

**GOVERNMENT OF MANIPUR**  
**DIRECTORATE OF HEALTH SERVICES**

**Revised Advisory for managing Health Care Workers (HCWs) working in COVID and NonCOVID areas of the Health Care Facilities**

No.3/COVID GUIDELINES/DHS/2022: Dated the 11<sup>th</sup> January 2022

This advisory is developed to ensure protection of Health care workers (HCWs) particularly in context of safety from Health Associated Infections (HAIs) while managing COVID-19.

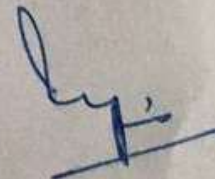
**1. Institutional Mechanism for preventing and responding to Healthcare Associated Infections (HAIs) among HCWs**

All health facilities shall activate its Hospital Infection Control Committee (HICC). The HICC in the health facility is responsible for implementing the Infection Prevention and Control (IPC) activities and organizing regular trainings on IPC for HCWs. A Nodal Officer (Infection Control Officer) shall be identified by each health facility to address all matters related to Healthcare Associated Infections (HAIs). With reference to preventing such infection among healthcare workers, the nodal officer will ensure that:

- 1.1. Healthcare workers in different settings of hospitals shall use PPEs appropriate to their risk profile.
- 1.2. All healthcare workers have undergone training on Infection Prevention and Control and they are aware of common signs and symptoms, need for self-health monitoring and need for prompt reporting of such symptoms.
- 1.3. Provisions have been made for regular (thermal) screening of all hospital staff.
- 1.4. All HCWs are vaccinated with 2 doses of the COVID vaccine and also take the precautionary third dose as per prescribed protocol.
- 1.5. Provisions have been made for prompt reporting of breach of PPE by the hospital staff and follow up action.

**2. Action for Healthcare Workers**

- 2.1. Ensure that all preventive measures like frequent washing of hands/use of alcohol based hand sanitizer, respiratory etiquettes (using tissue/handkerchief while coughing or sneezing), etc. are followed at all times.
- 2.2. Appropriate PPE is used at all times while on duty.
- 2.3. A buddy system\* to be followed to ensure that there is no breach in infection prevention control practices.
- 2.4. Any breach in PPE and exposure is immediately informed to the nodal officer/MS of the Hospital/CCCS



**2.5.** HCWs after leaving the patient care units (wards/OPDs/ICUs) at the doctor's duty rooms/hostels/canteen or outside the HCF must follow physical distancing and masking to prevent transmission to/acquiring infection from other HCWs who may be positive.

**2.6.** Pregnant/lactating mothers and immuno-compromised healthcare workers shall inform their medical condition to the hospital authorities for them to get posted in appropriate areas.

\*Buddy system: Under this approach, two or more-person team is formed amongst the deployed hospital staff who share responsibilities for his/her partner's safety and well-being in the context of (i) Appropriately donning and doffing of PPEs, (ii) maintaining hand hygiene and (iii) taking requisite steps on observing breach of PPEs.

### **3. SOP for health work force deployment during COVID-19**

#### **3.1 SOP to be followed in case HCW reports exposure/breach of PPE**

All the Healthcare workers must report every unprotected exposure/ breach of PPE while managing COVID-19 patients to the concerned nodal officer and MS of the concerned hospital/CCCs immediately. Such exposed HCWs shall continue to work wearing appropriate PPE and test themselves at day 5 of the exposure or if symptoms develop anytime within 14 days from the day of exposure.

#### **3.2 SOP to be followed in case HCW reports symptoms suggestive of COVID-19**

**3.2.1** If any healthcare worker who is manifesting signs and symptoms suggestive of COVID-19, he/she will be tested & isolated immediately and if tested positive the following actions shall be taken:

a. In case of mild case, HCW will have an option of home isolation, subject to the conditions stipulated in the "Revised guidelines for Home Isolation of mild /asymptomatic COVID-19 cases" (available at: <https://www.mohfw.gov.in/pdf/RevisedHomeIsolationGuidelines05012022.pdf>). Such cases would end their home isolation as per timeline provided in the said guidelines.

b. In cases where home isolation is not feasible, such mild cases will be admitted to a Covid Care Center.

c. Moderate cases that require oxygen therapy shall be managed at a Dedicated COVID Health Center.

d. Severe cases will be managed in a Dedicated COVID Hospital.

**3.2.2.** HCWs can resume duties while wearing appropriate PPEs if symptoms have resolved (except mild cough), and they are afebrile for 3 successive days.

**3.2.3.** Those HCWs who test negative and continue to be symptomatic, will be treated in non-COVID ward as per their clinical diagnosis. They can resume work based on the clinical diagnosis and the medical certification by the treating doctor.

**3.2.4** Discharge of COVID-19 positive HCWs will be in accordance with the discharge policy (available

**GOVERNMENT OF MANIPUR**  
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**Revised Discharge Policy for COVID-19**

No.3/COVID GUIDELINES/DHS/2022: Dated the 11<sup>th</sup> January 2022

(in supersession of the Revised Discharge policy for COVID-19 dated 29<sup>th</sup> May 2021)

This revised discharge policy is developed in alignment with the Ministry of Health & Family Welfare, Govt. of India "Revised Discharge Policy for COVID-19" dated the 9<sup>th</sup> January 2022.

**1. Mild cases of COVID-19**

Mild cases admitted to a COVID Care Facility or under home isolation will undergo regular health monitoring. The patient shall be discharged after at least 7 days have passed from testing positive and with no fever for 3 successive days. There is no need for testing prior to discharge.

**2. Moderate cases admitted to Dedicated COVID Health Centre**

2.1. Patients whose signs and symptoms resolve and maintain saturation above 93% for 3 successive days. If there is resolution of symptoms and the patient maintains saturation above 93% for the 3 successive days (without oxygen support), and stable co-morbidities, if any, such patient will be discharged as per the advice of the treating medical officer. There is no need for testing prior to discharge.

2.2. Patients on oxygen whose signs and symptoms do not resolve, and demand of oxygen therapy continues

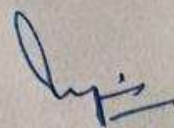
Such patients will be discharged as per the advice of the treating medical officer only after

- Resolution of clinical symptoms
- Ability to maintain prescribed oxygen saturation for 3 successive days without oxygen support
- Stable co-morbidities, if any.

**3. Severe Cases including immune-compromised (HIV patients, transplant recipients, malignancy etc.)**

Discharge criteria for severe cases will be based on clinical recovery at the discretion of the treating medical officer.

Note: The patients post discharge are advised to self-monitor their health for further 7 days and shall continue wearing masks. Post discharge, if the patient develops any symptoms of fever, cough or breathing difficulty or she/she continues to experience residual/sustained symptoms, he/she shall contact the treating doctor for further clinical guidance or contact the State Common Control Room, Manipur, 18003453818.



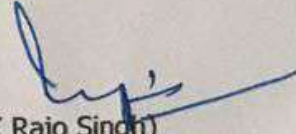
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at: <https://www.mohfw.gov.in/pdf/RevisedDischargePolicyforCOVID19updatedon9thJanuary2022.pdf>).

**3.3 Regular quarantine of healthcare workers after performing duty in COVID-19 areas**

Quarantine/isolation of healthcare workers, other than stipulated above is not warranted.



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