TELE COUNSELLING CENTER PROCESS PLAYBOOK FOR COVID 19

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By: Azhagu Pandia Raja M.P
City Innovation Officer,
Chennai Smart City Limited,
Greater Chennai Corporation.

Contents

1. Introduction

The unprecedented crisis has seen the best of all the departments from the Corporation pitching in to deal with the various setbacks as a result of the pandemic. The impact of the second wave has been more devastating than the first, and naturally the Chennai Corporation also stepped up its efforts with the lessons learnt from a year ago. Following up on patients and travellers for symptoms and referring for testing, providing psychosocial support, admission coordination with hospitals, providing professional counselling, coordination of relief for the needy are only some of the multiple activities undertaken by the Chennai Corporation. The standards for all these activities are in line with those released by the World Health Organisation.It is the sheer will to make a difference during these trying times that drives these volunteers to give it all.

The Tele Counselling Centre started functioning again this year on the 18th of April 2021. They have attended to approximately 4700 calls from the general public in the 20 days they have been operational. They include queries relating to COVID tests, travel, protocols for quarantine and isolation,

and requests for essential goods, medicines, disinfection requests among others They have also coordinated 62 emergency admissions that entail timely follow ups in gathering patient details, assessing the severity , coordinating with hospital for admission(Oxygen and ICU support) and ambulance at first priority basis. The team working at Amma Maligai has also been given the responsibility to man the COVID helpline numbers for the Chennai district. The other initiatives from the Greater Chennai Corporation includes developing an app for Telemedicine, helping patients at the Rajiv Gandhi Government hospital using on field volunteers, a team that is closely following and tracking home isolation and psychosocial support.

This document has captured all these processes mentioned above in detail to further optimize it and increase efficiency so we can serve Chennai better. The data for this document was collected through qualitative interviews with members from the different teams working for the Covid-19 Tele Counselling Center.

2. Types of Support

There are different types of support offered by the Tele-counselling center. They can be categorized into the following broad ones being psychosocial needs, Medical needs and physical needs. The psychosocial team offers counselling support for the citizens who call them.

Additionally, the volunteers who also continue following up with citizens for home isolation are also mapped to this category. Medical needs for citizens includes helping them with hospital admission, ambulance coordination and telemedicine services through the VIDMED app.Physical needs for the citizens include helping them find volunteers to do their groceries, find water supplies, medicines and food. This category would primarily be for citizens who are unable to step out of their homes primarily because they are isolated.

2.1Process Flow:

Step: 1 The citizen calls the Covid Tele Counselling center through the helpline numbers 044-46122300 or 044-25384520

Step: 2 Based on the query raised, the Tele counselling redirects the citizens to the respective teams

Step: 3 The tele counselling team understands if the citizens have any other additional queries otherwise,
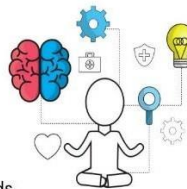they end the call

Types of Support

3. Overview Teams

There are currently 8 teams involved in this process. The tele caller team is at the core of this ecosystem. The tele caller team connects each of the citizens to their needs using the current network available. The teams currently present are the tele callers, emergency team, ambulance mapping team, psychosocial support, telemedicine, volunteer team at RGGH, home isolation team and the zonal team. Predominantly the teams working with the Tele counselling center are seated physically in the Amma Maligai building except the Telemedicine team and the home isolation team's virtual volunteers who work from their respective homes. Each team's workflow, observed pain points are captured in detail in the subsequent section.

3.1 Telecallers

The Tele counselling initiative by the Greater Chennai Corporation has been fighting against all odds to fulfil the various needs of the Chennai residents during the pandemic. The Tele Counselling Center functions as Know how to provide support to people who are affected by COVID-19 and know how to link them with available resources. Based on a comprehensive care model catering to the physical, medical, and psychosocial needs of the city's residents. The psychosocial support team works in collaboration with Loyola College, Chennai consisting of medical professionals, social workers, public health professionals,engineers, and police officers.There are 25 volunteers for the morning shift, 25-30 volunteers for the mid shift and 7 volunteers for the night shift at all times. The shift timings are as follows: 8-2 PM, 1.30-8PM and 8-8PM. The tele-counselling team is currently seated inside the conference room at Amma Maligai. The team handles queries including covid testing centers, covid vaccination centers, medical emergencies along with catering to non covid emergencies.

3.1.1 Process Flow

A) Citizen Facing:

Step: 1   Dial the helpline numbers
Step: 2   Explain the issue/needs

Step: 3 Listen to the solution given by the Telecaller and follow it scrupulously

B. Tele-Caller Facing:

Step: 1 Acquire knowledge regarding the process, the existing teams and their roles.

Step: 2 Building good rapport

Tele-caller Facing

Acquire knowledge — Building Rapport with the teams — Training — Attend calls — Query is solved or escalated to concerned teams

with all the teams in order to work hand in hand

Step: 3 The incoming call is picked and handled with professionalism.

Step: 4 When required, the call is diverted to the concerned entity for escalation

Step: 5 After all the queries are addressed, the call is ended

3.1.2. Pain points:

- Tele callers may be inexperienced and are unable to make spontaneous decisions to handle the crisis

- Few tele callers still require supervision and make the citizens wait while they find the solution which might increase the citizen's anxiety
- Man power is low and the present team might be overworked
- Consistency in terms of follow up especially with citizens who are isolated in their homes is relatively low
- The incoming calls during the gap in between work shifts is not covered

3.1.3 Other Remarks:

Is there a way we can allow citizens to first connect with their zones in order to reduce traffic at Tele counselling center?

3.2 Emergency

The Emergency team sits at the rear end of the conference room in the Amma Maligai. The Emergency team is responsible for creating a database and updating it with the information about the available beds with specific requirements, arranging for ambulances, assisting with the admission and daily follow up. The team consists of 8 people working

around the clock with one dedicated executive for handling the arrangement of ambulances. He specifically gathers information about the availability of the ambulances in real time and helps patients find an appropriate one which will take them to the hospital. In case the executive is unable to meet the needs, he escalates to the 108 team who will be parallely tracking ambulances real time through GPS.

3.2.1 Process flow

Step: 1 The emergency team receives the re-routed call from the Tele-calling team

Step: 2 The team also parallel collects information about beds and ventilator support and contacts the hospital

Step: 3 They talk to the citizens, understand the needs and connect with the doctors to escalate the process further

Step: 4 The ambulance team then maps the ambulance to the patient and waits until the citizen gets the bed

Step: 5 The emergency team follows up with the well being of the citizens

3.2.2 Pain Points:

- Follow up with all emergency admissions is relatively low
- Bed availability, oxygen and ventilator availability

3.2.3 Emergency - Ambulance/ 108

The specific process in particular for the Ambulance is broken down into citizen facing and 108 executive facing for better understanding.
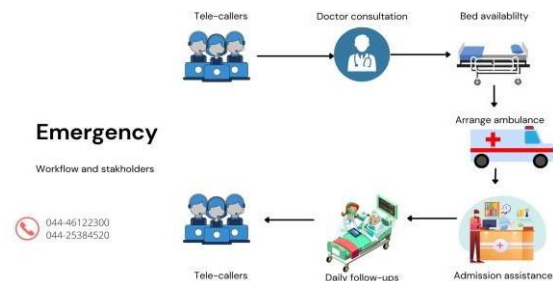
3.2.4 Process flow

A) Citizen Facing:

Step: 1 The citizen calls as an emergency with the request

Step: 2 The emergency team maps resources and if required will drop the call, map the

Ambulance - Emergency Team
Process Flow: Citizen

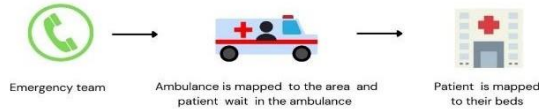Emergency team   Ambulance is mapped to the area and patient wait in the ambulance   Patient is mapped to their beds

resources and get back to the citizen

Step: 3 The ambulance is sent home if required

Step: 4 The team follows up with the ambulance for a few days to track the well being of the patient

B) Emergency Team Facing:

Step: 1 Tele counselling center receives an emergency call for bed - ventilator/O2/Non-O2

Step: 2 Team already has information about where the beds are available from the limited list of hospitals - Kings Guindy, Stanley, RGH, RGGH,KGH, KMC, OMC

Step: 3 Ambulance is in the current area is mapped to the patients location

Step: 4 If there is an ambulance present, its immediately sent to patients house, otherwise ambulance from neighbouring locations is mapped and then sent to the patients house

Step: 5 From the patient's house, the ambulance is sent to the hospital

Step: 6 It waits at the hospital until the patient gets the bed with its functionalities including o2 until then patient is under the support of the ambulance's equipment

Step: 7 After the patient gets the bed, the ambulance is sent back to the location

Process Flow: Emergency team

Emergency team   Ambulance is mapped to the area   In case of delays, Ambulance from nearby locations are mapped to the patient   Patient is mapped to their beds
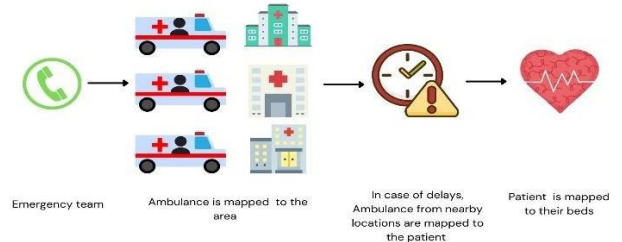
3.2.5 Pain Points:

- Availability of ambulances in specific areas is becoming scarce due to the delay in the hospital bed admission - How can we improve the process efficiency between patients getting bed and ambulance sent back to the respective areas?

3.3 Telemedicine

The Greater Chennai Corporation has launched the GCC VIDMED app, which facilitates individuals to consult a doctor free of cost through video call, around the clock. The app, available on Google Playstore has 10,000+ downloads. This is due to the persistent and unwavering efforts of the volunteers working along with the employees of the Corporation who have pledged their support to the cause of helping the citizens cope with the crisis. The doctors with different experiences have been onboarded in order to be able to attend to patients. There are currently 20 doctors who are spread over three shifts and physically present in the Ripon building office. The processes from both the citizen and doctor facing teams are captured in this section.

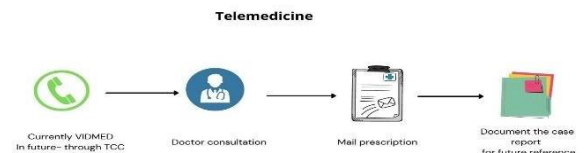### 3.3.1 Process Flow

A) Citizen Facing:

Step: 1 Downloading the app

Step: 2 Registration of the patient (Can the number of clicks be reduced?, button positioning of the submit in the registration be on the right)

Step: 3 Registration number is generated

Step: 4 Login

Step: 5 Four tabs are available 1. My details 2. Edit profile 3. Invoice 4. Refund

Step: 6 If the patient wants to call the doctor, they can just press the green button, the available doctors with the experience, language of consultation, specialization, consultation charges

Step: 7 Pressing the green call button, citizens can directly call the doctor

Step: 8 Doctor captures all the preliminary data to make a case sheet

Step: 9 Generates a case sheet, helps the patient with prescription which can be downloaded on the my details sheet

Process flow : Citizen
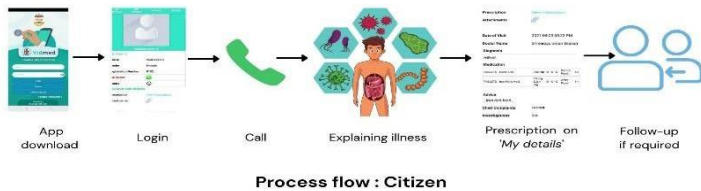
Step: 10 Follow up calls can be fixed with the doctor

B) Doctor's Facing:

Step: 1 On the doctor's screen, incoming patient call is captured

Step: 2 Doctor connects with the patient through video call

Step: 3 Doctors can capture all type of data from the patient : Chief complaints, History of the present illness, previous past history, vitals, investigation suggested, diagnosis, drugs ,advice, covid 19

Step: 4 Doctor advises how to consume tablets and gives other instructions regarding availability of drugs, drug intake and any other queries from the patient

Step: 5 Case sheet is generated and doctor clicks save

Step: 6 Pdf is sent to the patient and it appears on the my details page

Process Flow: Doctors
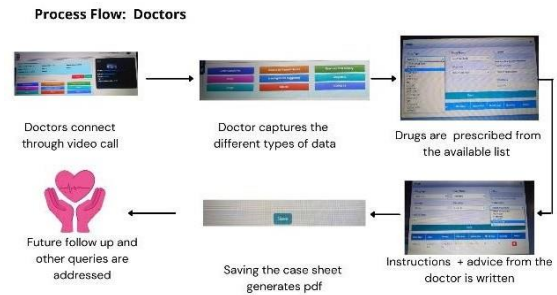
Step: 7 Patient can then disconnect the call

3.3.2 Pain Points:

- Video gets cut if the app is exited
- Family support is still not available for covid + patients
- Follow up after consultation for patients directed to zonal officers for further investigation is unavailable
- Invoice and Refund tabs are redundant
- Patients can misuse the prescription
- Limited data available for : areas from which patients call, call traffic based on time of the day

3.4 Psychosocial Support

As of 2nd May 2021, the workers have provided psychosocial support for 1830 Chennai residents. The psychosocial team consists of a team of 5-8 psychologists who are present round 11the clock to help citizens cope through this pandemic.

3.4.1 Process flow

Citizen Facing:

- Step: 1 Citizen reaches out the government through the Tele counselling center
- Step: 2 The tele counselling center connects the line to the team
- Step: 3 The citizen discusses their experience
- Step: 4 The psychologist then ends the call and submits the report

3.4.2 Pain Points:

- Seating arrangement has to be different
- Communication across the room with the patient on the line isn't idea

3.5 RGGH Volunteer support team
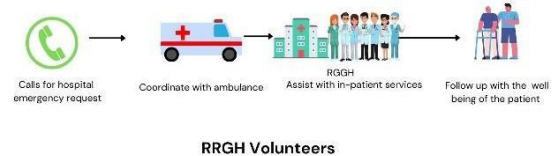
RRGH Volunteers

In addition to all this, there have been 10 volunteers who have been posted at Rajiv Gandhi General Hospital to assist with in-patient admissions, coordinating with ambulance services, as well as to provide psychosocial support to the COVID patients and their family members who come there.

3.5.1 Process flow

- Step: 1 The volunteers receive the patients at the hospital
- Step: 2 Help them settle down and assist with the entire process of the admission
- Step: 3 Follow up with the well being of the patient
- Step: 4 Provide the psychosocial support to the families

3.5.2 Paint points

- Currently volunteers are available on field only at RGGH.

3.6 Home Isolation

The team consists of 58 volunteers mobilized by the Network of Professional Social Workers at Amma Maligai who work in three shifts. The process of deploying 100 work-from-home volunteers who will be coordinated by 10 social workers from Amma Maligai is underway. The volunteers undergo intensive training for tracing contacts, providing psychosocial support, and following up on contacts and discharged patients. 18,423 home isolation follow ups had been made, that include volunteers following up on positive patients on persisting symptoms of covid , assessing whether they are high risk or low risk through gathering their history of comorbidities (Diabetic, heart disease, TB etc) , their vaccination status and addressing their medical , social and counselling support if needed.

3.6.1 Virtual Volunteers

The rapid increase in the number of home isolated patients have posed a

demand to expand the workforce as well. Pertaining to the workplace protocol, GCC- TCC has brought in around 200 virtual volunteers, in order to follow up the health condition of the home isolated patients through phone calls.

3.6.2 Process Flow

Home isolation Tele-callers Facing

Step: 1 Dials to the home isolation patient with the aid of the list of Covid positive patients including their basic info and their contact details .

Step: 2 Cross verifies the details

Step: 3 Enquires the health condition of the Home Isolated patient with the aid of the questionnaire that enlists the following questions:

- Date of turning covid positive
- Date of End isolation
- History of Comorbid Condition?
- Risk of Patient(High/Low)
- Any persistent symptoms of Covid(Yes/No)
- Emergency symptoms(Yes/No)
- End Isolation (Yes/No)
- Home Visit
- Vaccination (Dosage)
- Vaccination Type

- Psychosocial support given
- Psychosocial support required
- Remarks.

Step 4: Escalates it to the emergency team, if the patient is recognized unfit for home isolation.

Step 5: Instructs the patient about using GCC VIDMED app for medical consultation.

3.6.3 Pain Points

- Lack of manpower and the team finds it difficult to complete all the calls assigned for the day and the remaining numbers just piles up
- In line to the above, calls are being made to the home isolation patients, just for a day.
- Currently there's a system to check the quantity of work taken up by the tele caller but none for the quality of the work.
- The zone level execution of escalation from TCC with regard to home isolated patients lacks efficiency.
- The tele caller fails in capturing the complete information with regard to the health condition of the home isolated patients.

3.7 Zonal Offices

Zonal offices are usually nodes present across the city headed by the Zonal head and are run by Sanitation officers and Sanitation Inspectors who work with Focus Volunteers on the field who help citizens with all their needs.

The Tele counselling center redirects the call to zonal offices for further escalation regarding covid protocols, or any other assistance that falls into their expertise.

The Telemedicine team redirects citizens to covid centers or zonal offices in case citizens have to take further steps in assisting their ailments.

The zonal offices coordinate with field volunteers to help citizens with their needs that include buying them groceries, water supplies, medicine or assist them with home testing etc.

3.7.1 Pain Point

- Currently there is a heavy disconnect between the system and the citizens

4. Conclusion

This document has captured all these processes mentioned above in detail inorder to further optimize it and increase efficiency so that the residents of the Greater Chennai Corporation can be served better during this pandemic. The data for this document was collected through qualitative interviews with members from the different teams working for the Covid-19 Tele Counselling Center.
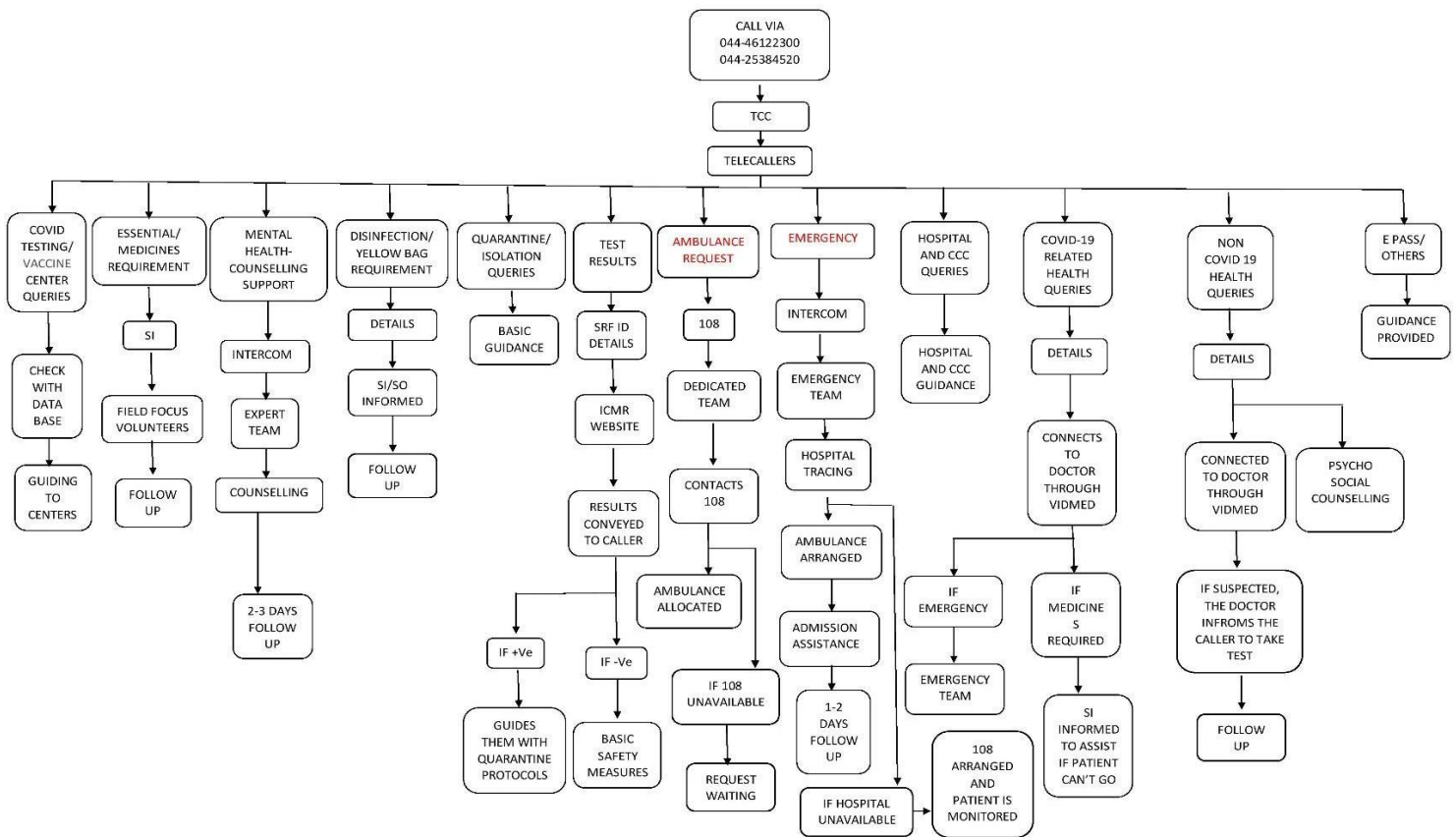
The entire document was designed and consolidated by the Process Optimization Team comprising of Ms.Janani Krishna.G, Mr.Jeffin Pious.J , Ms.Madhumeetha.B and Mr.Sandip Prakash.B
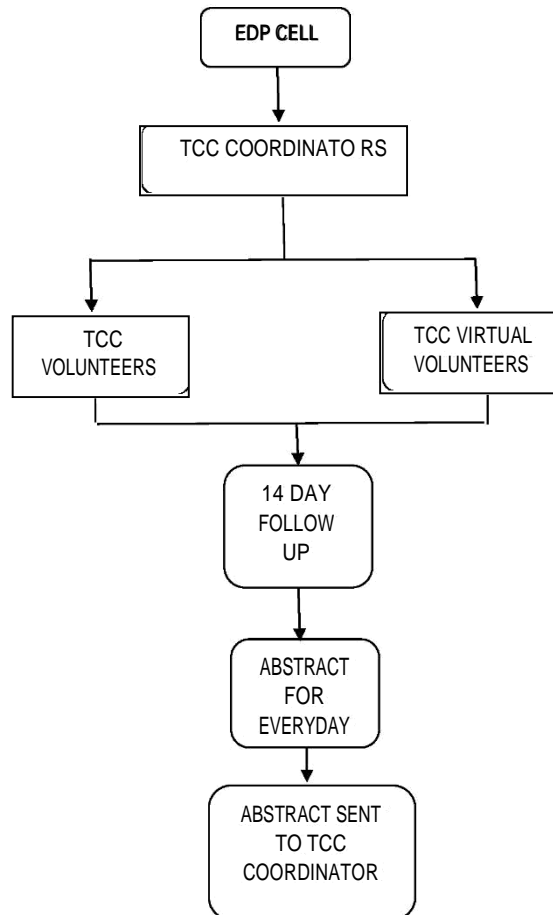
5. Appendix

5.1 Flowcharts – TCC Process Mapping and Home Isolation

TCC PROCESS MAPPING:

OUTGOING CALL- HOME ISOLATION

```
        ┌──────────────┐
        │   EDP CELL   │
        └──────┬───────┘
               │
               ▼
        ┌──────────────────────┐
        │  TCC COORDINATO RS   │
        └──────────┬───────────┘
               ┌───┴────┐
               │        │
               ▼        ▼
        ┌──────────┐  ┌──────────────┐
        │   TCC    │  │ TCC VIRTUAL  │
        │VOLUNTEERS│  │ VOLUNTEERS   │
        └────┬─────┘  └──────┬───────┘
             └───────┬───────┘
                     ▼
             ┌──────────────┐
             │   14 DAY     │
             │   FOLLOW     │
             │     UP       │
             └──────┬───────┘
                    ▼
             ┌──────────────┐
             │  ABSTRACT    │
             │    FOR       │
             │  EVERYDAY    │
             └──────┬───────┘
                    ▼
             ┌──────────────┐
             │ABSTRACT SENT │
             │   TO TCC     │
             │ COORDINATOR  │
             └──────────────┘
```

5.2. Report templates

In order to address the COVID-19 second wave, the GREATER CHENNAI CORPORATION restarted its COVID TCC (Tele counselling centre) on 18th of April 2021, in order to render support and meet the relevant needs of the public. It escorts with two helpline numbers through which the public can connect with the GCC-TCC - 044-46122300, 044- 25384520.

Home Isolation Team
- Date on
- No of Home isolation Patients
- Risk – Low/ High
- Home Visit – Yes/No
- Psychosocial Support
  Not Yet

Emergency team
Emergency arrangement for
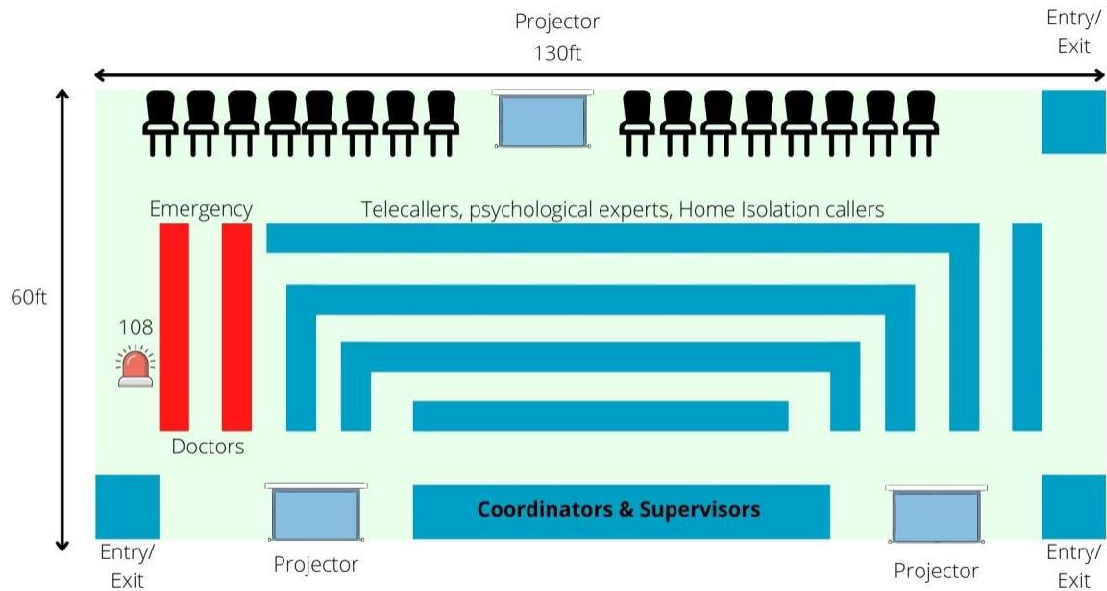**Hospital Admission**
- Date
- Cases Received
- Arranged
- Not Yet

108 Service
- Date
- 108
- Emergency team

Tele caller's
- Date
- Name of the volunteer
- Name of the caller
- Age
- Gender
- Phone no
- Area
- Zone
- 520/300
- Domain
- Details of the call
- Action Taken
- Follow up taken (Y/N)
- Referred VidMed (Yes/No)

5.3 Blueprint of the Telecounselling Center in Amma Maligai

Blueprint of the seating arrangement

TEAM:

Azhagu Pandia Raja M.P (City Innovation Officer)
Jeffin Pious J (Intern)
Madhumeetha B (Intern)
Janani Krishna G (Intern)
Sandip Prakash B (Intern)