Dear All,

The COVID 19 outbreak has placed unprecedented demands on our health system. Our health workforce is inundated with a plethora of activities related to controlling the pandemic. While the State and district health teams are rendering exemplary service in the management of COVID, the continuity of certain essential health services is also to be ensured. This was also discussed during the Video Conference with States on 8.4.2020.

Focusing on COVID 19 related activities, and continuing to provide essential services, is important not only to maintain population trust in the health system to deliver essential health services but also to minimize increase in morbidity and mortality from other health conditions. All emergency and critical care need to be ensured during the period of the lockdown. As per MHA Order No.40-3/2020-DM-I(A) dated 24.3.2020 and further modified on 25.3.2020, 27.3.2020, 2.4.2020 and 3.4.2020 (https://mha.gov.in/sites/default/files/PR.Consolidated%20Guideline%20of%20MH A_28032020%20%281%29_0.PDF), Essential health services are exempted and the list is given in the annexure to this letter. Hence,

- We need to ensure that the disruption to critical essential health services is minimized. Particular attention needs to be paid to providing essential health care for specific sub-population groups. These include
  - Pregnant women likely to deliver in the period of the lockdown with a particular focus on High Risk Pregnant Women,
  - New-borns and young children,
  - patients on treatment for chronic communicable and non-communicable diseases,
  - elderly people,
patients needing dialysis, chemotherapy as well as
Those requiring transfusion of blood and blood products.

- The lockdown places certain restrictions on movement and service delivery would need to be redesigned temporarily to suit the specific local context, be it urban or rural. In addition, transport, supplies of essential medicines and commodities for these population groups will need to be assured.

- States need to ensure access to care for such groups during the period of the lockdown through facilitating patient access to facilities as needed, using special passes/permits, if local administration warrant such passes and arranging transport, wherever required. This is to ensure that
  - women are transported safely to facilities for delivery,
  - birth doses of vaccines are administered in institutions,
  - new-borns and young children needing care are visited at home by ASHAs/ANMs,
  - Medicines for chronic diseases are delivered to patients who need them and ensuring adequate supplies to tide over the period of the lockdown.
  - Volunteers such as local youth who can support medicine delivery or accompanying patients can be engaged.

- The protection of our health workers should be of paramount concern. All frontline workers, undertaking home visits and participating in community interactions, nurses, medical officers and other staff who encounter patients in facilities need to be trained in the use of preventive measures such as hand-washing, maintain physical distance and other protective measures, as advised by Ministry from time to time.

As you are aware, DoHFW has released additional funds under HSS pool of FY 19-20 on 30th March 2020. Besides, under “India COVID 19 Emergency Response and Health System Preparedness Package” which is 100% centrally funded release, funds have been released to the States on 6th April 2020. States may use these funds and other flexibility under NHM to hire additional human

Contd..
resources and essential supplies that are required to ensure that COVID related activities are undertaken along with the existing essential services mentioned above.

Please let me know if you need any clarifications.

with warm regards

Yours sincerely

(Vandana Gurnani)

To
ACS / PSs / Secretary, Health of all the States/UTs

Copy to:-

- Mission Directors (NHM) of all the States/UTs
Health related services allowed under the MHA Order No.40-3/2020-DM-I(A) dated 24.3.2020 and further modified on 25.3.2020, 27.3.2020, 2.4.2020 and 3.4.2020

Point 2: O/o State/UTs, their autonomous bodies, corporations, etc

2(a) - Emergency Services

2(g) - Social Welfare Departmental Operations of homes for senior citizens

Point 3:

- Hospitals and all related medical establishments including their manufacturing and distribution units, both in public and private sector such as dispensaries, chemist, pharmacies (including Jan Aushadi Kendra) and medical equipment shops, laboratories, pharmaceutical research labs, clinics, nursing homes, ambulance, etc will continue to remain functional.

- The transportation for all medical personnel, nurses, para-medical staff, other hospital support services be permitted.

Point 4: Commercial and private establishments

4(k) - Data and call centres for Government Activities only

Point 5: Industrial establishments

5(a) - Manufacturing units of drugs, pharmaceutical, medical devices, their raw materials and intermediaries

Point 7: Hospitality services

7(a) - Hotels, home stays, lodges and motels, for medical and emergency stays

7(b) - Establishments used/earmarked for quarantine facilities

Other relevant components