

Date....13/05/2020

To,

The Chief Secretary
Government of Nagaland
Civil Secretariat
Kohima–797004

<u>Subject: Queries on the State of Critical Health Infrastructure and Preparedness</u>

Respected Sir,

As the lockdown period draws to a close in Nagaland and COVID-19 War Room under your leadership evolves an exit strategy to the 'new normal', we would like to bring to your urgent notice certain **concerns and queries for necessary action.**

Experts suggest that the time to get COVID-19 vaccine approved for mass use is expected not sooner than 12 to 18 months from now. This means, Nagaland, like the rest of the world, will have to navigate through this period of uncertainty with caution, sound judgment and preparedness.

As part of the exit strategy, the Nagaland government plans to bring back Nagas stranded outside the state. The exercise will be a major test of preparedness of the Nagaland government both in terms of putting in place all norms and safety measures in quarantine facilities and availability of critical healthcare infrastructure.

It is true that much work has been done and rightly displayed in the public domain—assistance provided to stranded migrants, help extended to Nagaland citizens outside the State, to students, rural folks, farmers and other relief measures. In the health sector, some progress is seen in the last one month—naming of COVID Hospitals (in the existing ones), adding beds, ICUs, ventilators or arranging other facilities like testing labs, ambulance etc. The colourful projection from the so called COVID-19 War Room does look to give a lot of confidence. But are we really prepared for the coronavirus itself?

The concerned authorities may **answer/clarify the following issues** in open media.

• State of preparedness of critical health care infrastructure, particularly, the availability of ventilators, oxygen (filled cylinders), backup stock, refilling (supply from vendors) and all other component required for safe delivery of oxygen to the patient.

• State of preparedness of manpower in critical healthcare of the designated hospitals may also be made known in public interest.

Specific queries are listed below to help in drawing information:

Query no.1: As per government information, Dimapur has a 22 bed ICU set up but with only 13 ventilators. This fact itself is critical and woefully inadequate, while the nature of gas used or oxygen supply capacity is unknown. Given that Dimapur district is most vulnerable; the government may kindly provide a SWOT analysis for Dimapur focusing on critical care and infrastructure.

Query no. 2: The concerned department should provide the public with approximate data on Nagaland's overall oxygen requirement in a worst-case scenario and mention the present state of preparedness and concrete action it will take to address any shortcoming, if any.

It should also provide a roadmap on how the COVID designated hospitals in Nagaland can prepare their oxygen inventory and to ensure that they do not run out of this life saving component.

Please state the oxygen technology used at present in Nagaland and enlighten the public about selection, procurement, supply chain/distribution and safe utilization in providing a reliable oxygen supply, including access to maintenance services and spare parts, etc.

Provide details about the current stock position of oxygen in all districts, including number of cylinders and whether filled or empty.

Provide a status report on district-wise availability of basic equipments needed for oxygen delivery other than cylinders like pressure gauges, regulators, flow meters, nasal cannulae, tubing, oxygen analyser and portable pulse oximeters (to measure blood oxygen levels and guide dosages).

Query no. 3: The data provided with regard to district-wise Oxygen/Nitrogen distribution in Nagaland appears to be inaccurate. The department may prove otherwise.

Across Nagaland (covering 11 districts), the data reveals that nitrogen distribution is more (Nitrous B-Type), which is commonly used for anesthesia. While the department may prove otherwise, from information we have, the following is what we have learned:

- a). Oxygen (black and white color, 2-5 pin index) cylinder and nitrous oxide (blue colour, 3-5 pin index) cylinders have different color coding and different pin index.
 - b). Nitrous oxide is usually used for anesthesia.

If that is the case, why is Nitrous B-Type cylinders distributed more? Is nitrous oxide also used in COVID-19 treatment, or is Nitrous B-Type cylinders filled with oxygen and used?

The government may clarify from the supplier whether they are supplying nitrogen/nitrous oxide/oxygen as the data in the COVID Dashboard mentions about 'distribution of oxygen/nitrogen'. What is the role of nitrogen in COVID-19 treatment?

As we understand, oxygen is a very important part of the treatment of critical cases of COVID-19. Therefore, it is absolutely essential that wrong cylinders are not supplied or wrong data is not shown. **The department should clarify.**

Query no. 4:In order to administer these life-saving equipments, we would also like to know how many ICU doctors and anesthesia specialists are employed and if trained technicians to perform such crucial emergency health task are available or not. Details should be provided on 'critical care'manpower availability. The details should be given district-wise.

Query no. 5:Is the government working on any plan to fast-track the available Covid-19 funds in installing a more reliable system for safe and continuous supply of oxygen? To begin with, the government may set up Oxygen Concentrators or Plant in Kohima and Dimapur hospitals and that can be followed by the introduction of oxygen concentrators in all district hospitals.

If the data on oxygen supply-distribution and critical care infrastructurecited above is indeed true, it is a cause of grave concern. The Nagaland governmentshould come out with a blueprint on the state of critical health care infrastructure, manpower and its preparedness.

The government is requested to graciously reply to these queries without delay. The public deserves to know the truth.

To publish these concerns in the media is based on our understanding that we need to intervene constructively in the larger interests of the people of Nagaland and not simply point fingers or play blame-game at this critical juncture. Nevertheless, should the government decide not to respond to the issues we have raised it will be a serious affront to the public who are deeply concerned on our rights to be informed and *The Naga Rising* will be forced to conclude that the government is rather clueless despite its best intentions.

ALONG LONGKUMER

JOEL NAGA

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