UTTAR PRADESH

AWARENESS GENERATION -

Aarogya Setu is a COVID-19 tracking mobile app developed by National Informatics Center (NIC) to create awareness of COVID-19 and to track coronavirus infections. The accurate strategy and innovative work and efforts of the Hamirpur District Administration with the cooperation of the public resulted in a successful campaign. Every officer and grass root level worker of every department was engaged to raise awareness and to get people to download the app. The campaign was linked with the work of free food grain distribution to the needy at Fair Price Shops. Nodal officers were appointed on each FPS to ensure that the people coming there must have the Aarogya Setu app downloaded in their smartphone. Vigilance committees were formed in all 330 Gram Panchayats and in wards of Town Areas. The committees organised regular meetings in respective GP/ward and performed door to door surveys to motivate people. NGOs, Nehru Yuva Kendra, Yuvak Mangal Dal and other Corona Warriors were identified and were engaged for this task. Regular munadi (announcements with drum beating), in rural areas, *nukkad natak* and aarogya setu songs were used to generate public awareness.

CONTAINMENT AND RAPID EMERGENCY RESPONSE SYSTEM, AGRA MODEL -

A 'Containment and Rapid Emergency Response System' was devised, which involved tracing the infection epicentre or hotspot. Health workers traced the first individual who tested positive for COVID in Agra and subsequently mapped out his entire travel history. Every individual who had come in contact with the first COVID positive case in the District was quarantined. The Integrated Control and Command Centre (ICCC) of Agra Smart City, established as part of the Smart City Mission, was converted into a COVID war room. The Agra Police constituted teams of officials to prepare for the cluster lockdown. The local administration demarcated a 3 km area around the hotspot following which the population in the area was screened through door-to-door visits conducted by community health workers. The entire process was monitored by the District Magistrate and other senior officials who also worked on the identification of additional clusters.

HEALTH WORKER CAPACITY BUILDING AND MOBILISATION -

The state government prepared a WhatsApp compatible training video on the role of field workers which was uploaded on a downloadable weblink. An SMS with the link to the video was circulated to ASHA Sanginis, ASHAs and ANMs. Voice messages developed for field workers on dos and don'ts, home care etc. were circulated through WhatsApp groups. The state government is working in

partnership with *Productivise*, an integrated communication, engagement, and operations software, to build a local network of health workers who can assist with infection prevention and control. Infrastructure enabled by Al has helped the State/District Control Room by bringing all available resources together on one secure channel for official communication by creating location-based clusters to ensure rapid mobilization of health workers. The software also facilitates data collection and round the clock monitoring.

TESTING -

TruNat and antigen detection assay were adapted for use as point-of-care tests in every district and medical college hospital. King George's Medical University, Lucknow applied the principle of pooled sampling, which has reduced costs by one-third and increased capacity of laboratory testing by three times.