Experiencia de Medellín en el manejo de la pandemia por COVID-19

Secretaría de Salud
Resilience and the ability to overcome adversity are one of the main characteristics of the Paisa culture and a common factor among the citizens of Medellín. The health emergency caused by the COVID-19 pandemic has led to a great crisis worldwide, not only from a health point of view, but also from an economic, social, and political point of view. Thanks to the capacity for resilience, in Medellín, this crisis has been a great opportunity to initiate the transformation towards the Medellín Future we dream of.
Slide 3 (Strengthening)
With the strengthening of our public and private hospital network, as well as the expansion of its infrastructure and provision of services to its citizens, the city prepared in advance for the arrival of the virus. Our challenge as a Municipal Administration is to keep this capacity alive, guaranteeing its sustainability, which translates into saving human lives.
Among the lessons that the pandemic leaves us, and perhaps one of the most important not only for the city, but for the entire world, is having managed to turn our gaze towards health; an aspect that little by little had become clearer in the day to day, in the occupations and in other interests that had it in the background, ignoring the importance of its preservation to develop our life’s projects. Taking advantage of these circumstances to incorporate self-care practices and healthy lifestyles in the daily life of Medellinians became a necessity for the Municipal Administration.
Slide 5 (Mental Health)
Another additional challenge in terms of health is to understand and address the consequences and lasting effects of COVID19 in people who have suffered it. In this sense, we must also refer to mental health, as a fundamental component of our Government program and of our Development Plan, since it is no secret that mental health has been greatly affected in this pandemic, bringing out all the long-standing burden of disease.
Un gran potencial para la mitigación del virus

Slide 6 (IVC as potential)
Another impact, which we also see as great potential, is that of commercial establishments. We were able to strengthen ties between merchants, businessmen and the municipal administration, which will allow us to consolidate the economy of our city, with better practices in terms of service. Our challenge is to overcome this economic crisis and create more and better jobs for people.
Finally, the pandemic is the development of the Software Valley. We were able to show that technology is at our service and it was a crucial tool so that many people could continue working from home and avoid that our economy comes to a stop. It has also been decisive for our management of the epidemic, since it has allowed us to detail the epidemiology for action.
MEDIDAS ECONÓMICAS Y DE SALUD PÚBLICA

Slide 8 (Economic and Public Health Measures)
Since January, with the first reports of the epidemic in China, the Health Secretariat of Medellín activated the prevention phase of its contingency plan for Acute Respiratory Infections and Acute Respiratory Disease, intensifying educational actions and general community on self-care measures such as hand hygiene, cough etiquette, use of a mask in respiratory symptomatic persons and follow-up of vaccination schedules.

Additionally, the Acute Respiratory Disease rooms were strengthened, especially in the public service network, and the media plan was established to disseminate the self-care recommendations and the alerts that were emerging regarding the new coronavirus. As for epidemiological surveillance, since January 27, the coronavirus task force was established, led by the Ministry of Health and in which insurers, providers, academia and private sector participated.

With the confirmation of the first case in Medellín on March 9, the Emergency Operation Center was activated, in coordination with the departmental government and with the technical advice of the National Health Institute, which remains active to date. Likewise, on March 25, the Unified Command Post was activated to optimize the management of the service network, within the framework of the Municipal Medical Emergency System, which
incorporated into its prioritized conditions, the unusual severe acute respiratory infection, including suspected and confirmed COVID-19 cases, for more agile regulation among city providers. This allowed the administration to have information in real time about the occupation of the hospital network in its different services, as the main tool for decision-making. Also noteworthy is the implementation of the “Plan Mil” to expand by 1000 intensive care beds, the installed capacity in the city's hospital network, the administration of the old “Saludcoop” on the 27 of March, with subsequent adjustments in infrastructure and equipment, as part of the capacity expansion for the city.

On the other hand, on March 31, the “Peak and ID” strategy began, in order to control crowds in the city, channeling of citizens on their priority movements, according to the last digits of the number of the ID. As a complement to these measures, the “Medellín Me Cuida” technological platform was launched on April 5, after designing and developing the modules for families and companies, allowing the identification and characterization of more than two million inhabitants of the city and about 150,000 companies, becoming a great information management tool for epidemiological actions, inspection, surveillance and control of biosafety protocols and identification of needs, to prioritize aid to the most vulnerable population.

Since the month of April, the health-friendly hotline was made available to the community in Medellín. This strategy offered services and support in mental health, developed by the Ministry of Health and that seeks to bring the offer of mental health services to all citizens who require it. The friendly line was expanded to answer calls 24 hours a day, seven days a week and a WhatsApp line was established, in order to accommodate the preferences of the citizens. Through this line, the process of accompanying anticipated grief due to COVID-19 was around hospitalized patients and their families, guaranteeing communication between both, through technological tools such as video calls, to counteract the distancing between families, given the isolation in hospitalization. The mourning route was also established for relatives and people close to those who died from COVID-19 as well as mental health support for health workers.

It is also necessary to mention the “health caravans” in the territories, which began operating on May 20, reaching the most affected communes with a broad range of health services, including education and prevention actions, as well as the detection of risk factors for COVID-19 and socio-economic vulnerabilities. Based on the information generated by the Emergency Committee and the Medellín Me Cuida platform, the municipal administration was able to identify the concentration of cases in some sectors of the city. This is how on May 31 the expanded epidemiological fence was defined for a sector of commune 2 (Santa Cruz), in order to control the expansion of cases and cut transmission chains in the community and work settings. This measure made it possible to control the surge of cases in the
sector, as well as lethality and mortality. This was replicated for commune 10 in June, with similar results.

On June 19, the conformation of the bioethics committee was formalized (in operation since May 22), as a tool to accompany critical decision-making for health professionals in clinical settings and with bioethical criteria. This committee is made up of people of great recognition in the city in the field of bioethics and has made it possible to alleviate the emotional burden of health professionals, who face high impact clinical decisions.

As of July 17, the total care measure was implemented, already in the mitigation phase, to balance the favoring of social distancing and the economic stability of the city, applying strict quarantine three days a week and economic activation the other four days. This measure was developed from the rise of the contagion curve in the city and throughout the phase of increase in cases or "peak" of the epidemic. The strategy made it possible to control the increase in cases, the timely management of serious cases in the care network, and to keep the fatality and mortality rate below the national average.
PLANIFICACIÓN PARA FUTURAS CRISIS

Slide 10 (Planning for Future Crises)
The municipal administration is stronger. We are documenting the entire management of this emergency and in health, for example, many processes have been adjusted, such as the management of diseases of interest in public health, with all the learning we have had. We have a mayor's office that is capable of serving its citizens in its vast majority from virtuality, if necessary. We were able to enrich the inputs for our Development Plan with everything we collected with the communities and what we experienced first-hand in the midst of the emergency. We have a very clear route and an action plan to address emergencies in our city with the integrality of the institutions, based on the management developed with COVID19.
Papel y potencial de la cooperación Sur-Sur y triangular entre ciudades en el intercambio de buenas prácticas y soluciones en salud pública y reducción del riesgo de desastres

Slide 12 (Role and potential of South-South and triangular cooperation between cities in the exchange of good practices and solutions in public health and disaster risk reduction).

In 2019, 80 projects were completed in the country in a bilateral mode and 8 more in a triangular mode, with an average duration of 2 years. But they not only consist of receiving help, but the country has also offered its experience to countries in Latin America, Asia and Africa to face the pandemic, in topics such as telehealth and telemedicine, digital learning, the development of the CoronApp application, the measures of reactivation for the entertainment industry, targeted subsidies such as Solidarity Income and VAT refund.

Among the modalities of cooperation that exist, the South-South model is one of the most interesting, because it is more horizontal, it occurs between countries or cities that share common features due to their geographical proximity, their income level or their culture.

In the midst of the pandemic, Medellín found in this way, that part of the basic principle of solidarity and reciprocity among equals, a way of sharing and also learning in real time about the pandemic management model. And that was key in the months of greatest uncertainty for the city.

The city was able to share and position public policies that were expanding
and were successful, such as the application of information technologies to react quickly to new public health conditions and economic reactivation.

South-South cooperation became a closer network of cities to share problems and solutions, and also strengthened relationships with cities in the southern cone that we were not so active. This also helped us position Medellín as a benchmark for innovation.

Finally, Medellín has had a differentiating factor as a city and it is anticipating many of the measures, including the restriction of visits to prisons and geriatric homes, days before the arrival of the virus in the city, the mandatory use of a mask in the public transport and establishments closed since the beginning of April.

It is important to mention that the epidemiological strategy focused on bringing health services closer to homes to control the spread of the virus in the city and especially in health centers.

In Medellín our emergency care line is 123, through it all care has been channeled to the population with respiratory symptoms.

Thus, the Territorial Teams for Comprehensive Family Care (ETAFI) were deployed throughout the territory to carry out tests, epidemiological fences, field investigations and control of outbreaks.

These are the actions that have marked the success of the strategy, based on the establishment of governance and governability processes.
Esta diapositiva finaliza la presentación.
Gracias

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