

# PAHAL

QUARTERLY NEWSLETTER BY UP-TSU



## About UP-TSU

Uttar Pradesh Technical Support Unit (UP-TSU) was established in 2013 under a Memorandum of Cooperation signed between Government of Uttar Pradesh (GoUP) and Bill & Melinda Gates Foundation (BMGF) to strengthen the Reproductive, Maternal, Newborn, Child, and Adolescence health (RMNCH+A) and nutrition. University of Manitoba's India-based partner, the India Health Action Trust (IHAT) is the lead implementing organization.

UP-TSU provides technical and managerial support to GoUP at various levels of the health system and that includes maternal, new born, child health, nutrition and family planning. UP-TSU also supports the GoUP at the state level in policy formulation, planning, budgeting, human resource management, monitoring, contracting, procurement, and logistics to improve healthcare throughout the state.



## A NOTE BY EXECUTIVE DIRECTOR

Dear Friends,

This fifth edition of UP-TSU's quarterly newsletter, "PAHAL" comes to you during the Corona Virus pandemic when most of the focus of the health system is concentrated on dealing with this crisis. UP-TSU is supporting GoUP in the planning and implementation of its response to this outbreak.

Due to the embedded nature of UP-TSU and its focus on system strengthening interventions we have been able to establish partnership of trust and collaboration at all levels of the Government health systems right from the policy makers down to the Front Line Workers.

While the government is taking all measures to control the spread through effective surveillance, testing and management of the cases detected, we stand committed to the needs of the department of health in this trying times. Within a short span of time, we supported GoUP in the establishment and activation of L1 dedicated COVID-19 hospitals across the state followed by organizing trainings at various levels. The FLWs have been called upon to help trace suspected cases in their catchment area while making home visits in order to control community spread. They have been equipped with information about the disease, instructions on management of it and preventive practices through modules, flyers and short films etc which were developed with support from UP-TSU.

As a comprehensive response to manage and monitor the COVID-19 pandemic, an integrated COVID-19 digital platform is helping GoUP in tracking the lifecycle of persons suspected for COVID-19, right from surveillance to testing, to facility management in a seamless way. UP-TSU is also supporting Uttar Pradesh Medical Supplies Corporation (UPMSC) in procurement of medical devices, equipment, drugs, masks, N95, full PPE kits, sanitizers etc with short term minimal direct procurement support by UP-TSU.

We hope that the citizens will abide by the advisories being issued from time to time to control the spread of the disease. Together we'll soon overcome this pandemic.

(Dr. Vasanthakumar N.)  
Executive Director

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- Monitoring and Evaluation
- Procurement and GOs

Your suggestions, innovative ideas and feedback are invaluable to the success of our program.

Write to us at [iec.uptsu@ihat.in](mailto:iec.uptsu@ihat.in)



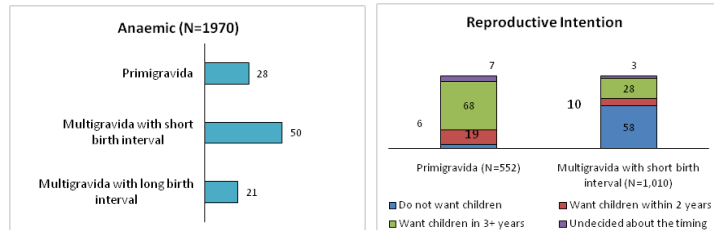
**Ms. V Hekali Zhimomi,**  
Secretary, Medical, Health  
and Family Welfare  
Department GoUP

“Usually during intervention phase we develop lot of protocols, we run pilots. However, these interventions remain limited to a particular geography. These interventions should not be limited to just 25 districts, but must expand.”



## Counselling - minimizing missed opportunities for FP

According to a Lancet study, 60% of maternal deaths in India can be averted by contraceptive use because it can prevent unwanted high risk pregnancies contributing to high infant and maternal mortality rate in UP. Also, as per CBTS-6 (2018), out of the 50% anaemic multi-gravida women with short birth interval, 86% of them didn't want children for at-least 3 years. Similarly, from the 28% anaemic primi-gravida women, 74% of them didn't want children for at-least 3 years. The figures suggest that while the unmet need is high in primi and multi-gravida anaemic women, only 46% received FP counselling during pregnancy or after delivery.



UP-TSU supported NHM-UP to organise trainings at State, District and Block level to strengthen the understanding of the potential impact of FP and building capacities of service providers on FP counselling. The participants were Medical Officers (MOs), Health Education Officers (HEOs), Staff Nurse, Auxiliary Nursing Midwife (ANM) and Hospital Nurses. 206 participants at the State and 2,463 participants at district have been trained. The number of service providers at block level facilities will be doubled from the current 3,465 that have been trained till date.

## Child Health Program Knowledge Sharing, Uttar Pradesh

A Knowledge Experience Sharing event on Child Health Interventions in Uttar Pradesh was organized by UP-TSU on January 17th, 2020 in Lucknow. The Child Health program was launched in 2014 and initially started with 3 districts and later expanded to 25 HPDs of UP.

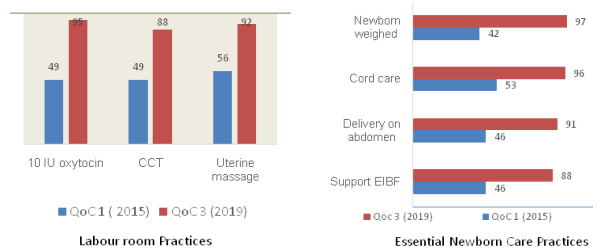
**Below mentioned are the 5 year learnings of the Child Health program:**

<p><b>Activation and Strengthening of Emergency Triage for US Children</b> Since June 2018, it has been introduced in 15 out of 25 DH and 7 out 100 CHCs.</p>	<p><b>Facility Readiness</b> Since 2018, results of CH Facility readiness assessments used to guide evidence based plans for facility strengthening at DHs in 25 HPDs.</p>	<p><b>Analysis of Referral Policy Documents for MNCH</b></p>
<p><b>Improving Quality in Nutrition Rehabilitation Centres through Rapid Evaluation</b></p>	<p><b>Improving Child Health by Understanding The Role Of The District Nurse Educator</b></p>	<p><b>Integrated Action Plan For Pneumonia and Diarrhoea (IAPPD) In Uttar Pradesh:</b> An Analysis Based on NFHS-4 and HMIS Data</p>
<p><b>Improving Knowledge through Job Aid to support management of sick US children and skills of ASHAs</b></p>	<p><b>Vulnerabilities and Risk Factors: For Severe Pneumonia and Diarrhoea</b></p>	

“The Project Summary Book of Child Health” which envisages the summary of 5 years of Child Health program was unveiled by Mr. Vijay Vishwas Pant, MD, NHM-UP, Dr. Maryanne Crockett of UoM along with other dignitaries. Around 200 people attended the event which included stakeholders from Govt. Health facilities, public health and civil society organizations among others.

## GOUP scales up UP-TSU's Nurse Mentor initiative

The initiative of UP-TSU to station a Nurse Mentor in 25 High Priority Districts has proved to be instrumental in improving the clinical competencies and practices of the nursing cadre in providing quality of care to mothers and new-borns. According to Quality of Care (QoC) there has been improvement in providing quality of care to mother and new-born in 25 HPDs of Uttar Pradesh, where UP-TSU's nurse mentors are working.



Encouraged by the evidences of improvement, GoUP has scaled up nurse mentoring program (all 820 blocks in 75 districts) to accelerate the pace of improvement of care around intra and immediate postpartum period. The newly appointed nurse mentors have undergone 6 days

### UP-TSUs 5 days training package covers following;

- » Concept, strategy and implementation status of nurse mentoring program.
- » Quality of care initiative, Adult learning principle, PDCA cycle and QI meeting.
- » LaQshya initiative- QI initiative of GoUP.
- » The mentoring methodology, skill lab guideline and protocol of clinical examination.
- » The various MNH recording and reporting formats.

Daksh training at the Trained Nurses Association of India (TNAI) Greater Noida and 3 days Dakshata training at the divisional level as per the GoI recommendation. UP-TSU has successfully completed training of 20 batches on Nurse Mentoring covering 506 NMs, 61 Maternal Health (MH) consultants.

### RRTC – collaborating with medical colleges to mentor doctors

UP-TSU showcased the achievements of the Regional Resource Training Centres (RRTCs) and acknowledged the support of medical colleges in strengthening and activating First Referral Units (FRUs) in the UP, at the All India Congress of Obstetrics and Gynaecology (AICOG-2020) organized in Lucknow on 1st of February, 2020. The best performing doctors under Buddy – Buddy model of FRU activation were also felicitated for their initiative on this occasion by UP-TSU.

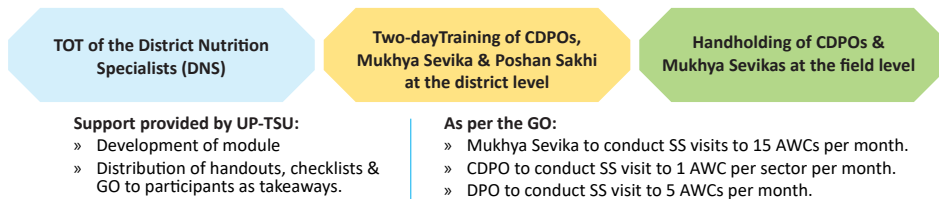
Dr. Bidyut Sarkar and Dr. Seema Tandon, presented an overview of RRTC expressing their gratitude to the faculty of medical colleges. During the first panel discussion, the faculty shared their experiences of mentoring doctors to initiate C- Section services at FRUs. The government officials and Health Professionals of the second panel discussion focused their deliberations around improving state health services specially ANC and institutional deliveries at FRUs.

### UP-TSU support for establishing a Supportive Supervision mechanism in the ICDS

UP-TSU supported the Government of Uttar Pradesh in the roll-out of Supportive Supervision (SS) training for Mukhya Sevikas, CDPOs and Poshan Sakhis in 29 districts of UP. The trainings were conducted by District Nutrition Specialists (DNSs) at the district level, following a state-level TOT in January this year. A total of 1815 participants, including 295 CDPOs, 1128 Mukhya Sevikas, and 392 Poshan Sakhis were trained in 64 batches across 29 districts during Jan- Feb 2020.

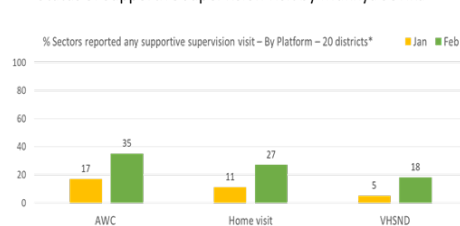
#### Supportive Supervision Mechanism

(Led by the Nutrition project of UP-TSU)



Post-training, the Mukhya Sevikas of 21 ICDS-CAS districts are visiting and filling the checklist in CAS, while Mukhya Sevikas of 8 non-CAS districts are filling the same in the hard copies of the checklist. The outcome of this training is reflected in the CAS data of 20 UP-TSU supported districts (excluding Amethi) where Poshan Sakhis are positioned at the block and sub-block level.

Status of supportive supervision visit by Mukhya Sevika



\*TSU supported districts where Poshan Sakhis are positioned at the block and sub block level. In Amethi TSU provides only District level support, hence the data of Amethi is excluded.

### Donor Team visits UP-TSU intervention sites

In January 2020, a team of experts from Bill and Melinda Gates Foundation and University of Manitoba visited Sitapur, Uttar Pradesh and observed and learnt about UP-TSUs health interventions being done at facility and community level.



Team being introduced to the interventions at District Health Facility



In interaction with staff at District Warehouse



RRTC Team and Faculty Members at AICOG-2020



SS Training Day 1 - Dr. Sriha Bhaskar, DNS Hardoi training the CDPOs and Mukhya Sevikas of Bilgram Block



Training on Supportive Supervision was helpful. Specifically, I learned about the importance of speaking politely and being empathetic towards the Anganwadi Worker for building a good work environment, which in turn will improve their efficiency. Now I envision myself as the mentor of Anganwadi Workers and focus on encouraging and supporting.

**Sangita Yadav, Mukhya Sevika, Siddharthnagar**



Understanding the role of FLWs and their engagement with communities



Team with Health facility staff

The key domains under which UP-TSU is providing its support to GoUP are as follows;

<b>Key Domain 1</b>	Community Outreach Initiatives for Prevention & Management of COVID-19
<b>Key Domain 2</b>	Gearing up the facility response by establishing and activating dedicated COVID-19 Hospitals
<b>Key Domain 3</b>	Human Resource & Capacity Building
<b>Key Domain 4</b>	Dissemination of information to ensure appropriate community response
<b>Key Domain 5</b>	Strategic use of information technology to manage the pandemic
<b>Key Domain 6</b>	Monitoring and Evaluating Support - Analytical support to GoUP in handling COVID-19
<b>Key Domain 7</b>	Streamlining supply chain system in the COVID-19

### Modules developed for FLWs

Learning Resource Package for FLWs in tackling community Spread of virus covers aspects such as;

- » Information on COVID-19 and how it spreads
- » Preventing spread of COVID-19 and role of FLWs
- » Steps for taking proper care of infected people
- » Role of FLWs in prevention of COVID-19
- » Interventions required during Home Quarantine



FLWs creating awareness in communities

### Initiatives of UP-TSU to Prevent Community Spread of COVID-19

The embedded nature of UP-TSU with its focus on the system strengthening has facilitated both the strategic planning and implementation of GoUP's response to the COVID-19 outbreak. UP-TSUs Community, Facility and System level interventions are providing support to GoUP from bottom to top in implementation of activities related to COVID-19.

#### Key Domain 1- Community Outreach Initiatives for Prevention & Management of COVID-19

Recognizing the importance of community level interventions and the role of FLWs in prevention and management of this pandemic, GoUP with the support of UP-TSU and other partners took the following initiatives:-

##### 1. Defining roles of FLWs in prevention and management of COVID-19 in UP

Active involvement of FLWs was secured through UP-TSU's initiatives to mitigate the community spread of COVID-19. ASHA and ASHA Sanginis have been successfully involved in tracking of migrants coming from other countries, states, and districts. A script on their roles has been prepared and is being read out to ASHAs through the COVID-19 call-centre. A similar letter was circulated on 27th March 2020 by the Director, ICDS Department of Uttar Pradesh, to all DPOs directing them to raise awareness about COVID-19.



Line listing of households for screening by ASHA in Etah



Village level quarantine centre in Sitapur district



AWWs are actively participating in Community led initiatives

##### 2. Development of training plan and material

After the Training of Trainers (ToT) on 27th March, 2020, at the National level, it was decided to conduct the training of FLWs in cascade model starting with a ToT at State, District and Block level where functionaries were trained centrally through virtual platforms. Subsequently, FLWs were oriented on prevention and management of COVID-19 through training modules designed for them.

#### Key Domain 2- Gearing up the facility response by establishing and activating dedicated COVID-19 Hospitals

UP-TSU team supported GoUP in the establishment and activation of 75 L1 dedicated COVID hospitals across the state within a short span of 2 weeks. Each of these hospitals has the capacity to admit a minimum of 30 positive cases and maximum of 100 cases. This ensured that 75 districts were prepared to admit, isolate and manage COVID positive cases even if the number rises to 10 times the initial numbers in mid-march. Some of the Facility level initiatives are as follows;



##### Development of Technical resource materials for facility staff on COVID-19

1. **Technical documents-** UP-TSU developed a technical document and presentation with the information on COVID-19, IP and PPE protocol, facility preparedness and case management. This was approved by GoUP, uploaded via an SMS link and used to train all the master trainers.



Principal Secretary, Health (GoUP) addressing the Master Trainers of COVID facilities through Video conference

2. **Follow-up through SMS link** - The IT cell of UP-TSU developed an SMS link which was sent to all Govt. doctors and nurses of UP registered on Manav Sampada. All the training material were uploaded to the link. 4336 doctors and 3307 nurses had accessed the link till the 8th of April and used to train staff in all districts.

**State ToT for facility staff and support in L1 trainings and post training assessments**

UP-TSU supported GoUP in coordinating and facilitating the State TOT of Master trainers for all L1 COVID hospitals via video conferencing on 25th March and 27th March. Chaired by Principal Secretary, Health and led by Director and Joint Director (VBD), the TOT was attended by other partner agencies like WHO and UNICEF. After this UP-TSU district level team facilitated selection and training of master trainers as well as team members. UP-TSU also supported the post training assessment to assess the critical knowledge and skills which care givers required to handle the COVID positive patients in L1 facilities. Master trainers were oriented on the questionnaires, OSCE checklists and the methodology of assessment to ensure uniform understanding and comparable results across all districts.

UP-TSU district level team also supported the management, roll out and follow up of Training of Medical Personnel in Non-COVID 19 Hospitals as well.



Secretary, Health (GoUP) inaugurating the district training with key note address



Various facets of ongoing Facility level trainings



Counsellor at CHC Jalalabad

**Role of Counsellors in COVID-19 support in Uttar Pradesh**

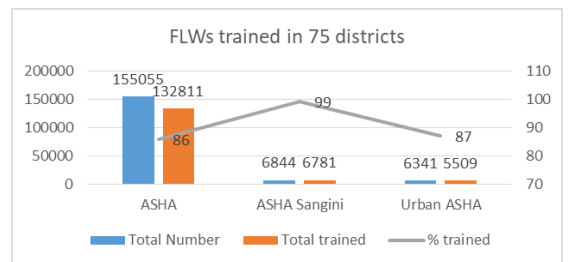
RMNCH+A Counsellors are playing a crucial role by reaching out to the facilities and spreading awareness on COVID-19 from field as well as from their home via WhatsApp groups. They have discussed the key messages that focus on social distancing and disinfection. They have also demonstrated hand-washing technique and the process of making homemade masks in their community, facility, and to ASHAs. These counsellor have reached out to over 40,000 people. They are also helping ASHAs to line-list the people who have travelled back from other countries or other states in their areas in the last 14 days.

ASHA tracking of migrants (till 13th April, 2020)	No. of migrants tracked
Total number of migrants tracked so far	689,426
# Migrants with any symptom	4,506
# Migrants with only fever/cough	3,740
# Migrants with breathlessness	766
# Migrants with no symptoms of COVID	684,920

**Key Domain 3- Human Resource & Capacity Building**

**Capacity Building of Front Line Workers for Community initiatives**

To strengthen the field level operations, Capacity Building of FLWs i.e. ASHA & ASHA-Sangini got initiated subsequently. These trainings got conducted on 5th & 6th April, 2020. As on 6th April, the training report from 75 districts shows that most of the FLWs in these districts have been trained. The graph (adjacent) shows that 86% of ASHAs, 99% of ASHA Sanginis and 87% of Urban ASHAs have been trained in 75 districts.



**Tracking of migrants by ASHAs in 28 UP-TSU supported districts**

After trainings by UP-TSU, ASHAs are inspecting 25 to 30 houses in their area every day to find the suspected cases of COVID-19 especially inter-state & inter-district migrants. Identified cases are reported to BCPM on telephonic calls. In many districts the ASHAs and AWWs worked as a team to track the migrants who came into the state.



ASHA and ASHA-Sangini tracking migrants in their area



UP-TSU supported Training of L1 Staff

**Capacity Building of Facility Staff**

UP-TSU team provided support in the Capacity Building of healthcare staff which includes formation and sharing of training material and Training of Trainers (ToTs). UP-TSU field staff like DFPS/ DTS/ ZTS supported these Master Trainers in the training of staff of L1 & L2 health facilities, staff of isolation ward in district hospitals, other doctors and nurses in public facilities including block PHCs, LA/LT, AYUSH Doctors, Ambulance Staff, and Private Doctors.

Training status by facility and cadre (as on 17th April 2020)

Details	# MO trained	# SN trained	# Other cadre staff trained	Total trained
Staff trained in L1 facility	868	863	1918	3649
Staff trained in L1 Attached facility	230	224	454	90
Staff trained in Isolation ward at DH	390	386	998	1774
Staff trained in L2 facility (6)	163	216	214	593
Staff trained in other block level facilities	6527	6430	26131	39088
Private providers trained	4050	-	-	4050
LT/LA Trained	-	-	1599	1599
Ambulance staff trained	-	-	1493	1493
<b>Overall health staff trained</b>	<b>12228</b>	<b>8119</b>	<b>32807</b>	<b>53154</b>

**COVID-19 Surveillance Platform**

Web portal and mobile app has been made to facilitate the tracking and monitoring of the COVID-19 cases. The link for the web portal <https://upcovid19tracks.in/> has been shared at all levels with separate Username & Password. The portal shows an online dashboard for each district on the indicators like Total Cases, Active Cases, Case Type, Total Testing, etc. Separate ID is given to each case for the identification purpose. The unverified cases are referred to Rapid Response Team (RRT) or BCPM by District Surveillance Officer (DSO) for verification. After testing, if a case gets confirmed then DSO refers that case to a facility through the portal.

**Key Domain 4- Dissemination of information to ensure appropriate community response**

UP-TSU designed a strategic action plan for IEC/BCC activities incorporating different needs of the rural and urban communities, healthcare staff and FLWs. IEC/BCC material developed by UP-TSU were approved by Directorate of Medical Health and then shared with DHIEOs, DCPMs, and BCPMs in each of the 75 districts of Uttar Pradesh. These IEC/BCC materials were shared with ICDS department and UP-SRLM. Flyers were converted into media content which were published in various newspapers and online portals across the state. The audio clips were shared with HCL foundation to be disseminated through their IVRS based project - SAMADHAN. Daily 6,360 beneficiaries are receiving messages on COVID-19 through IVRS.

**List of COVID-19 IEC/BCC materials developed by UP-TSU:**

**Flyer & Brochures**



**Poster & Press Ad**



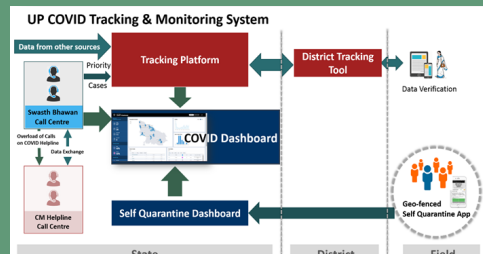
**Voice Messages**

<p>Essential information for home care and home quarantine</p>	<p>Essential message on preventive measures for the elderly Population</p>	<p>Advisory on care and protective measures for foreign returned</p>
<p>Care and protective measures for those who returned from other states</p>	<p>Essential information for FLWs such as; DO's and Don'ts for the community, what to do when in home quarantine etc.</p>	

**Short Films**



Call Centre in progress



View of Planning, Tracking & Monitoring System



COVID Websites for Training and IEC BCC

**Key Domain 5- Strategic use of information technology to manage the pandemic**

For comprehensive response to manage and monitor the COVID-19 pandemic in support to GoUP, a number of digital initiatives have been implemented by UP-TSU. These initiatives are aimed at supporting the administration in effective decision making at strategic, operational and tactical levels- based on surveillance, information management, resource management and response planning in an emergency.

**COVID Helpline Call Centre (1800-180-5145)**

In order to manage COVID-19 queries and calls of the public, Department of Medical Health & Family Welfare, GoUP has set up a dedicated 24x7 Call Center with support from UP-TSU. It will provide general information on COVID symptoms and precautions and capture details of the caller so that the caller can be sent messages and alternatively reached by the department to check on his/her prevailing symptoms and wellbeing.

- » Call centre setup within 4 days
- » More than 10,000 incoming calls handled within 5 days
- » Average per day call volume is between- 1,500 to 1,600 calls
- » 300+ Priority-1 cases have been sent for tracking

**COVID Self-Quarantine App**

In order to encourage self-reporting and social responsibility a Self-Quarantine app has been developed by the state for real time tracking of people who are quarantined at home. Information about the patient can be tracked by both the authorities and the patient.

**KEY HIGHLIGHTS**

- » SMSs about the app sent to all foreign returned citizens to download this app
- » Application registers users and enables them to upload symptoms and track their Quarantine.
- » Application captures travel history, symptoms and test results of self-quarantined person
- » The GPS location is captured for tracking.



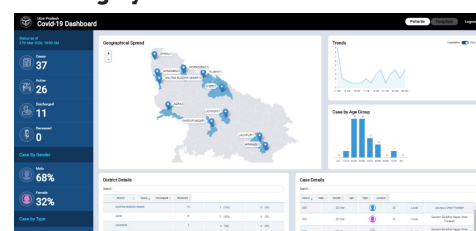
Self-Quarantine App with Geo-fencing

**COVID Case Tracking Platform**

A web and mobile application has been developed to keep a track of suspected/likely COVID cases as well as those who have been tested positive for the virus. Through the app, health functionaries in the field will be able to provide data which will make it easier for the authorities to Track, Test, and Treat (T3). All symptomatic and asymptomatic suspects are being tracked through this platform.

**COVID State Dashboard, Tracking & Monitoring System**

In order to plan resources, track, and monitor and provide information for strategic and tactical planning, a comprehensive COVID Dashboard is under development. Information from the tracking platform, Call Centres, surveillance teams and self-quarantine app will flow to the Dashboard, in near real-time.



**Dedicated COVID Website**

A website has been created for the Department of Medical & Health Services to serve as a one stop solution for sharing updated information and guideline related to COVID19.

**Key Domain 6- Monitoring and Evaluating Support - Analytical support to GoUP in handling COVID-19**

Data-based decision remained one of the key components in providing strategic inputs to control the spread of COVID-19. Key analytical support includes:

1. **Data inputs for the web-system:** Identification of suspected people, tracking their health status, and continuous monitoring over the period of 14 to 28 days was one of the primary efforts made by GoUP. While UP-TSU helped in establishing a robust IT system to enable continuous tracking, the triangulation of data from various sources formed a base to run this system efficiently. The monitoring and evaluation unit of UP-TSU supported GoUP in standardizing different data sources, data cleaning, removing duplicates and running the validation checks to bring them in usable format. A cleaned version of different data sets was then uploaded to the digital platform to smoothen the process of monitoring a huge number of suspect cases in the state.

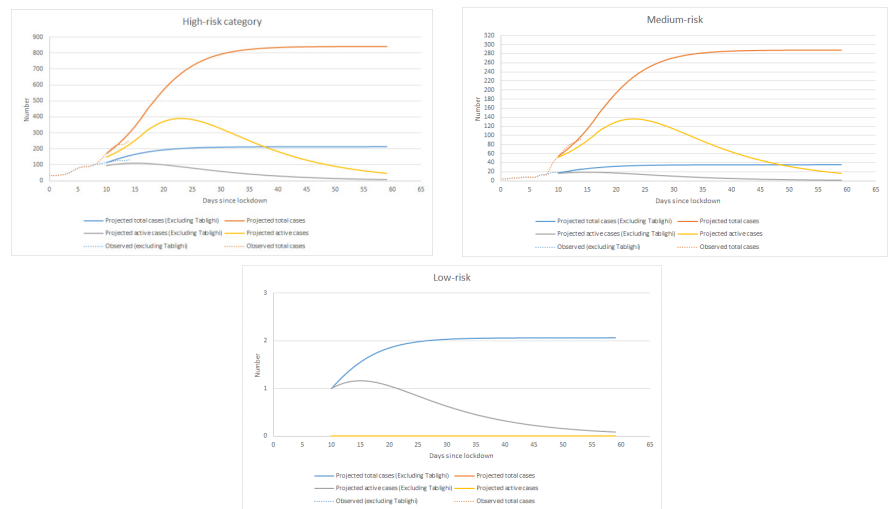
**Various Government Orders (GOs) issued for Prevention & Treatment of COVID-19**

UP-TSU provided support to GoUP in developing and detailing various Government Orders. These GOs have provided guidance for effective implementation in the field. Some of the GOs issued to address Community Spread of COVID-19 are as follows;

- » GO on Role of ASHAs during Home Visits and line listing of those who have returned from Foreign countries and other States during past 14 days issued
- » GO on line listing of Division and district wise CHCs, Hospitals, and Medical Colleges and converting them into LI COVID facilities for treating Corona infected patients
- » GO on disinfecting residential and commercial areas
- » GO on ensuring availability of Ambulances, Mobile Medical Units, and Personal Protective Equipment (PPE) for the healthcare workers.
- » GO on developing Special Level-2 Hospitals in each District Hospital to treat COVID-19 patients
- » GO for Surveillance of COVID-19 confirmed cases was streamlined and strengthened
- » GO on Delivery services for pregnant Women and Care of Sick New Borns during COVID-19

This data also helped in continuously tracking the symptoms and health status of people who were either under home or facility quarantine.

2. **Inter-linking the individual and facility level data:** Support was also provided in inter-linking the individual and facility level data and generating key indicators that were further consolidated in a web-enabled dashboard. The dashboard helped in providing a consolidated view of suspected cases, confirmed cases, quarantined cases and those which require medical assistance. The facility level data was then integrated to provide details of HR, trainings, and availability of beds, ventilators, oxygen cylinders to track the preparedness of the health system. This data was analyzed on a daily basis and pushed to the system.
3. **Modelling to estimate positive and active cases-** To ensure the system preparedness and proper allocation of resources, modelling exercise was done to estimate the day-wise total number of confirmed and active cases. The SIR model (Susceptible, Infected and Recovered) was used for the estimation of the final size of the coronavirus epidemic. The model also predicted the potential districts with more number of positive cases and those which require additional intervention. The districts were categorised into high, medium, and low risk groups to implement a differential level of intervention to curtail the spread of epidemic.



**Key Domain 7- Streamlining supply chain system in the Covid-19 pandemic**

UP-TSU provided its support to Uttar Pradesh Medical Supplies Corporation (UPMSC) in direct procurement of following commodities for COVID-19:

- » 75 Real-time PCR kits (15000 tests)
- » 2.3 Lakh Triple Layer Masks
- » 1.3 Lakh FFP2 certified N-95 Respirators
- » 3 Lakh Hydroxy Chloroquine tablets
- » 2.25 Lakh Lariago tablets (Anti-malarial)
- » 2000 PPE Kits ( in transit)

Apart from this, key supplies required for COVID-19 such as Triple Layer masks, Personal Protective Equipment, N-95 masks, Rapid testing kits, Infra-Red thermometers, Goggles, Thermal Scanners etc. are procured and are available in optimum quantity at facilities to overcome the surge in demands.



Hand washing Demonstration at household level in Rampur district



ASHA-Sangini stitching local masks in Siddharthnagar

Mask distribution by ASHA Sangini in Chitrakoot

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