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Did Mumbai turn the tide on COVID19 thanks to its deep coffers (and some luck)?

May 24, 2021 Hepzi Anthony



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Mumbai's handling of the pandemic has earned accolades from several quarters, including [from India's Supreme Court](#), which suggested that New Delhi emulate Mumbai civic body's response to COVID19.

In the second wave of the pandemic, which in Mumbai [started on February 10 and showed up on its dashboard on Feb 11th](#), registered a mortality rate of 0.4% (until April 30).

BMC Commissioner Iqbal Chahal claims that this could be one of the lowest mortality rates in any city in the world.

Mumbai has registered 14,574 deaths till May 22, 2021 since the onset of the COVID19 last year. COVID19 fatalities in India for the same period is 2,95,525.

The 'Mumbai model' is unique largely thanks to its massive and wealthy municipality. "The BMC is a huge organization with 1.8 lakh people and a budget of about Rs 40,000 crores. Mumbai has an independent local body with a large pool of funds and so quick decision making is possible," said Rais Sheikh, leader of the Samajwadi Party in BMC

and legislator from Bhiwandi, a neighbouring town in the Mumbai Metropolitan Region.

Some activists say deeper work needs to be done to contain the virus in the city. Sandhya Fernandes, founder of non-profit SOS_Saviours pointed out that blackmarketing of drugs like Remdesivir and Tocilizumab continues and so does illegal hoarding by stockists. “The cases have waned and hence this talk of Mumbai model. But, lack of transparency and availability and distribution of vials and drugs raise questions about our preparedness. Yet another surge and we would be back to chasing vials yet again. Not much has changed on the ground,” said Fernandes.

But as India is blamed globally for its mismanagement of the pandemic, it is worth looking into how the country’s most populous city managed to pull COVID19 numbers down significantly.

How BMC did it

The Brihanmumbai Municipal Corporation (BMC) got dashboards to handle patient allotments in the 172 public hospitals including 80% of the beds of 132 private hospitals.

After collecting COVID19 test reports directly from labs (positive reports were first made available to the BMC. Later, the war room told the families and checked whether they had facilities for self isolation), BMC took over allotments of beds and monitored patients right through their recovery process.

Medical students/ interns manning war rooms allocated beds in the hospitals after a medical team visited the homes of symptomatic patients and assessed whether a patient needed to be allocated an ICU bed, an oxygen bed or could be allowed home quarantine.

The ambulances then arranged their transfers to the hospital. “We call this policy ‘Chase the patient ‘ policy. Right from chasing his chest report to hospital bed, everything BMC was doing,” said Chahal.

No centralised controls

Chahal disbanded centralised control rooms and instead set up decentralised war rooms at each of the 24 wards each equipped with 10 dashboards, 10 doctors, 10 ambulances, 10 teams of support staff working in three shifts co-ordinated by 10 telephone operators on 30 lines to handle calls at the local ward level.

About 1100 medical interns joined following a whatsapp appeal from Chahal to final year students of the state’s 65 medical colleges. About 800 SUVs were converted into makeshift ambulances by setting partitions between drivers and passengers within 7 days and coordinated with Uber dashboards.

Telephonic monitoring continued even after discharge and patients were monitored for post-recovery complications.



Jumbo COVID19 facilities

Each of the city's seven jumbo centers are essentially makeshift temporary hospitals set up on large grounds to handle excess patient load.

Each jumbo center has over 2000 bed capacity including oxygenated beds and ICUs. About 2000 beds were kept aside for walk-in patients or suspected COVID19 patients. Walk-in facility saved about 20,000 lives in Mumbai as they helped cope with the limited testing capacity in Mumbai, said Chahal.

National Joint Secretary of the Aam Aadmi Party Ruben Mascarenhas questions why the BMC failed to beef up its testing beyond the 30,000-odd tests per day.

The BMC sourced medical-grade oxygen from Reliance Industry Limited's Jamnagar unit. They also set up Independent Oxygen generation plants at every jumbo COVID19 facility.

The Aam Aadmi Party, which had set up a helpline to help people to get beds, oxygen and injections before the BMC did it, said that Mumbai managed the COVID "not because of the BMC but despite the BMC".

In the three weeks that they ran the helpline, Mascarenhas said they handled about 1000-odd calls per day. "Our healthcare system is broken, there is no concept of a primary healthcare center (PHC) on the ground. There was chaos on the ground and hospitals were refusing to take in patients needing high oxygen flow. Our basic

healthcare facility needs to be ramped up rather than just respond to situations in a knee-jerk manner,” he said.

Of the eight jumbo centers built, only one was dismantled. “Though we were down to less than 200 patients in December 2020 and just about three patients in January at our NESCO COVID19 center, we refused to dismantle them in preparation for the second wave,” claimed Chahal.

Currently, the BMC is setting up four more jumbo COVID19 centers in anticipation of a third wave expected in September. “Of all aspects of handling the pandemic, be it the management of hospitals, citizens, medicines or of vaccine management, the only place BMC scored very well was in hospital management,” said Shishir Joshi, CEO and founder of Project Mumbai. “Apart from the lockdown which has been effective, there is a huge luck factor that worked in Mumbai,” he added.

Replicating the ‘Mumbai model’

The question now is can the ‘Mumbai model’ be replicated?

Even neighbouring cities within Maharashtra or even within the Mumbai Metropolitan Region (MMR) have failed to replicate it.

Rais Sheikh’s constituency of Bhiwandi, on the periphery of Mumbai, often experiences paucity of funds and is dependent on the state government for its funding and decisions. “Unlike Mumbai, smaller towns function differently. Procuring of oxygen for instance could be done independently by Mumbai but here we are dependent on the collector. These are smaller cities and need independent micro plans,” adds Sheikh.

Not just smaller towns, even other larger cities might not be able to replicate the model.

Nitai Mehta, Managing Trustee of Praja Foundation said comparing Mumbai to Delhi is unfair as the national capital has complex governance structures. “Delhi is a nightmare as far as governance is concerned. Every service is controlled by different agencies. In this quagmire everyone passes the buck and is a mess even in normal times. Mumbai has a strong administrative system, has a strong private healthcare infrastructure and is independent of the state. In comparison with places like Delhi or even Bangalore the BMC is the best among the worst,” he said.

In his opinion, the ‘Mumbai model’ can be replicated only if there is an infrastructure in place and free hand is given to the right people.

“It’s too early to start getting positive about the Mumbai model,” said Ruben.

Link:- <https://mumbai.citizenmatters.in/did-mumbai-turn-the-tide-on-covid19-thanks-to-its-deep-coffers-and-some-luck-24204>