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COMMISSIONERATE

**Health & Family Welfare and Ayush Services**

NO. JRO(1A)/148/2019-20

Date: 05/02/2020

**Circular**

Sub: TOR for district level teams for 2019 nCoV (novel Corona Virus)  
Preparedness Dated: 5-2-2020

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WHO has declared the recent 2019-nCoV epidemic affecting 24 countries as Public Health Emergency of International Concern (PHEIC). In view of this unprecedented event, preventive and promotive strategies should be implemented and made functional for prevention of spread of disease in the community. Activation will involve partial or full staffing at district level depending on the support that is required for managing the situation. Staff assigned to the nCorona Virus Outbreak Control and Prevention at District level will follow job activity sheets and standard operating procedures. The respective committees / units are to be constituted for the proper management of various administrative and complementary aspects related to nCorona virus preparedness. The officers in the districts shall follow these guidelines for constitution of teams and start functioning in concurrence with the TOR

- The respective Committee may co-opt / include the persons necessary for compiling the reports and supporting the districts according to the needs.
- They shall ensure that the specific activities are conducted, data collated and presented in a specific format.
- All Committees and members shall connect and work with their district level teams and compile the activities, so as to prepare the report of the activities in the evening meeting.
- The collated district report should be sent by District Health & Family Welfare officer to the state control team by 6.00pm daily
- All Committees shall ensure to be present in daily meeting chaired by DHO at 6 pm at the district / wherever suggested by authorities
- The following teams should work independently with their teams according to the following TOR.

**DISTRICT LEVEL nCORONA VIRUS CONTROL - TEAMS**

1. Surveillance and contact tracing teams
2. HR management
3. Training and awareness generation
4. Material management team
5. Infrastructure (isolation ward and facilities) management team including Private hospital surveillance
6. Media Surveillance and monitoring including IEC/BC.

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## ACTIVITIES OF VARIOUS TEAMS

### 1. Surveillance and contact tracing teams

#### A) Hospital surveillance

- The condition of the Symptomatic patients admitted at isolation wards of hospitals should be closely scrutinized and reports should be updated to surveillance team
- Compilation and Analysis of daily reports

#### B) Community surveillance

- Those patients discharged from hospitals will be monitored by field workers in their corresponding PHC area
- The asymptomatic travelers/ contacts in home isolation will also be monitored for 28 days by field workers and reports will be sent to the DSO daily

#### C) Lab surveillance

- The DSO and District nodal officers entrusted for sample collection will inform to the lab surveillance team before sample collection
- Sample/Lab requisition forms will be scrutinized before sending to National Institute of Virology Unit Bengaluru
- All criteria has to be followed as per case definition for sample collection.

#### D) Other key responsibilities

- Support and supervise Surveillance activities at district level
- Contact tracing of cases as notified from state
- Establishing support system with SMO (WHO), mechanism for strengthening IDSP disease surveillance system
- Detailed data monitoring at IDSP district surveillance unit.
- Identifying areas for inter-sectoral action & steps for the same.

### 2. HR management

- a) The team should have a thorough knowledge of all HR distribution in the district
- b) The team should also communicate with the district regarding the optimum redistribution of staff if any required according to the needs.
- c) HR details of the isolation facilities should be managed and timely/immediate decisions if necessary should be taken
- d) The HR data of isolation facilities/nodal centres should be compiled on daily basis and ensure there is no shortage in any category.
- e) Human resource management mostly happens at the district level but at any point if district needs any additional support, the needs can be communicated to state.

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### **3. Training and awareness generation**


District should train all the cadres/ officials timely and the data should be compiled at the district level. District team has the responsibility for preparing the training materials in addition to those prepared by state according to the daily needs being discussed in the daily district review meetings. These training materials should be vetted by group of experts and should be disseminated to all concerned (districts, agencies, groups, IMA, IAP etc). District team should ensure the availability of training materials developed by the state team

- i) Identify the segments/staff in Government and Private sector:
  - Orientation of all government medical officers can be planned at the district and field workers at taluka level
  - District level orientation of private practitioners should be planned in co-ordination with IMA/IAP/PHANA
- ii) Dissemination of the prepared technical guidelines shared from state and IEC materials including audio visual aids/training materials to health workers/volunteers/public/media
- iii) Dissemination of FAQ'S and its answers

### **4. Logistic management team**

- a) Material management should be done at the institution level using all possible Resources; however there might be higher degree of needs arising in certain situations. The Needs and activities should be compiled in the districts and coordinated with state.
- b) Triple packaging boxes, Viral transport media, sharp container boxes, gloves, surgical masks, N95 masks, face shield, protective goggles, Gowns, soaps, hand drying tissue, hypochlorite solution, oxygen concentrators, flow splitter, oxygen prongs, oxygen tubes, pulse-oxymeter, laryngoscope, stainless steel depresors, endotracheal tube, alcohol based hand-rub, biohazard bag, body bag, safety box, etc.

#### **The primary responsibilities of logistic management team are:**

- i) Prepare the list of items required at the Hospital for providing health care
  - ii) Monitor inventory position institutions wise
  - iii) Ensure supply chain management of health care and other items requirement
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**5. Infrastructure (isolation ward and facilities) management team**

- i. Identify isolation place in each district for at least for 5 patients
- ii. Ensure all the required things in the isolation ward of these facilities
- iii. Set up dedicated team in each district
- iv. Train the dedicated team and other health functionaries
- v. Ensure strict protocol of infection control is followed in district
- vi. Ensure and compile referral of contacts from field/ 104 call centers to isolation facilities in the district (Annexure enclosed)

**6. Media Surveillance team including IEC/BCC**

- i. Print, visual and social media surveillance with the support of State and District team.
- ii. Collection of information regarding media articles circulated in local media and addressing the needs by bridging the gaps after validating the information
- iii. Validating the information collected from the media for forecasting potential negative outcomes and execute timely preventive and control measures.
- iv. Reply queries to the general public regarding health related events and information through phone numbers circulated at the district level.
- v. District level compilation of media surveillance data should also happen timely

**IEC/BCC and Media Management**

- i. Preparation of local level IEC materials related to the preventive and promotive activities to be done at the field level for the management of 2019-nCov disease spread, decrease the anxiety of general public and to disseminate factual information regarding the disease
- ii. Dissemination of same in PRO, TV channels, AIR, social media etc
- iii. Preparation of daily reports for media (if required)
- iv. Arrangements of press conferences as per direction
- v. DC/DHO should only brief the medicine

This information will be updated as and when situation demands

  
Commissioner

Department of Health & FW Services.

**Copy to**

All District Health Officer/District Surveillance Officers for Necessary Action

**Copy for Kind information**

Additional Chief Secretary of Health & Family Welfare Dept Karnataka