Collect information of contacts and addresses.

iv) Prepare the food kits to provide to the Contacts in Home Quarantine.

b) Psychological support team

i) Team should arrange district / field team for managing post-traumatic stress related events and stress during quarantine. The field level activities should be compiled and presented during daily control room meeting.