
Assessing COVID-19 Response



A group of experts is proposing a scorecard that may help to assess governments' pandemic response and better prepare for future outbreaks.

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In a [comment](#) published in *Nature Medicine*, the authors propose six recommendations with regard to the implementation of public-health measures for controlling outbreaks. The recommendations are based on the WHO's framework for health systems and include the following.

1. Improve public health communication and health literacy

To get the necessary public support and ensure compliance with the implemented measures, clear, evidence-based and consistent communication with the public is a must. To achieve this, a government needs to engage experts, opinion leaders and community representatives and create a comprehensive strategy to address the needs of all population groups.

2. Facilitate robust surveillance and reporting

As confirmed by the experience of previous outbreaks, extensive and accurate testing is important for identification of infection and its dynamics. Testing policies should be complemented by contact tracing conducted on a voluntary basis and in compliance with rights protection principles. Creating and maintaining epidemiological databases is another necessary field of work for public health authorities.

3. Develop pandemic preparedness

Preparing its pandemic response, countries should focus on forming and maintaining two resource pools, that of appropriately qualified healthcare workforce and of physical resources, such as ventilators, masks, testing kits, etc. These should be backed up with efficient cooperation with manufacturers and suppliers to ensure proper delivery, stocking and distribution of critically needed supplies of adequate quality.

To coordinate all of the above, governments and international health organisations should create dedicated pandemic preparedness teams and provide relevant training. This should be supported by up-to-date infection-prevention guidelines and protocols, regular training of healthcare workers and frequent testing at healthcare facilities to limit exposure and minimise nosocomial transmission.

4. Strengthen health systems

While actively promoted by the World Health Organization (WHO), health-systems strengthening is still overlooked in its member states. Factors such as increased funding, collaboration between primary care and social services, engagement of sectors outside of health, or telehealth technologies adoption may play a major role here.

5. Ensure health and social equity

Social protection programmes should be in place to support vulnerable groups, such as people with chronic illnesses, people with low income, the elderly, people with disabilities and others. Plans should be developed to contain epidemic spread in densely populated, low-resource areas and various facilities, including nursing homes, prisons, refugee camps, etc.

6. Ensure that confinement and de-confinement strategies are comprehensive

Implementation of any non-pharmaceutical interventions should be based on rigorous analysis of their broader health and socioeconomic consequences. In this context, measures are needed to facilitate social physical distancing and safeguard the health of workers on the frontlines. Efficient international cooperation and consultation would improve national policies during and post-pandemic.

Score each of the following statements from 1 (completely disagree) to 5 (agree completely):	1	2	3	4	5
1. The authorities communicate clearly and consistently about COVID-19 and provide public health grounds for their decisions.	1	2	3	4	5
2. Government communications target the entire population in all its diversity (e.g. language, culture, education, and socioeconomic level).	1	2	3	4	5
3. Public health experts, government officials, and academic researchers agree on COVID-19 nomenclature and clearly explain the reasons for public health measures.	1	2	3	4	5
4. i) Everyone can get a free, reliable COVID-19 test quickly and receive the results promptly.	1	2	3	4	5
ii) Contact tracing is implemented for positive cases.	1	2	3	4	5
5. Public health bodies maintain robust national, subnational, and local epidemiological databases, updated and reported daily.	1	2	3	4	5
6. There are enough qualified health workers and medical equipment (e.g. ventilators and face masks) to meet national needs.	1	2	3	4	5
7. The government can require private manufacturers to produce critical equipment rapidly, if needed.	1	2	3	4	5
8. A pandemic preparedness team that includes public health and medical experts is coordinating the national response.	1	2	3	4	5
9. Infection prevention and care guidelines and protocols are comprehensive and up to date.	1	2	3	4	5
10. Health systems have sufficient funding and infrastructure to care for all COVID-19 patients.	1	2	3	4	5
11. Everyone has uninterrupted access to regular health services	1	2	3	4	5
12. Primary care services and social services are coordinating and collaborating with each other during the pandemic.	1	2	3	4	5

The COVID-19 Assessment Scorecard (COVID-SCORE) (For the [full version](#) see Lazarus et al. 2020)

The authors give examples of how governments and international organisations, including WHO, have collectively failed to control the global spread of SARS-CoV-2, noting that this was “disappointing but predictable.” They argue that first and foremost public trust in governments must be restored and suggest the COVID-19 Assessment Scorecard (COVID-SCORE). It lists 19 statements that can be scored from 1 to 5 (from completely disagree to completely agree). The scorecard allows an easy assessment of COVID-19 response policies and, if used on a large scale, could be a guideline for future government actions.

In the coming weeks, the team is planning a first round of assessments with COVID-Score in at least seven countries around the world.

Source: [ISGlobal Barcelona Institute for Global Health](#)

Image credit: Lazarus et al. 2020

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