

भारत सरकार(GOVERNMENT OF INDIA)
रेल मंत्रालय(MINISTRY OF RAILWAYS)
रेलवे बोर्ड (RAILWAY BOARD)

CIRCULAR

Sub: Implementation Framework for community Containment/Large containment areas for COVID-19 in the Country.

Ref: MHA's Order No. 40-3/2020-DM-I(A) dt. 29.04.2021 circulated vide Railway Board's Circular No. 2020/G(Acc.)/Maint/Misc./COVID-19 Dt. 30.04.2021.

A copy of Order No. 40-3/2020-DM-I(A), dated 27.05.2021 issued by the Ministry of Home Affairs on the above mentioned subject is enclosed herewith for information and strict compliance.

No.2020/G(Acc.)/Maint/Misc./COVID-19
New Delhi, dated 28.05.2021



(B. MAJUMDAR)
Joint Secretary
Railway Board

All officers and staff of Board's Office at Rail Bhawan, Dayabasti and National Rail Museum, New Delhi.

Copy to :-

1. Registrar, CRIS, Chankyapuri, New Delhi.
2. Vice Chairman, RLDA, New Delhi.

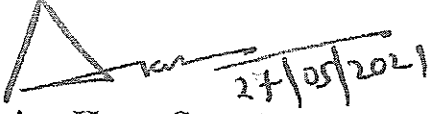
No. 40-3/2020-DM-I(A)
Government of India
Ministry of Home Affairs

North Block, New Delhi-110001

Dated 27th May, 2021

ORDER

In exercise of the powers, conferred under Section 10(2)(1) of the Disaster Management Act 2005, the undersigned hereby directs that Ministry of Home Affairs' Order of even number dated 29th April 2021, to ensure compliance to the containment measures for COVID-19, as conveyed vide Ministry of Health & Family Welfare (MoHFW) DO No. Z.28015/85/2021-DM Cell dated 25th April 2021, will remain in force upto 30th June 2021.


Union Home Secretary

and, Chairman, National Executive Committee (NEC)

To:

1. The Secretaries of Ministries/ Departments of Government of India
2. The Chief Secretaries/Administrators of States/Union Territories
(As per list attached)

Copy to:

- i. All Members of the National Executive Committee
- ii. Member Secretary, National Disaster Management Authority

भारत सरकार(GOVERNMENT OF INDIA)

रेल मंत्रालय(MINISTRY OF RAILWAYS)

रेलवे बोर्ड (RAILWAY BOARD)

CIRCULAR

**Sub : Implementation Framework for community containment/Large
containment areas for COVID-19 in the Country.**

A copy of Order No. 40-3/2020-DM-I(A), dated 29.04.2021 issued by the Ministry of Home Affairs in reference of Ministry of Health & Family Welfare(MoHFW) vide D.O.No. Z.28015/85/2021-DM Cell, dated 25th April 2021 on the above mentioned subject is enclosed herewith for information and strict compliance.

No.2020/G(Acc.)/Maint/Misc./COVID-19
New Delhi, dated 30.04.2021



**(T. SRINIVAS)
Director (GA)
Railway Board**

All officers and staff of Board's Office at Rail Bhawan, Dayabasti and National Rail Museum, New Delhi.

Copy to :-

1. Registrar, CRIS, Chankyapuri, New Delhi.
2. Vice Chairman, RLDA, New Delhi.

No. 40-3/2020-DM-I(A)
Government of India
Ministry of Home Affairs

North Block, New Delhi-110001
Dated 29th April, 2021

ORDER


Whereas, an Order of even number dated 23.03.2021 was issued for effective control of COVID-19 in the country, for a period upto 30.04.2021;

And whereas, considering the unprecedented surge in COVID-19 cases across the country, Ministry of Health & Family Welfare (MoHFW) vide DO No. Z.28015/85/2021-DM Cell dated 25th April 2021, has issued an advisory to all States and Union Territories (UTs), for implementing intensive, local and focused containment framework, in specific districts/ cities/ areas, identified based on a prescribed criterion:

Whereas, in exercise of the powers under section 6(2)(i) of the Disaster Management Act, 2005, National Disaster Management Authority (NDMA) has directed the undersigned to issue an order, for ensuring compliance on the focused containment measures, as mentioned in the aforesaid MoHFW letter dated 25.04.2021, for containment of COVID-19 in the country;

Now, therefore, in exercise of the powers, conferred under Section 10(2)(l) of the Disaster Management Act 2005, the undersigned, hereby directs the State/ Union Territory Governments and State/ Union Territory Authorities to consider the containment measures for COVID-19, as conveyed vide aforesaid MoHFW advisory dated 25.04.2021, as per Annexure-I, for immediate implementation in their State/ UT, based on the assessment of the situation, until 31.05.2021. States/ UTs, will take the necessary containment measures, under the relevant provisions of the Disaster Management Act 2005, it is further directed that:

- (i) The National Directives for COVID-19 Management, as specified in Annexure-II, shall continue to be strictly followed throughout the country.
- (ii) All the District Magistrates shall strictly enforce the containment measures taken by States/ UTs and the National Directives.
- (iii) Any person violating these measures will be liable to be proceeded against under the provisions of Section 51 to 60 of the Disaster Management Act, 2005, and legal action under Section 188 of the IPC, and other relevant provisions of law.



Joint Secretary, Ministry of Home Affairs

To:

1. The Secretaries of Ministries/ Departments of Government of India.
2. The Chief Secretaries of all States/ Union Territories.
(As per list attached)

Copy to:

1. All Members of the National Executive Council.
2. Member Secretary, National Disaster Management Authority.

5. The areas requiring Intensive action and local containment connotes specific and well defined geographical units such as cities/town/part of the towns/district headquarters/semi-urban localities/municipal wards/*panchayat areas* etc.
6. The areas so identified for intensive action and local containment will primarily focus on the following strategic areas of intervention.

A. Containment

- i. Focus will be on containment as a major approach to flatten the current curve of the epidemic
- ii. Night curfew: Movement of individuals shall be strictly prohibited during night hours, except for essential activities. Local administration shall decide the duration of the night curfew hours and issue orders, in the entire area of their jurisdiction, under appropriate provisions of law, such as under Section 144 of CrPC, and ensure strict compliance.
- iii. The spread of the infection has to be controlled through restricting the intermingling amongst people, the only known host for the COVID-19 virus.
- iv. Social/ political / sports / entertainment / academic / cultural / religious / festival-related and other gathering and congregations shall be prohibited.
- v. Marriages (attended by up to 50 persons) and funerals/ last rites (attended by up to 20 persons) may be allowed.
- vi. All shopping complexes, cinema halls, restaurants & bars, sports complexes, gym, spas, swimming pool and religious places should remain closed.
- vii. Essential services and activities such as healthcare services, police, fire, banks, electricity, water and sanitation, regulated movement of public transport including all incidental services and activities needed for a normal functioning of these activities shall continue. Such services shall continue in both public and private sector.
- viii. Public transport (railways, metros, buses, cabs) to operate at a maximum capacity of 50%.
- ix. There shall be no restrictions on inter-state and intra-state movement, including transportation of essential goods.
- x. All offices, both government and private, to function with a maximum capacity strength of 50%.
- xi. All industrial and scientific establishments (except those which are essential) may be allowed subject to the workforce being limited to 50% of the normal. They shall also be allowed through only one entry and exit point (with in-date symptoms) from time to time.
- xii. The SOPs already issued by MoHFW, including SOPs for surveillance teams and supervisors are applicable in the areas where they are followed.
- xiii. However, these are indicative activities, and the local administration should do a careful analysis of the local situation, areas to be avoided, modes of transmission and then take a decision.

- xiv. The restrictions as above shall continue for a period of 14 days.
- xv. Before declaring a containment area, make a public announcement, outlining the rationale for the same and the kind of restrictions that will be in place (a leaflet in local language may be distributed highlighting the gravity of the situation and restrictions to be followed)
- xvi. Community volunteers, civil society organizations, ex- servicemen, and members of the local NYK/NSS centers etc. should be involved for sustainable management of containment activities, translating the aforementioned leaflets and for encouraging people in the community for sustained behavior change as well as vaccination.

B. Testing and Surveillance

Districts will continue with the strategy of 'Test-Track-Treat-Vaccinate' and implementation of Covid Appropriate Behavior across the district as the ongoing strategy for the management of COVID-19.

- i. Ensure adequate testing and door to door case search in the area through adequate number of teams formed for such purpose.
- ii. Plan for testing of all clinically resembling cases of Influenza like illness (ILI) & SARI through RAT. All symptomatic individuals turning out to be negative for SARS-CoV-2 infection with RAT need to be retested through RT-PCR.
- iii. Ensuring compliance of COVID Appropriate Behaviour aggressively through creation of awareness through involvement of the community based organizations and through stringent regulatory framework

C. Clinical Management

- i. Analysis to be undertaken with respect to health care infrastructure so as to manage the present surge (up to 1000 cases per month) and necessary action initiated to ensure availability of beds, ICU beds, ventilators, ambulances, etc. in all health care facilities/hospitals, as needed. Sufficient quarantine facilities to be set up.
- ii. Leverage government, private health care facilities, etc. wherever available with central ministries, states, health departments, etc. hospitals etc.
- iii. Ensure that people staying at home get adequate support and care under home isolation. Provide a support system for such people through Call Centres along with regular home visits, etc. from health workers.
- iv. Provision of a customized list of all health care facilities, including detailed list and details of all health care facilities.
- v. Specific monitoring must be established for all health care facilities reporting to the health department. Regular audits and inspections must be conducted. Cases shall be notified to health department through call centres.

- vi. Appoint senior district officials as In-charge for all Covid dedicated hospitals and create a mechanism for seamless shifting of patients (including home isolation cases) as per their symptom to the relevant facilities.
- vii. Ensure availability of sufficient ambulances for such purpose.
- viii. Coordinate availability of oxygen, other related logistics, drugs etc. in collaboration with state officials and ensure their rational use.
- ix. Oxygen therapy for the admitted cases shall follow the guidelines issued by Ministry of Health on the rational use of oxygen
- x. Use of investigative drugs (Remdesivir / Tocilizumab etc.) shall also strictly follow the clinical management protocol/advisories issued by Ministry of Health.
- xi. Facility wise cases and deaths shall be analyzed on daily basis by the Incident Commander/District Collector/Municipal Commissioner. Death-audit shall be undertaken for all deaths in the hospitals and in the community to provide supportive supervision to field staff/hospitals.

D. Vaccination

100% vaccination for the eligible age-groups shall be undertaken duly creating additional vaccination centres and optimal capacity utilization of existing Centres.

E. Community Engagement

- i. Ensure adequate advance information to community, also highlighting the need for stringent containment actions so as to win their involvement and support.
- ii. Provide enough time for people movement for essential requirements etc. before announcing the large scale containment
- iii. Take necessary actions to avoid misinformation & panic in the community.
- iv. Involve local level NGOs/CBOs/CSOs, Opinion Makers and subject experts to create a positive environment and for sustained dialogue with the community.
- v. Create wide publicity on early warning signals and self-reporting, identify cases early and to prevent avoidable deaths among asymptomatic patients.
- vi. Give wide publicity on the mechanism of early warning signals, early detection, details of available health services, patient care, community based organizations available for support, and dissemination of information on prevention and care services to the community.
- vii. Ensure that details of hospital capacities, oxygen availability, and other available facilities are also released to the community.
- viii. Details on availability of oxygen, drugs, and other related facilities, including the procedure related to the availability of these facilities, shall be disseminated to the community.

- ix. Community should be oriented about the feasibility of managing mild COVID-19 cases at home with appropriate monitoring of vital parameters such as temperature and oxygen saturation with the help of pulse oxymeter.
- x. **Need for COVID Appropriate Behaviour** including regulatory framework for enforcement should be widely publicized.
- xi. **Build confidence** in community duly highlighting the nature of disease, the fact that early identification helps in early recovery and more than 98% people recover to remove fear as well as stigma related with Covid-19. Involvement of civil society organizations to hold such orientations go a long way in this regard.

ANNEXURE-I

Containment framework, as mentioned in Ministry of Health & Family Welfare (MoHFW), DO no. Z.28015/85/2021-DM Cell dated 25th April 2021

Annexure – A

Implementation Framework for community containment/large containment areas

Understanding the virus transmission dynamics:

The virus transmits through the human host. It is imperative to understand that in order to contain the transmission of the virus, the strategies involve not just containing the virus but also the human host.

Broadly, the strategies are:

1. Individual actions such as wearing of masks, maintaining a distance of 6 feet from others, sanitizing one's hands frequently and not attending any mass gathering; and

2. Public Health measures to contain the virus by:

- quarantining and testing individuals suspected to be positive including contacts of SARS-CoV-2 positive persons, SARI cases, persons with flu like symptoms etc. and ensuring that they are not mobile and thus able to spread the infection
- isolating all those who are positive, tracing their contacts, quarantining and testing them.
- where there are clusters of cases, simply quarantining individuals or families will not help. In that case, containment zones with clear boundaries and stringent controls will be required to ensure that the infection does not spread outside. This is in line with the containment strategy followed worldwide and also already incorporated in SOPs of the Ministry of Health. This would mean a large geographical area, such as a city or district or well defined parts thereof, where cases are high and identified and gets contained physically, moreover, regulated movement of public for essential needs will be permitted.

3. Evidence Based Containment procedures in these and other large gatherings, including those in Zone (CZ) has to be reviewed and modified as per the latest evidence and the nature of the situation, such as the population, factors like geographical spread, the type of infrastructure, transportation, the mode of entering and leaving etc.

4. However, in order to be able to contain the virus, it is imperative to have a clear strategy, making the containment zones and other measures, such as the use of masks, etc. of the Ministry of Health.

Containment Zone	Paradigm	Intervention
1. Zone (CZ)	Individuals	Quarantine, Isolation, Testing, Contact Tracing, Masking, Hand Hygiene, etc.
2. Zone (CZ)	Individuals	Quarantine, Isolation, Testing, Contact Tracing, Masking, Hand Hygiene, etc.
3. Zone (CZ)	Individuals	Quarantine, Isolation, Testing, Contact Tracing, Masking, Hand Hygiene, etc.
4. Zone (CZ)	Individuals	Quarantine, Isolation, Testing, Contact Tracing, Masking, Hand Hygiene, etc.

NATIONAL DIRECTIVES FOR COVID-19 MANAGEMENT

1. **Face coverings:** Wearing of face cover is compulsory in public places; in workplaces; and during transport.
2. **Social distancing:** Individuals must maintain a minimum distance of 6 feet (2 gaz ki doori) in public places.
Shops will ensure physical distancing among customers.
3. **Spitting in public places** will be punishable with fine, as may be prescribed by the State/ UT local authority in accordance with its laws, rules or regulations.

Additional directives for Work Places

4. **Work from home (WFH):** As far as possible the practice of WFH should be followed.
5. **Staggering of work/ business hours** will be followed in offices, work places, shops, markets and industrial & commercial establishments.
6. **Screening & hygiene:** Provision for thermal scanning, hand wash or sanitizer will be made at all entry points and of hand wash or sanitizer at exit points and common areas.
7. **Frequent sanitization** of entire workplace, common facilities and all points which come into human contact e.g. door handles etc., will be ensured, including between shifts.
8. **Social distancing:** All persons in charge of work places will ensure adequate distance between workers and other staff.
