

S. Korea's COVID-19 response

: from district health authority perspective

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About Ansan city and Sangnoksu district HC

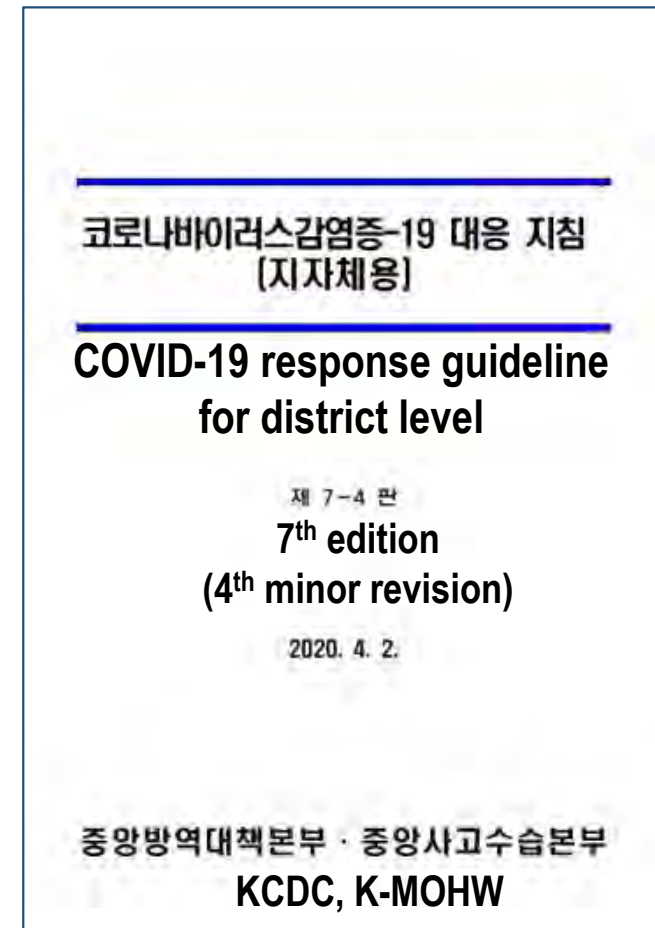
| | |
|---------------------------------|--|
| Population | 711,719 (1.4% of total S. Korea pop) |
| Governance structure | 2 districts and 25 towns |
| Hospitals | 60 (1 tertiary, 24 secondary, 16 long-term care, 15 oriental, and 4 dental hospitals) |
| Clinics | 683 (355 medical, 188 dental, and 140 oriental medicine clinics) |
| Public health facilities | 8 (<u>2 district health centers</u> , 4 sub-health centers, 2 rural clinics) |

One of 254 District Health Centers in S. Korea



Main role and responsibility of district health authority to respond to COVID-19

- Risk communication & health education
- Surveillance
- Coordination of testing
- Contact tracing
- Self-quarantine management
- Local-level resource mobilization and allocation



District health office organogram (before COVID-19)

- 8 teams and 2 sub-centers
- 135 staff members
- Annual budget : about 17 Million USD

Director General

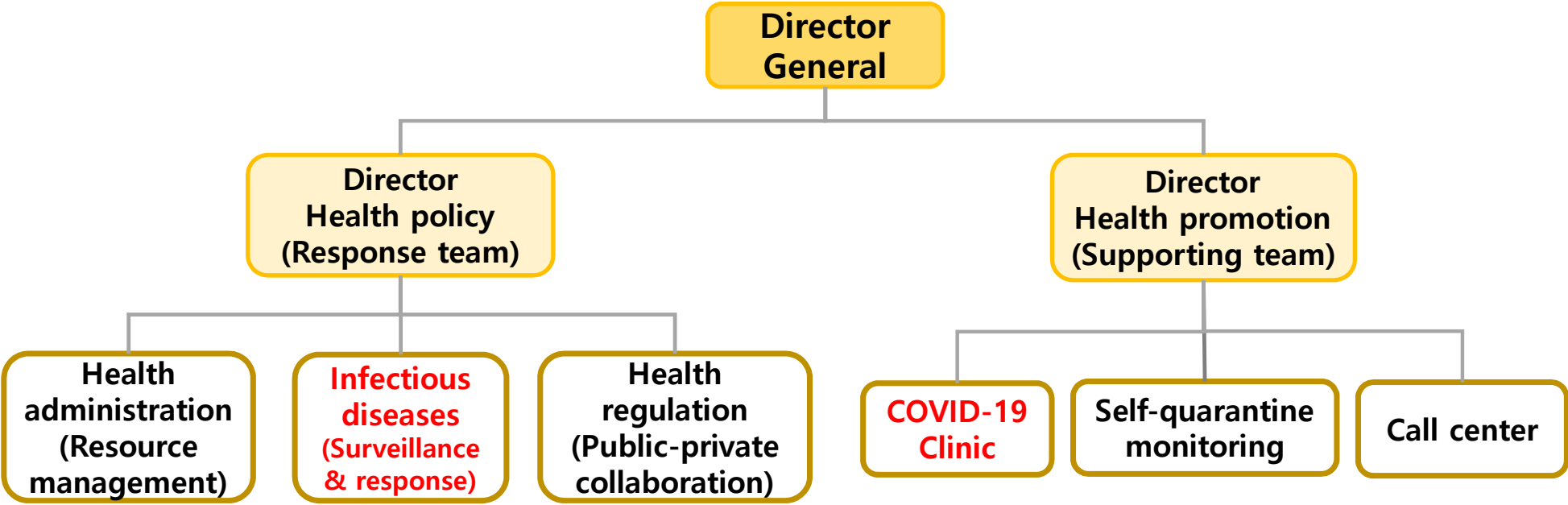
Director Health policy

Director Health promotion

- Health administration
- Infectious diseases
- Health regulation
- Medical services
- Banwol sub-center
- Su-am Sub-center

- Health promotion
 - Health promotion
 - Smoking
 - Physical activity
 - NCDs
 - Suicide prevention
- Visiting nursing
- Maternal and child health
 - Immunization
 - MCH
 - Nutrition
- Dementia center

District health office organogram (at COVID-19 outbreak)



Risk communication & health education

- Hand hygiene, cough etiquette and mask
- Information on risky places
 - Wuhan → China → Daegu → Mega-church
 - Public space (e.g. gym) → Work place (e.g. call center) →
 - Long-term care facilities → International travels
- Physical distancing



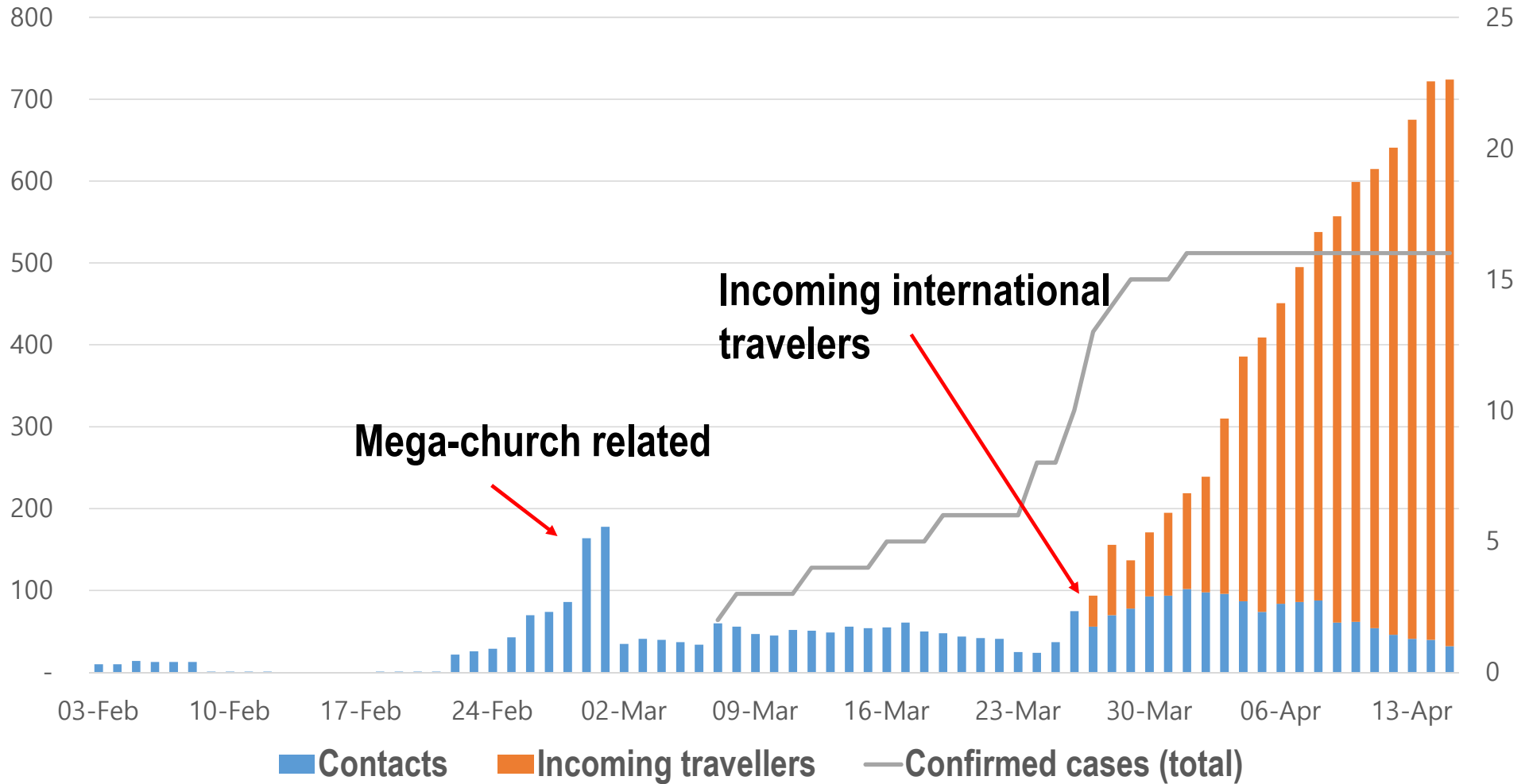
Surveillance

- Daily report (as of 14 April 2020)

| | Confirmed cases | | | Total | Quarantined cases | | Released |
|----------------------|-----------------|-----------------|-----------|--------------|-------------------|-------------------------|------------|
| | Total | Under treatment | Recovered | | Contacts | International Travelers | |
| <i>Daily changes</i> | - | - | - | +71 | +2 | +69 | - |
| Ansan city | 16 | 5 | 11 | 1,288 | 40 | 682 | 566 |
| Sangnoksu district | 6 | 1 | 5 | 639 | 23 | 292 | 324 |
| Danwon district | 10 | 4 | 6 | 649 | 17 | 390 | 242 |

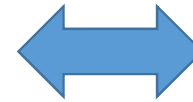
| Testing | Total | Under testing | Negative | Positive |
|------------------------|--------------|---------------|--------------|-----------|
| <i>Daily additions</i> | +124 | +116 | +8 | - |
| Total | 3,475 | 121 | 3,338 | 16 |

Confirmed and self-quarantined cases in Ansan city



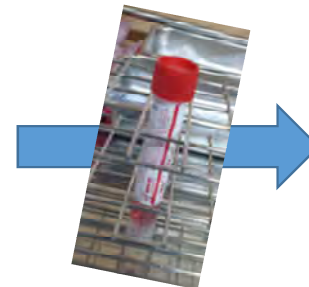
Coordination of testing

- COVID-19 clinics with negative pressure
 - 1 public and 2 not-for-profit hospitals
 - 2 public district health centers
- Fever/respiratory clinics
 - 3 additional not-for-profit hospitals



Laboratories

(about 100 public & private institutions nation-widely)



Contact tracing

- 1) Interviewing initial histories (where/when to go, who to meet) from the patient by trained district health officer
- 2) Determining size of contact tracing team and organizing a team
 - A team leader from province level: rapidly established Epidemic Intelligence Service (EIS) officer
- 3) Identifying/confirming close contacts
 - Use CCTV, credit card utilization records, GPS and others
- 4) Disinfecting the places identified
- 5) Opening the information (place and time) to the public when it is necessary to find un-identified close contacts



Self-quarantine(isolation) management

- 1) Sending self-quarantine notice by the district health authority
- 2) Providing health education
- 3) Delivering basic hygiene kit and food: thermometer, masks, hand sanitizer, waste bag etc.
- 4) Arranging a facility if house is inappropriate for self-quarantine
- 5) Checking symptoms two times a day by phone call
 - Use smart phone app with GPS function when necessary



Self-quarantine guidelines

- ✓ **Do not leave the quarantine area to prevent the spread of disease.**
- Keep the door closed and open the window frequently to ventilate. - Eat by yourself.
- If possible, use a separate bathroom and sink.
- Shared bathroom and sink should be disinfected with a home disinfectant such as chlorine bleach after use.
- ✓ **Stay alone in an isolated area.**
- Keep the door closed and open the window frequently to ventilate. - Eat by yourself.
- If possible, use a separate bathroom and sink.
- Shared bathroom and sink should be disinfected with a home disinfectant such as chlorine bleach after use.
- ✓ **If you need to leave the area for an inevitable reason such as treatment, you must contact the local health center(Officer in charge)first.**
- ✓ **Avoid contact with family members or cohabiters. (speaking, etc.)**
- If inevitable, do not face each other, wear masks, and keep at least 2m distance.
- ✓ **Use personal items separately. (personal towel, tableware, mobile phone, etc.)**
- Wash clothes and bedding of suspected infectee separately from others.
- Separate tableware, so others don't use it before it is cleaned.
- ✓ **Comply with the health guidelines.**
- Comply with personal hygiene recommendations (washing hands, wearing etc.) - Wear a mask when coughing.
- If you don't have a mask, cover your mouth and nose with your sleeve and wash or sanitize hands after coughing or sneezing.

During the active monitoring period, your local public health center will contact you for symptoms, etc.
Please maintain self-monitoring for 14 days from the date of contact with a diagnosed infectee.

Self-monitoring method

- ✓ Monitor your health conditions for any symptoms of infection such as respiratory symptoms.
- ✓ Take the temperature every morning and evening.
- ✓ Inform the public health center of your symptoms when they contact you once or more a day.



Local level resource mobilization & allocation

- Working with doctor's association and nurse's association
- Working with hospital managers
- Working with civil society organizations for better risk communication and community engagement
- Working with business persons to secure facilities for self-quarantine



Discussion: some governance issues at district level

- Public-private collaboration
 - Especially, for ICU beds, fever/respiratory clinics (primary care level)
- Central-local coordination
 - Triage, treatment and PPE allocation (central/provincial level)
vs. Prevention and early detection (city/district level)
- Citizen's participation

Thank you!

