



Tel: +9180-2287 4039  
+9180-2235 4085  
Fax : +9180-2228 5591  
e-mail : com-hfws@karnataka.gov.in

# COMMISSIONERATE

## Health & Family Welfare Services

No. DD/SSU/Covid-19/SOPs/42/20-21

Date: 20<sup>th</sup> July 2020

### Revised Standard Operating Procedure for CCC

**Subject:** Standard Operating Procedure for admission and management of COVID-19 positive cases at COVID Care Center (CCC)

**Reference:** 1. No: DHS/PS/97/2020-21 regarding guidelines for establishing and managing Covid Care Centre (CCC) dated 22.06.2020  
2. No: DHS/PS/115/2020-21 Standard Operating Procedure for admission and management of COVID-19 positive cases at COVID Care Center (CCC) dated 02.07.2020

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In view of evolving situation of COVID-19 in the state, Covid Care Centers (CCC) are being established both in government and private. These shall be set up in suitable hostels, hotels, schools, stadiums, lodges, etc. The Covid positive person/ patient shall be admitted to these CCCs by the triage team based on below mentioned criteria either in Government or Private institution as preferred by the patient. The patient/relative shall sign the prescribed consent form (Annexure-1) in case he/she is going to a private institution.

The following persons shall be admitted directly to COVID care Centre (CCC) after triage:

- All asymptomatic/mild symptomatic persons who meet one or more of the following criteria:
  - Persons of any age:
    - who are not eligible for home isolation.
    - who opt for isolation at CCC.
  - Body temperature  $> 38^{\circ} \text{C}$  ( $> 100.4^{\circ} \text{F}$ ) for more than 24 hours.
  - If the person has the following co-morbidities like hypertension, diabetes mellitus, obesity, thyroid disease; they are well managed and under good clinical control as assessed by medical officer/physician.

- Shall not have any comorbid conditions like kidney diseases including persons on dialysis, heart diseases, stroke, tuberculosis, cancer, people living with HIV, immune-compromised, on steroids and immune-suppressants, etc.
- Persons being admitted to CCC shall have
  - Oxygen saturation  $\geq$  95%
  - Respiratory rate  $<$  24/min
  - Pulse rate  $<$  100/min

Criteria	COVID care Centre* (CCC)	Dedicated COVID Health Centre (DCHC) (Beds with Oxygen facility)	Dedicated COVID Hospital (DCH) (ICU Beds Available)
Clinical condition	Asymptomatic or Mild	Moderate	Severe
Measure Oxygen Saturation with fingertip Pulse oximeter	SpO <sub>2</sub> more than 94%	SpO <sub>2</sub> between 90 to 94%	SpO <sub>2</sub> less than 90%
Pulse Rate	<100/ min	100-120/min	>120/ min
Systolic Blood Pressure	-	-	<100 mm Hg
Respiratory Rate	< 24/ min	24-30/min	>30/min
Co-morbid Conditions	Hypertension, diabetes mellitus, obesity, thyroid disease under good clinical control as assessed by medical officer/physician  Without any other comorbid conditions	With co-morbid conditions  Pregnant women- 4 weeks before expected date of delivery (EDD)	with comorbid conditions

All Asymptomatic/mild symptomatic COVID-19 patients admitted in CCC should undergo screening for the following at the time of admission.

- Collect SRF ID and personal ID.
- Temperature screening using thermal scanner.
- SpO<sub>2</sub> and pulse rate using fingertip Pulse oximeter.
- Blood pressure using BP apparatus.
- Random Blood sugar using glucometer.
- Medical history, enquiring about comorbid conditions and verifying records, if available.
- All other cases shall be shifted to DCHC or DCH based on the severity of symptoms.

Every COVID Care Centre should be linked to one or more Dedicated COVID Health Centers (DCHC) and at least one Dedicated COVID Hospital (DCH) for referral purpose.

Every COVID Care Centre must also have a dedicated Basic Life Support Ambulance (BLSA) equipped with sufficient oxygen support on 24x7 basis, for ensuring safe transport of a case to dedicated higher facilities if the symptoms progress from mild to moderate or severe.

### **Responsibilities of Doctors and Paramedical staff.**

- Daily examination of the persons for any complaints and if necessary, treat accordingly (Annexure-1).
- Case sheets shall be maintained for each patient separately.
- Daily statistics like bed occupancy, status of patients and referral/ discharges should be updated to BBMP officer/THO in the online platform.
- Regular Monitoring shall be done of the below parameters:
  - Body temperature
  - Pulse Rate
  - Blood Pressure
  - Respiratory Rate
  - SpO<sub>2</sub>– saturation as shown by fingertip pulse Oximeter
  - Symptoms as described by the patients with special attention to difficulty in breathing/persistent pain or pressure in the chest,etc.
  - Above (a to f) to be monitored once at the beginning of each shift compulsorily.
- If any patient progresses to show moderate or severe symptoms, shall be shifted to a Dedicated COVID Health Centre/Dedicated COVID Hospital at the earliest. The CCC nodal person shall be responsible for the same.

### **Human resources requirements:**

- Doctors – one per 100 persons for 8 hrs shift (to be provided by the health/medical education dept. in case of government managed CCC)
- Staff nurses – one per 50 persons for 8 hrs shift. (to be provided by the health/medical education dept. in case of government managed CCC)
- Support staff for food/supervision – one per 100 persons for 8 hrs shift.
- Staff for cleaning – one per 50 persons for 12 hrs shift.
- Data entry operator – one per 500 persons for 12 hrs shift.
- Security personnel and marshals – one per 100 persons for 12 hrs shift.

The staff should reside at CCC in a separate area/block. They shall work for 10 days at CCC (one cycle) and then go home for 4 days.

After one cycle of duty the staff, before going home shall be tested using rapid antigen kit.

### **Required amenities for Covid care Centre (CCC):**

A Covid Care Center shall have:

- Have restricted access to general public.
- Have a help desk.
- Have beds 1 meter apart with side locker & charging point for mobile/laptop, etc.
- Have one pedestal fan, one chair/stool.
- Separate areas for asymptomatics and mild symptomatics.
- Have a separate section/ward for male and female patients
- Has 24 X 7 Electricity with power back up & Water supply.
- Have a nursing staff and doctor at station for 24X7 care.
- Shall have adequate supplies of PPE Kits, N-95 Masks, triple layered surgical masks, gloves, hand sanitizers, thermal scanners, pulse oximeters, glucometer,

BP apparatus, stethoscopes, medicines like hydroxy chloroquine, vitamin-c, zinc and others including emergency drugs, dressing material and first aid kit, oxygen cylinder with tubing/oxygen concentrator, nebulizer, portable ECG machine. (The requirements of supplies is given in the Annexure-2)

- Have adequate bath and toilet facilities (@1 bath and toilet for 20 persons )
- Have adequate ventilation and lighting facility
- Have monitoring facility using CCTV camera installed.
- Have 24X7 ambulance service to shift patients whenever necessary-one ambulance per 250 persons
- Have a linkage with dedicated covid-19 health center or dedicated covid hospital.
- Bed sheet and pillow covers shall be changed daily.
- Separate areas for donning/wearing and doffing/removing PPE kit.
- Facility for disinfection & sterilization of patient linen & equipment (Mechanized Laundry).
- Availability of broadband Internet connectivity with computers and DEOs for providing the COVID-19 patients data.
- Garbage Management inside and outside the COVID Care Centre, linkages with solid waste management.
- To ensure that the biomedical waste generated in the CCC is sent to designate common waste treatment facility/agency.

### **Food and Nutrition**

- Nutritious diet shall be provided to the patient as per the Annexure-3.
- Proper food arrangements three times a day along with snacks for the patients, Doctors, Officers and others.
- Breakfast shall be provided by 7.00 AM, Lunch to be provided at 1.00 PM, and Dinner by 7.00 PM.

### **Ancillary services**

- Separate entry and exit shall be provided for the positive persons and doctors /staff at the facility.
- To ensure complete sanitation inside and outside the CCC.

### **Patient monitoring**

- A common facility for thermal scanning and pulse oximetry can be set up for temperature and oxygen saturation check
- A staff nurse/trained health worker can record everybody's temperature and pulse oximeter reading thrice a day

### **Discharge of the patient**

#### **For asymptomatic/mild symptomatic individuals:**

- They shall be discharged based on the following criteria;
  - No Fever and No Symptom/s for the last 3 consecutive days before discharge (without antipyretics)
  - Maintains saturation above 95% for the last 3 consecutive days (without oxygen support)

- Symptomatic individuals with a positive COVID test report, , **shall be discharged 10 days from the date of onset of symptoms**
- Asymptomatic individuals with a positive COVID test report, who continues to remain asymptomatic during their stay in the CCC, **shall be discharged 10 days from the date of swab collection.**
- There is **no need for RT-PCR/CBNAAT/True-NAT test/Rapid antigen test** before discharge of the patient.
- At the time of discharge, the patient shall be advised for home quarantine and self-monitoring their health for another 14 days.

#### **Management of Logistics at CCC:**

##### **A. Supply of equipment and medicines to government managed CCC.**

The Karnataka State Drugs Logistics & Warehousing Society (KSDLWS) will provide the necessary drugs, equipment and other supplies to government managed CCCs. In greater BBMP area the nodal officer for CCC will send the requirement for 15 days to Additional Director, KSDLWS. In districts DCs will manage this from drugs, equipment and other supplies available with them for Covid-19.

##### **B. Supply of food:**

The BBMP/District Administration will make arrangement for supply of food for patients (as per diet chart) and to the staff.

##### **C. Other essentials:**

- Standard IEC material and displays
- Large plastic bags
- Appropriate clinical waste bags
- Linen bags
- Sharps containers
- Collection container for used equipment
- Standard protocols for hand hygiene, sample collection and BMW displayed clearly
- Standard Infection prevention and control protocols
- Standard Clinical management protocols

##### **D. Disinfection and IPC:**

- The doctor and care giver shall be trained on IPC protocol.
- Setup a trolley outside the changing room to hold PPE (triple layer medical mask, gloves) and linen. Used PPEs should be collected in waste disposal bins (touch-free bin) and disposed off as per the Biomedical Waste Management guidelines.
- Ensure suitable arrangements for hand washing and sufficient availability of supplies including alcohol-based hand rub near the point of care and the room door.
- Used linen, pillow covers, towels shall be changed daily and kept in a disposable bag for washing with commonly used detergents.
- Cleaning and regular disinfection (using 1% sodium hypochlorite solution) of frequently touched surfaces (door knobs, elevator buttons, hand rails, benches, washroom fixtures, etc.) to be carried out thrice daily in all common areas.
- Effective and frequent sanitation, thrice a day, within the facility premises shall be

maintained with particular focus on lavatories, drinking and hand washing stations/areas.

- No aerosol generating procedure shall be carried out in the Covid Care Facility.

**E. Transportation:**

Have 24X7 ambulance service to shift patients whenever necessary

**F. Testing:**

The staff should reside at CCC in a separate area/block. They shall work for 10 days at CCC (one cycle) and then go home for 4 days.

After one cycle of duty, the staff before going home shall be tested using rapid antigen kit.

**G. CCC in-charge nodal officer:**

District Administration/BBMP shall appoint a Group-A officer as Centre in charge who shall be stationed in the CCC and manage the HR and logistics of the Centre (Annexure-4, CCC Arrangement template ; Annexure-5, Monitoring Checklist for Covid Care Centre)

**H. Daily reporting:**

The CCC will ensure compulsory daily reporting of the admissions, discharges, medical condition of patients in the software recommended by the state government.

Establishing CCC by private medical establishments in collaboration with hotels/ staying facilities and RWAs, AoAs is mentioned in Annexure-6.

  
Commissioner  
Health & Family Welfare Services

To:

1. All Dist. Health & FW Officers
2. All Dist. Surgeons of Dist. Hospitals
3. All Divisional Joint Directors
4. Chief health officer, BBMP, Bengaluru

Copy to:

1. The Commissioner, BBMP, Bengaluru.
2. The Special Commissioner (Health & Planning) BBMP, Bengaluru.
3. Sri. Rajendra Kumar Kataria, Special Officer Covid Care Centers, Bengaluru.
4. Mission director, National Health Mission, & OSD, SSU, Health and Family Welfare Services, Bengaluru.
5. All Deputy Commissioners.

**Annexure -1**  
**Management and treatment Plan for COVID-19 persons at CCC**

Recommended Investigations	Complete Blood Count Random Blood Sugar HbA1C (if known diabetic) Electrocardiogram (ECG)
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**Note:** Any other investigations as deemed necessary by the attending medical officer/physician

Recommended Treatment Protocol	
Treatment	Precautions
1. Tab Hydroxychloroquine Sulphate (HCQS) – 400 mg BD for 1 Day followed by 200 mg 1-0-1 for 4 Days 2. Tab Zinc 50 mg 0-1-0 for 7 Days 3. Tab Vitamin C 500 mg 1-1-1 for 7 days	Vitals should be re-assessed regularly  Contraindications for HCQS: 1) QT interval > 500ms 2) Porphyria 3) Myasthenia Gravis 4) Retinal Pathology 5) Epilepsy

➤ **Additional Medications**

- All persons to continue the regular medications for the pre-existing comorbid illnesses like Hypertension, Diabetes Mellitus, Hypothyroidism, etc.
- Tab Pantoprazole 40 mg 1-0-0 (empty stomach), if required
- Antitussive cough syrups – For dry cough
- Tab Cetirizine 10 mg 0-0-1 – For running nose if required
- Tab Paracetamol 500 mg/ 650 mg SOS – For Fever

➤ **Tab Hydroxychloroquine Sulphate (HCQS) Prophylaxis for the staff**

- Tab HCQ 400mg 1-0-1 (BD) on First day followed by 400mg/week under medical supervision

**However, the treatment protocol as advised by physician shall be followed.**

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## Annexure -2

### Requirements for COVID Care Center (CCC)

#### **1. Access considerations**

- Parking space including Ambulances, etc.
- Ease of access for delivery of food/medical/other supplies
- Differently-abled Friendly facilities (preferably)

#### **2. Ventilation capacity:** Well ventilated preferably natural

#### **3. Basic infrastructure/functional requirements:**

- Rooms/Dormitory separated from one another may be preferable with in-house capacity of 5-10 beds per enclosure.
- Each bed to be separated 1meter (3 feet) apart from all sides.
- Lighting, well-ventilation, heating, electricity, ceiling fan.
- Potable water to be available.
- Functional telephone system for providing communications / Desktop.
- Laundry services.
- Sanitation services/Cleaning and House keeping.
- Properly covered bins for waste disposal.

#### **4. Space requirements for the facility:**

- Administrative offices
- Reception area
- Logistics areas/drug stores
- Rest rooms- doctors/nurses/supporting staffs
- Donning and doffing areas
- Clinical examination room/ nursing station / Sampling area
- Laundry facilities (on- or off-site)
- Mess/Meal preparation (on- or off-site)
- Holding area for contaminated waste
- Wash room/Bathroom/Toilet separate for male and female
- In house accommodation for working staff

#### **5. Social support resources/ Recreational areas (preferable)**

- Television and radio/Reading materials/ indoor recreation area
- Tele-counseling services.

#### **6. Securing Entry and Exit points**

- In order to prevent and control infection in the facility, strategic points in the facility needs to be identified including the administrative area where a person entering inside CCC to get proper awareness and training on infection prevention and control (IPC) measures
- A well informed and trained security to check (main entrance gate of the area) and a guard (24X7) with registers for entry and exit.
- Only authorized & trained persons or those designated in work areas to permit to enter the CCC.

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**Annexure-3**  
**Model Diet Plan**

(Similar diet plan may be suggested as per staple diet suitable locally)

On Rising Day	Coffee/ Tea/ Milk							
	Mon	Tue	Wed	Thu	Fri	Sat	Sun	
Break-fast 7:00 AM	Rava Idli	Pongal	Set Dosa	Rice Idli	Bisibele Bath	Chow Chow Bath	Set Dosa	
Mid-Morning 10:00 AM	Watermelon	Papaya	Muskmelon	Watermelon	Papaya	Muskmelon	Papaya	
	Ragi Ganji	Palak Soup	Rava Ganji	Carrot Soup	Ragi Ganji	Tomato Soup	Rava Ganji	
Lunch 1:00 PM	Pulka- 2 nos + Palya + Rice + Dal + Curd							
Evening 5:30 PM	Elaichi Banana + Marie Biscuits – 3 Nos/ Protein biscuits- 2 Nos/ Fresh Dates- 2 Nos + Mango bar (Vit-C rich)							
Dinner 7:00 PM	Pulka- 2 nos + Palya + Rice + Dal + Curd							
Bedtime 9:00 PM	Flavoured Milk							

**Do's and Don'ts**

**Do's**

- Eat whole grains such as brown rice, whole wheat flour, oats, millets, etc.
- Include beans, lentils & pulses as these are good sources of protein
- Include fresh fruits & vegetables ( fruits & vegetables like red capsicum, carrots, beetroot & greens etc.)
- Drink 8-10 Glasses of water and Hydrate yourself. Water helps to flush out toxins
- Citrus fruits like lemons & oranges are a good source of Vit C which is key in improving immunity levels & to fight off infections
- Include spices like ginger, garlic & turmeric which are natural immunity boosters
- Eat home-cooked food. Use low fat and less oil for cooking food
- Wash fruits & vegetables before use Include Low-fat milk & yogurt as they are good sources of protein & calcium

**Don'ts**

- Strictly avoid alcoholic drinks

**Annexure-4**  
**CCC Arrangement template**

<b>CCC Number</b>			
<b>Location:</b> Address			
<b>Contact Number:</b>			
<b>Strength:</b> beds			
<b>Nodal Officer :</b> Name & mobile number			
<b>Admin Officer of the institution:</b> Name & mobile number			
<b>Arrangements</b>		<b>Name and Contact Number</b>	<b>Person Incharge</b>
Medical Staff	Doctors		
	Nursing Staff		
Triage Team			
Housekeeping staff			
Medical Supplies	Medicines and diagnostic equipment		
	PPE and others		
Personal supplies			
Furnishings (beds, linen, etc.)			
Food and drinking water			
Waste disposal including bio-medical waste			
Funds for local expenses			
Ambulance arrangement			
Health checkup protocol and reporting arrangements			
Training of all staff			< .. date .. >
Certification of CCC (ready for operation)			< .. date .. >

## Annexure-5

### Monitoring Checklist for Covid Care Center

#### I. General Information

1. Name of the CCC	
2. Type of CCC Government/Private/ Others(specify)	
3. Address of the Covid Care Facility a. Village/Ward b. Taluk c. District d. State e. Email ID f. Contact no	
4. Name of Nodal Officer and designation a. Email ID b. Contact no	
5. Name of the In charge medical officer/physician a. Email ID b. Contact no	
6. Total number of isolation beds	
<b>7. Details of CCC</b>	
a. Is there separate entry / exit for the isolation area?	Yes/No
b. Dedicated space for staff to put on PPE while entering the isolated area	Yes/No
c. Dedicated space for staff to take off PPE near exit?	Yes/No
d. Isolation facility has separate area for isolating symptomatic and asymptomatic cases	Yes/No
e. Is the distance between two beds in isolation wards/rooms more than 1 meter (3 feet)?	Yes/No
f. Is there adequate natural ventilation?	Yes/No
g. Is the facility air-conditioned, does it follow CPWD* guidelines?	Yes/No
h. Are washrooms available as 1 toilet per 20 persons?	Yes/No
i. Is there a separate washroom available for the symptomatic and asymptomatic cases?	Yes/No

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<b>8. Logistics</b>		
	Yes/No	Quantity
a. Triple layer mask,		
b. N-95 Masks		
c. Goggles/Face shield	Yes/No	
d. Examination gloves	Yes/No	
e. Reusable vinyl or rubber gloves	Yes/No	
f. Stethoscope	Yes/No	
g. Sphygmomanometer	Yes/No	
h. Medicines like hydroxy chloroquine sulphate		
i. Dressing material and first aid kit	Yes/No	
j. Oxygen cylinder with tubing/oxygen concentrator	Yes/No	
k. Nebuliser,	Yes/No	
l. Portable ECG machine.	Yes/No	
m. Emergency medicines-Like Atropine, Adrenaline, CPM, Dexamethasone, Cetirizine, PCT, Pantoprazole, Dextrose IV Fluid, RL,NS etc.	Yes/No	
n. Large plastic bags	Yes/No	
o. Disposable waste bags	Yes/No	
p. Collection Bin for used PPE	Yes/No	
<b>9. Infection prevention control</b>		
a. Doctor/ care giver trained on infection control protocols	Yes/No	
b. Functioning hand washing stations (including water, soap and paper towel or air dry) at isolation area	Yes/No	
c. Does the facility have uninterrupted running water supply?	Yes/No	
d. Is there posters to reinforce hand washing and PPE at hand washing stations	Yes/No	
<b>10. Ambulance support</b>		
a. Ambulance facility for transporting patients from isolation area?	Yes/No	
b. List of contact numbers of ambulance service provider displayed at isolation area?	Yes/No	

\* For air-conditioning / ventilation, the guidelines of CPWD shall be followed which inter alia emphasizes that the temperature setting of all air conditioning devices should be in the range of 24- 30°C, relative humidity should be in the range of 40-70%, intake of fresh air should be as much as possible and cross ventilation should be adequate.

**Annexure-6**

**Establishing CCC by private medical establishments in collaboration with hotels/ staying facilities**



Tel: +9180-2287 4039  
+9180-2235 4085  
Fax : +9180-2228 5591  
e-mail : com-hfws@karnataka.gov.in

**COMMISSIONERATE**  
**Health & Family Welfare Services**

NO: DHS/PS/77/20-21

Date : 09.07.2020

**CIRCULAR**

**Sub: Establishing of COVID Care Centres (CCC) by private medical  
establishments in collaboration with hotels/staying facilities**

**Ref:** 1. Circular from Commissioner-HFW regarding guidelines for establishing  
and managing COVID Care Centre (CCC) dated 22.06.2020  
2. Circular by ACS HFW regarding guidelines for isolation of Covid positive  
person at home dated 04.07.2020

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The private medical establishments which are registered under KPME (Karnataka Private Medical Establishments Act) will be allowed to establish and manage COVID Care Centres for COVID positive persons (followed by triaging by the hospital) in collaboration with hotels/staying facilities. Separate registration or permission for such hotels will not be required but such an arrangement shall be duly informed to concerned District health and family welfare/Chief Health Officer-BBMP officer through a letter/e-mail. This arrangement shall be the joint responsibility of private medical establishment and hotel.

These CCCs in private sector are specially identified hotels/staying facilities where "Asymptomatic/mild symptomatic COVID positive persons" can be kept under optimum medical observation and care till their recovery. Such an arrangement will improve availability of beds in hospitals for those who are moderately or severely affected by COVID-19.

The private medical establishments shall ensure:

1. Guidelines from Government of Karnataka regarding establishing and managing CCC issued from time to time shall be strictly followed (annexure-1)
  - a. Ensuring only eligible COVID positive persons are admitted to CCC with due information to district/BBMP health authorities
  - b. Availability of medical staff at facility and tele-monitoring as per guidelines
  - c. Health monitoring of COVID positive person
  - d. Treatment protocol
  - e. Availability of medical supplies
  - f. Adequate training of CCC staff on infection, prevention protocols
  - g. Appropriate diet and ancillary services

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- i. Bio-medical waste disposal as per guidelines
  - i. Discharge protocols
  - j. Ensure to enter details of CCC, like infrastructure and patients (admitted/discharged) in the software application provided by the state government for monitoring the movement of patients
2. It is important that 24x7 ambulance service is readily available to shift patients whenever necessary
3. All charges of CCC (Category wise package rates) shall be displayed and communicated to the COVID positive person well in advance and there shall be no scope for any conflict in this regard. The maximum ceiling limit for the charges is as follows:

Sl. No.	Type of Hotel	Per day maximum Ceiling
1	Economy/ Budget	Rs: 8,000
2	3-Star	Rs: 10,000
3	5-Star	Rs: 12,000

4. A three tier approach is recommended:
- a. The hotel staff like cooks, back office, admins, etc. shall not come in contact with COVID positive persons
  - b. The food delivery personnel and others shall serve Covid positive persons in the rooms under supervision and care
  - c. Medical and health staff shall monitor health condition of Covid positive persons thrice daily and shall be available round the clock (24 X 7)
5. The private medical establishment shall ensure daily reporting to District Surveillance officer (DSO) regarding number of persons admitted, discharged, referred and health status. Details of DSOs is attached with this letter as annexure-2

  
 6/3/20  
 Commissioner  
 Health & Family Welfare Services  
 Government of Karnataka

To,

1. Commissioner, BBMP,
2. Deputy Commissioners of all districts
3. CEOs of ZP of all districts
4. DHOs and DSOs of all districts
5. CHD-BBMP

9/11-

**12. Information Education Communication (IEC):**

Display charts about COVID-19 Dos and Don'ts shall be prominently exhibited inside the rooms, halls and outside the premises to educate the patients and the residents. Wall mounted TV services may also be provided only with the silent display of news regarding COVID.

The SOP on running CCC is attached with these guidelines



To  
All the RWAs/ADAs through the Commissioner, BBMP.

Copies for kind information:

1. Additional Chief Secretary, Health & Family Welfare Department.
2. Additional Chief Secretary, Urban Development Department.
3. Commissioner, BBMP
4. Mission Director, National Health Mission.
5. Deputy Commissioners, Bengaluru Urban & Rural districts.
6. Director, Health & Family Welfare Services.
7. Director, Medical Education.



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Fax : +9180-2228 5591  
e-mail : com-hfws@karnataka.gov.in

# COMMISSIONERATE

## Health & Family Welfare Services

No. COM/HFW/PS/2020-21

Date : 10.07.2020

### Guidelines for establishing COVID care centres managed by Resident Welfare Association/Apartments Owners Association /Companies in their own premises

#### **Background:**

Government of Karnataka is establishing COVID care centres (CCC) for Isolation and management of asymptomatic and mild symptomatic COVID 19 cases in govt/private institutions like Shri Shri Ravishankar ashram, BIEC, Haj bhavan, GKVK, etc. In this context a number of Resident Welfare /Apartments Owners Association have come forward to facilitate home isolation and management of positive persons in their premises for the benefit of residents/communities in their walled/gated community.

In this regard the government has decided to involve the community organisations in the management of mild and asymptomatic COVID-19 positive persons by themselves. It is noteworthy to mention here that various RWAs/AOAs have shown interest for managing COVID Care Centres.

#### **1. Facilities needed:**

- a) Vacant houses, community halls and flats within the apartment(s)/community.
- b) Separate accommodation for women and children.
- c) Individual occupancy in a room of 10x10 feet preferably with attached bathroom and toilet.
- d) In the absence of individual rooms, 4 to 6 COVID positive persons shall be accommodated in a hall having attached bath and toilet/s.
- e) Temporary partitions of either PVC or side screen shall be provided for individual privacy keeping a physical distance of minimum of six feet between the two beds.
- f) Beds, mattresses, furnishings and linens, uninterrupted water and power supply shall be available.
- g) Home-made food either from the patient's house or from a common kitchen shall be arranged.
- h) Ancillary services like garbage management, sanitation and logistics should be managed exclusively and separately for the COVID block. Especially the biomedical waste shall be treated with 1% hypochlorite solution for a contact period of one hour should be assured before final disposal.
- i) If citizens of a group of individual houses in a street or neighbourhood are willing and have an independent unoccupied house or community hall they are encouraged to run CCC facilities akin to RWAs.

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**2. Eligibility for admission in community managed Covid care centre (CCC):**

All Asymptomatic and mild symptomatic COVID positive persons except the following

- a) > 60 years of age.
- b) With comorbid conditions like hypertension, diabetes, severe obesity, thyroid disease, cancer, kidney diseases include patients on dialysis, heart diseases, stroke, Tuberculosis, People living with HIV, immune-compromised, on steroids and immune-suppressants.
- c) Pregnant women and lactating mothers.
- d) Children below 10 years of age.
- e) Any other serious medical/psychological condition.

**3. Medical care at Covid care centre (CCC):**

- a) Access to public shall be restricted.
- b) The RWA / AOA / Company should have a tie up with medical team (or with a doctor residing in the premises) for triaging & regular clinical support of the patients.
- c) Nursing staff will conduct temperature measurement and pulse oximetry, monitor other symptoms, record the temperature and spO<sub>2</sub> with fingertip pulse oximetry thrice a day, and shall have tele consultation with the doctor for any instructions.
- d) Linkage with an affiliated private hospital, dedicated COVID-19 health center or hospital for referring the COVID positive person in case of need.
- e) Adequate supplies of PPE Kits, N-95 Masks, triple layered surgical masks, gloves, hand sanitizers, thermal scanners, pulse oximeter, glucometer, BP apparatus, stethoscope, medicines like hydroxy chloroquine, vitamin-C, zinc, etc shall be available.
- f) In case of emergency, ambulance services shall be obtained from government ambulance service 108/private ambulance.
- g) The COVID positive person shall be under the care of RWAs; attending doctor and staff nurses will all be under the supervision of the jurisdictional MOH/DHO/HO of BBMP or THO/DH & FWO of the department.
- h) Data entry – the nursing officer shall maintain patient charts and records (for requisite parameters), and the doctor shall officially verify the record data and advise.

**4. Required amenities for Covid care centre (CCC):**

- a) Support staff for food/supervision- will be present 24/7, in two or three shifts designated only for the care of patients in the ratio of 1:12 per COVID positive person.
- b) Designated security personnel shall supervise the CCC.
- c) 24/7 Electricity with power back up & Water supply.
- d) Monitoring facility using CCTV camera installed (optional).
- e) Facility for disinfection & sterilization of linen & utensils of COVID positive person.
- f) Availability of broadband Internet connectivity with computers and DEOs for providing the COVID-19 patients data.

- 5. Daily monitoring and medical supervision of the COVID positive persons by the medical and health team:**
  - a) Thrice daily temperature & SpO<sub>2</sub> recording using fingertip pulse oximeter.
  - b) 24/7 monitoring by medical officer.
  - c) Attending to medical and other complaints.

- 6. Food and Nutrition:**

- a)** Nutritious diet should be provided to the patients using the suggested diet plan as per government advice, but catering to the patient's individual tastes, allergies and dietary requirements. Food will be delivered from the concerned patient's home to the Centre for the staff to give to the patients. Disposable Plates and cutlery shall be used.
- b)** Proper food arrangements three times a day along with snacks for the patients and the nursing staff.
- c)** Breakfast, lunch and dinner to be provided at appropriate times convenient to the patient by the patient's family.
- d)** Consumption of tobacco and alcoholic drinks is strictly prohibited.

- 7. Ancillary services:**

- a)** Dedicated area of donning and doffing of PPE for health care workers.
- b)** Garbage Management inside and outside the COVID Care Centre.
- c)** To ensure that the biomedical waste generated in the CCC is sent to designate bio-medical processing Centre.
- d)** To ensure complete cleanliness inside and outside the CCC.

- 8. Testing:**

Covid-19 Testing for the patients should be done as per the testing guidelines issued by the GOK from time to time. Any other test required as per the doctor's assessment should be made available from the nearest health facility.

- 9. Daily reporting:**

The CCC will ensure daily reporting of the admissions, release from isolation and medical condition of patients in the software recommended by the state government/report to district surveillance officer (DSO)

- 10. Others:**

The RWAs/AOAs shall enter details of CCCs capacity, admission/release of persons in state government software application without fail.

The CCC facility will be used by the local RWA/AOA residents only.

The COVID positive persons shall be allowed to use their laptop, mobile, tablet, books and other reading materials, etc.

- 11. Discharge/Release from Isolation**

To be followed as per GOK guidelines issued from time to time in consultation with treating doctor.

**12. Information Education Communication (IEC):**

Display charts about COVID-19 Dos and Don'ts shall be prominently exhibited inside the rooms, halls and outside the premises to educate the patients and the residents. Wall mounted TV services may also be provided only with the silent display of news regarding COVID.

The SOP on running CCC is attached with these guidelines



To  
All the RWAs/ADAs through the Commissioner, BBMP.

Copies for kind information:

1. Additional Chief Secretary, Health & Family Welfare Department.
2. Additional Chief Secretary, Urban Development Department.
3. Commissioner, BBMP
4. Mission Director, National Health Mission.
5. Deputy Commissioners, Bengaluru Urban & Rural districts.
6. Director, Health & Family Welfare Services.
7. Director, Medical Education.