

Managed Reopening After Lockdown

Recommendations for State Governments

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Executive Summary

To prudently resume social and economic activity in accordance with outbreak risks, healthcare capacity, and vaccination progress, we recommend that State governments:

- 1. Designate Gram Panchayats/Wards or groups of Gram Panchayats/Wards as Public Health Management Units (PHMUs) and apply restrictions at this level.
- 2. Follow an anticipatory/pre-emptive approach wherein restrictions can be tightened or relaxed based on what's happening in other districts and states.
- 3. Determine threat levels within each PHMU on values of three triggers: Test Positivity Rate (TPR) and Trend, TPR trends in adjoining districts, and Oxygenated Bed Availability and Trend.
- 4. Roll out a six tier approach for permitting activities within each PHMU based on the threat levels.

RESUME — REBOUND — RESERVE

The #3R Reopening Plan for State Governments 2021

1. The objective of the #3R Reopening Plan is to prudently resume social and economic activity in accordance with outbreak risks, healthcare capacity and vaccination progress.

2. Key priorities:

- a. controlling the outbreak and minimising loss of life
- b. protecting economically vulnerable segments of society
- c. producing essential goods and services
- d. resuming productive economic activities
- e. maintaining social harmony

3. Key principles:

- a. Epidemic control measures will be undertaken at the local level determined by objective threat levels:
 - i. Gram Panchayats and Municipal Wards shall be designated Public Health Management Units (PHMU) in rural and urban areas respectively.
 - ii. Where settlement areas, economic patterns, transport and geographical considerations are such that they cover more than one Gram Panchayat or municipal ward, then the PHMU can cover several of them.
 - iii. In any case, a PHMU should have clear leadership consisting of elected representative, administrative official, public health official and police official who shall be accountable for the outcomes.

- b. The threat level shall be determined based on the following
 - i. Trigger A1 Test Positivity Rate (TPR) and Trend subject to a minimum of 500 individual tests/lakh population/week.
 - ii. Trigger A₂ TPR trends in adjoining districts, including those in neighbouring states.
 - iii. Trigger B Oxygenated Bed Availability and Trend in a 30km radius for rural areas and 20km radius in urban areas.
 - iv. Alert Level shall be raised when either A1 or A2 and B are triggered. Alert Level shall be lowered when A1 and B are triggered.
- c. Contain epidemic **pro-actively and pre-emptively** so as to minimise damage to public health and the economy.
- 4. Based on the threat level, a six tier (or five-level) approach will be implemented within each PHMU (See Para 6 below).
- 5. Key Success Factors:
 - a. It is important to note that control measures may be tightened (locked down) as well as relaxed ('unlocked') based on the threat levels. This should be clearly communicated to the public.
 - b. It is also important to note that the pandemic does not end (Alert Level Green/Tier o) until the population has acquired herd immunity.
 - c. To ensure that TPR figures are a useful metric, it is necessary to ensure at least 500 tests/lakh population/week as a baseline, irrespective of the alert level.

6. Alert Levels and Thresholds:

Level/Tier	5 Super Red	4 Red	3 Super Orange	2 Orange	1 Yellow	0 Green
Trigger A1 Test Positivity Rate - Past 7 day rolling average - min 500 tests/lakh population/week	Above 20%	10-20%	5-10%	1-5%	1-5%	Below 1%
Trigger A2 Pandemic Trends in Other Districts (including in adjoining states) - past 7 day rolling average	>30% TPR in adjoining districts and >30% in adjoining state	>20% TPR in adjoining districts or >30% TPR in adjoining state	10-20% TPR in adjoining districts or >20% TPR in adjoining state	5-10% TPR in adjoining districts or 10-20% TPR in adjoining state	1-5% TPR in adjoining districts or 5-10% TPR in adjoining state	
Trigger B O2 Bed Trend - Bed availability in 30km/20km radius - Oxygen availability assessment	Below 20%	Below 40%	40-60%	60-75%	Above 75%	Above 80%
Pandemic Management Protocol	Strict Lockdown	Lockdown	High Caution	Caution	Stay Alert	Normal

Explanatory Note:

- a) A PHMU will raise its Alert Level in response to two simultaneous triggers: At or A2 and B. In other words, it will raise its alert level when its own population crosses a TPR threshold and bed availability declines. Or, pre-emptively when neighbouring states are suffering outbreaks while its own bed availability is weak.
- b) A PHMU will lower its Alert Level only when its own TPR (A1) and Bed Availability (B) improve.
- c) When a PHMU is in Alert Level 1 and above the testing rate should be based on individual, non-pooled, samples. At Level o (Green) the testing rate can include pooled testing on a random sampling basis, as it is for monitoring purposes.

7. Implementation Requirements:

- a. State governments should have credible, near real-time data on test rates, test results and healthcare capacity.
- b. Available healthcare capacity for each PHMU should be mapped and available on a semi real-time basis to the State government as well as individual PHMU administration.
- c. Reliable pandemic trend data from adjoining states and districts should be incorporated into the state level dashboard.
- d. To the extent possible, the State government's plan must be coordinated with that of neighbouring states. The ideal case is for neighbouring states to accept a common definition of Alert Levels and exchange data on a real-time basis.

APPENDIX A: #3R REOPENING PLAN - ALERT LEVELS AND PERMITTED ACTIVITIES

SN	Level/Tier	5	4	3	2	1	0
	Colour Code	SUPER	RED	SUPER	ORANGE	YELLOW	GREEN
		RED		ORANGE			
	Meaning	Strict	Lockdown	High	Caution	Stay	Safe
		Lockdown		Caution		Alert	
1.	PERSONAL						
1a.	Pedestrian Movement	No	Limited	Limited	Yes	Yes	Yes
1b.	Private Vehicle 2W	No	No	No	Limited	Yes	Yes
1c.	Private Vehicle 4W	No	No	No	Limited	Yes	Yes
1d.	Public Transport	No	No	Limited	Limited	Limited	Yes
ıu.	Auto3W	110	110	Limited	Limited	Ziiiiicca	100
1e.	Public Transport Taxi	No	Limited	Limited	Limited	Limited	Yes
1f.	Private Buses	No	Limited	Limited	Limited	Limited	Yes
1g.	Buses & Metro	No	No	No	Limited	Limited	Yes
1h.	Non-local Transport	No	No	No	Limited	Limited	Yes
1i.	Domestic help	No	No	Limited	Yes	Yes	Yes
1j.	Ecommerce/Delivery	No	Yes	Yes	Yes	Yes	Yes
,	,						
2.	SOCIAL						
2a.	Home Functions	No	No	No	Limited	Limited	Yes
2b.	Religious Buildings	No	No	No	No	Limited	Yes
2c.	Function Halls	No	No	No	No	Limited	Yes
2d.	Open Air Maidans & Grounds	No	No	No	Limited	Yes	Yes
2e.	Public Parks	No	No	No	Limited	Yes	Yes
2f.	Stadiums	No	No	No	No	Limited	Yes
2g.	Swimming Pools	No	No	No	No	Limited	Yes
2h.	Funeral Services	No	Limited	Limited	Limited	Yes	Yes
	TDIICATIONAT						
3.	EDUCATIONAL	3.7				T. 1	**
3a.	Playschools & KG	No	No	No	No	Limited	Yes
3b.	Primary to Tenth grade	No	No	No	No	Limited	Yes
3c.	Pre-college, vocational	No	No	No	No	Limited	Yes
3d.	Private coaching	No	No	No	No	Limited	Yes
3e.	Private tuition < 4	No	No	No	No	Yes	Yes
3f.	Colleges & Higher Ed School Bus	No No	No	No No	No No	Limited Limited	Yes
3g. 3h.	School Auto	No	No No	No	No	Limited	Yes Yes
J11 .	Jeliooi Auto	110	110	110	110	Lillicea	169
4.	COMMERCIAL						
4a.	Street Vendor –	No	Limited	Limited	Limited	Yes	Yes
	Individual						
4b.	Small Retail – Counter	No	Limited	Limited	Limited	Yes	Yes
4c.	Small Retail – Indoor	No	No	Limited	Limited	Limited	Yes
4d.	Retail – Indoor Mall	No	No	No	Limited	Limited	Yes
4e.	Small Market - Outdoor	No	No	Limited	Limited	Yes	Yes
4f.	Small Market – Indoor	No	No	No	No	Limited	Yes
4g.	Large Market Area	No	No	No	No	Limited	Yes
4h.	Restaurants & Bars	No	No	No	No	Limited	Yes

4i.	Cinemas & Multiplexes	No	No	No	No	Limited	Yes
5.	ESSENTIAL SERVICES						
5a.	Grocery & PDS Store	Limited	Limited	Limited	Limited	Yes	Yes
5b.	Milk & Meat Stores	Limited	Yes	Yes	Yes	Yes	Yes
5c.	Food – Home Delivery	Limited	Yes	Yes	Yes	Yes	Yes
5d.	Hospitals & Clinics	Yes	Yes	Yes	Yes	Yes	Yes
5e.	Pharmacies	Yes	Yes	Yes	Yes	Yes	Yes
5f.	Computer Supplies	No	Limited	Limited	Yes	Yes	Yes
5g.	Petrol Stations	Yes	Yes	Yes	Yes	Yes	Yes
6.	INDUSTRIAL & BUSINESS						
6a.	MSME Factories	No	20%	30%	50%	75%	Yes
6b.	Large Factories	No	10%	20%	50%	75%	Yes
6c.	MSME Office	No	20%	30%	50%	75%	Yes
6d.	Large Office	No	10%	20%	50%	75%	Yes
6e.	Laboratories – Non Bio	No	20%	30%	50%	75%	Yes
6f.	Laboratories – Bio	Limited	Limited	Limited	Limited	Yes	Yes
6g.	Logistics Facilities	Limited	Limited	Limited	Limited	Yes	Yes
6h.	Cold Storage Facilities	Limited	Limited	Limited	Limited	Yes	Yes
6i.	Agricultural Markets	No	Limited	Limited	Limited	Yes	Yes
7.	RURAL ECONOMY						
7a.	Farming & Rural Works	Limited	Limited	Limited	Yes	Yes	Yes
7b.	Agro-processing open air	No	Limited	Limited	Yes	Yes	Yes
7c.	Agro-processing indoor	No	No	Limited	Limited	Limited	Yes
7d.	Fisheries	No	Limited	Limited	Limited	Yes	Yes
7e.	Perishable storage	Limited	Limited	Limited	Yes	Yes	Yes
7f.	Non-perishable storage	No	No	Limited	Limited	Yes	Yes
7g.	Cottage Industry	No	20%	30%	50%	75%	Yes
7h.	Farm equipment retail	No	No	Limited	Limited	Yes	Yes
7i.	Farm equipment services	Limited	Limited	Limited	Yes	Yes	Yes
7j.	Irrigation Management	Limited	Limited	Limited	Yes	Yes	Yes

Note I: The term "Limited" implies limited in time (for instance operating hours), number of people (for instance number of passengers in a taxi, or employees per square foot), type of premises (for instance, no meeting rooms/conference rooms shall be open) and so on. The PHMU administration should be empowered to determine these limitations subject to the Key Priorities stated above. If the need arises, the State government can define these limitations instead.

Note 2: This table has been prepared with Karnataka as a reference point; exact recommendations will vary from state to state, according to local conditions.

