KERALA'S STRATEGIES FOR COVID-19 RESPONSE:

Guidelines and learnings for replication by other Indian states

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Authors* : Mehul Das, Isalyne Gennaro, Sneha Menon, Anahita Shah, Kadambari Shah, Tvesha Sippy and Priya Vedavalli

This note comprehensively documents the policies and strategies that Kerala government adopted in responding to the COVID-19 pandemic. As other states develop their own guidelines and responses, there are several lessons worth replicating from the context of Kerala, subject to legislative processes and resource constraints. Kerala registered India's first COVID-19 case on [January 27](#) and [as on May 11](#), had registered 519 confirmed cases, 489 recovered, 4 deaths, and [27986 persons](#) have been placed under surveillance, out of which 27545 are under home isolation and 441 are admitted in designated isolation facilities. The document discusses immediate measures such as testing, tracing, treatment, medical and human resource mobilisation, intra-governmental coordination, health worker protection, followed by short term measures such as communications, legislation, primary care centres, social protection and infrastructure mobilisation and medium term measures such as mental health, epidemiological modelling, financial resource mobilisation, continuity of essential services and easing restrictions. Under each subject, measures are arranged chronologically to represent the timeline of the Kerala response.

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I.   IMMEDIATE MEASURES

1. Testing and diagnoses

Define cases comprehensively and develop clear testing protocols for each case category

A. Define important terms like Suspect Case, Laboratory Confirmed Case, Contact, High Risk and Low Risk (26 Jan, 12 Mar)

B. Began local testing labs as early as Feb 2

C. Develop a matrix (26 Jan, 1 Feb, 6 Feb, 19 Feb, 12 Mar, 23 Mar, 31 Mar) for testing, admission, isolation and discharge based on risk assessment (12 Mar).

D. Allocate a district jurisdiction to testing laboratories (25 Mar). This allocation was subsequently revised (24 Apr)

E. Begin rapid antibody testing and develop a clear criteria on eligibility (27 Mar)

F. Launch Walk-In Sample Kiosk (WISK) for quick & cheap sample collection enabling mass screening using serological tests (6 Apr)

G. Develop instructions for rapid antibody testing to check community transmission (11 Apr) and issue advisories on the use of the antibody test kits (16 Apr)

H. Issue guidelines on the use for   Polymerase Chain Reaction (PCR) based testing such as such Truenat -beta -CoV (16 April) and Xpert SARS CoV (24 April)

I. Began sentinel surveillance on Apr 23, wherein frontline workers of the health department have been testing a sample of vulnerable people across all 14 districts of the state.

2. Tracing, surveillance and quarantine

Institute measures to contact-trace, isolate or quarantine suspect cases and contain spread[1]

A. Begin screening of passengers from specific countries (23 Jan)

B. Issue guidelines for surveillance for each type of case defined (26 Jan, 1 Feb)

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[1] However, in its containment measures, the government's efforts to protect patient privacy fell short on two counts; in securing patient privacy of the family involved in the Patthanamthita cluster outbreak and in its initial contract with data science company Sprinklr.

C. Set guidelines for airport surveillance and returning tourists ([26 Jan](), [15 Mar](), [19 Mar]())

D. Conduct contact tracing at [railway stations]() in conjunction with the health department (14 March)

E. Make measures for [home quarantine]() of asymptomatic health care workers who have come in contact with a proven COVID-19 case. (24 Mar)

F. [Carry out home surveillance](): Check in on people under home quarantine and ensure that they have access to food, medicine and healthcare. (28 Mar).

G. [Release revised guidelines for containment](), that recommended classification of districts into four zones, based on number of cases and disease threat ([17 Apr]()).

H. Uptake of Kasaragod's Covid Safety app for contact tracing in other districts like Kochi ([15May]())

I. Follow up on [quarantined households]() through telephone and in-person check-in by anganwadi workers (n.d.)

3. Treatment and Case Management

Chalk out a clear treatment protocol based on symptoms and severity

A. Estimate the severity of cases and map appropriate action (14 Mar)

Severity of case	Action
Mild	No hospitalisation required, send to nearest Corona Care Centre (CCC) to get treated for mild illness
Moderate	Hospitalisation required for 8-14 days, but given limited hospital capacity, send to CCC first
Critical	Intensive care required, send to hospital

B. Issue [treatment protocols]() for three categories of patients based on their symptoms (24 Mar)

C. Develop a [telemedicine application](#) for teleconsultation with doctors (1 April)

D. Issue guidelines specifically for [critical care](#) (02 Apr)

E. Convert regular hospitals into COVID-19 Hospitals based on these [guidelines](#) (02 Apr)

4. Medical resource mobilisation

Expand access to medical services, track and replenish resources, ensure smooth logistics

A. Constitute [state medical boards](#) (02 Feb)

B. Follow medical [waste management guidelines (08 Feb)](#)

C. Create an [inventory list](#) of supplies to ensure availability (13 Mar)

D. Create a [designated ambulance](#) management system for transporting point to point probable/confirmed COVID-19 patients (13 Mar)

E. Ensure supply of [medical oxygen](#)(19 Mar, 23 Mar)

F. Convene a [high level meeting](#) to discuss shortages of Personal Protective Equipment (PPE) (21 Mar)

G. Deploy [robots](#) for feeding patients, cleaning common areas, distribution of hand sanitisers and community sensitisation (22 Mar)

H. Follow guidelines on [rational use of PPE](#) (25 Mar)

5. Intra-government Coordination and expertise

Constitute intra-governmental and expert bodies at state and district levels, meet regularly and share meeting reports publicly

A. Issued COVID-19 advisory to district governments as early as [20 Jan](#).

B. [Daily review meetings](#) held with state and district officials (30 Jan)

C. Issue specific advisories to departments such as Tourism ([26 Jan](#), [5th Feb](#)) , Animal Husbandry ([5 Feb](#), [8 Feb](#)), Education Department ([05 Feb](#))

D. Set up a [24/7 Control room](#) at State and District Headquarters with Single Window Communication between them (01 Feb) and provide [contact information](#) (10 Mar)

E.   Create   expert groups on quarantine, isolation, monitoring, contact tracing, media surveillance, laboratories, treatment protocol, training of personnel, awareness programmes, etc who meet twice a day. The Health Minister attends the second meeting (03 Feb).

F.   Hold regular meetings for state disaster management (03 Feb)

G.   Through a multi-disciplinary team of innovators and volunteers, develop open source public utilities for Tracking, Telemedicine, care, Ambulance network, Medicine delivery network, Food delivery, Super hero app, Stay, trucks, AyuRaksha, Knowledge, Corona Cell, Online Pass System, India Map, Kerala Map, Kerala Hotspots and Volunteer Management. (March)

H.   Hold coordination meetings with local government bodies (03 Feb) and subsequently issue guidelines on public health and sanitation measures at Panchayat level (23 Mar).

I.   Constitute state level committees and Rapid Response Teams for managing surveillance, call centre, Human Resources, training, documentation, psychological care, ambulance, finance etc. (03 Feb)

J.   Create COVID-19 cells within ministries of Transport, Tourism, Higher Education and General Education (16 Mar)

K.   Seek joint efforts with political opposition party leaders at state, district and ward level (19 Mar)

L.   Create a Digital War room: This includes a HealthCare Physical Assets Network, Human WorkForce Network, Emergency Logistics Network, Corona Primary Treatment Centers at Panchayats, COVID-19 Sample Management System and all Subsystems (06 Apr)

M.   Hold academic sessions on various topics of relevance for the stakeholders (May)

6. Health/ Frontline worker protection

Adopt adequate training protocols and safeguards for the safety and protection of health workers

A.   Create online training video playlists for healthcare professionals. Kerala created a YouTube playlist for easy access.(12 Feb)

B.   Delegate PPE procurement to State Medical Service Co-operation. Allocate 10% of the State Disaster Response Fund to aid in procurement through Kerala Medical Services Corporation Ltd (07 Mar)

C. Set up a [Mobile sanitiser vehicle](#) for police protection (09 Apr)

D. Release [hospital infection prevention and control guidelines](#) (16 Apr)

E. Ensure adequate supply of PPE kits through [local manufacturing](#) (17 Apr)

F. Provide mental health support and [counselling services](#) for frontline workers (17 Apr)

7. Human resource management

Leverage functionaries of existing welfare schemes, decentralise HR mobilisation and set up a volunteer recruitment drive

A. [Mobilise existing state functionaries](#): Primary healthcare workers, Accredited Social Health Activist (ASHA) workers, elected representatives, Self Help Group staff, police, teachers and other state department staff (05 Feb)

B. Prepare [training modules](#) for various job-roles in existing health care centres and Corona-specific care centres (06 Mar)

C. Enlist doctors by Public Service Commission from the [existing rank list](#) (24 Mar)

D. Enlist volunteer [retired doctors](#) and extend duty for two months of newly retired ones for helping on ad hoc basis (26 Mar)

E. Mobilise [medical, data and engineering volunteers](#), giving priority to those less susceptible (28 Mar)

F. [Publish guidelines](#) on tier-wise classification of COVID hospital staff, workflow of each tier and staff rotation cycle (31 Mar).

G. Introduce [temporary recruitment measures](#) for Health Inspectors ([31 Mar](#)).

H. Constitute a [human resource mobilisation committee](#) at both district and state levels to coordinate isolation services, contract tracing, surveillance, call centres, etc. (05 Apr)

II. SHORT TERM MEASURES

8. Communication strategy

Use traditional and new platforms to provide real time information to general public, tackle misinformation through regular media monitoring

A. Release a [comprehensive presentation](#) informing citizens about the various aspects of the virus (1 Feb)

B. Publish [daily bulletins](#) on the government website including details of preventive measures, number of people tested, district-wise number of persons under surveillance, number of positive cases, number of recoveries and those under quarantine (05 Mar)

C. Create [quizzes](#) for citizens to facilitate better understanding.(10 Mar)

D. Translate central and global portals such as World Health Organisation guidelines into the [local language](#) (11 Mar)

E. Launch ["Break the Chain" campaign](#) ([16 Mar](#))

F. Kerala police also participated in this campaign and shared WHO videos translated in Malayalam to ensure larger reach, used social media channels, local TV and radio to communicate and addressed fears about the virus. Videos were also translated in Hindi and Bengali for guest workers (19 March)

G. Share [nutritive recipes](#) through the department networks (20 Mar)

H. Release [informative animated videos](#) about care during pregnancy, support for lactating mothers, caring for elders, COVID-19 and the lockdown (20 Mar)

I. Release information about COVID-19 through [multiple media](#) such as POSHAN Vani, FM Campaign, Community Radios (20 Mar)

J. Disseminate [audio messages](#) in the form of songs, parodies or stories about COVID-19 (20 Mar)

K. Release COVID-19 communication materials for [elderly](#), [migrants](#), [self isolated individuals](#) and [tourists](#) (25 Mar)

L. Set up a [Corona media cell](#) to monitor misinformation ([25 Mar](#)).

M. Chief Minister's Office [started a COVID-19 Centre on Twitter](#) to connect with people ([30 Mar](#))

N. Release a [WhatsApp chatbot](#) and [web-based Chatbot](#) to provide accurate information about COVID-19 (31 Mar).

O. Provide updates on the virus to app users through the GoK Direct App. The app can even send text messages to those without Internet connections (01 Apr)

P. Set up a helpline number for assistance or support for guest workers in Kerala (02 Apr)

Q. Conduct a COVID-19 quiz via emojis on WhatsApp (02 Apr)

R. Create a dashboard with Daily Reporting on Quarantine, Test Results, Outbreak Locations, Community Kitchens, Destitute Rehabilitation, Useful Links, fund raising, Volunteer Registration, Directorate of Health Services (DHS) Daily Bulletin, e-Curfew Pass etc (early Apr).

S. Publish an advisory on masks (Apr 6) with instructions on how to self-produce and how to wear etc[2]. This was later accompanied by a list of FAQs on mask-wearing (Apr 9).

T. Create an app to track volunteer services (13 Apr)

U. Release FAQs for COVID-19 patients (17 Apr)

V. Publish list of policy actions taken by the government thus far (29 Apr)

W. Anganwadi workers also conducted demonstrations on how to wash hands (n.d.)

X. Issue directions to District Child Protection Units (DCPU) and Child Care Institutes (CCI) regarding circulation of Information, Education and Communication material to CCIs and foster homes (n.d.)

9. Legal Measures

Take swift legal and regulatory decisions to support public health measures

A. Declare COVID-19 as a state calamity as early as 3 Feb

B. Release Kerala Epidemic Diseases, COVID-19 Regulations, 2020 (21 Mar) and pass Epidemic Disease Ordinance (Mar 27). This provision allows the state to restrict the duration of essential or emergency services such as banks, media, health care, food supply, electricity, water and fuel. etc.

C. Announce state-wise lockdown. Issue guidelines for essential services, state borders and monitoring activities (23 Mar)

D. Take measures to restrict/ban gatherings, inspect those who travel to the state; seal state borders; restrict public and private transport; prescribe social distancing norms and restrict working of government and private offices, educational institutions, shops and factories etc. (24 Mar)

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[2] See Malayalam versions here and here

E. Make face masks mandatory in public places and workspaces from Apr 30

10. Primary care and Sanitation

Transform educational institutions into temporary care centres to support capacity of the health system

A. Establish COVID-19 Care Centres for taking care of those who have no residence in Kerala (20 Mar)

B. Set up sanitiser kiosks in public places (21 Mar)

C. Create COVID-19 Care Centres (CCC): There are centres where persons reaching Kerala can be quarantined to contain the spread and manage the people during the period of incubation (28 Mar).

    a. Identify[3] educational institutes to be converted to CCCs, post which, the Institute Head agrees to set up a CCC, the State Mission Director, National Health Mission issues a letter and the Principal/Head of Institution sends an acceptance letter back to the State Mission Director. (n.d.)

    b. Determine staffing requirements, Key Result Areas (KRA), working hours and work shifts (28 Mar)

    c. Create a Standard Operating Procedure (SOP) for Patient management (n.d.)

D. Create COVID First-line Treatment centres (FLTC) : The centre identifies all mild and moderate symptomatic persons under surveillance and should be utilized for treating positive cases (28 Mar).

    a. The check-list for operationalizing such a centre can be found here.

    b. Plan for facilities/resources available as per this list, procure required resources in coordination with government and donors.

    c. Issue first line treatment protocol for patients

    d. List roles and responsibilities of various stakeholders

11. Social Protection

Announce comprehensive economic relief package.

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[3] For example In Kerala, Loyola School has been selected, the school is located within a 6 km radius of 7 hospitals, and 10-11 km radius of 13 hospitals.

A. Announce loans through self help group programme (Kudumbashree - ₹2,000Cr) (19 Mar)

B. Bolster existing welfare programmes with supplementary funding and economic assistance (₹1,320Cr) (20 Mar)

C. Develop plan to clear government arrears (₹1,400Cr) (20 Mar)

D. Announce creation of a healthcare package (₹500Cr) (20 Mar)

E. Announce provision of tax relaxation on Transport (Autos, Taxis, Passenger vehicles) and Entertainment (Cinema halls) (20 Mar)

F. Announce bill payment relaxation for public utilities like water and electricity (20 Mar)

G. Issue guidelines to private establishments regarding working time, safety measures, and leave for employees (17 Mar).

H. Announce distribution of pension 2 months in advance (24 Mar)

I. Deliver essentials to families under quarantine (25 Mar)

J. Provide food kits to transgender people (25 Mar)

K. Create camps for labourers (28 Mar) and the homeless (27 Mar)

L. Decongest prisons. Kerala gave parole to select prisoners, who were sentenced to less than 7 years until April 30 (30 Mar)

M. Announce free provisions to all ration cardholders in the state(1 Apr onwards).

N. Create community kitchens with the help of Kudumbasree and Local Self Governments (LSGs) (Apr 1). The government has also instructed LSGs to hire volunteers for the kitchen and pay them an honorarium (20 Apr).

O. Announce Chief Minister Helping Hand Loan Scheme was announced for people facing lockdown-related unemployment and hardships (04 Apr).

P. Sanction financial assistance to (i) fishermen (06 Apr) (ii) artists (16 Apr) (iii) lottery agents and sellers (24 Mar) (iii) animal care (15 Apr)

Q. Issue guidelines to CCI Superintendents to follow the COVID-19 preventive measures and inform the Health Department if any child shows symptoms (06 Apr)

R. Launch whatsapp helpline for reporting domestic violence (11 Apr)

S. Conduct a survey of 44 lakh elderly (n.d.)

T. Contact and follow up on institutions for women and children, the elderly, destitutes and differently abled (n.d.)

U. Issue guidelines to State In-charge Childline Foundation India for a 24/7 helpdesk (n.d.)

V. Release contact numbers of counsellors and social workers for families and children to contact if they need assistance (n.d.)

12. Infrastructure mobilisation

Repurpose existing infrastructure, develop Corona-specific centres and strengthen communication technology

A. Issue guidelines on [hospital preparedness](#) (26 Jan) and identify [hospitals](#) with isolation facilities for each district (01 Feb)

B. Issue [guidelines on sample collection](#) (26 Jan) and create [viral transportation measures](#) for samples between districts and labs (04 Feb)

C. Open centralized facilities in Corona Care Centers for treatment and logistics: [technology center](#), [SuperFab labs](#), [waste disposal centers](#) (13 March, 19 March, 13 March)

D. Prepare an [ambulance network](#) and request Defence Minister/Directorate General of Civil Aviation (DGCA) for permission for air ambulances (13 March)

E. Convert hostels, sports facilities, schools, and colleges to hospitals to increase capacity. Kerala [requested permission](#) to use available facilities of central government's institutions and research laboratories (22 Mar)

F. Expand network capacity by internet service providers (Kerala expanded by [30% - 40%](#)) to meet increase in demand (12 Mar)

G. Request the use of [drones](#) (22 Mar) which were subsequently used to [monitor lockdown situation](#) and production of spurious liquor and drugs (7 April)

H. Convert existing hospitals into dedicated COVID-19 hospitals ([31 Mar](#), [02 April](#))

13. Law and Order

A. Enlist the support of [prison inmates](#) for mask production (15 March)

B. Deter the spread of fake news through arrests of persons and filing of complaints. Around [217](#) cases were filed by Kerala police (as on 14 May)

C. Undertake technology-driven lockdown enforcement:

   a. Check on quarantined persons using [geo-fencing digital applications](#) (24 March), in-person visits, video call checking and arrests of those who violate the quarantine orders

   b. Use [112 system](#) and highway patrol vehicles to deliver medicines to critical patients (1 April)

    c. Develop shopping application for online ordering of essential goods (1 April)

    d. Develop a road vigil application to monitor the movement of vehicles during the lockdown (4 April)

D. Ensure poor families have access to food: Kerala police launched the "Oru Vayarootam" initiative under which Non Governmental Organizations (NGO), student police cadets and volunteers distribute food packets from open police kitchens (9 April)

E. Ensure welfare and wellbeing of migrant workers: (21 April)

    a. Join/create WhatsApp groups to communicate, identify key worries and prevent the spread of rumours

    b. Connect guest workers with their home state's nodal officers

    c. Provide workers with entertainment facilities viz. televisions, cable networks, pen drives full of movies in their local languages, board games etc. to keep them occupied

    d. Assign kitchen duties to communities within the colonies

F. Launch dedicated call centre to cater to the needs of the elderly: Kerala police leveraged its existing "Prashanti" scheme to meet the needs of the elderly (25 April)

G. Ensure safety and wellbeing of frontline police officers and their families: Kerala police launched the "Protect the Protectors" initiative (28 April)

H. Encourage public use of face masks using innovative challenges (4 May)

I. Undertake organisational changes for police safety: (16 May)

    a. Create a 50% reserve force within the police

    b. Avoid activities requiring group assemblies viz. parades, roll-calls etc.

    c. Appoint welfare officer to ensure police have access to safety equipment

    d. Assign work from home/desk duties to pregnant officers / those with comorbidities

    e. Encourage online/telephonic registration of complaints through email, WhatsApp or 112 emergency system

J. Use online inter-district travel pass system as lockdown eases (18 May)

K. Triple lock-down issued in Kasaragod (broader restriction of movement, Geographical Information System, targeted effort to home isolate case contacts) (Apr 11)

III. MEDIUM TERM MEASURES

14. Mental health

Empower patients, care-workers and citizens to cope with lockdowns, isolation and quarantine

A. Acknowledge citizen contribution to the fight against COVID-19 and [motivate people](#) who are self isolating or are in quarantine (04 Feb)
B. Provide [psychosocial](#) support to families of suspected cases (04 Feb)
C. [Address the stigma](#) around COVID-19 (20 Mar)
D. Reach out to [reassure citizens](#) and provide support to relieve stress (20 Mar)
E. Issue mental health guidelines for [People-in-Isolation](#), [Elderly,](#) [Public](#), [Caregivers of Children](#) (28 Mar)
F. Assign [1050 counsellors](#) to work with the health department ([18 Apr](#))
G. Hold [counselling training sessions](#) about safety online, child sex abuse and dealing with the COVID-19 prevention and stress with the DCPU and CCI counsellors (18 Apr)

15. Epidemiological modelling

Forecast disease burden and infrastructural capacity to facilitate resource management in advance

A. Create a mathematical model to [understand the capacity](#) to be created (accounting for existing capacity); the [model](#) should be transparent and amenable to iteration based on feedback from external organisations (13 Mar)
a. Include the following [variables](#) in the mathematical model (n.d.):
   ○ Population by age group (according to Census 2011)
   ○ Probability of mild (stay at home)/moderate (require hospitalisation)/critical cases (ICU)
   ○ Infected population in different scenarios (e.g. lockdown, partial suspension, no lockdown)
   ○ Fatality rates expected in different age groups

- ○ Total number of ICU beds, % of ICU beds utilised, % of ICU beds available
B. Calculate ventilators and other health infrastructure availability across different institutions and create a digital network to know live capacity with geolocation – medical colleges, government hospitals and private hospitals (31 Mar)

16. Financial resource mobilisation

Tap into existing state resources, revise existing and develop new borrowing arrangements and fundraise from private sector and citizens. Currently collect donations under the CM-Distress Relief Fund

A. Request existing State Disaster Relief Funds to be used for relief work (20 Mar)
B. Request the central government for upward revision of the ceiling on state borrowings under the Fiscal Responsibility and Budget Management Act, 2003 (20 Mar)
C. Request Reserve Bank of India (RBI) for a one-year repayment holiday on loans (20 Mar)
D. Request government officials to donate one-month's salary to relief efforts through a "Salary Challenge" which was later approved by cabinet (30 Mar)
E. Approve an ordinance to defer 6 days of salary of government staff per month (30 April)
F. Request centre to make necessary changes to Companies Act to enable Chief Minister's Distress Relief Fund (CMDRF) to be eligible for Corporate Social Responsibility (CSR) funding (14 April)

17. Continuity of Essential Services

Carry out public service delivery through alternative means like home delivery of mid-day meals and stay-at-home exams and minimize disruptions in essential services

A. Make arrangements for food provisions for families under surveillance (01 Mar)
B. Announce home delivery of midday meals (11 Mar)
C. Introduce stay-at-home exams upto class 8, with non-editable question papers that can be sent to parents. Answers can be sent back to the school (14 Mar)
D. Extend functioning hours of Primary Health Centres (20 Mar)

E. Issue guidelines for shopping centres and shopping malls (20 Mar).

F. Issue guidelines for beauty parlours and salons (20 Mar)

G. Carry out surveillance of other communicable diseases (21 Mar)

H. Include Horticorp (Kerala State Horticultural Products Development Corporation) and Panchayat services under essential services (23 Mar)

I. Introduce various exemptions on lock down: (i) Shops and bakeries (23 Mar) (ii) Online food deliveries (02 Apr) (iii) Parcel services (03 Apr) (iv) Automobile service workshops (06 Apr) (v) Shops and service centres (08 Apr) (vi) Plumbers and electricians (09 Apr)

J. Issue guidelines for the management of Pregnancy and Labour care (24 Mar)

K. Issue guidelines for dental care (24 Mar).

L. Issue and update guidelines for immunization drives (24 Mar, 16 Apr)

M. Take measures to curb hoarding and price rise (25 Mar)

N. Declare a list of essential services under the Kerala Essential Services Maintenance Act, 1994 (25 Mar)

O. Issue guidelines for residential associations (26 Mar)

P. Ensure prescribed levels of liquor to alcoholics and de-addiction routine (26 Mar)

Q. Introduce a webtool for the repatriation of Malayalee expats/migrants abroad (28 Mar)

R. Enable door-step delivery of cash through post-office (06 Apr)

S. Issue guidelines for industrial units when they reopen (18 Apr)

T. Auction less sale of fish in selected harbours to promote social distancing in densely populated coastal fishing areas (20 Apr). Issue SOPs for management of inland and marine fisheries (pre and post harvest, including processing)

U. Restore limited functionality to F&B sector (take-away and online ordering) (20 Apr)

V. Issue guidelines for Tuberculosis (TB) testing (20 Apr)

W. Ensure expats carry a COVID-19 negative certificate upon return (22 Apr)

X. Issued guidelines on home delivery of Take Home Ration (THR) (27 Mar, 15 Apr, 12 May)

Y. Supply required kinds and quantities of milk to beneficiaries (n.d.)

Z. Issue instructions to District Child Protection Officers regarding ensuring availability of masks, disinfectants, soaps, water, menstrual hygiene products and other essentials in coordination with the civil supplies department (n.d.)

AA. Supply essential food grains to Government Observation homes and Place of safety (n.d.)

18. Easing Restrictions

Ease restrictions on lockdown in a phased manner

A. Constitute an Expert group for advising on post-lockdown strategies (24 Mar).

B. Highlight various transmission criteria based on which restrictions could be eased:

(i) number of new confirmed cases

(ii) percentage increase/decrease in number of persons under home surveillance, and

(iii) no emergence of hotspots for districts to be under different phases (06 Apr)

C. Recommend phasing as follows;

● Phase I: Universal masking, odd even vehicular mobility, 50% staff attendance

● Phase II: Permit public transport for short distance, Micro, Small, and Medium Enterprises (MSME) to work under restrictions, relaxation on private events and private sector staff attendance

● Phase III: Limited inter-district bus travel, domestic flights will be allowed, Universities, schools and colleges allowed to hold examinations with social distancing (n.d.)

Further, 14 day compulsory home quarantine for new entrants to states. Removal of restrictions only to be considered around June 30

Important Resources

1. **Kerala Directorate of Health Services - Guidelines**
2. **Kerala Directorate of Health Services - Daily Bulletins**
3. **Kerala Directorate of Health Services - Advisories**
4. **Corona Safe Network Care**
5. **Government of Kerala Website**
6. **CMO, Kerala Website**
7. **CMO, Kerala Twitter**
8. **PRS COVID-19 Notifications**
9. **Government of Kerala, Department of Women and Child**
10. **News Media : Livemint, Manorama, Telegraph etc.**

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