

Government of West Bengal
Health and Family Welfare Department

Memo No. 181-Secy(H&FW)

Dated 15-06-2020

NOTIFICATION

Subject: Satellite Health Facility for Asymptomatic/Mild COVID 19 Cases

In order to effectively combat COVID-19, it is felt necessary that the bed capacities of existing hospitals should be continuously augmented. State government has already started 77 designated COVID hospitals across the state with 10317 beds. Hospitals in the private sector are also providing healthcare to COVID-19 patients.

As per the current health protocol for management of COVID-19 cases, asymptomatic and mild symptomatic COVID positive patients can be kept in home isolation on advice of medical officer after obtaining written declaration from the patients. Many such positive persons especially old and with co-morbid conditions, require hospital care instead of home isolation. Health & Family Welfare Department, GoWB has already issued separate guidelines regarding management at Safe Homes for treatment of asymptomatic/mild symptomatic cases.

Whereas many private hospitals have expressed their interest in running separate health facilities in private establishments in close vicinity of their existing hospitals for asymptomatic/mild symptomatic patients.

In the backdrop of such immediate necessities and under the provisions of The West Bengal Epidemic Disease COVID-19 Regulations 2020, this interim arrangement is allowed for three months subject to the provisions of The West Bengal Clinical Establishments (Registration, Regulation and Transparency) Act, 2017 and The West Bengal Clinical Establishments (Registration, Regulation and Transparency) Rules, 2017. Such **Satellite Facility** will be designated as "**Observation Ward**" of attached hospital. Regular medical check up of persons staying in these satellite facilities shall be done on daily basis by concerned hospital authorities as per existing guidelines of treatment of COVID 19 patients. The overall responsibility of treatment of these patients shall lie on the concerned hospital authorities and they shall ensure that all the treatment protocols of COVID 19 patients are properly observed.

Interested hospitals shall apply to the concerned licensing authorities in the prescribed format. Only room rent & other incidentals including consultation charges of doctors and other nursing charges can be collected by the hospitals from the patients kept in such facilities.



FORMAT: A

Application for Satellite Health Facility

Dated:

1. Name of the Hospital:
2. Address:

3. CE License No:
4. Date of Validity of License:

No of beds Sanctioned as per CE License	No of Beds functional at present as on 01.06.2020	No of beds occupied on the date of application	No of CCU Beds	No of Ventilators	No of Beds For COVID-19 Positive cases	No of CCU beds for COVID-19 Positives	No of Ventilators for COVID-19 Positives

5. Name of the Satellite Health facility :
6. Address:

7. Distance from Hospital:
8. Trade License No :
9. Agreement or MOU with Nodal Health Facility:
10. Room for Doctors/ Nurses(Examination Room):

No of beds for Satellite Health Facility	Separate entry/exit (if only part declared as SHF)	Availability of adequate or separate toilet/ washrooms	Availability of Kitchen/ Facility for meal supply	Separate Biomedical waste management with Nodal Health Facility	Availability of Transport Ventilator/BIPAP/ Oxygen Cylinders	Availability of Stand by Ambulance (24*&7)	Availability of Doctors & Nurses (24*7) as per specification	Availability of Separate Laundry Services

FORMAT: A

Declaration: This facility will not be used for profiteering purpose. Only the room rent, incidental charges of the facility, doctors consultation and nursing charges will be charged from the Patients. Medical Certificate along with consent of the patient will also be taken while admitting them in SHF.

Any deviation from the SOP for management of COVID-19 will be liable to cancellation of CE license as the case may be according to **West Bengal Clinical Establishment (Registration, Regulation and Transparency) Act & Rules 2017**

Signature of the Applicant