

**TWO-DAY MULTI-COUNTRY ITEC-NCGG TRAINING
PROGRAMME
FOR
NATIONS OF EAST AFRICA, CENTRAL ASIA AND SOUTH ASIA
ON
'COVID- 19 – GOOD GOVERNANCE PRACTICES IN A
PANDEMIC'
18TH JUNE 2020 – 19TH JUNE 2020**



**NATIONAL CENTRE FOR GOOD GOVERNANCE
DEPARTMENT OF ADMINISTRATIVE REFORMS & PUBLIC
GRIEVANCES
MINISTRY OF PERSONNEL, PUBLIC GRIEVANCES & PENSIONS
GOVERNMENT OF INDIA**

ACKNOWLEDGEMENT

National Centre for Good Governance (NCGG) gratefully acknowledges the support and partnership of its key partners in the Two-Day Multi Country ITEC-NCGG Training Programme for Nations of East Africa, Central Asia & South Asia on ‘COVID -19 – Good Governance Practices in a Pandemic.’

The presence of the Hon’ble Minister of State for Personnel, Public Grievances & Pensions, Government of India Dr. Jitendra Singh as the Chief Guest for the event underscored the significance of the workshop and highlighted the roadmap ahead for Nations in winning the battle against the COVID – 19 Pandemic lies in restarting the economy and strengthening cooperative federalism.

Dr. Kshatrapati Shivaji, Secretary, Department of Administrative Reforms & Public Grievances (DAR&PG), Govt. of India as Chairperson of Management Committee of NCGG provided overall guidance; Shri V. Srinivas, Additional Secretary, Administrative Reforms & Public Grievances (DAR&PG), Govt. of India and Director General, National Centre for Good Governance (NCGG) played a leadership role & provided strategic direction for hosting the workshop; while Dr. Devyani Khobragade, Joint Secretary, DPA-II & DPA-IV, Ministry of External Affairs, Govt. of India provided overall support on behalf of Indian Technical and Economic Cooperation Programme (ITEC).

NCGG is thankful to Mr. Piyush Goyal, Sr. Technical Director, National Informatics Centre (NIC), who provided his technical support to let this webinar happen successfully.

NCGG is thankful to the Chairman and Speakers for each session –

DAY - 1

Session 1 - State Level Best Practices

Chairman – Shri V. Srinivas, Additional Secretary, DAR&PG and Director General, NCGG, Government of India

Speaker 1 – Major General HJS Gunawardena, RSP, VSV, USP, Chief of Staff, Sri-Lanka Army

Speaker 2 – Dr. Shalini Rajneesh, Additional Chief Secretary, Planning Programme Monitoring and Statistics Department, Govt. of Karnataka

Speaker 3 – Shri Pratyaya Amrit, Principal Secretary, Disaster Management, Government of Bihar

Session 2 – District Level Best Practices

Chairman – Shri Ajit Seth, Former Cabinet Secretary, Government of India

Speaker 1 - Mr. Kaung San Linn, District Administrator/Director, Government of Myanmar

Speaker 2 – Shri P.B. Nooh, Collector, Pathanamthitta, Kerala

Speaker 3 – Shri Krishna Bhaskar, Collector, Sircilla, Telangana

Speaker 4 – Shri Indu Kanwal Chib, Deputy Commissioner, Reasi, Jammu & Kashmir

DAY -2

Session 1 – Health Sector Challenges for Health Sector

Chairman – Ms. K. Sujata Rao, Former Health Secretary, Government of India

Speaker 1 – Prof. Uma Kumar, Professor, All India Institute of Medical Sciences (AIIMS)

Speaker 2 – Prof. Sushma Bhatnagar, Professor & Head, ONCO- Anaesthesia & Palliative Medicines, AIIMS

Speaker 3 – Prof. Padma Srivastava, Professor & Head & Chief, Neurology, AIIMS

Session 2 – Vande Bharat

Chairman – Shri Rajiv Bansal, Chairman & Managing Director, Air India

Speaker 1 – Shri Parvathaneni Harish, Additional Secretary, Economic Diplomacy & States Divisions, Ministry of External Affairs, Government of India

Speaker 2 – Shri Dammu Ravi, AS & Coordinator (COVID -19), Ministry of External Affairs, Government of India

NCGG extends a special thanks to the participants from 16 Countries Including the Chief of Staff, Sri Lanka Army Major General HJS Gunawardena, 08 Senior Secretaries to Government from Bangladesh, 11 District Administrators from Myanmar, Senior officials from Bhutan, Kenya, Morocco, Nepal, Oman, Somalia, Thailand, Tunisia, Tonga, Sudan and Uzbekistan.- who contributed to a dynamic exchange of ideas and experiences during the workshop.

Team from the National Centre for Good Governance provided extends support for execution of the workshop. NCGG also acknowledges support from Mr. Hemender K. Sharma, Director (DPA-II) and Mr. Atul Bhardwaj, Under Secretary (TC), Ministry of External Affairs, Govt. of India.

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BACKGROUND



The National Centre for Good Governance (NCGG) is an autonomous institute under the aegis of Department of Administrative Reforms and Public Grievances, Government of India. Its head office is at New Delhi and branch office at Mussoorie.

The NCGG has been set up to assist in bringing about governance reforms through studies, training, knowledge sharing and promotion of good ideas. It seeks to carry out policy relevant research and prepare case studies; curate training courses for civil servants from India and other developing countries; provide a platform for sharing of existing knowledge and pro-actively seek out and develop ideas for their implementation in the government, both at the National & International Level.

It is envisaged that NCGG would be an institute of excellence that works with the government. Specifically, its repertoire shall include research on good governance practices across administrative, social, financial and political spheres, through assorted means - including (but not limited to) establishing academic collaboration, fostering synergies across various government agencies, developing a national repository of information, establishing educational, research and academic platforms. The over-arching intended principle is to employ an eclectic approach for research, advocacy and dissemination of good practices for inclusive and responsive governance with ‘perceptible’ and ‘sustainable’ transformation of the least developed” as the end-in-view.

With this larger view in focus, the workshop was jointly conceptualized by the Ministry of External Affairs, Department of Administrative Reforms & Public Grievances and National

Centre for Good Governance with the objective of disseminating India's good governance practices in fighting the COVID -19 pandemic to ITEC countries.

The workshop included esteemed chairmen and eminent speakers from different Ministries/ Departments and reputed institutions of Government of India. The participants of the workshop comprised of Senior Secretaries, District Administrators & Senior Officials from 16 countries of East Africa, Central Asia and South Asia.

The methodology was simple and included an inaugural session inaugurated by Dr. Jitendra Singh, Hon'ble Minister of State for Personnel, Public Grievances and Pensions, Government of India that outlined the objective of the COVID -19 Workshop. There were four sessions that were conducted during the course of the programme to discuss the Best Practices of State & Districts in fighting against the COVID – 19 Pandemic, Challenges for Health Sector and Mission Vande Bharat.

INAUGURAL SESSION

The Two-Day Multi-Country ITEC-NCGG Training Programme on COVID-19 – Good Governance Practices in a Pandemic through a webinar on 18th June 2020 was inaugurated by Dr. Jitendra Singh, Hon'ble Minister of State for Personnel, Public Grievances and Pensions, Government of India. The conference was attended by 71 International Civil Servants from 16 countries including the Chief of Staff, Sri-Lanka Army Major General HJS Gunawardena, 08 Secretaries to Government of Bangladesh, 11 District Administrators from Myanmar, Senior Officials from Bhutan, Kenya, Morocco, Nepal, Oman, Somalia, Thailand, Tunisia, Tonga, Sudan and Uzbekistan.



Address by Chief Guest – Dr. Jitendra Singh, Minister of State for Personnel, PG and Pensions, Government of India

Dr. Jitendra Singh welcomed and acknowledged the participants and emphasized the importance of team work, compassion and statesmanship that defined India's Governance in response to COVID – 19 Pandemic. As it becoming the part of human lives, considering the threat the Hon'ble Prime Minister of India, Shri Narendra Modi given a clarion call for "Do Gaz ki Doori" (a distance of two yards) – Social Distancing. He added that "Awareness not Anxiety" should determine the response.

India has popularized the Aarogya Setu App which is currently used by more than 120 million Indians.



Moreover, getting to live with the coronavirus has meant less contact governance, officials having to work in masks and gloves and work from home models being adopted. Virtual offices, web-room meetings, virtual private networks were adopted as India's Central Secretariat became a digital Central Secretariat. Seventy Five Ministries adopted e-Office, functional web-rooms were created by NIC and India's digital infrastructure initiatives bore fruit. The impact of integrated service portals was seen.

Dr. Jitendra Singh further said that it was Indian Prime Minister Shri Narendra Modi, who gave a wakeup call to the world to fight this challenge and set high standards of mutual international cooperation. Hon'ble Prime Minister Shri Narendra Modi was not only instrumental in creating a COVID – 19 Emergency Fund, with a commitment of 10 Million US Dollars, but also addressed the pandemic issue at SAARC, NAM and other platforms.

He further emphasized that India's efforts for digital empowerment of citizens were successful in this period of coronavirus pandemic. The unique digital identity of Aadhar enabled availability of services on real time basis with e-Classes, e-Hospitals, e-Nam, Pradhan Mantri Jan Dhan Yojana and Bharat Interface for Money, all of which were seeded on Aadhar identification. The roadmap ahead for Nations in winning the battle against the COVID-19 pandemic lies in restarting the economy and strengthening cooperative federalism. The thrust is for stronger institutions, stronger e-Governance models, digitally empowered citizens and improved healthcare.

DAY -1 - Session I – State Level Best Practices



The **First Session** of **DAY – 1** Programme was chaired by **Shri V. Srinivas**, **Additional Secretary, Department of Administrative Reforms & Public Grievances and Director General, National Centre for Good Governance (NCGG), Government of India**. The session focused on **State Level Best Practices**. During the session, three Presentations were made.

The First Presentation was made by **Major General H. Jagath S. Gunawardena**, **Chief of Staff, Sri-Lanka Army**.



The presentation focused on the Best Practices being followed by Sri Lanka in controlling the pandemic. Sri Lanka has a robust health system and infrastructure that can have the three levels of readiness in place to prevent the disease from spreading within the country and restrict it being transported overseas. The outbreak, spread and trend of the Coronavirus in Sri-Lanka was measured on the basis of 3 stages. Under the first stage the positive and suspected cases are arrived from overseas following the second stage in which the positive cases detected from the Sri-Lankan society resulting to the increase in spread from the returning of Sri-Lankan foreign students and migrant workforce as explained in third stage.

Sri-Lanka with guidance from WHO, has sought to implement a Strategic Preparedness and Response Plan in the eight areas. The overall goal of this plan is to stop further transmission of COVID – 19 and prevent spread in the country, and to mitigate its impact. The main areas of Strategic Preparedness and Response Plan COVID 19 are: a) Risk Communication and Community Engagement; b) Surveillance, Rapid-response and case investigation; c) Capacity Building, system strengthening and information sharing; d) Point of Entry (PoE); e) Infection prevention and control; f) National Laboratories; g) Case Management. To break the spread, the military officially roped into Sri-Lankan COVID 19 outbreak led by Army Commander Shavendra Silva. Containment, restriction and sustainment strategy was prepared and been working through specific working groups focused to contain in containment of COVID – 19 in Sri-Lanka within the health and medical capacity of the country whilst maintaining livelihood and the social system of the public without major breakdowns. In continuation to it, restriction, relaxation and normalcy strategy was also operated under health and medical guidelines focused to systematically exit from the imposed restrictions while minimizing the risks of contaminating COVID-19 in the society, and to resume normalcy.

The Second Presentation was made by **Dr. Shalini Rajneesh, Additional Chief Secretary, Planning Programme Monitoring and Statistics Department, Govt. of Karnataka**



The presentation focused on COVID – 19 – Grievance Led Reforms. The Government of Karnataka have taken several steps to flattening the curve for COVID – 19 such as 15 committees have been setup under the Chief Secretary to monitor COVID – 19 mitigation strategies. Government of Karnataka has launched helplines to ensure speedy response to people’s grievances. About 18000 calls per day attended at success rate of 90% within 24 hours. Free software called fresh desk is being used by department concerned to integrate different sources of data into a single dashboard which will help them for analytics and follow up. The police department has also provided with 112 platform by the Ministry of Home Affairs to receive different grievances and divert them online to the concerned departments for speedy progress and monitoring. A fresh internship programme called by the Government of Karnataka on the lines of NITI Aayog to facilitate the Government in the battle of COVID – 19 for Post Graduates & Research Scholars. The Karnataka State Disaster Management Authority was the first to follow the principle of “Not to mix COVID and Non-COVID patients”. Based on the contingency plan, to mitigate the impact of COVID-19 on the population, the State has taken steps to ramp up the Health infrastructure in the State. Dedicated COVID health care centres and COVID hospitals, 531 fever clinics have been setup across the State. KSDMA has been put in place a real-time data collection technology framework to help the department of Health and Family Welfare. Information indexed at various levels is collated, analysed and forecasted using data science and geographical models. Such real-time information enables quick and time-sensitive decision making. The data collection templates range from registering citizens, tracing treatment at fever clinics, Quarantine Centres (CCC), Supervised Isolation Centres (DCHC) and Covid Hospitals (DCH), test results from testing centres and tracking home quarantine cases. The Software for making SOP’s self-enforced in private sector through IISc.

The Third Presentation was made by **Shri Pratyaya Amrit, Principal Secretary, Disaster Management, Government of Bihar**



Shri Pratyaya Amrit has explained about the COVID – 19 Monitoring & Response by Disaster Management Department, Government of Bihar. State Emergency Operation Center (SEOC) has been started by Government of Bihar in collaboration with ISRO to monitor the outbreak of COVID – 19. The Bihar Government is also providing food and lending help to the stranded. Aapda Rahat Kendra has been setup for the destitute and stranded urban poor from 27th March to 1st June 2020. Seema Aapda Rahat Kendra was also setup at borders for medical screening and provision of food for the migrant workers. Mukhyamantri Vishesh Sahayata scheme was also announced by the Chief Minister, Bihar on 06th April 2020. Bihar became the first state to launch DBT support to people of Bihar stranded outside the state. Rs. 1000/- per family was provided directly to their bank accounts. Another relief package was also announced by Bihar Government as Corona Sahayata which is beneficial for Ration Card Holders as sum of Rs. 1000/- was provided to the Ration Card Holders under Direct Benefit Transfer. Village Quarantine Camps and Block Quarantine Camps were also opened for migrant workers returning back to Bihar. A 14 day quarantine stay including food, utensils, clothes and dignity kit was provided to migrants. Disaster Management Department release daily press release on the important issues and development carried out by the department. Regular briefing to print and electronic media made by the Principal Secretary, DMD. NDRF also carried out sanitization work at various places; railway station, bus stop, government offices, other important places in towns and villages.

Session II – District Level Best Practices

The **Second Session** of **DAY – 1** Programme was chaired by **Shri Ajit Seth, Former Cabinet Secretary, Government of India**. The session focused on **District Level Best Practices**. During the session, three presentations were made.



The First Presentation was made by **Shri P.B. Nooh, Collector, Pathanamthitta, Kerala**. His presentation focused on **Good Governance Practices of Pathanamthitta, Kerala**.



The containment strategy was introduced by the Government of Kerala includes Trace, Isolate, Test, Treatment. A regular surveillance was operated which consists of Contact Tracing - In depth interview with patients; Involvement of Field Teams for contact tracing and Spatio-Temporal Mapping, cell tower data. Call Centres were also functional to monitor the outbreak of COVID-19 by addressing medical and non-medical needs, psychological support & counseling and symptom surveillance. Media surveillance helps channeling ideas for policy decision and addressing public needs. Community mobilization through involvement of local self-governments. It is the key to tackle the pandemic in Kerala through volunteer Involvement, management of quarantine facilities and treatment facilities, quarantine adherence through ward level committees and through community kitchen budget hotel. Government also recruit additional human resources through online, volunteers through community mobilization, partnerships with private medical colleges and intersectoral convergence for HR mobilization – teachers, fire force, rural development departments etc for mobilization of human resources which increases man power to tackle the pandemic.

He further added, at 5000+ active COVID – 19 cases, CFLTCs will have to be decentralized to panchayat level. Community halls, auditoriums etc. are identified and need to be operationalised as COVID first line treatment centres. Upto 5000 beds can be operationalised in a manner that If the number of category C patients requiring intensive care exceeds 276 at any point of time, remaining category C patients will have to be shifted out of the district for intensive care.

The second presentation was made by **Smt. Indu Kanwal Chib, Deputy Commissioner, Reasi, Jammu & Kashmir**. The presentation was focused on good governance practices implemented in Reasi District.



She said that several challenges have been faced so far as – a) Ignorance about Coronavirus and the ill effects of its containment; b) People not realising the significance of COVID protocols like wearing mask, Social distancing, Staying home, hand washing etiquettes etc; c) Making public realising the minimalistic way of life during lockdown phases esp. urbane and above middle class population; d) Provision of essential commodities to poor and daily wage earners; e) Management of Non COVID health issues ESP pregnancy and Terminal diseases; f) Migrant labour coming on foot/vehicles from other districts/States and entering Reasi illegally. They started sneaking in from all sides and with 70% hilly terrain it was another challenge to check each bridal path. Although we had sealed most of the points; and g) Labour belonging to Reasi but working in other districts of J&K and other parts of the country for eg. Himachal Pradesh, Uttarakhand, Haryana, Delhi and Chandigarh. District Migrant Cell was inundated with their calls all day long.

Another problem which arises that the YATRA reaches at 11,85,351 before 14.03.2020 and was 14,159 on the day closure i.e. 18.03.2020. Keeping in view of the fact, it was decided to stop persons with history of foreign travel w.e.f. February 15, 2020 in Q facilities. Sealed borders w.e.f. 21.03.2020 and established 06 check points encircling the entire district apart from police nakkas with local teachers on roster duties. Few events which may have mattered that after the capacities of HQ got saturated we switched to strict HQ which was supervised by VSCs. Established VSCs wef 30 March 20 after a 4-day training. Established USC's also after training.

Establishment of COVID 19 Call Centre for counter surveillance. Geo tagging of HQ persons for effective surveillance. Staggered openings of markets with social distancing through volunteers.

05 control rooms have been created to control the outbreak of COVID – 19 elaborated as a) COVID -19 Control Room (06 persons on roster); b) Administrative Control Room (12 persons on roster); c) Migrant Labour Control Room (5 persons & 2 officers); d) Red Cross Control Room for medicines to needy on payment and free to poor on door steps; e) Control centre for essential supplies to poor/labour (3 officers with concerned SDM).

Some other initiatives have been taken by the Government as - COVID surveillance call centre (07 persons on roster who call 20 VSCs/ per person/day). Geo tagging of HQ persons by VSCs (on MGNREGA pattern daily analysed by core committee). 06 members COVID core committee daily does 05 random calls each. Fortnightly review of VSCs by District Surveillance Officer. UT Govt initiated an all population survey present within the territories of the districts known as “SWASTHYA NIDHI” to proactively identifying the persons with ILI symptoms and Reasi has completed this survey through the same VSC/USCs and now we have a population figure of 3.65 lacs which has been visited by these committees already and 81 people out of them have been tested for COVID as well. 48607 Inter State Migrant Workers have boarded 33 trains from Katra Railway Station in the district.

The third presentation was made by **Shri Krishna Bhaskar, Collector, Sircilla, Telangana**. The presentation focused on the measures taken against COVID – 19 at District Level.



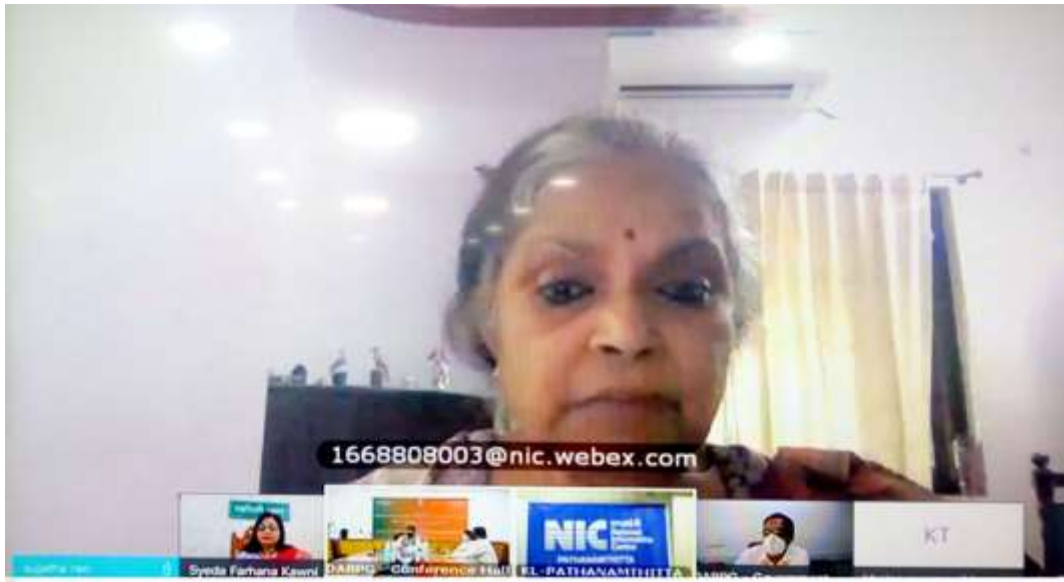
He said that it has been instructed to the officials to geo-tag the details of the people who were in home quarantines. The District administration has appointed two special officers for every mandal to monitor the coronavirus situation. The collector conducted review meeting with the officials of various departments to discuss the COVID – 19 situations in the district. Special officers have been instructed to record the details of home quarantine persons in a prescribed form alongwith their present photographs through village secretaries. It is the responsibility of special officers to see that the prices are not escalated by sellers. Also the need to maintain social distancing at vegetable markets and shops are must for all. Also Physical patrolling, information flow, logistics, telemedicine and managing expectations.

In respect of Migrant labours, 5000 families have been surveyed that these family are on work or not? Whether there is availability of food to them? Regular counseling in operation to those families.

Local measures have also been taken as precaution to this pandemic as: a) Use of Umbrellas; b) Community Radio; c) Election Infrastructure; d) Kala Jataras; e) Public Appeals; f) Local manufacturing; g) Sanitation; and h) Prevention – Diet and Exercise.

DAY – 2 - Session I – Health Sector – Challenges for Health Sector

The **First Session** of **DAY – 2** Programme was chaired by **Smt. K. Sujata Rao, Former Health Secretary, Government of India**. The session focused on **Health Sector – Challenges for Health Sector**. During the session, three Presentations were made.



The First Presentation was made by **Prof. Uma Kumar, Professor, All India Institute of Medical Sciences (AIIMS)**. The presentation focused on **Brief overview of nCov-SARS-2, Specific Challenges and Experience at AIIMS**.



Coronavirus disease 2019 (COVID-19) has spread throughout China and gained world-wide attention as a result of acute respiratory illness due to a novel coronavirus (SARS-CoV-2), traditionally known as COVID-19. On 30 January 2020, the World Health Organization (WHO)

officially announced the outbreak of COVID-19 a public health emergency of international concern. A third introduction of a highly pathogenic and large-scale coronavirus disease in humans was the SARS-CoV-2 outbreak as a result of a severe acute respiratory syndrome coronavirus (SARS-CoV) in 2003 and the Middle East respiratory syndrome coronavirus (MERS-CoV) in 2012. Medical signs of COVID-19 patients include fever, cough, exhaustion and a limited number of patients with signs of gastrointestinal infection. Elderly and people with underlying diseases are susceptible to infection and prone to adverse results that could be associated with acute respiratory distress syndrome. There are currently few specific antiviral approaches available but many effective antiviral and repurposed drug candidates are under urgent investigation. The aim of this review was to summarize the recent medical advancement of COVID-19's epidemiology, transmission, and clinical characteristics, and discussed current treatment and scientific developments to fight the novel coronavirus outbreak.

She further added, coping with new infections and huge numbers has posed several challenges such as Infrastructure, Human Resource, PPE Kit Availability, Diagnostic Challenges – High sensitivity & specific test, Point of Care Test, Vaccine Availability, Stress & Trauma to HCW and public at large and testing & management guidelines.

Experience at AIIMS – dedicated corner for COVID – 19 related information on AIIMS website as a) Standard Operating Procedure (SoP); b) Guidance Doc for Disinfection & Sanitization; c) Training of HCW: Webinars, Videos etc; d) CoNTeC-AIIMS Public Health; e) Testing; f) Tele Consultation/ Video Consultation; g) Intramural Grant for COVID – 19 related research; h) Teaching/ Training Online/ Assessment Online; i) Documents on Stress coping strategies; and j) Minimal touch technique in RDC.

“Every Crisis is an opportunity in disguise” and “Corona Pandemic is a Portal” It has opened up an entirely new world for us, she concluded.

The Second Presentation was made by **Prof. Sushma Bhatnagar, Professor & Head, ONCO-Anaesthesia & Palliative Medicines, AIIMS**. The presentation focused on **Ethics-based Decision-Making in a Pandemic Crisis**.



She explained about the Distribution of Cases in comparison to world as India stands at 4.16% of cases i.e. 3,33,255 following Russia (6.70%), Brazil (10.82%) and United States (26.98%). She further explained the Seven Ethical Principles Guiding Decision-Making during a Pandemic –

1. Minimizing Harm – All public health measures needed to protect public from harm.
2. Proportionality – Individual liberty versus measures to protect public from harm.
3. Solidarity – Working together beyond self-interest, territoriality.
4. Fairness – Fair allocation of resources.
5. Duty – Duty to provide care beyond the call of duty.
6. Reciprocity – Supporting those who face disproportionate burden.
7. Privacy – Right to privacy versus harm to public.

The ethics based decision making matrix in a pandemic explained a) Social Solidarity – Subsidiarity, Common Good, Public Order, Safety & Ready Access; b) Professionalism – Duty, Integrity, Reciprocity, Transparency and Accountability; c) Justice – Stewardship, Due Process, Equity, Confidentiality & Disclosure.

The Third Presentation was made by **Prof. Padma Srivastava, Professor & Head & Chief, Neurology, AIIMS**. The presentation focused on **Challenges in Neurological Practice**.



The challenges faced in Neurological Practice as a) Emergency and Triage; b) Strokes; c) Triage: Protected Code Stroke; d) Green Corridor: Preparedness; e) COVID & Brain.

Several Challenges were also faced as:

1. The services of Non-COVID Outpatients suspended.
2. Potential Problems: Non emergent cases neglected.
3. No Follow ups.
4. Issues with compliance and control of risk factor.
5. TELE HEALTH Services: New Normal in-person OPD.

6. Academics: DM Exit Exam/ Entrance, Teaching Curriculum
7. National: Hub Spoke Based Tele Health Delivery Systems.

She further referred two of her books provided at www.annalsofian.org -

1. Consensus Statement – Suggested Recommendations for Acute Stroke Management during the COVID-19 Pandemic: **Expert Group on Behalf of the Indian Stroke Association** - Rohit Bhatia, P. N. Sylaja, **M. V. Padma Srivastava**, Dheeraj Khurana et al. **Annals of Indian Academy of Neurology** – MAY 2020.
2. Consensus Statement On Immune Modulation in Multiple Sclerosis and Related Disorders During the COVID-19 Pandemic: **Expert Group on Behalf of the Indian Academy of Neurology** - Rohit Bhatia, **M. V. Padma Srivastava**, et al. **Annals of Indian Academy of Neurology** – MAY 2020.

Session II – Vande Bharat

The **Second Session** of DAY – 2 Programme was chaired by **Shri Rajiv Bansal, Chairman & Managing Director, Air India**. The session focused on **Vande Bharat**. During the session, one Presentation was made.



Shri Rajiv Bansal, Chairman & Managing Director, Air India has presented a Pax Figures to elaborate the mission taken by Air India to evacuate the passengers from abroad under Vande Bharat Evacuation Mission during the Pandemic of COVID – 19.

Phase - 1 & 2		Inbound Flights		Outbound Flights	
		No. of Flights	No. of Passengers Carried	No. of Flights	No. of Passengers Carried
Air India Group	Total of Phase 1	64	12708	64	3562
Air India Group	Total of Phase 2	325	59576	325	15721

Phase - 3		Inbound Flights		Outbound Flights	
		No. of Flights	No. of Passengers Carried	No. of Flights	No. of Passengers Carried
Air India Group	Total till Jun 17, 2020	152	29182	157	10268
Air India	Total till Jun 17, 2020	75	15381	81	8892
	On Jun 18, 2020	18	3433	16	1944
	Total till Jun 18, 2020	93	18814	97	10836
Air India Exp	Total till Jun 17, 2020	77	13801	76	1376
	On Jun 18, 2020	3	550	3	0
	Total till Jun 18, 2020	80	14351	79	1376
Air India Group	On Jun 18, 2020	21	3983	19	1944
Air India Group	Total till Jun 18, 2020	173	33165	176	12212
Air India Group	Total of Phase 1 & 2 & 3	562	105449	565	31495

The Presentation of the Second Session of DAY - 2 was made by **Shri Parvathaneni Harish, Additional Secretary, Economic Diplomacy & States Divisions, Ministry of External Affairs, Government of India** and **Shri Dammu Ravi, AS & Coordinator (COVID -19), Ministry of External Affairs, Government of India**. The presentation focused on **Initiatives Taken by Ministry of External Affairs during the pandemic of COVID – 19**.



The Ministry of External Affairs has taken several steps pre-lockdown to control the outbreak of COVID – 19 as on 13th March 2020 all existing visas have been suspended and free travel by OCI cardholders put on hold. On 15th March 2020 all passengers movement through land check posts suspended. On 18th March 2020 flights have been suspended from EU, EFTA, Turkey, Afghanistan, Philippines, Malaysia and UK. As on 22nd March 2020 all international flights has been suspended and a complete nationwide lockdown has been imposed on 24th March 2020.

Several initiatives have been taken by MEA during the Pandemic of COVID – 19 as:

1. Creation of 24x7 MEA COVID Control Room on 16 March handled queries - telephonically and through emails
2. Daily analysis of global trends – Media briefing and Court Cases
3. Supply of medicines and equipment to 150 countries – grant / commercial Pharmacy of the World
4. Held VC meetings at various levels including at Summit level – SAARC, G20, NAM, etc.
5. Assisted inbound travel related to medical emergencies
6. Evacuation of foreign nationals stranded in India - 1,04,442 belonging to 117 countries
7. Repatriation of Stranded Indians –
 - Mapping – 13.5 million Indians; focus on 2,00,000-5,00,000
 - Creation of MEA Repat Portal – 1 May
 - Compelling Reasons
 - Categories of stranded Indians
 - Compilation of domicile wise data by Indian Missions
 - Coordination with State Governments on quarantine and logistics
8. Vande Bharat Mission – 7 May 2020
 - 2,64,597 passengers returned from abroad.
 - 1038 flights : Air India – 562, Charter – 382, Others - 88
 - 6 Naval Ships
 - Land border crossings

Valedictory Session – COVID – 19 – Governance Challenges in a Pandemic



The Valedictory Session for the Two-Day Multi-Country ITEC-NCGG Training Programme on COVID-19 – Good Governance Practices in a Pandemic through a webinar on 19th June 2020 was delivered by **Dr. Kshatrapati Shivaji, Secretary, Department of Administrative Reforms & Public Grievances, Government of India**. The day 2 of the Workshop witnessed participation from 18 countries and 150 international civil servants from India, Sri Lanka, Bangladesh, Myanmar, Bhutan, Bosnia & Herzegovina, Austria, Kenya, Morocco, Nepal, Oman, Somalia, Thailand, Tunisia, Tonga, Sudan and Uzbekistan.

In his valedictory address Dr. Kshatrapati Shivaji said that India has adopted a nationwide coherent, coordinated and collective strategy in coordination with all the State governments to fight the Corona Virus. He said, the cluster containment strategy with focus on early detection of cases through the RAF (Red, Amber and Green) model has focused on social distancing. The Government's 20 Trillion Rupees of economic self-reliant package is expected to revive inclusive economic growth. He further said that States have adopted diverse but locally suitable nuanced strategies, as evident in the Kerala, Uttar Pradesh, Sikkim, Odisha and Maharashtra models. Digital preparedness and digital infrastructure have been found to be very useful in fighting against the pandemic in ensuring delivery of public services, dissemination of digital information and telemedicine. He further added that there has been an unprecedented surge in public grievances in the COVID 19 period which could be handled in a prompt and decisive manner within a record response rate of 3 days.

The Two-day Workshop was jointly conducted by the Ministry of External Affairs, Department of Administrative Reforms and Public Grievances and National Centre for Good Governance with the objective of disseminating India's good governance practices in fighting the COVID-19 pandemic to ITEC countries.



Shri V. Srinivas Additional Secretary DARPG and Director General NCGG said that the participation in the Two- Day ITEC-NCGG workshop had exceeded expectations and positive reviews were received from all participating international civil servants.



Annexure - I

Two-Day Workshop on COVID – 19 – Good Governance Practices in a Pandemic (18th June, 2020 – 19th June, 2020)

List of Participants

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Note: 200 Participants have participated in this programme including Chairpersons, Speakers, Team of DAR&PG, ITEC, NCGG and Participants from the nations of East Africa, Central Asia and South Asia.

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