

राजस्थान सरकार
चिकित्सा एवं स्वास्थ्य (गुप-2) विभाग

क्रमांक: प.1(1)चिस्वा/गुप-2/2020

जयपुर, दिनांक : 22.05.2020

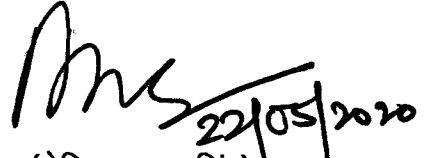
आदेश

विश्व स्वास्थ्य संगठन तथा संयुक्त राष्ट्र द्वारा कोरोना वायरस (कोविड-19) संक्रमण को Pandemic घोषित करने तथा कोरोना वायरस (कोविड-19) संक्रमण से बचाव, रोकथाम हेतु तथा आमजन को आवश्यक चिकित्सा सुविधा उपलब्ध कराने के संबंध में व्यापक लोकहित में राज्य सरकार द्वारा सभी सम्भव प्रयास किये जा रहे हैं। कोरोना वायरस संक्रमण (कोविड-19) से उत्पन्न इस विषम परिस्थिति में राज्य में स्थित निजी चिकित्सालय/क्लीनिक/नर्सिंग होम आदि कोरोना संक्रमण से बचाव, रोकथाम, आमजन को आवश्यक चिकित्सा सुविधाएं उपलब्ध कराने व राजकीय चिकित्सा संस्थानों में मरीजों की संख्या कम करने की अति महत्वपूर्ण कड़ी है तथा वर्तमान परिपेक्ष्य में इनकी निर्णायक व महत्ती भूमिका है। राज्य में संचालित कई निजी चिकित्सालय इस विषम परिस्थिति में व्यापक लोक हित में आमजन के प्रति अपने नैतिक व व्यावसायिक दायित्वों का निर्वहन कर रहे हैं।

राज्य सरकार के संज्ञान में आया है कि कुछ गैर कोविड-19 चिकित्सा संस्थानों में भर्ती मरीजों व हेल्थ केयर वर्कर के कोविड-19 पॉजिटिव पाए जाने पर निजी चिकित्सा संस्थानों के संचालकों में चिकित्सा संस्थान बंद किये जाने की निरर्थक आशंका बनी हुई है।


अतः इस क्रम में NON-COVID निजी चिकित्सा संस्थानों के संचालकों की उक्त आशंका को देखते हुए विभाग के समसंख्यक आदेश दिनांक 30.04.2020 एवं दिनांक 11.05.2020 की निरन्तरता में स्पष्ट किया जाता है कि गैर कोविड-19 (non-covid) चिकित्सा संस्थानों (निजी एवं राजकीय) में संदिग्ध/कोविड-19 पॉजिटिव मरीज पाए जाने पर इस संबंध में भारत सरकार द्वारा जारी दिशा-निर्देश (संलग्न) (Guidelines to be followed on detection of suspect/confirmed covid-19 case in non-covid health facility) के अनुरूप कार्यवाही किया जाना सुनिश्चित किया जावे।

संलग्न-उपरोक्तानुसार


(रोहित कुमार सिंह)
अतिरिक्त मुख्य सचिव

प्रतिलिपि निम्न को सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित है:-

1. निजी सचिव, मा. मुख्यमंत्री महोदय।
2. विशिष्ट सहायक, मा. चिकित्सा मंत्री महोदय/मा. चिकित्सा राज्य मंत्री महोदय
3. निजी सचिव, मा. मुख्य सचिव महोदय।
4. निजी सचिव, अतिरिक्त मुख्य सचिव, गृह विभाग।
5. निजी सचिव, अतिरिक्त मुख्य सचिव, चिकित्सा एवं स्वास्थ्य विभाग।
6. निजी सचिव, शासन सचिव, चिकित्सा शिक्षा विभाग।
7. समस्त जिला कलक्टर, राज.
8. समस्त प्रधानाचार्य एवं नियंत्रक, मेडिकल कॉलेज, राज.
9. समस्त निदेशक चिकित्सा एवं स्वास्थ्य सेवाये राज. जयपुर
10. समस्त संयुक्त निदेशक, चिकित्सा एवं स्वास्थ्य सेवाएँ, जोन राज.
11. समस्त प्रमुख चिकित्सा अधिकारी, राज./समस्त मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी, राज.


(संजय कुमार)
शासन उप सचिव

18th May, 2020

**Government of India
Ministry of Health & Family Welfare
Directorate General of Health Services
(EMR Division)**

Guidelines on preventive measures to contain spread of COVID-19 in workplace settings

1. Background

Offices and other workplaces are relatively close setting, with shared spaces like (corridors, elevators & stairs, parking places, cafeteria, meeting rooms and conference halls etc.) and thus COVID-19 infection can spread relatively fast among officials, staffs and visitors.

Thus there is a need to prevent importation of infection in workplace settings and to respond in a timely and effective manner in case suspect case of COVID-19 is detected in these settings, so as to limit the spread of infection.

2. Scope

This document outlines the preventive and response measures to be observed to contain the spread of COVID-19 in workplace settings. The document is divided into the following sub-sections

- (i) basic preventive measures to be followed at all times
- (ii) measures specific to offices
- (iii) measures to be taken on occurrence of case(s)
- (iv) disinfection procedures to be implemented in case of occurrence of suspect/confirmed case.

3. Basic preventive measures

The basic preventive measures include simple public health measures that are to be followed to reduce the risk of infection with COVID-19. These measures need to be observed by all (employees and visitors) at all times. These include:

- i. Physical distancing of at least one meter to be followed at all times.
- ii. Use of face covers/masks to be mandatory.
- iii. Practice frequent hand washing (for at least 40-60 seconds) even when hands are not visibly dirty and use of alcohol based hand sanitizers (for at least 20 seconds).
- iv. Respiratory etiquettes to be strictly followed. This involves strict practice of covering one's mouth and nose while coughing/sneezing with a tissue/handkerchief/flexed elbow and disposing off used tissues properly.
- v. Self-monitoring of health by all and reporting any illness at the earliest

4. Preventive measures for offices:

Guidelines with respect to preventive measures specific to offices have been issued by DoPT. These guidelines are available at:

<https://www.mohfw.gov.in/pdf/PreventivemeasuresDOPT.pdf>.

Any staff reportedly suffering from flu-like illness should not attend office and seek medical advice from local health authorities [e.g. CGHS wellness center, medical attendance under CS (MA) etc.]. Such persons, if diagnosed as a suspect/confirmed case of COVID-19 should immediately inform the office authorities.

Any staff requesting home quarantine based on the containment zone activities in their residential areas should be permitted to work from home.

DoPT guidelines with respect to organizing meetings, coordinating visitors shall be scrupulously followed.

5. Measures to be taken on occurrence of case(s):

Despite taking the above measures, the occurrence of cases among the employees working in the office cannot be ruled out. The following measures will be taken in such circumstances:

5.1. When one or few person(s) who share a room/close office space is/are found to be suffering from symptoms suggestive of COVID-19:

5.1.1. Place the ill person in a room or area where they are isolated from others at the workplace. Provide a mask/face cover till such time he/she is examined by a doctor.

5.1.2. Report to concerned central/state health authorities. Helpline 1075 will be immediately informed.

5.1.3. A risk assessment will be undertaken by the designated public health authority (district RRT/treating physician) and accordingly further advice shall be made regarding management of case, his/her contacts and need for disinfection.

5.1.4. The suspect case if reporting very mild / mild symptoms on assessment by the health authorities would be placed under home isolation, subject to fulfilment of criteria laid down in MoHFW guidelines (available at: <https://www.mohfw.gov.in/pdf/RevisedguidelinesforHomeIsolationofverymildpresymptomaticCOVID19cases10May2020.pdf>)

5.1.5. Suspect case, if assessed by health authorities as moderate to severe, he/she will follow guidelines at:

<https://www.mohfw.gov.in/pdf/FinalGuidanceonMangaementofCovidcasesversion2.pdf>.

5.1.6. The rapid response team of the concerned district shall be requisitioned and will undertake the listing of contacts.

5.1.7. The necessary actions for contact tracing and disinfection of work place will start once the report of the patient is received as positive. The report will be expedited for this purpose.

5.2. If there are large numbers of contacts from a pre-symptomatic/asymptomatic case, there could be a possibility of a cluster emerging in workplace setting. Due to the close environment in workplace settings this could even be a large cluster (>15 cases). The essential principles of risk assessment, isolation, and quarantine of contacts, case referral and management will remain the same. However, the scale of arrangements will be higher.

5.3. Management of contacts:

The contacts will be categorised into high and low risk contacts by the District RRT as detailed in the **Annexure I**.

The high risk exposure contacts shall be quarantined for 14 days. They will follow the guidelines on home quarantine (available on:

<https://www.mohfw.gov.in/pdf/Guidelinesforhomequarantine.pdf>).

These persons shall undergo testing as per ICMR protocol (available at: <https://www.mohfw.gov.in/pdf/Revisedtestingguidelines.pdf>).

The low risk exposure contacts shall continue to work and closely monitor their health for next 14 days.

6. Closure of workplace

If there are one or two cases reported, the disinfection procedure will be limited to places/areas visited by the patient in past 48 hrs. **There is no need to close the entire office building/halt work in other areas of the office** and work can be resumed after disinfection as per laid down protocol (see para 7).

However, if there is a larger outbreak, the entire building will have to be closed for 48 hours after thorough disinfection. All the staff will work from home, till the building is adequately disinfected and is declared fit for re-occupation.

7. Disinfection Procedures in Offices

Detailed guidelines on the disinfection procedures in offices have already been issued by the MOHFW and are available on:

<https://www.mohfw.gov.in/pdf/Guidelinesondisinfectionofcommonpublicplacesincludingoffices.pdf>.

Risk profiling of contacts

Contacts are persons who have been exposed to a confirmed case anytime between 2 days prior to onset of symptoms (in the positive case) and the date of isolation (or maximum 14 days after the symptom onset in the case).

High-risk contact

- Touched body fluids of the patient (respiratory tract secretions, blood, vomit, saliva, urine, faeces; e.g. being coughed on, touching used paper tissues with a bare hand)
- Had direct physical contact with the body of the patient including physical examination without PPE
- Touched or cleaned the linens, clothes, or dishes of the patient.
- Lives in the same household as the patient.
- Anyone in close proximity (within 1 meter) of the confirmed case without precautions.
- Passengers in close proximity (within 1 meter) in a conveyance with a symptomatic person who later tested positive for COVID-19 for more than 6 hours.

Low-risk contact

- Shared the same space (worked in same room/similar) but not having a high-risk exposure to confirmed case of COVID-19.
- Travelled in same environment (bus/train/flight/any mode of transit) but not having a high-risk exposure.

Figure 1: Management of the case(s) and contacts

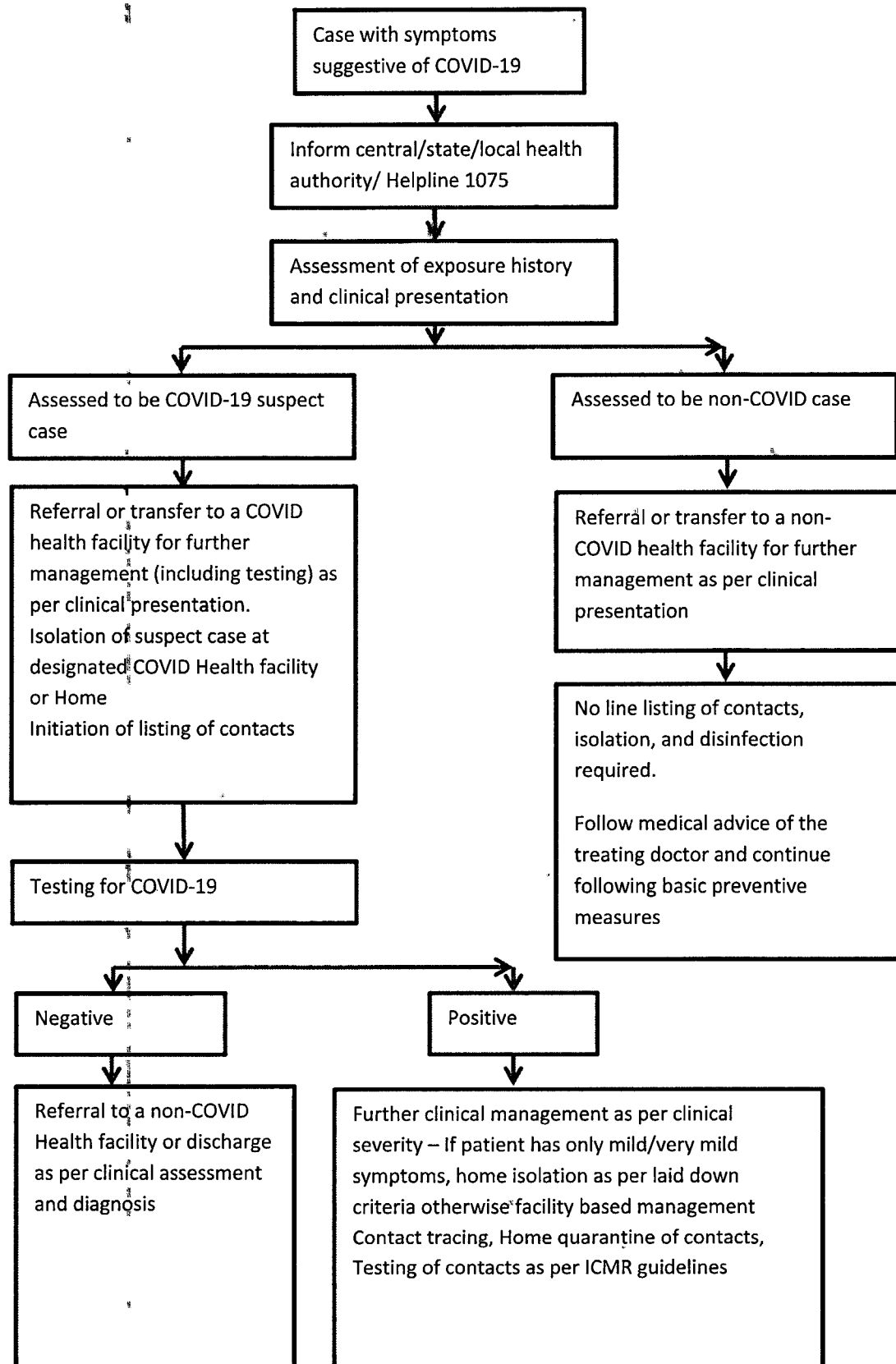


Fig-2: Disinfection of workplace

