



Corona Virus also known as COVID-19 is considered to be one of the most critical global calamities of this century and the greatest challenge ever faced by humankind after 2nd World War, and the catastrophic Great Depression.

COVID-19 is also one of the greatest challenges Pakistan has ever faced since its inception. In reference to the vision of Prime Minister of Pakistan, Imran Khan concerning contemporary crisis, the Government of Punjab has geared-up its concerned departments, teams and stakeholders to give a tough fight to this disease. With the mission of public safety, we have worked tirelessly since the outbreak of this pandemic and we intend to do so till the end of this crisis. Punjab Government acted immediately to prepare, respond and recover from the tragedy caused by the said virus. From strengthening healthcare system, taking required precautionary measures to activating robust emergency response system, the Government of Punjab is leaving no stone unturned for the safety of public.

Amid COVID-19 crisis, the efforts and initiatives of concerned departments and stakeholders to find quick and deployable solutions for COVID-19 deserves to be lauded. Our concerned stakeholders, departments, committees, teams i.e. Primary and Secondary Healthcare Department (P&SHD), Specialized Healthcare & Medical Education Department, National Institute of Health (NIH), National Command& Operation Center (NCOC), Cabinet Committee to Combat Coronavirus Threat, Surveillance and Response teams have worked as one entity to fight this global calamity.

Continuous surveillance, formulation and implementation of Standard Operating Procedures (SOPs) in accordance with WHO guidelines, capacity strengthening of healthcare system and healthcare workers, introduction of telemedicine are some notable initiatives taken by Primary and Secondary Healthcare Department. We are highly determined to continue our efforts to fight against Corona Virus by utilizing all means and possibilities.

Sardar Usman Ahmad Buzdar

Chief Minister Punjab



The COVID-19 pandemic has literally engulfed the whole world within 5 months of its outbreak. Not only affecting the health of people, this virus devastated the economy, peace, fabric and nature of our lives unexpectedly. The World Health Organization (WHO) declared COVID-19 a public health emergency on 30th January 2020 and declared it as a pandemic on 11th March, 2020. No one was prepared for pandemic of this scale.

However, the moment Govt. of Punjab realized the prevailing crisis, preemptive measures were taken proactively in this regard to ensure lower morbidity and mortality rate in the province. As directed by Chief Minister of Punjab, our concerned Healthcare departments responded promptly to the situation and fighting with this crisis to their maximum capacity. Controlling the spread of virus to the limit it ends soon is our core mission. We did whatever it took to control the spread.

Government of the Punjab facilitated public and supported Government of Pakistan to come out of this crisis by all means. The fight will not end until we win. Periodical, efficient and smart decisions taken by our healthcare departments to fight coronavirus proved to be quite helpful in this regard. We are determined to adopt advance strategies and methods to end this pandemic. Whatever it takes to end this crisis for the sake of public welfare will be done accordingly and efficiently.

Dr. Yasmin Rashid Minister Health Punjab



The pace with which the catastrophic COVID-19 spread globally took all concerned by shock, it was a challenge for Government of Punjab as well. As per Punjab health department's core responsibility; dealing with health crisis to ensure the safety and good health of public, the department acted in the same defined manner in the crisis of this pandemic as well. Given the nature of this pandemic, it was and still a new and extremely critical virus for the whole world including health professionals and researchers. Thus, it has not been an easy fight because the virus has not only affected the health but psychological and financial state of people as well.

Primary and Secondary Healthcare Department has worked beyond its capacity in regard to giving a tough fight to this virus. During the crisis, we have taken some very efficient initiatives i.e. Continuous surveillance, strengthening healthcare system, identifying weak sectors, forming and implementation of Standard Operating Procedures (SOPs) in accordance with WHO guidelines.

Moreover, increasing the capacity of hospitals, provision of PPEs to healthcare workers, smart sampling, smart testing & tracing service, ensuring good quarantine facility, isolation and transportation services for confirmed and suspected patients of coronavirus, telemedicine, and many other aspects were proactively implemented in immediate basis.

Other than equipping our healthcare system, we firmly believe that awareness can play a vital part in this regard. Massive awareness campaigns using Electronic, Print and Social Media were launched. We are zealously determined to fight COVID-19 till its end.

Jawad Rafique Malik Chief Secretary Punjab



The correlation of human health and diseases is neither a new phenomenon, nor a new subject. Since the emergence of COVID-19 in China at the end of 2019, global health emergency has been imposed gradually depending upon the spread of this virus. This virus is highly contagious and can easily be transmitted through droplets from affected person and close contacts.

COVID-19 is not only considered as a serious threat to Public Health of 21st century but it has also been an indicator of socio-economic crisis globally. Since the day of its outbreak, the world has faced numerous challenges. Coronavirus is not a new term for medical experts but the new strain of COVID-19 has been recently identified in humans. From a local street of China to every corner of the world, the spread of this infection blew out of proportions at an alarming speed.

World Health Organization (WHO) declared it as global pandemic soon after the realization of its fast spread and fatal nature. World Health Organization since then has urged all the countries to get prepared for its potential arrival. Some countries took preemptive measures immediately but negligence was also observed in many. However, those who ignored faced drastic consequences, such states also posed a greater threat for their neighboring countries. Initially, both China and Iran (neighboring states of Pakistan) were top most Covid-19 affected countries globally. The high influx of travelers by air, sea and land with respective neighboring states posed Pakistan at greater risk of virus spread. Fortunately, Pakistan acted immediately and prepared in its maximum capacity to combat the crisis. In Pakistan, first coronavirus patient was reported in late February and, the spread has increased gradually in March 2020.

The day, first case was reported in the province of Punjab, concerned stake holders became active to reverse the effect of this virus. Government of the Punjab has adopted advance precautionary measures to prevent its spread. Preparedness included; travel ban, activating emergency response systems, arrangement of required supplies and medical equipment, increasing hospital capacities, increasing test service, establishment of isolation wards, lockdown strategies etc. To minimize morbidity and mobility rate, Government of the Punjab is determined to leave no stone unturned.

Captain (R) Muhammad Usman Younis

Secretary, Primary and Secondary Healthcare Department

Table of Contents

•	Major Initiatives	1
	a. First Advisory b. Second Advisory c. Provincial Focal Person d. High-dependency Units (HDUs) e. Travel Advisory f. Provincial Disease Surveillance and Response Unit g. Establishment of Provincial Technical Expert Group h. Chief Minister's Steering Committee i. SOPs and Guidelines by Technical Working Groups (TWGs) j. Screening of Travelers k. Secretary Health Visit l. Training sessions m. Visit of Chief Minister Punjab n. Cabinet Committee to Compact CoronaVirus Threat o. Covid-19 Standard Operating Procedures (SOPs) p. Working Group & District Rapid Response Team q. Visits of Director General Health Services r. Covid-19 Protocols and Guidelines s. Awareness Session & Workshops t. Health Emergency Response Committees	
	Important Decisions	9
	Punjab Infectious Diseases (Prevention & Control) Ordinance, 2020	18
	COVID-19 Funds and Utilization	21
	Laboratory Network	23
	a. Lab Capacity Enhancement b. Laboratory Testing status	
•	ICT Interventions	27
	Test, Track, Quarantine (TTQ)	34
	Drug Control and Actions Against Hoarding	37
=	Human Resource Management	39
	Protection of Front- Line Workers	41
	a. Training b. Shaheed Package c. Honorarium d. PPEs Arrangement and Distribution.	
=	Awareness Campaigns	48
	Specialized Healthcare & Medical Education Department (SH&ME)	59



The Government of Punjab has been preparing to fight the global pandemic - COVID-19 since outbreak of disease in the world. From alerting the concerned stakeholders and departments to forming special committees and task forces, every possible initiative has been taken till date and the war is still going on. Following are some major initiatives taken so far:

As early as 13th January, 2020, Primary and Secondary Healthcare Department started preparing to give a tough fight to this pandemic. Department worked at all fronts including:

- Continuous surveillance
- Strengthening healthcare system
- · Identifying weak sectors
- Forming and implementation of Standard Operating Procedures in accordance with WHO guidelines
- Capacity building of concerned stake holders i.e. healthcare workers
- Ensuring quality precautionary measures for workers
- Introducing advance testing system
- Strategizing smartly in hospitals in regard to COVID-19 patients handling i.e. establishing specified counters to receive COVID-19 suspected patients, collection of samples, safe transportation of samples and dedicated COVID-19 isolation wards & High Dependency Units etc.
- Track, Trace & Quarantine Regime
- Tele Medicine

First Advisory

Primary and Secondary Healthcare Department was first department in country to issue early advisory to all districts of Punjab to take preemptive cautionary measures to fight with COVID-19 crisis. The Advisory was prepared in accordance to the guidelines issued by World Health Organization. The concerned department is still adapting to new modified strategies; any possible way which can prove to be helpful in coping this crisis will be considered immediately.

Second Advisory

In the third week of January, National Institute of Health – Pakistan (Field Epidemiology & Disease Surveillance Division) Islamabad issued second advisory; Advisory on Pneumonia Outbreak due to novel coronavirus in Wuhan City, Hubei Province, China. The respective advisory provided a detailed and well research insight to the situation up to that point.

Provincial Focal Person

On 25th of January Directorate General Health Services (DGHS) was nominated as Provincial Focal Person for COVID-19. Directorate General Health Services (DGHS) is the main programmatic coordination, implementation and monitoring arm of health department.

High-dependency Units (HDUs)

With the collaboration of concerned departments, High-dependency units were established. Pre-existed units were also dedicated solely to deal with critical cases of COVID- 19. Since high- dependency units are those areas of hospitals where patients are taken care of more contagious and grave diseases and, located near to intensive care units. They were dedicated to deal with COVID-19 emergency cases on immediate basis.

On 24th of January, high-dependency units of teaching hospitals were marked for Coronavirus Patients. The respective units were made functional for the defined purpose in almost all district teaching hospitals of Punjab with specified point-of-entries (POEs). Only patients and active healthcare workers are allowed to use those POEs. Specialized Healthcare & Medical Education Department Punjab (SH&ME) issued notification for the establishment of High-Dependency Units at teaching hospitals in districts with POEs.

Travel Advisory

National Institute of Health – Pakistan (Field Epidemiology & Disease Surveillance Division) Islamabad issued travel advisory for the Prevention and Control of Novel Coronavirus (2019-nCoV). The Advisory (after the analysis of prevailing situation) described Preventive Measures for incoming and outgoing travelers.

Provincial Disease Surveillance and Response Unit

Surveillance and Response units gather and analyzes disease surveillance data from relevant sources and, periodically disseminate the gathered information to relevant stakeholders and departments. The purpose of the dissemination of information is to identify, notify public and other stake holders. Once the information is accessed, the concerned stake holders have the chance to take timely preemptive measures as per the prevailing situation.

On January 25th, the Government of Punjab had activated Provincial Disease Surveillance and Response Unit to gather and analyze situation in regard to COVID-19. Provincial Disease Surveillance and Response unit is active 24/7. On 28th of January, Advisor to Chief Minister Punjab for Health paid a visit to Provincial Disease Surveillance and Response Unit to monitor and analyze the functionality methods of the unit.

Establishment of Provincial Technical Expert Group

The Government of Punjab has established Technical Expert Group at provincial level in wake of pandemic crisis handling. On January 25th, Government of the Punjab has issued a notification of Provincial Technical Group for COVID-19.

On 31st of January, second meeting of Provincial Technical Expert Group was held. Main purpose of the meeting was assessment, preparedness, surveillance and response to COVID-19 situation at that point of time.

Chief Minister's Steering Committee

The Government of Punjab notified a steering committee. On 31st of January, it was confirmed that Chief Minister's Steering Committee will act as oversight body to assess COVID -19 situation in the province. To deal with coronavirus crisis efficiently the Committee comprises of:

- Finance Minister
- Chairman Planning and Development Board
- Secretary Planning and Development Board
- Secretary Labour & Human Resource Department
- Secretary Primary and Secondary Healthcare department
- Secretary Specialized Healthcare and Medical Education department.

The committee has been directed to take imperative actions on three agendas:

- Health, infrastructure and financial needs
- Economic impact analysis
- Social protection plan for the vulnerable community.

On January 31st, Government of the Punjab officially notified the Steering Committee to assess information concerning COVID-19 situation in Punjab (as per the defined agendas).

The committee meetings were held periodically in the month of February i.e. 1st, 3rd, 4th, 6th, 10th & 12th.

SOPs and Guidelines by Technical Working Groups (TWGs)

On February 1st, an official notification was issued for Technical Working Group to develop Standard Operating Procedures (SOPs), Guidelines and strategies to smartly deal with pandemic crisis at Provincial level. The Technical Working Group was instructed to formulate rules and regulations in accordance with the provincial situation, potential and capacity complying standard national and international regulations.

On 3rd of February, a meeting was held by concerned Technical Working Group in order to formulate and design provincial guidelines.

Screening of Travelers

With the Collaboration of National Institute of Health (NIH), Central Health Establishment and PDSRU Punjab screening of travelers was done at Lahore International Airport. The travelers who were screened for the purpose were coming back from different parts of China.

Secretary, PSHD Health Visit

Secretary Primary and Secondary Healthcare Department also monitored the activities and functionality of Provincial Surveillance and Response Unit. He himself visited the unit periodically. The first visit paid by him was on 6th of February.

Training Sessions for HDUs, RRTs and DHAs

Another major initiative taken by the Government of Punjab was training of concerned stakeholders to fight the pandemic more effectively and to ensure lower morbidity and mortality rate. The stakeholders have tried their best to find a fine balance between the benefits and risk for the sake of public and healthcare worker's health and continue to fight the disease.

On February 10th, the notification for the training of concerned stake holders was issued. As per the notification, following staff members were required to be trained as they were directly involved in Corona Patients handling, facilitation or treatment programs:

- · High-dependency Unit's (HDUs) staff
- Rapid Response Teams (RRT)
- Doctors' Health Advisory Service (DHAs)

Following are the details of training sessions held to train High-dependency Unit staff, Rapid Response Teams and DHAs staff on Provincial SOPs and guidelines being trained by various medical units in different cities of Punjab, Pakistan:

Time	Unit
10th February	King Edward Medical University, Lahore
12th of February	Punjab Medical University, Faisalabad
14th of February	Rawalpindi Medical University, Rawalpindi
19th of February	Safdar Shaheed Medical College, Sialkot
19th of February	Holy Family Hospital, Rawalpindi
20th of February	Nishter Medical University, Multan
21st of February	Allied Hospital, Faisalabad
24th of February	Nishter Hospital, Multan
26th of February	Khawaja Safdar Medical College, Sialkot
28th of March	Quarantine/HDU IPC Training, Faisalabad
30th of March	Donning and Doffing Training, Gujrat
31st of March	PPEs Donning & Doffing Training, Gujranwala
1st of April	Donning & Doffing Training at DHQ hospital, Khanewal
1st of April	Donning & Doffing Training at DHQ hospital, Khushab

Visit of Chief Minister Punjab

Chief Minister of Punjab, Sardar Usman Buzdar paid his first to COVID-19 Control Room established at Primary and Secondary Healthcare department on 21st of February 2020. Chief Minister of Punjab continues to visit concerned units and healthcare centers to monitor services.

Cabinet Committee to Combat Coronavirus Threat

On February 28th, a high-level Cabinet Committee was established in reference to deal with COVID-19 crisis. Punjab Chief Minister Sardar Usman Buzdar set up a Cabinet Committee headed by Provincial Minister for Law, Parliamentary Affairs and Social Welfare to further strengthen preventive measure against coronavirus across the province.

At times, Chief Minister of Punjab himself presided over high-level meetings of the Cabinet Committee for Corona Control to review prevailing situation periodically.

Other members of the committee are

- Provincial Finance Minister
- Minister for Industries and Commerce
- Chief Secretary
- Senior Member Board of Revenue
- Additional Chief Secretary Home
- IG Punjab
- Secretaries of Primary Health, Information, Finance, Specialized health,
- Planning and Development (P&D)
- Local government departments
- Commissioner Lahore Division
- DG of e Provincial Disaster Management Authority (PDMA)

As per the assigned duties, the committee is bound to perform following task:

- Coordinate productively with federal and International agencies to fight pandemic more effectively.
- Monitor and supervise healthcare facilities available to public
- Monitor facilities for COVID-19's patients i.e. diagnosis, isolation and treatment.
- Ensure the provision of required testing kits, medical equipment and other facilities to hospitals
- Arranging training of medical staff.
- Monitor and boosting awareness campaigns in order to control the infection spread.
- Making sure that the food supply is uninterrupted for general Public
- Ensure the implementation of social distancing
- Ensure limited mobility of citizens

The committee is obligated to update Chief Minister of Punjab on daily basis. The Secretary of Primary Health provides logistic and administrative support to the Committee and serves as the Secretary of the Committee.

COVID-19 Standard Operating Procedures (SOPs)

With the help of Technical Working Groups (TWGs) and other concerned stake holders, Standard Operating Procedures were formulated, to be followed by all the citizens of Punjab as per their relevant occupations. On 29th of February those SOPs were published after the approval of higher authorities.

Working Group & District Rapid Response Team

On 4th of March as constituted by the concerned authorities a Working Group and District's Rapid Response Team was established. The purpose of developing a working group was to prepare a smart strategy in order to cope the pandemic situation and virus threat effectively.

Visits of Director General Health Services Punjab

On 12th of March, Director General Health Services Punjab paid a special visit at the office of Commissioner (Dera Ghazi Khan) regarding preparedness of Quarantine facility in University Campus of Dera Ghazi Khan.

COVID-19 Protocols and Guidelines

Concerning the critical COVID-19 situations prevailing with time, different protocols and guidelines were formulated and notified. Following are the details of some:

- Disinfection & Decontamination protocols Notified on 10th March 2020.
- COVID-19: Deceased Burial Guidelines Notified on 11th March 2020.
- Guidelines for Home Quarantine Notified on 15th March 2020.
- Cabinet committee to combat COVID-19 threat with some revised TORs constituted on 25th march 2020.
- COVID-19: Deceased Burial Guidelines revised (WHO Interim Guidelines) Notified on 25th March 2020.
- COVID-19: To ensure around the clock availability of essential/lifesaving medicines/ therapeutic goods, notified on 29th March 2020.

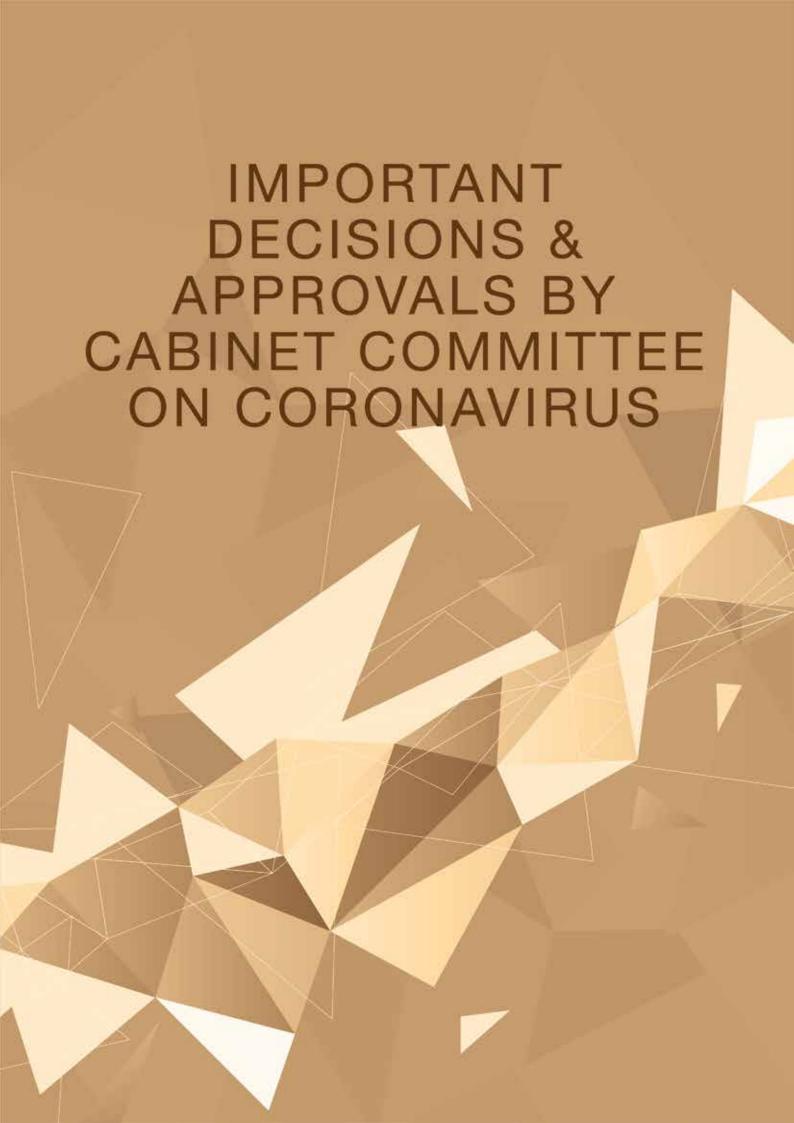
Awareness Session & Workshops

Different awareness sessions were conducted for Government officers. On 16th of March, a special Coronavirus Disease awareness session was conducted in Police Lines Qila Gujjar Singh. The purpose of the respective session was to make police department aware about their roles & responsibilities in the pandemic situation. On 29th of March workshops; Corona Awareness Workshop were arranged at Jhang and Chiniot.

Health Emergency Response Committees

In the light of critical situation, it was the need of time to monitor the situation with more precision at all levels. Different committees were constituted to strengthen the fight against virus at ground level. Following committees were constituted at district and tehsil level:

Time	Committee	
19th of March	Districts Health Emergency Response Committee	
19th of March	Tehsil Health Emergency Response Committee	



Chief Minister of Punjab, Sardar Usman Buzdar notified a high-level Cabinet Committee. On 28th of February to strategize efficiently concerning COVID-19 pandemic situation handling in accordance to the facilities and capacity of Province. Provincial minister for Law, Parliamentary Affairs and Social Welfare heads the committee to further strengthen initiatives against corona across the province. Chief Minister of Punjab Sardar Usman Buzdar at times also presided the committee meetings himself, to monitor and analyze the situation and functionality direction of the concerned committee.

Cabinet Committee for Corona Control comprises of following honorable members:

- Provincial minister for Law, Parliamentary Affairs and Social Welfare
- Provincial Finance Minister
- Minister for Industries and Commerce
- Chief Secretary
- · Senior Member Board of Revenue
- Additional Chief Secretary Home
- IG Punjab
- Secretaries of Primary Health, Information, Finance, Specialized health,
- Planning and Development (P&D)
- Local government departments
- Commissioner Lahore Division
- Director General of Provincial Disaster Management Authority (PDMA)

The high-level committee, was assigned special task to help strengthen government functionality in such critical circumstances. The committee is bound to coordinate with federal and international agencies to combat coronavirus, to supervise hospitals and the healthcare centers, oversee testing, diagnosis, isolation and treatment of suspected and confirmed patients of coronavirus in designated healthcare facilities, to ensure the provision of required PPEs, medical equipment and other facilities to designated healthcare facilities and hospital for the defined purpose. They are also responsible for the arrangement of training of concerned medical staff.

Moreover, the committee oversees a massive awareness campaign among public for the prevention of virus spread. They also supervise uninterrupted and adequate food supply across the province. They had to make sure the implementation of formulated SOPs i.e. social distancing, limited mobility of citizens as per official announcements. The Cabinet Committee holds a review meeting on a daily basis and forwards the report to the Chief Minister. The Secretary Primary Health provides logistic and administrative support to the Committee and serves as the Secretary of the Committee.

Following are short details of its proceedings:

17th of March

- Quarantine Facilities: Establishment of Quarantine facilities in Multan and Bahawalpur on 17th of March
- SOPs regarding quarantine: On 17th March some SOPs were formulated by the concerned authorities regarding quarantine.
- Awareness Campaign: It was decided on 17th March that people need to be informed and alerted, for that purpose mass awareness and media campaign should be planned.
- Prevention of hoarding: In light of the situation; increased demand and less facilities, it
 was decided on 17th March that hoarding of masks, essential commodities, and profiteering
 will be discouraged.

21st March

- Chief Minister's Fund for Corona Control: To ease the burden of daily wagers and other underprivileged people, Chief Minister's Fund for Corona Control was established on 21st of March.
- SOPs for Home Isolation and quarantine: on 21st of March first time SOPs were defined in regard to home Isolation and quarantine.
- Social safety nets: On 21st of March preparations were started for social safety nets.
- Lockdown: Partial lockdown was implemented on 21st of March for only 2 days.

23rd of March

 Procurement of Medical Equipment, Medicines and Personal Protective Equipment (PPEs): On 23rd of March approval for required medical equipment, medicines and personal protective equipment (PPEs) to be procured was issued.

25th of March

- Hospital at Jail: In reference to the diagnosis of COVID-19 in some prisoners on 25th of March, hospital at Camp Jail was established. Not only this, a strategy to combat COVID-19 threat in prisons was also devised
- Repatriation of Zaireen: Repatriation of Zaireen from DG Khan Quarantine facility after completion of mandatory 14 days period was done on 25th of March.
- Risk allowance: Risk allowance to all medical staff working in COVID-19 related facilities was granted on 25th of March.
- BSL-III labs: Eight new BSL-III labs were established on 25th of March.
- Punjab Infectious Diseases Ordinance: On 25th of March new Punjab Infectious Diseases Ordinance was introduced.

27th of March

- Lockdown measures: Initial lockdown measures to be implemented by Home Department was formulated on 27th of March.
- Procurement of PPEs and Testing kits: Procurement of PPEs and Testing kits was carried out in bulk on 27th of March.
- Food Supply: It was decided on 27th of March that the committee will overlook food security and supply across the province

31st of March

- Release of prisoners: Release of prisoners was done on 31st of March under Section 188 PPC.
- Discussion with Chinese experts: Sharing of best practices and SOPs with Chinese experts was also done on 31st of March.
- Expo Center field Hospital: On 31st of March Expo Center field Hospital was operationalized.
- Committee at district level: On 31st of March Committee at district level to monitor usage of PPEs was established.

6th of April

- Tableeghi Jamaat: In the light of fast spread of virus in tableeghi jamaat students, on 6th of April testing protocols for Tableeghi Jamaat members were established
- Philanthropic activities: On 6th of April various philanthropic activities were streamlined by bringing them under the umbrella of District Administration

7th of April

- Funds utilization: On 7th of April, Approval of Funds utilization agenda of both departments were given.
- Enhance testing capacity: It was decided on 7th of April to exert efforts to enhance testing capacity and procure PPEs.
- Engagement & Collaboration: Engagement & Collaboration with public representatives and medical community regarding strategies was decided on 7th of April.

16th of April

- Primary and Secondary Healthcare department utilization Plan: On 16th of April, approval of P&SHD utilization plan (list of 23 items) was given
- Airlift donated items: On 16th of April, permission was granted to SH&MED to airlift donated items from China at a cost of PKR 37M

18th of April

- Taraweeh prayers: Permission for Taraweeh prayers subject to adherence to SOPs was given on 18th of April.
- Random sampling: On 18th of April, random sampling of citizens was carried out by Primary and Secondary Healthcare department (P&SHD) throughout to ascertain spread rate

22nd of April

- Approval to SMBR for procurements: on 22nd of April an approval was granted to SMBR for procurements already made (PKR 664M) and planned procurements (list of items)
- BSL-III: On 22nd of April, new BSL-III laboratories were established in Sialkot & Sargodha
- Smart picketing: Smart picketing' proposal was given by IG Punjab on 22nd of April.

27th of April

Advisory Group & Smart Sampling: On 27th of April, approval of Analytics Advisory Group
 & Smart Sampling Project was given by the committee.

- Standardization of food: Standardization of food being served in QCs and Hospitals was done on 27th of April.
- Technical members: Technical members were co-opted in the Cabinet Committee on 27th of April.

1st of May

- Smart Sampling: Approval of Smart Sampling Project and daily progress to be updated was given
- Utility Stores Exemption: Exemption was granted to Utility Stores from 9AM to 8PM
- Transfer of quarantined people: Transfer of quarantined people to their home provinces was granted
- SOPs incoming passengers: Similar SOPs were developed for incoming passengers on flights as well
- Improve basic necessities: It was impressed that efforts need to be exerted to improve basic necessities at QCs

2nd of May

- Relaxation in lockdown: Recommendations regarding relaxation in lockdown were submitted to Federal Government for consideration
- SOPs for Home Quarantine: SOPs for Home Quarantine were developed for further discussion

16th of May

- Awareness campaign: It was considered that mass awareness campaign to urge the masses to follow SOPs, should be initiated as a tool for prevention
- Shopping malls: Shopping malls were notified to be open, subject to adherence to SOPs
- Transport: Inter-city & Inter-district public transport allowed to operate, subject to adherence to SOPs
- Transport fares: Reduced public transport fares to be publicized and implemented
- Appreciation: Efforts to District Administration and Police appreciated with respect to Youm-e-Ali were encouraged

19th of May

 Business Operation Permission: Permission granted to shops and businesses to operate 7 days a week as per decision of Honorable Supreme Court.

21st May

- Exemption for Shrines: Exemption granted for opening of Shrines, under administrative control of Auqaf and Religious Affairs department, 7 days a week subject to adherence to SOPs.
- Purchase of medicines and disposable surgical Items: Approval of purchase of medicines and disposable surgical item as presented by Secretary SH&MED was granted.
- Timing Relaxation: Approval of relaxation of timing for shops from 9 AM till 10 PM for 21st May to 24th May only was granted

28th Of May:

- Primary and Secondary Healthcare Department's Proposal Approval: Approval of Secretary P&SHD proposal was granted for the purchase of laptops (PKR 5m), printers (PKR 1m), furniture (PKR 4m), Hiring of contingent paid staff (PKR 3m) and Other services rendered (PKR 10m).
- Serological testing/survey: It was decided on 28th of May that Federal Government shall be requested to include certain areas of Punjab in serological testing/survey.
- Sunday car bazaars: Ban on Sunday car bazaars was implemented forthwith
- Strengthening Awareness campaign: It was decided that Awareness campaign should be initiated to highlight the expenses incurred by both Health departments till date which is less than allocated funds.
- Daily statistics: It was directed that Healthcare capacity and bed statistics shall be shared on daily basis in media to alleviate concerns of general public.
- Telemedicine: Dedicated telemedicine helpline for aid of home quarantined people to be established
- Public transport fares: Reduction in public transport fares to be publicized and implemented

30th of May

- List Sharing: Approval was given to share provincial negative list and recommendations with National Command Operation Center (NCOC) and National Curriculum Council (NCC)
- Procure ventilators: It was decided that Federal Government should be approached with the request to procure 1500 ventilators and payment to be made from already allocated funds
- Direct procurement: CS to take up the matter of direct procurement with Chinese Ambassador
- Divisional control rooms: Divisional control rooms of SH&MED linked with P&SHD and further linked with CM Office with comprehensive view of all information should be made.
- Exemption granted: Exemption granted to Punjab Public Service Commission (PPSC) to conduct interviews via videolink and conduct of written exams subject to adherence of SOPs.
- Restaurants Opening: It was decided that Opening up of restaurants shall be placed before National Command Operation Center (NCOC)
- Contingency plans: Contingency plans should be developed by Health Departments spanning multiple scenarios.

4th June, 2020

- Staff Requirements of P&SHD: Staff Requirements of P&SHD to be met from other departments which are currently closed
- Financial & Administrative issues: Financial & Administrative issues of testing all incoming passengers to be taken up with NCOC.
- Punjab Healthcare Commission (PHC): Punjab Healthcare Commission (PHC) to be briefed, regarding standardization of private testing laboratories
- Committee of experts: CS convened a committee of experts to decide on efficacy and cost effectiveness of Actemra
- SOPs: SOPs to be strictly enforced and violators to be fined

6th of June:

- Parks: Decision to allow parks to be open only for physical exercise, children not allowed
 wearing masks made mandatory
- Shops: Milk shops and bakeries exempted 24/7 and meat shops 7 days a week till 7 pm only
- Actemra to be procured: Actemra to be procured for 1000 patients initially, and to be administered strictly on the basis of guidelines to be developed by committee of experts
- Permission to Roche: It was decided that Federal Government should be approached to grant permission to Roche, through DRAP, for import of Actemra from USA as well

10th June, 2020

- Magisterial powers: Grant magisterial powers to officers of district administration with Lahore High Court to provide legal cover to action against violators of SOPs.
- Masks: Ensure that all participants of fruit and vegetable markets shall use face coverings/face masks.
- Helpline: Publicize bed and ventilator availability along with helpline in electronic and print media, widely.
- Hospital shifting awareness: Initiate awareness campaign highlighting steps to be taken in case of COVID-19 infection and shifting to hospital etc.
- Legal action against whoever hoards or sells Actemra: It was decided that immediate legal action will be taken against whoever hoards or sells Actemra at inflated prices as proposed by Chief Secretary.
- Public sector hospitals: Ensure strict check and balances in public sector hospitals to prevent theft and pilferages of Actemra.
- Clinical audits: Conduct clinical audits of private hospitals by PHC to ensure Actemra is not sold at inflated rates (official rate is Rs. 33,000 (PKR)/200mg IV injection).
- Expo Center field: Conversion of 1 out of 3 blocks of Expo Center field hospital from quarantine facility into HDU and provision of X-ray facility.
- Increase HDU capacity: HDU capacity by hundred beds at services hospitals should be increased.
- Oxygen supply and maintenance: Ensure oxygen supply and maintenance of its 1-month stock at all public hospitals.
- Portable toilets: Establishment of portable toilets and shower rooms in field hospitals should be made possible as soon as possible.
- Data analysis and submission of a strategy for Lahore: Conduction of data analysis and submission of a strategy for Lahore by a concerned working group due to critical situation in provincial capital.
- Examinations of Final Professional medical examinations: UHS, FJMU, SU, UOL and KEMU was allowed to conduct supplementary examinations of Final Professional (MBBS) and final year supplementary examinations for BDS, BSc Nursing, Doctor of Physical Therapy and BSc Allied Health Sciences subject to adoption of SOPs.

23rd of June

- · Revised burial guidelines: Approval of revised burial guidelines was given
- Subcommittee: Formation of subcommittee to deliberate on issues being faced by masses in hospitals.
- Undertaking of extensive contingency planning and capacity enhancement: It was
 decided that undertaking of extensive contingency planning and capacity enhancement
 should be prepared for worst case scenario, deploy rangers & police at teaching hospitals
 having COVID-19 patients, combat shortage of essential medicines and take legal actions
 against the hoarders and profiteers, approval of celebration of doctors day and
 development of detailed modalities regarding health insurance of healthcare workers to be
 presented before the Cabinet committee.
- Frozen rates: Ensure observance of frozen rates by all hospitals and strict legal action against overcharging private hospitals by Healthcare commission.
- Grant exemption to HED: Approval to grant exemption to HED to resume marking on answer books, at designated centers of all educational boards, subject to strict adherence to SOPs/guidelines issued by P&SHD.
- Cattle markets: Formation of a committee headed by Minister Law to deliberate on the issue of cattle markets.
- Provincial Disaster Management Authority (PDMA): The concerned authority was directed to coordinate with Police, provide necessary personal protective equipment and replenish existing stocks through regular and emergency procurement modes, immediately procure and provide masks, gowns, sanitizers and goggles to Police, other law enforcement agencies, and all departments involved in enforcement of lockdown on emergency basis.
- BSL-3 laboratory at Rahim Yar Khan: Establishment of BSL-3 laboratory at Rahim Yar Khan and re-appropriation of funds from the existing PKR 6.7 billion block allocation by P&SHD.
- Punjab Information Technology Board: Exemption to PITB to operate their E-Khidmat Marakaz from 1st July subject to strict compliance of SOPs/guidelines.

4th of July

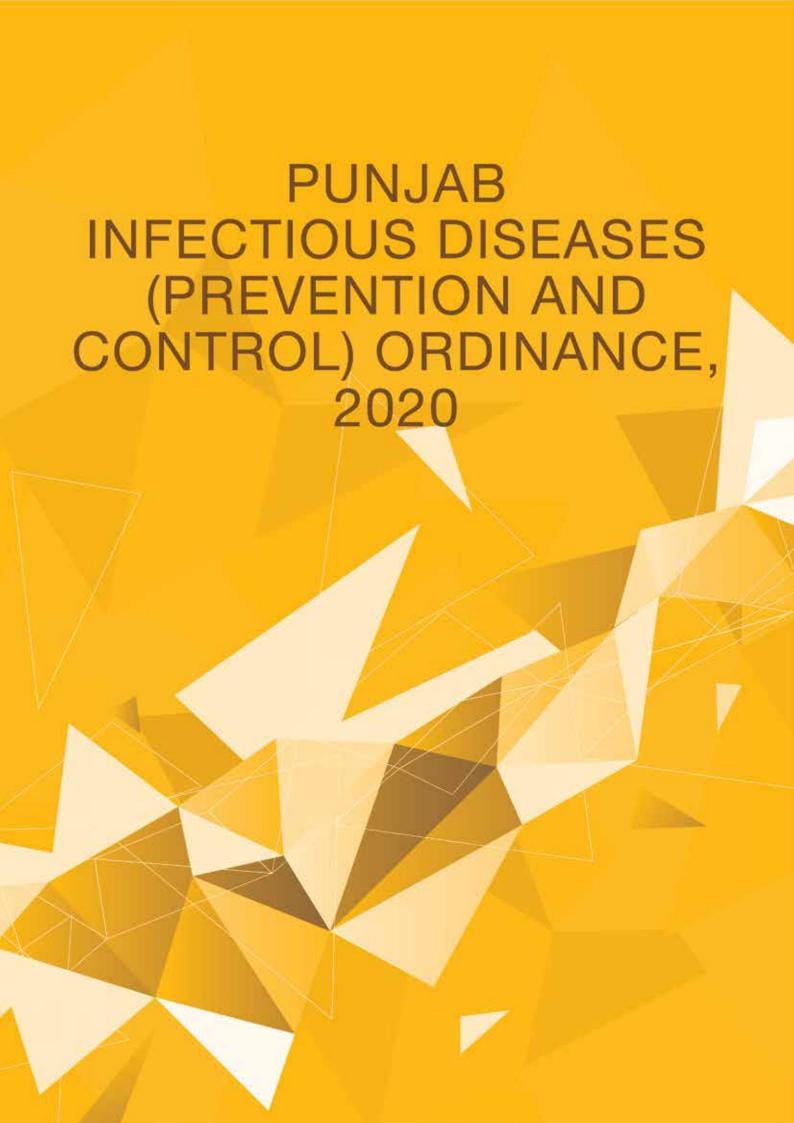
- Funds: Allowed expenditure to be met by existing block allocation of PKR 6.7 bn, available with P&SHD and presentation of findings of the pilot study before the Cabinet Committee.
- Punjab Public Service Commission: Permission to PPSC to conduct interviews subject to adoption of SOPs formulated by P&SHC Department was granted.
- Cattle markets: Establishment of Cattle markets immediately and no later than 15 days before Eid, presentation of other requirements e.g. size and number of cattle and pictorial evidence of compliance before the Cabinet Committee.
- Anti-Congo measures: Ensure preventive arrangement for Anti Congo measures including Tick Infestation surveillance in cattle markets and display of awareness material on Congo and COVID at prominent points in the markets and preparation of smart lockdown plans.

10th of July

- Expo Center: Approval for Expo Center to remain functional till Muharram was granted, payment of utility bills to Expo Center as per discussion between the Health Department and Expo Center administration and sharing of actual expenditure with media
- Procurement plan presented by Secretary SH&MED: Approval of the procurement plan presented by Secretary SH&MED.
- Dengue: Strict disciplinary action against the delinquents/repeated offenders, initiation of awareness campaign regarding testing cost, procedure and locations, take measures and activate field formations to combat Dengue.
- SOPs for visits of officers: Revision of criteria and SOPs for visits of officers was done.
- Smart lockdown: Approval for the smart lockdown plan for 7 cities as presented by Secretary P&SHD and granted ex-post facto approval for the issuance of necessary orders.
- Strict lockdown: Initiation of necessary enforcement and publicity campaign regarding lockdown at least 5 days before Eid, strict lockdown 5 days before Eid to avert expected spike in cases and closure of parks be placed before NCOC.
- Administrative offices: Opening of administrative offices of DEAs, public and private schools for specific days as presented by Secretary SED, only with skeleton staff as per SOPs. Appointment Management system: Implementation of Appointment Management system in the Motor Registration branches & property tax branches throughout the province.

17th of July

- Smart lockdown: In reference to upcoming festive of Eid the concerned committee granted approval of smart lockdown.
- Strict legal action: It was decided by the committee that strict legal action will be taken against who violate animal trading laws; animal trading outside of cattle market.
- Testing symptomatic visitors and Awareness: The decision was made to test symptomatic visitors to cattle market and initiation of mass awareness campaign urging masses to not take children and elderly to cattle markets and regarding Eid Prayers.
- Dengue control: Decision to place the matter of dengue control for further deliberation before the cabinet committee and to conduct dengue control meetings by VCs was made by the respective committee.



Punjab Infectious Diseases (Prevention and Control) Ordinance, 2020; an Ordinance to provide for prevention and control of infectious diseases was passed on 27th of March. The ordinance was promulgated by Governor of the Punjab, Chaudary Muhammad Sarwar. Although, Punjab Assembly was not present in the respective session but Governor of Punjab was satisfied that existing circumstances require immediate action. The core aim for this Ordinance is to "make provisions of prevention and control for infectious diseases in the Punjab and matters ancillary and connected thereto."

The Ordinance authorizes Secretary Health, Primary and Secondary Healthcare Department and also medical practitioners (only in some specific cases), to impose restrictions and duties regarding how to deal with infectious people, places, gatherings, etc. The Secretary Health with the approval of Chief Minister Punjab can, impose duty upon all registered medical practitioners and health facilities in any area of the Punjab, to record, communicate and treat cases of infection or contamination. Also, can impose one or more restrictions or requirements on or in relation to persons, things or premises. It gives procedural guidelines to the patients on how they will be treated. Sections 17-20 of the Ordinance further categorize punishment according to the level of offence committed by an infected person.

The Ordinance gives an insight to Government of Punjab's determined commendable policy towards this crisis. In this Ordinance, medical officers are addressed majorly and assigned with some specific duties. The purpose of implementing the Ordinance is to crush the epidemic in an organized efficient manner.

Some Salient Features of the Ordinance are:

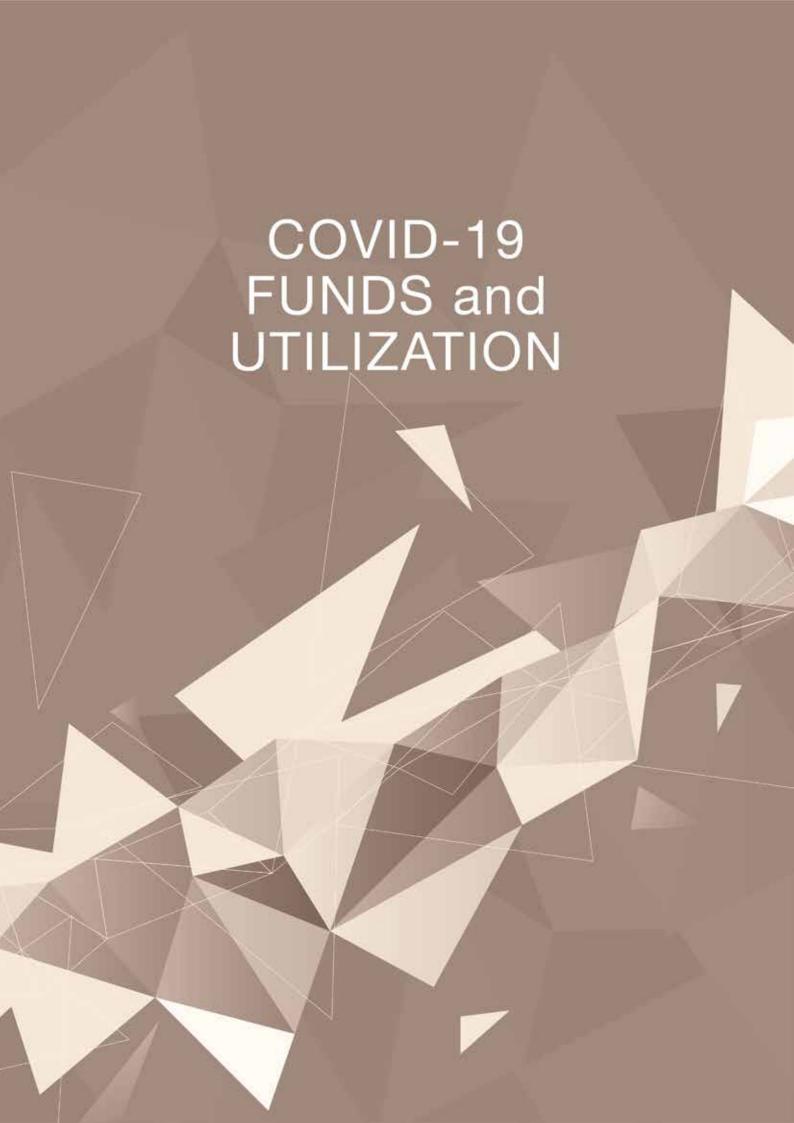
- Declaration of Health Emergency: The coronavirus outbreak has been declared a health emergency by the concerned authorities, as the outbreak continues to spread across the province and pose serious threats to public and healthcare system
 - Unity of Command Powers vested with the Office of Deputy Commissioner
- Specific obligations of various stakeholders have been highlighted: According to the
 Ordinance roles and powers of concerned stake holders were defined e.g. if the epidemic
 spreads, private doctors and hospitals can be ordered to treat patients of the epidemic. The
 government can impose any kind of ban anywhere including banning people from sending their
 children to schools or gatherings. Government will also have the authority to make decisions
 about burial and transportation of dead bodies of the patients
 - Emergency powers have been granted to the Government:

Emergency powers have been granted to government relating to temporary acquisition of assets and services. The Deputy Commissioner shall have the authority to restrict any type of movement in certain areas for a specified period, transfer any sick or infectious person to specific places.

- Health practitioners: Some special powers have been granted to Health practitioners
- Screening, Testing and Quarantine protocols: The protocols related to screening, testing
 and quarantine of suspected and confirmed patients have been strengthened and elaborated.
 Government will be allowed to screen masses anywhere. Every citizen is responsible to report
 ill people to certified medical officers and designated healthcare facilities. In case of violations
 penalties and fines can be charged as defined in the ordinance.

- Penalties and implementation: Penalties and implementation framework has been clearly delineated. Violation of any clause will result in two months imprisonment and fine of Rs. 50,000/- (PKR). Violation of more than one clause will lead to six months imprisonment and fine of Rs. 0.1 Million (PKR). A fine of up to Rs. 0.2 Million (PKR) will be imposed on an institution for first time violation. According to the Ordinance, an infected person who escapes quarantine or does not comply with the given precautions may face imprisonment or be fined up to PKR 50,000. A second escape attempt will lead to an 18 months imprisonment and fine of up to Rs. 0.1 Million (PKR). Ordinance empowers government to impose sanctions on various festivals and gatherings. Ordinance allows the government to close any premises and stop entry and exit at place.
 - Approved by Provincial Cabinet, notified & promulgated in the province.





In order to combat coronavirus threat, Government of Punjab left no stone unturned to control pandemic. Funds were made available to ensure timely provision of resources to department. Primary & Secondary Healthcare Department has been provided funds in four different released time to time. Summary of funds and utilization is given below;

COVID-19 Funds (Primary & Secondary Healthcare Department)

No.	Funds Released	Funds Utilized	Booked/POs Issued	Remarks/Purpose
4	Rs.236.500 M	Rs.236.282 M	Rs.0.000 M	All the items (Purchase of Mask, PPEs, Printing etc.) received and payment of contactors paid
2	Rs. 2,000.000 M	Rs.18.395 M	Rs.1,460.000 M	Pending payment in process for Rs.509.270-M and PO issued for Rs. 754.184-M for purchase of Personal Protective Equipment (PPE), PCR Kits & Consumables Collection of list of Medical staff for Incentive/Allowances is in progress Salaries for additional Contingent Paid staff
3	Rs.629.150 M	Rs.134.870 M	Rs.211.856 M	Up-gradation of 03 BSL-II Labs into BSL-III Labs Establishment of 05 new BSL-III Labs All the Labs are functional Payments of funds amounting to Rs.211.856-M to contractors is pending
4	Rs. 3,873.000 M	Rs.1,029.144 M	Rs.2,200.000 M	Purchase of Personal Protective Equipment (PPE), PCR Kits, Consumables, Disinfectant Solutions etc. amounting to Rs. 2,200-M is in progress Required Medicine for COID-19 Patients Required equipment for Existing Hospitals including Labs Repair of Equipment/Ventilators done and Payment pending Rs. 150 M utilized for Awareness Campaigns Warehouse Charges
Total	Rs.6,738.65 M	Rs. 1,419.741 M	Rs.3,871.856 M	

Procurement Process of Equipment/Items/Consumable



LABORATORY NETWORK

Phase II

4.000 tests/day

Addition of labs & labs in Lahore, Rawalpindi, Multan & Faisalabad Phase III

5,500 tests/day

Addition of labs in DGK & Bahawalpur Auto extractors procured for Bahawalpur, Faisalabad, UVAS Phase IV

8,040 tests/day

Auto Extractors procured for UVAS, TB Lab, and PRL in Lahore

Phase I

400 tests/day Single Punjab Reference Laboratory in Lahore Pakistan, an underdeveloped state has a weak health care infrastructure in comparison to developed states. For Pakistan, which is already in the grip of deadly diseases such as Polio, Dengue and TB, facing and coping with pandemic has been a great challenge. Despite having underdeveloped healthcare system, Government is trying its best to tackle this critical situation. With every disease outbreak there comes a realization that it is important to invest in healthcare facilities.

It is well recognized by experts that, investment in laboratories and disease surveillance networks are key elements for response towards outbreaks. Without adequate testing networks of laboratories and protective equipment all other efforts can collapse. As even realized by global experts, determining the spread of infection is as important as its treatment and handling. In reference to this approach the authority decided to increase the capacity of testing, introduced laboratory chains in different cities of Punjab for COVID- 19 test and also modified existing reference labs. Moreover, well-equipped public health laboratories with trained staff and advanced diagnostic and surveillance capacity were established. These initiatives were taken to authenticate the estimation of infection spread and for the detection of more vulnerable areas. Furthermore, it let authorities act accordingly in the areas where there is large spread of infection.

Independent laboratories and hospital laboratories in the major cities have been designated to collect samples from suspected patients of coronavirus, with the complete assurance of safety for healthcare workers who are working in the respective domain. Functionality includes; safe sample collection from suspected cases, its storage, packing and then its safe transportation to designated lab centers. It also requires relevant supplies e.g. appropriate testing kits, PPEs etc.

Lab Capacity Enhancement

As also recognized by global health experts; increased and efficient testing protocols can prove helpful to control the spread of infection. Since the outbreak, Government of Punjab has invested a lot to strengthen the Laboratory Network against COVID -19, following are some major initiatives:

- Modification: Government of Punjab has modified already existing Punjab Reference Lab to test for Covid-19. This initiative ensures the capacity increment of testing.
- Upgradation: In view of the growing need, the authority decided to upgrade the labs. In this regard, three labs in Multan and Lahore were upgraded to test COVID-19 suspected patients.
- New Laboratories: Amid fast and uncontrolled spread across the province, the concerned authority decided to construct and establish new laboratories. In this regard, five new laboratories were constructed in different cities of Punjab i.e. Faisalabad, Rawalpindi, Dera Ghazi Khan and Bahawalpur
- Procurement: Auto extractors were also procured in the month of June for UVAS, TB Laboratory and PRL in Lahore
- Testing Capacity in March: In the month of March (PHASE I), the testing capacity which initially was 400 test per day was then increased to 2000 tests per day.

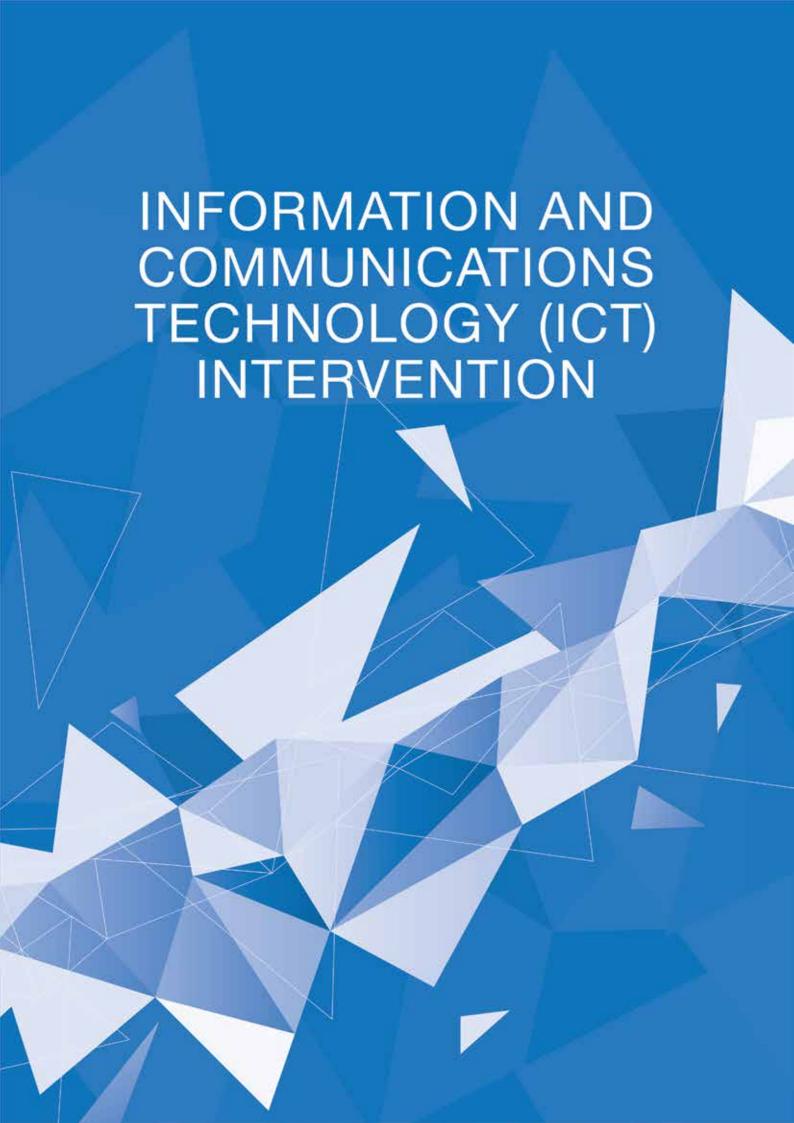
- Testing Capacity in the month of April (PHASE II) was almost doubled in comparison to previous month, March. From 2000 tests per day the testing capacity was increased to 4000 per day by April.
- Testing Capacity in May: The authority keeps on focusing to increase the testing capacity.
 In the month of May (PHASE III), the testing capacity against COVID -19 was increased to 5500 tests per day.
 - In June (PHASE IV) testing capacity of laboratory was increased to 8040 tests per day.
- Total test till July 28th: Total of 713,688 tests were conducted across the province till the end of July (28th July)

Laboratory Testing Status

The concerned authority equipped all the respective laboratories to increase COVID-19 testing. Following are details of the testing capacities of laboratories in different cities of Punjab:

Laboratory	Capacity
Punjab Referral Laboratory & HCP	2,700
Nishtar Hospital	200
PFSA	1,500
PKLI	150
Jinnah Hospital	300
Lahore General Hospital	300
TBP, Lahore	300
UVAS	200
IPH Lahore	300
RMU	200
Allied Hospital	600
TB Lab Multan	190
Gujranwala	200
BBH Rawalpindi	200
CAMB, Lahore	200
Civil Hospital Bahawalpur	300
DG Khan	200
TOTAL	5,040

Laboratory	Capacity
Abwa Hospital & Research Centre	300
Mughal Labs Lahore	100
Chughtai Lab	5000
Shaukat Khanum Hospital	1000
Bahria International Hospital Rawalpindi	100
City Lab	200
Bahria International Hospital Lahore	100
Al Khidmat Foundation	300
University of Lahore	100
NIH	1000
Testzone	100
Agha Khan	500
Rawalpindi Institute of Cardiology	200
Doctors Hospital	180
Bakhtawar Amin Medical College & Trust Teaching Hospital Mattital Road Multan	100
TOTAL	9,280



Since the outbreak of Pandemic, experts are trying their best to explore more efficient and convenient methods to control the spread of virus. The role of Information and Communications Technology (ICT) became more significant, to trigger public awareness, virus spread prevention, surveillance, diagnosis, treatment and coordinate response for COVID-19. Therefore, ICT interventions are treated as one of the most effective phenomena worldwide to fight this crisis. Government of Punjab and specifically Primary and Secondary Healthcare Department is also using widely used and popular modes of communication to fight against this crisis.

A number of ICT-based initiatives has been taken by the concerned authorities to fight more effectively with the infection and to ensure minimal morbidity and mortality rate some are:

- Developing dashboard to provide the updated statistical report on Coronavirus
- Web portal: to update concerned stake holder with contemporary situation
- Information Portals: To educate people, various information portals were also made functional
 - Digital interactive maps: To identify most vulnerable areas in the cities.
 - Awareness measures: Public service messages on electronic, print and social media
- Online discussions and information sessions: Various online campaigns, trainings, workshops were arranged on different platforms for different stake holders.
- Helplines: Different helplines were created e.g. 1033 to provide and collect information from public.
- Message Alert: With the collaboration of network companies alert messages in this regard were sent to general public.
 - Call alert: Automated call alerts are given to general public in this regard.
 - Applications: Some applications are also working in this regard to aware people.
- NHS test and trace service: A service to provide an efficient tracing of suspected coronavirus patients was also made functional
- Telemedicine: To minimize mobility of citizens, to maintain social distancing rules and to ensure the ease of Public telemedicine was also introduced by concerned authorities which prove to be of immense importance

Management Information System /

The concerned authorities are utilizing ICT interventions to the best of their knowledge, to combat COVID-19 pandemic crisis. Following are some major details:

Contact Tracking

This application is the building block used to track and add contacts of COVID-19 Confirmed patients. It shows the main statistics of Confirmed Contacts and Travelers and bifurcates them into the following categories

- Total confirmed and potential cases
- 2. Traced
- To Be Traced
- 4. Screened

Application shows a list of the patients in health facility, from where contacts can be added just by clicking particular patient name.



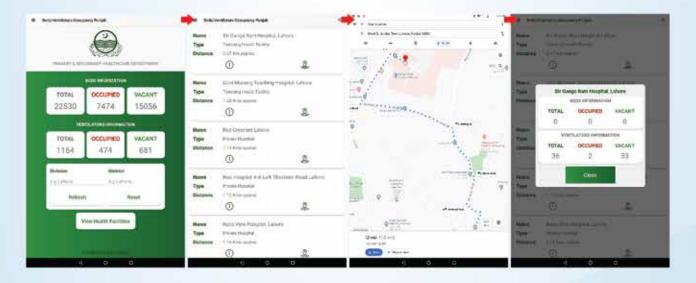
Bed ventilator occupancy

This Application provides the information of total beds & Ventilators of Punjab along with the categorization of

- 1. Occupancy
- 2. Vacant

The Application serves as a helping tool to the Rescue 1122 teams when they need to transfer the patient to a health facility. The Application displays nearest health facilities to them based on the entered Division and District and the availability of beds and ventilators in the selected facility.

Additionally, the Rescue teams can also be guided through Maps, in the app, in order to reach the desired health facility in minimum amount of time.



Home Isolation

This Application consists of three stages

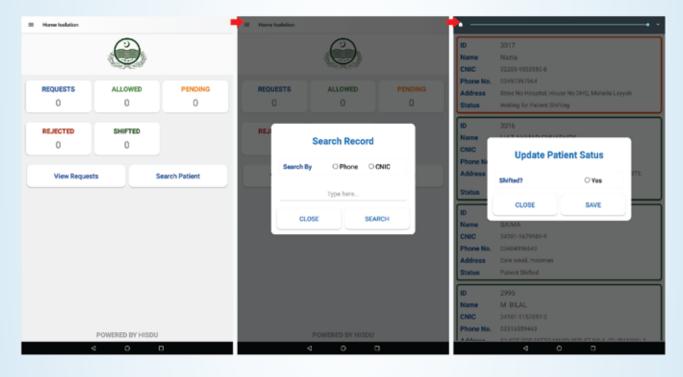
- Doctor Assessment
- 2. Health Team Assessment
- Rescue 1122 Teams Actions.

If a patient wish to get himself home isolated, then the doctor using this Application, would perform a complete assessment about the condition of the patient.

Once, approved from the doctor, Health Teams would get the notification on the same Application. The teams would go to the patient address and evaluate the prerequisites needed to meet before patient gets home isolated. Evaluation results as a score

- 1. If the score is equal to 12 or more, patient can be home isolated in house
- 2. If the score is less than 12, patient cannot be Home Isolated.

If the Patient is eligible for home isolation after the evaluation of Health Teams, Rescue Teams would get the notification on the same Application and will update the status of the patient once shifted to their respective homes.

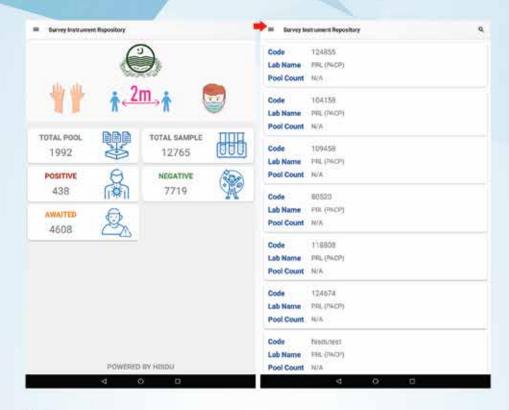


Pool Sampling / Surveillance / Survey Installed repository

This Application allows random sampling exercise to be conducted separately. All samples are geotagged & logged separately for easy access of district health teams.

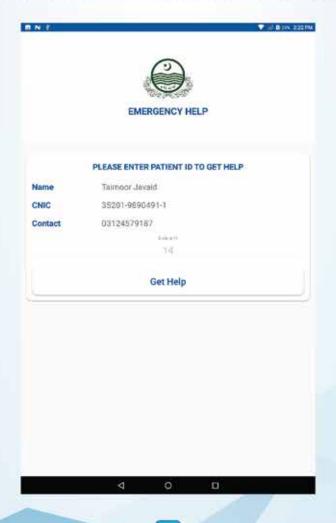
Screening of Traveler

All foreign travelers that visit Punjab are assessed through a questionnaire and if found suspected then respective samples are collected. If result is positive than the contacts are been traced of that particular patient.



Emergency Help

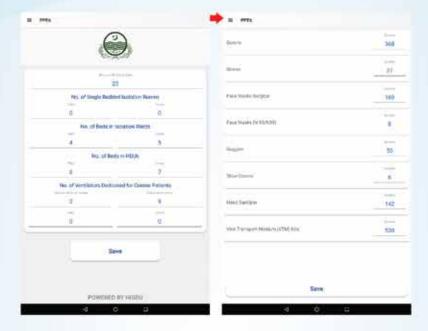
This Application is installed in the patients Mobile when they are isolated at home. The application would analyze the movement of the patient around its defined dimensions. Once the patient gets out of it, an immediate alert message will go to DDO, so that they can stop the patient from moving and can protect the other people from being affected.



Personal Protective Equipment

PPEs Application allows Health facility to store their available stock of equipment.

The entered stock would then be displayed to the main dashboard on Web Portal. In this way, higher authorities can determine the stock position and can cover shortages in time.



Self Disease Assesment

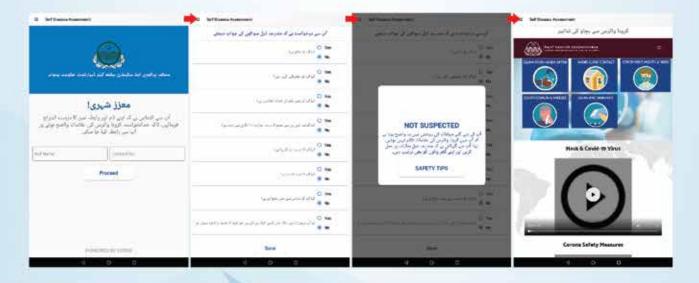
This Application allows a random person to evaluate oneself, if he or she feels certain symptoms.

This Application would, after installation, just ask for the client's name and contact number and then would ask to enter some basic questions regarding the symptoms of this disease.

Based on the answers entered by the user, Application would declare the client a:

- Potential Cases
- Not Suspected

If the client is found Not Suspected, then the Application would route the user to the Safety Tips Window, where one can get a complete guide on the precautions needed to be taken in order to remain safe from this disease.



Contact Tracing

- · Geo tagging: Geo tagging and details of all respective contacts are provided.
- Contact Tracing: Contacts are traced at home, relations and work place or places visited around
 - Sample: All contacts sampled and samples generated through application



Online Bar- Code Lab request:

 People can access to bar code VTM online by entering appropriate required data against Bar code VTM then bar code can easily be received and system generated reports are available for people



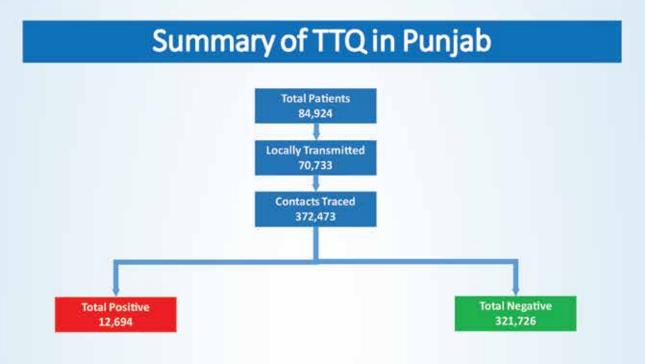
Online Lab reports

 For the ease of public and to ensure less mobility in risky areas lab reports are available online





"Test, Track, Quarantine" was the only measure given by WHO in March, 2020 to fight COVID-19. Primary and Secondary Healthcare Department in collaboration with National Command and Control estabilished very active TTQ Cell and put its best human resource in this wing. TTQ Cell figures given below speak of their performance and drop in positivity ratio in province speak of their success.



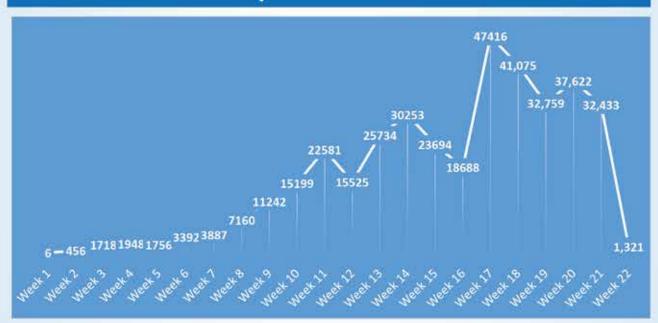
Summary of Contact Traced (till Week 15)

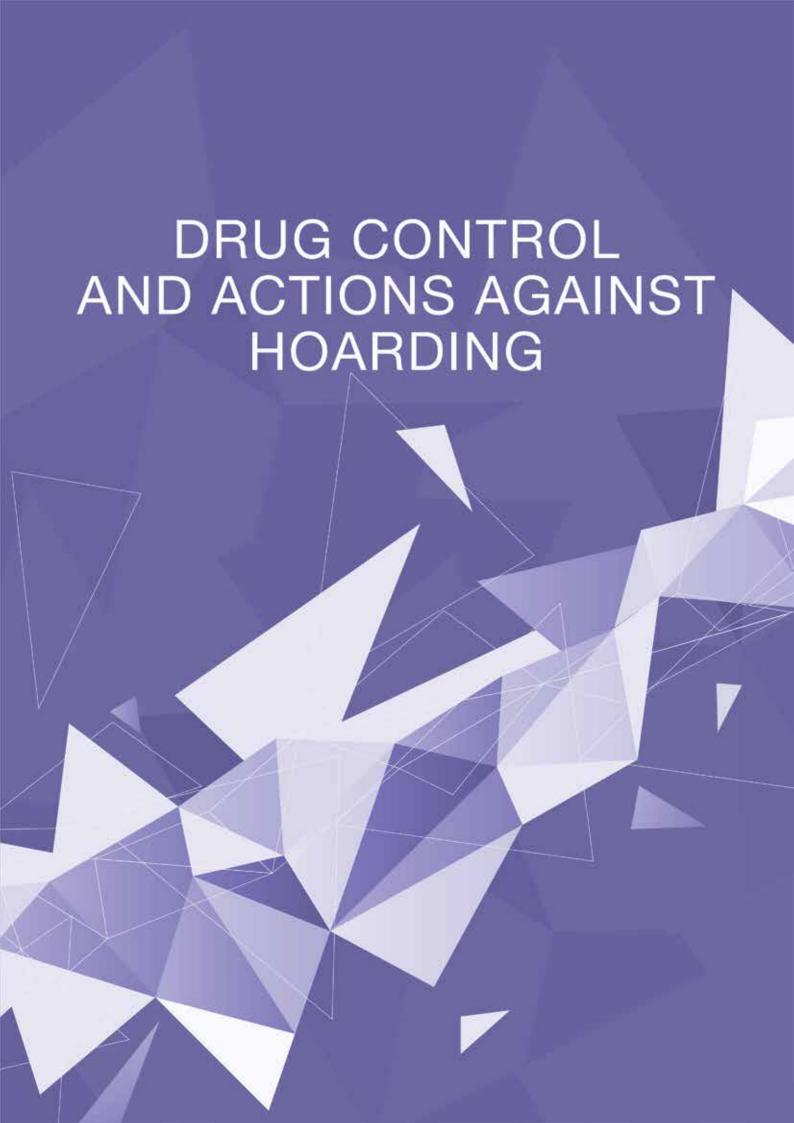
Week Number	Dates	No of Contacts
Week 1	8-14 March 2020	6
Week 2	15-21 March 2020	456
Week 3	22-28 March 2020	1,718
Week 4	29 March-04 April 2020	1,948
Week 5	05-11 April 2020	1,756
Week 6	12-18 April 2020	3,392
Week 7	19-25 April 2020	3,887
Week 8	26 April - 02 May 2020	7,160
Week 9	3-9 May 2020	11,242
Week 10	10-16 May 2020	15,199
Week 11	17-23 May 2020	22,581
Week 12	24-30 May 2020	15,525
Week 13	31 May-6 June 2020	25,734
Week 14	7 -13 June 2020	30,253
Week 15	14 - 20 June 2020	23,694
To	otal	164,487

Summary of Contact Traced (From Week 16)

Week Number	Dates	No of Contacts		
Week 16	21-27 June 2020	18,688		
Week 17	28 June-04 July 2020	47,416		
Week 18	05-11 July 2020	41,075		
Week 19	12-18 July 2020	32,759		
Week 20	19-25 July 2020	37,622		
Week 20	26 July-1st Aug 2020	32,433		
Week 21	Week 21 02-08 Aug 2020			
Grand	Grand Total			

Summary of Contact Traced





Drug Control /

During COVID-19 times, quacks and fake medicines became challenge. Provision of best healthcare services and quality medicine have been top priority of Primary & Secondary Healthcare Department. To ensure this, Provincial Drug Control Unit carried out massive campaign right from start of COVID-19. Brief summary of the activities carried out are:

Drug Control Activities (March-July 2020)

No. of Shops/Units Inspected 18498		FIRs Registered	15
No. of Samples Taken 4764		Cases of Illegal Advertisement	12
Samples Declared Substandard 109		Cases of Expired Medicine	128
Samples Spurious/Unregistered 20		No. of Shops Sealed	403
Cases Referred to PQCB	59	Launched in Drug Court	337
Cases Referred to DQCB	853	Fine Imposed	476000
No. of Cases Without DSL	369		

Actions Against Hoarding & Profiteering

Effective and hygienic treatment of patients for COVID-19 during all phases of their disease; from screening till their discharge needs to be handled vigilantly. The availability and distribution of required commodities i.e. oxygen cylinders, masks, sanitizers, medicines were a difficult task to monitor. Amid the outbreak of pandemic there was a high trend of hoarding of required supplies. To discourage the hoarding of required supplies Government of Punjab with the collaboration of required stake holders and under section 144 regulated the market, details are as follows:

Actions Taken	SOPs Violated	Hoarding/Profiteering of Oxygen Cylinders/Related Medical Supplies, Masks, Sanitizers and Medicines	Grand Total		
Sealed	11491	60	11551		
FIR	119	7	126		
Fine (Rs)	1,24,81,900	213,000	213000		
Warnings	10592	295	10887		



The impact of COVID-19 is felt across all the sectors, groups and classes of society. It definitely has overtly burdened the healthcare department and healthcare workers. "Healthcare workers" not only refers to just doctors and nurses, but all those who are risking their lives in the fight against COVID -19. People working in awareness campaigns, developing information dashboard, producing and distributing PPEs and providing other required facilities, are equally part of the noble chain.

The critical nature of the situation presented healthcare systems with difficult decisions which needed to be assessed and changed immediately. Time demanded modifications and additions for more efficient functionality. Overburdening, existing personnel is not a solution and it cannot produce productive results.

In the light of the aforementioned circumstances, the concerned departments recruited special teams for the defined purpose. The purpose of recruitment is purely to share the burden of already existing workers specifically healthcare workers who are directly dealing with patients and crisis. In this regard, Medical officers i.e. male and female were appointed to help fight against COVID -19 crisis. Nurses were also appointed in the meantime. Moreover, for strategized functionality and efficient results some consultants and technologist were also taken on board by the concerned authorities to ensure the minimal morbidity and mortality rate across the province of Punjab.

Following are the details of new recruitments by the respective department in this regard:

Primary & Secondary Healthcare Department new Inductions for COVID-19

No.	Designation Posts							
1	Woman Medical Officer	620						
2	Charge Nurses 51							
3	Consultants 39							
4	Medical Officers 600							
5	Technologists 17							
	TOTAL 1,327							



One cannot think of a better time to honor and recognize healthcare workers i.e. Doctors and nurses, for their commitment to the profession. Around the world healthcare workers are on the frontlines battling against coronavirus. Healthcare workers are working day and night closely for COVID-19 patients. The nature of their job has placed them at an increased risk of falling ill as it puts them all in more vulnerable environments. They are at increased risk of catching any communicable disease specifically COVID-19. Hence, it was necessary to establish hospital-specific protocols to reduce their risk of infection in interactions with COVID-19 patients. Healthcare workers confront daily the unsettling reality that they themselves are exposed to the potentially lethal infection. Moreover, the fear of virus transmission to their families and friends is more pressurizing. But still healthcare workers are giving a tough fight against this virus across the province.

For the sake of healthcare workers health and for the welfare of whole nation, it was of urgent need to explore more safe and secure ways. To protect today's frontline workers and to ensure the country is better prepared for any critical situation, the respective government bodies have created some policies and list of essentials required for safety. The respective stake holders have completely supported policies, which will deliver protective equipment, and guaranteed sick leave and pay. The following initiatives taken by concerned authorities have helped scale up and prioritize those policies:

Training of Healthcare workers

To strengthen the effective functionality of healthcare system, the concerned stake holders decided to train healthcare workers. Following are some details:

- Training as per WHO guidelines for donning and doffing of PPEs
- District wise sessions conducted to train concerned employees
- Training for handling of infectious waste in HDUs, Isolations wards, and quarantine facilities
- Training of District Health Authority employees for proper sample collection, storage and transportation

Following are some details of training sessions arranged by the concerned authorities:

No.	Title	Target Audience	Venue	No of Trainees	Dates
1	COVID-19	5 Point of Entry	Mayo Hospital Lahore	280	10-2-2020
	SOPs (1st Edition)	Stations Rapid Response	Faisalabad Medical College	230	12-2-2020
		Teams	Rawalpindi Medical University	200	14-2-2020
		District Physicians/ Clinical Focal	KS Medical College Sialkot	220	19-2-2020
		Persons and Infection Control Nurses from all 36 Districts	Nishtar Medical University	180	20-2-2020
			Sub-Total	1110	

No.	Title	Target Audience	Venue	No of Trainees	Dates
	Donning	HDU and Isolation	Services Hospital Lahore	20	17-2-2020
	and Doffing of PPEs	Unit Staff at Point of Entry	Holy Family Hospital Rawalpindi	20	19-2-2020
2		attached hospitals	Allied Hospital Faisalabad	20	21-2-2020
-			Nishtar Hospital Multan	20	24-2-202
			KS Medical College Sialkot	20	26-2-2020
			Sub- Total	100	
3	Donning and Doffing	Rapid Response Team Quarantine Staff	DHDCs of all 36 Districts 30 person/ District	1080	29-3-2020 to 6-4-2020
4	PPE use for Hospital Janitorial and Sanitation Staff	Hospital Janitors and Sanitary Workers	All DHQ and THQ Hospitals Quarantine Centres 10-15 persons / hospital	1650	31-3-2020 to 27-4-2020
	COVID-19 SOPs 2nd Revision	District Master Trainers Physician			18-4-2020
5	Cascade Training	Chest Physician Infection Control Focal Person Disease Surveillance	Gujrat University (12 Upper Punjab Districts) 40 persons per batch	80	20-4-2020
		Coordinator Surveillance Officer (WHO)	Institute of Public Health (12 Central Districts) Social Security Hospitals	80	22-4-2020
6	COVID-19 SOPs 2nd Revision Cascade Training (District Level)	Physician Focal Persons Infection Control Focal Persons DDHOs	All 36 DHDCs 3-5 person/hospital	750	1-5-2020 to 10-5-2020
7	COVID-19 SOPs 2nd Revision Cascade Training (DHQ and THQ Level)	Doctors Nurses Paramedics Support Staff	Teaching Hospitals DHQ and THQ Hospitals Isolation Centres Quarantine Centres	7500 Doctors 22500 Nurses 11250 Paramedic and Support Staff	5-5-2020 31-5-2020
8	COVID-19 SOPs 2nd Revision For Rapid Response Teams and Health Managers	CEOs DHAs DHOs DDHOs Rapid Response Teams Medical Superintendents of all teaching, DHQ and THQ Hospitals	DHDCs	720	4-5-2020 10-5-2020

No.	Title	Target Audience	Venue	No of Trainees	Dates
9	IPC and hygiene for Janitorial staff	Infection Control Officers Infection Control Nurses Janitorial Staff	Lahore, Gujranwala, Rawalpindi, Faisalabad and Multan Teaching hospitals DHQ Hospitals THQ Hospitals RHC All teaching hospitals 5 DHDCs	150 Doctors/ Infection Control Officers 150 Infection Control Nurses 1650 Janitorial staff	16 June to 9 July 2020
10	Childhood pneumonia, diarrhoea and COVID-19 case management Zoom session	Paediatricians, GPs and Medical officers	All DHQ Hospitals	360	22 July 2020
11	Childhood pneumonia, diarrhoea and COVID-19 case management	GPs	120 tehsils of Punjab	1200	24 - 29 July 2020
12	IPC and use of PPE for Frontline workers (Online Lecture by Fatima Jinnah Medical university attended by batches of 10 at Tehsil level)	Frontline workers Doctors Paramedics LHS Outreach workers	120 tehsils of Punjab	13500	23-29 July 2020
			Grand Total	63040	





















Shaheed Package /

Chief Minister of Punjab, Sardar Usman Buzdar has announced "Shaheed Package" for healthcare professionals who lose their lives while fighting against coronavirus. "Shaheed Package" to be given in addition to the Financial Assistant Package already granted to the family of a civil servant, who dies while in service except the Contingent paid staff, who shall only be entitled for the proposed package. The details of package are as follow:

 One-time lump sum amount, for regular, adhocee, contractual staff, contingent paid employees and those being hired on lump sum package

No.	Basic Scale	Financial Assistance			
1	BS-1 to BS-16	4 million (PKR)			
2	BS-17 and above	8 million (PKR)			

Honorarium

Government of Punjab announced one month pay package including rate of honorarium, in lieu of corona risk allowance for healthcare workers hired in consultancy mode on lump sum package to perform duties for COVID-19 patients in healthcare centers. An honorarium equal to one month's basic pay per month for those directly dealing with established COVID-19 patients was decided. Specialized Healthcare and Medical Education Department has issued the respective notification. As directed all codal/legal formalities must be fulfilled before making payments.

PPEs Arrangement and Distribution

Furthermore, PPE's were also arranged by the concerned department (Primary and secondary Healthcare Department) in different cities of Punjab. Following are some details:

District	Water Resistant Gown	Examination Gloves	Surgical Face Mask	Face Mask N/99 N95	Goggles	Shoe Cover	Hand Sanitizer	Long Shoes	Scrub Tops	Soap	Clea- ner	Body Bag	Ther- mal Guns
Attock	2,800	2,000	14,800	1,100	590	3,000	1,380	10	75	900	14	15	15
Bahawalnagar	4,000	10,000	34,000	2,210	1,190	5,000	1,550	20	75	900	14	15	15
Bahawalpur	800	2,000	2,300	750	-	6,500	870	-	75	900	14	15	15
Bhakkar	900	2,600	4,500	500	320	2,600	900	-	75	900	14	15	15
Chakwal	1,300	3,000	4,000	200	500	3,000	850	-	150	900	14	15	15
Chiniot	600	1,000	2,000	400	20	2,000	100	-	75	900	14	15	15
DG Khan	1,800	7,400	29,750	1,500	810	9,800	1,025	20	75	900	14	15	15
Faisalabad	4,600	11,200	29,850	4,170	720	22,200	4,816	40	300	3,600	57	60	180
Gujranwala	1,300	10,700	10,850	850	12	6,000	3,100	-	300	3,600	57	60	60
Gujrat	500	7,300	18,500	2,028	70	1,000	2,350	-	200	2,400	38	40	40
Hafizabad	2,300	5,300	15,000	700	1,020	10,300	930	-	75	900	14	15	15

District	Water Resistant Gown	Examination Gloves	Surgical Face Mask	Face Mask N/99 N95	Googles	Shoe Cover	Hand Sanitizer	Long Shoes	Scrub Tops	Soap	Clea- ner	Body Bag	Ther- mal Guns
Jhang	600	800	1,500	500	-	1,300	800	-	-	900	14	15	15
Jhelum	1,000	1,500	2,500	900	30	4,500	850	-	75	900	14	15	15
Kasur	2,250	2,700	7,600	1,070	1,150	9,000	1,330	10	75	900	14	15	15
Khanewal	2,000	2,000	5,000	-	500	2,000	750	-	75	900	14	15	15
Khushab	5,300	7,500	35,500	1,730	1,340	14,500	970	-	15	900	14	15	15
Lahore	46,463	124,917	281,422	23,760	2,390	80,057	16,802	590	1,250	15,000	235	302	256
Layyah	1,900	3,700	12,000	1,100	510	1,000	970	-	75	900	14	15	15
Lodhran	900	-	4,000	500	400	2,300	70	-	-	-	-	-	-
Mandi Bahuddin	70	100	-	25	10	-	750	-	75	900	14	15	15
Mianwali	2,450	8,900	23,250	800	200	2,200	453	-	-	-	-	-	-
Multan	8,375	9,300	15,700	3,775	3,090	20,600	4,400	-	350	4,200	66	70	-
Muzaffargarh	4,200	7,200	34,500	2,550	930	8,500	990	-	75	900	14	35	15
Nankana	100	-	1,000	200	-	100	750	-	75	900	14	15	15
Narowal	6,100	6,500	23,500	2,750	1,030	4,000	1,130	-	75	900	14	15	15
Okara	50	-	500	50	-	-	20	-	-	-	-	-	-
Pakpattan	700	5,100	4,000	450	110	8,000	900	-	75	900	14	15	15
Rajanpur	1,400	6,600	32,000	2,030	1,930	8,800	620	-	-	-	-	-	-
Rawalpindi	9,550	9,000	39,300	5,950	1,900	27,900	3,700	90	-	3,600	57	60	60
RY Khan	2,050	8,000	25,500	1,220	180	2,100	1,100	-	100	1,200	19	20	20
Sahiwal	2,900	6,810	27,700	2,420	790	12,200	1,550	-	75	900	14	15	15
Sialkot	2,100	1,500	22,500	700	520	11,000	600	30	-	-	-	-	-
Sargodha	600	1,500	1,500	700	80	2,300	1,050	-	100	1,200	19	20	20
Sheikhupura	3,870	3,300	4,700	1,230	40	9,350	-	-	100	1,200	19	20	20
Sialkot	600	1,000	4,000	150	20	8,000	1,550	20	150	1,800	29	30	30
Toba Tek Singh	1,600	4,700	16,050	570	1,000	4,700	650	-	-	-	-	-	-
TOTAL	128,028	285,127	790,772	69,538	23,402	315,807	60,626	830	4,290	55,800	876	1,002	986



Formulation of precautionary measures is as important as spreading the word. Awareness campaigns have helped dispel misinformation about the coronavirus while promoting precautionary measures. It's due to awareness messages that now people know and are encouraged to wash hands frequently, use antiseptics to clean household items, wear masks in public places, avoid meeting people with cold and coughs, observe physical distance, avoid crowded places, and stay home as much as possible. The public awareness campaign is one of the preferred tools, supported by world experts to assist government in its response to the COVID-19 crisis.

Media health awareness campaigns were kicked off, the moment first case of COVID-19 was reported in Punjab, Pakistan. The exposure to media as well as the knowledge related to COVID-19, particularly related to its symptoms and to frequent handwashing as a preventive measure, increased over time. Implementation is another issue but there is no doubt that people are well aware how they should act. Whether it is precautionary measures, lockdown policies, SOPs, people know rules and it's all because of the aggressive media campaign run by concerned bodies. Right awareness is one of the most valued preventive tool for combating the pandemic. Awareness campaign had already served as an important source for health education and promotion in our societies for decades. COVID -19 campaigns were aimed at changing the health behavior of the population by creating awareness and promoting prevention, such as hand hygiene practices and immunization coverage.

The concerned departments of government decided to launch an aggressive advertisement drive especially amid lockdown to convince people to follow social distancing approach, keep masks on while being out for work, and abide by all other SOPs. The success of campaign can be estimated with the fact that people learnt that they had to take the danger of the coronavirus serious and they had to take precautions to save their own and their beloved one's lives. Awareness messages were designed in a manner that they should be full of information, awareness, clarity, and motivation and should be without escalating the level of stress and fear among public. Following are some highlight activities done in this regard:

Helpline /

In view of critical circumstances and less mobility rules, the concerned authority launched a helpline, "1033". If a person is in immediate need and danger in regard to COVID-19, he can call on respective helpline number. The helpline is functional 24 hours a day and 7 days of week. Helpline not only provides information regarding the concerned matter but also redirect suspected patient's request to concerned and designated healthcare facilities. Moreover, it has also helped in contact tracing of active cases. Helpline was started in March and is still functional. Total 16,954 calls were received at the respective helpline number. Following are some details:

Month	Calls
April	4,779
May	2,967
June	2,880
July	1,276





Counseling /

Medical professionals and psychologists providing counselling to patients and acquaintances via helpline





Print Media

The concerned authorities ensure to use every possible tool for the sake of public awareness. Public service messages and some other write up methods were used aggressively in print media to inform and educate people in this regard.





Electronic Media

An aggressive media campaign was run on Electronic Media too. Public service messages were generated to be broadcasted on television and radio. Government officials periodically arranged media briefings and conferences to update people with contemporary circumstances. There is no doubt in the fact that media houses collaboration in this crucial time should be lauded. Total 110 public service messages were produced in the meantime.





Outdoor Campaigns /

The respective healthcare department ran aggressive outdoor campaigns to let people have a deep insight into the critical circumstances that we are living in. Another purpose of outdoor campaign to strengthen prevention and control of virus.

 Shops: Printed awareness messages in the form i.e. brochures, standees etc. were also placed in different shops i.e. grocery stores, barber shops etc.





 Ramadan Calendar: The respective department designed specialized calendars and distributed among masses locally in the month of Ramadan.





 Mosque: The policy makers strategized to use mosque and the respective Clerics to sensitize public. Clerics not only helped in spreading awareness but also let healthcare workers place posters and banners. Posters and banners prepared in this regard were made displayed in ablution areas of mosque.





- Clinics: Awareness messages formed in different forms i.e. brochures, posters, banners
 and flyers were placed in clinics of general Physicians. The purpose of placing posters in such
 places because people visit such places was people visiting them frequently so, it could be a
 good source of awareness.
- Public and Private Hospitals: Placing posters and banners in healthcare facilities is one successful tool of respective awareness campaign. This tool has been used since the very start of this crisis.





 Campaign for Quarantined Patient: A special awareness campaign was also done for patients in quarantine facilities. Messages were designed in a manner to let people follow guidelines formulated for patients and quarantine facilities.





 Standees: Standees designed to spread awareness regarding prevention and control of COVID – 19 were placed in different public visiting places i.e. hospitals, clinics, mosques etc.







Mobile Miking: A mobile squad was arranged and designated with the job to spread the
word regarding COVID- 19's prevention and control and to let people be cautious in this regard.
A loudspeaker is attached with each bike and these bikes wander in local streets of city. There
are awareness messages played on those loudspeakers (depending upon the language of the
locality) so that people get alerted through them. Mobile miking was launched across the
province; this commendable initiative is highly acclaimed even by international media.







Daily Statistics Update: The awareness team update statistics regarding COVID -19
patients with not only media houses but also shared those statistics in the form of still post from
official social media forums.



- Books: Three books were also published for the concerned purpose i.e. Standard Operating Procedures, Standard Operating Procedures Revised and Preparedness to Combat COVID – 19.
- Booklets: Since the day, (first case of COVID -19 was reported in the province)
 Government's official awareness team started working in this regard. Numerous booklets comprising the information and guidelines in this regard were published and distributed and still continue to do so. Total 6 booklets are published up till now.



- Distribution of flyers/Brochures/booklets: Distribution of flyers, brochures and booklets were also done through the hands of vaccinators during their rather scheduled EPI visits. Total 28 brochures and flyers are published for the purpose.
- Distribution of flyers/Brochures/booklets through polio healthcare workers: The
 distribution of prepared awareness content shaped in the form of flyers, brochures and booklets
 were also distributed in local areas of cities through Healthcare workers (working in regard to
 polio vaccination). The visits of polio workers were not rearranged, rescheduled or disturbed
 anyway.



Kiosks: Another attractive tool; Kiosks were used and still are being used for awareness
in this regard. Kiosks are placed with smart strategy; on most public visiting points.



 Steamers & Hoardings: Another time-sensitive, flexible and attractive outdoor campaign; hoardings and steamers were used to spread the word. Messages were also displayed on digital hoardings and billboards placed on busiest locations; local roads and streets of major cities across Punjab. Some digital billboards were also engaged for the defined purpose. This campaign style proves to be quite successful.



Social Media

The tool which is used most aggressively in this regard is social media. Concerned government officials and other professionals have used all social media platforms to alert, update, educate and inform people in the concerned matter. Social media is a proven and most successful tools in the respective awareness campaign. Briefings and conferences were also shared with viewers 'live' and they were given the chance to share their concern with concerned dignitaries. Whether it is to notify lockdown, strategies, guidelines or SOPs, social media has been used actively and still continues to do so. Total 70 still posts were uploaded on social media by the concerned stake holders for the sake of public awareness. From last 80 days daily a post; on the current cases situation, continues to be updated on social media.

 Media Engagement: Government officials ensured the complete and productive participation of media houses. Media houses were actively engaged and helped to spread the right word in this regard





Engagements

Boost Unavailable

15 Comments 3 shares

Рессте геаспед

OO# 223

Most Viewed Videos



Reach	2494116
Engagement	258846
Views	1.2 Million



Reach	1732916
Engagement	101334
Views	754.9 K

Publication Summary

Tools	Quantity
Brochures & Flyers	128
Booklets	16
Detailed Books	12
Daily Statistics Update Posts	180
Awareness Posts	170
Public Service Messages	1210
Calls on Helpline	116,954



Specialized Healthcare & Medical Education department, a secretarial provincial department operating under the administrative control of Secretary Health. The respective department under the defined jurisdiction performs two major functions i.e. Policy making and regulation across the province. Department strives to strengthen provincial healthcare system and, in this regard, perform following functions:

- Provide and deliver a basic package of quality essential health care services
- Develop and manage competent and committed health care providers
- Generate reliable health information to manage and evaluate health services
- Adopt appropriate health technology to deliver quality services
- Finance the costs of providing basic health care to all
- Reform the health administration to make it accountable to the public

During this pandemic, the respective department is trying its best to ensure effective and quality healthcare service just to ensure public's sound health. Following are some notable initiatives taken by the department for the concerned purpose:

Hospital Capacity Enhancement

In the light of prevailing crisis of pandemic, it was decided that hospital's capacity needs to be increased. For effective adjustment of COVID-19 patients, capacity of hospitals was enhanced in a way that:

- Tertiary Care Hospitals: Tertiary care hospitals were designated for the treatment of COVID-19 patients and almost 24,387 COVID-19 patients have been registered in respective hospitals.
- Beds, HDU's Bed and Ventilators: 46 tertiary and 8 field hospitals were dedicated for the defined purpose. Moreover, 6160 COVID-19 beds including 479 ventilators and 1365 HDU beds were dedicated for COVID-19 patients.
- Budget allocation for Tertiary Care Hospital: As allocated by government, the respective department has transferred 2.553 billion out of Rs. 5.173 billion to tertiary Care Hospitals for the management of COIVD-19 patients in its 46 Hospitals till 30th of June.
- Training: Training of healthcare professionals have been arranged periodically in the meantime.
- Recruitment: In reference to the increased demand, Department has recruited 490 doctors (MO/WMO), 2 Consultants, 795 nurses and 250 allied health professionals and 419 supporting staff for COVID-19 duties.

Ensuring Protection Of Healthcare Professionals

As per department's core responsibility; protection of healthcare workers, the department has aggressively worked in the concerned sector to ensure the protection of healthcare professionals:

- Guidelines: Designed guidelines, as per the set standard of WHO in regard to correct use of PPEs.
- Issue of duty hours for HCW performing duties in corona wards

- Training: Arranged Donning and doffing training of concerned staff.
- Infectious control guidelines: Designed guidelines for hospitals in regard to Infectious control
- Pay Package: Government decided extra pay packages for healthcare professional who are involved in the treatment of COVID-19 patients.
- Shuhada package: 11 deaths of healthcare workers were reported by the end of April, in regard to this rather saddening situation, Government announced Shuhada package for healthcare workers, in case if they unfortunately lose their life while performing their duties for COVID-19 patients. 4 cases received from field formations and were placed before the Clinical & Mortality audit for Corona cases, constituted on 27th of March. The Committee has declared the following 4 officers as shaheed i.e. Prof. Dr. Mustafa Kamal Pasha, Vice Chancellor, Nishtar Medical University / Nishtar Hospital, Multan, Dr. Khalid Masood Qaisrani, APMO (BPS-19), Teaching Hospital, D.G. Khan, Dr. Hafiz Maqsood Ali, Assistant Professor (BPS-18), Services Institute of Medical Sciences / Services Hospital, Lahore, Dr. Ghazala Shaheen, Sr. Demonstrator (BPS-18), Nishtar Medical University / Nishtar Hospital, Multan. However, the other cases are still in process and are being considered.

Establishment Of Field Hospitals

Other than tertiary, some field hospitals were also established just to handle the crisis of COVID-19 pandemic. Details of the hospitals are as follows:

- Eight Field Hospitals: With the bed capacity of 2,000, eight field hospitals were established to serve the purpose in different cities of Punjab i.e. Lahore, Gujrat, Gujranwala, Sialkot, Rawalpindi
- Affiliation with Tertiary Hospitals: for effective management the respective newly established hospitals were attached with main tertiary care hospitals.
- Recruitment: Due to increased demand in healthcare sector, department recruited new doctors, nurses and Paramedic staff.

Regular Policy Guidelines And Advisories /

To increase the effectivity of crisis management various policies and advisories were formulated some already existing were also modified. Details are as follows:

- Corona Experts Advisory Group (CEAG): Corona Experts Advisory Group (CEAG) was formulated for issuance of regular advisories regarding the prevailing situation ON COVID-19 FRONT. Corona Expert Advisory Group (CEAG) was notified in March, 2020. On the recommendations of CEAG, following notifications/guidelines have been issued from time to time:
- o "Safety Guidelines": To ensure the correct use of PPEs by healthcare workers, safety guidelines were formulated.
 - Duty Hours: Specific duty hours were notified for healthcare workers.
- Chloroquine and Hydroxychloroquin: A special Advisory regarding use of Chloroquine and Hydroxychloroquine was formulated.
- o Algorithms: For better and precise management of Corona patients, algorithms were introduced.

- Policy guidelines: Some specific Policy guidelines were introduced for management of critical patients affected due to COVID-19.
- o Plasma Transfusion Therapy: Some specified SOPs were also introduced for trial use of Plasma Transfusion Therapy. Initially, it was started at PKLI, Lahore. Later on, it was also allowed at Mayo Hospital, Services Hospital and LGH, Lahore.
- o Central Control Room: A Central Control Room was established at Mayo Hospital, Lahore in this regard.
- o Actemra Injection: A policy defining the mechanism for right use of Actemra Injection was also introduced.
- o Serological / Antibody Tests: Policy for the use of Serological / Antibody Tests was also introduced in the process.
- Audit: Mortality Audit of deaths; due to COVID-19 was also conducted.

Healthcare Establishment and Professionals, (Protection and Security) Act, 2020

Specialized Healthcare and Medical Education department left no stone unturned to ensure the protection of our noble profession's worker; Healthcare Workers. The efforts for their life insurance deserve to be lauded and the introduction of special act is one exemplary effort. "Healthcare Establishment and Professionals, (Protection and Security) Act, 2020 act has been submitted to the Cabinet Committee on Legislative Business and will soon be functional after its approval.

Public Awareness And Guidance

Keeping in mind the importance of awareness and benefits it can pose in the prevention and control of disease the respective department also used various tools to aware people in this regard. Following are some major efforts:

- Helpline: To guide people in this regard a helpline was created (0304-1111781), which is functional 24 hours a day and 7 days a week.
- Central Control Room: A Central Control Room/ Patient/ Resource Management for patients in Lahore was created in Mayo Hospital, Lahore.
- Press release: On official website of the respective department a press release is also released on daily basis.
- Telemedicine: Telemedicine facility was also made available which is functional 24 hours a day and 7 days a week.
- Press briefings: Press briefings by Minister health and CEAG members are also released.
- Updates: On official website of the concerned department updates are given daily basis.



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