



**National Health Mission**  
**SDA Complex, Kasumpti, Shimla-9**  
**Himachal Pradesh**


Dated: Shimla-171009, the May 2020



**CIRCULAR**

The Government of India has notified **revised guidelines on preventive measures to contain spread of COVID-19 in workplace settings** (copy enclosed). These guidelines outline the preventive and response measures to be observed to contain the spread of COVID-19 in workplace setting and to prevent importation of infection and to respond in a timely and effective manner in case suspect case of COVID-19 so as to limit the spread of infection.

It is, therefore, advised that these guidelines be strictly followed in letter and spirit in each and every office/ organization throughout the State of Himachal Pradesh for the containment of COVID-19.

  
Additional Chief Secretary (Health) to the  
Government of Himachal Pradesh

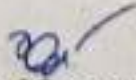
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**Dated Shimla-9 the**

**Copy for information and necessary action to:**

1. All the Administrative Secretaries to the Government of Himachal Pradesh
2. All the Head of Departments/MDs/CEOs of all Departments/Boards/Corporations in Himachal Pradesh
3. All the Deputy Commissioners in Himachal Pradesh
4. The Director Health Services, Himachal Pradesh
5. The Director Medical Education & Research, Himachal Pradesh



  
Additional Chief Secretary (Health) to the  
Government of Himachal Pradesh

18<sup>th</sup> 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>

**Annexure I****Risk profiling of contacts**

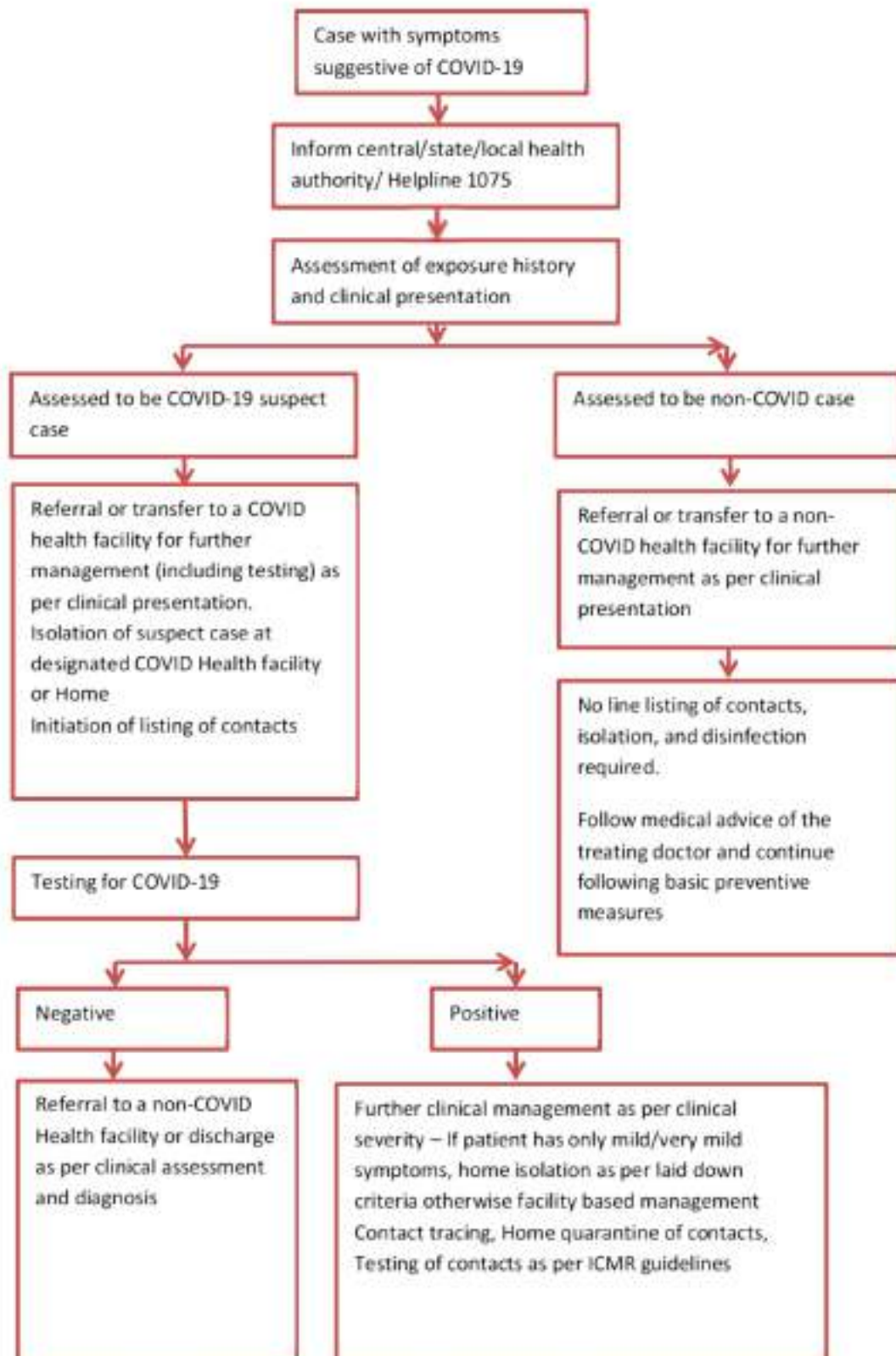
Contacts are persons who have been exposed to a confirmed case anytime between 2 days prior to onset of symptoms (in the positive case) and the date of isolation (or maximum 14 days after the symptom onset in the case).

**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**