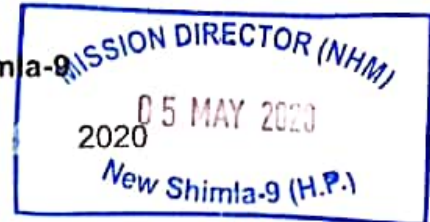




National Health Mission
SDA Complex, Kasumpti, Shimla-9
Himachal Pradesh
Dated: Shimla-171009, the



CIRCULAR

Elderly people are at a higher risk of COVID-19 infection due to their decreased immunity and body reserves, as well as people with associated co-morbidities like diabetes, hypertension, chronic kidney disease and chronic obstructive pulmonary disease. Also, course of disease tends to be more severe in case of this vulnerable segment of population, resulting in chances of higher mortality. The State of Himachal Pradesh has implemented the Mukhya Mantri Nirog Yojana in order to address all common NCDs in an integrated manner in the 18+ aged population. More than 17.8 lakh of population has been screened and the data of people suffering from NCD can be accessed digitally at the e-Health card software. Furthermore, during the recent ACF campaign, it has been found that 1007739 (14.5%) people in the state are vulnerable by virtue of being elderly (> 60 years of age), diabetic, hypertensive, asthmatic or having some other chronic disease. The line listing of these vulnerable segments have already been shared with the districts.

Keeping in view, the increased chances of COVID-19 infection and the severe course of disease in the vulnerable population, it is imperative that certain measures be taken to reduce the spread of infection in vulnerable population of the State:

General Dos for the vulnerable population:

1. Keep in touch with family and friends through phone, internet and social media
2. Use telephone or online services for other essential services, drug delivery, banking, grocery delivery etc
3. Wash hands often with soap and water for at least 20 seconds, especially after blowing their nose, coughing, or sneezing, or having been in a public place. If soap and water are not available, use alcohol based hand sanitizer that contains at least 70% alcohol.
4. Follow respiratory etiquettes. Use a tissue or your sleeve to cover your mouth while coughing or sneezing and wash your hands/ sanitise them after throwing the tissue in a closed bin.

5. Avoid touching surfaces in public places – elevator/ lift buttons, door handles, handrails. Use a tissue or their sleeve to cover your hand or finger if you must touch something.
6. Always use a face cover in public places.
7. Avoid shaking hands with people, avoid hugging and kissing people.
8. Maintain at least 1 metre (3 feet) distance with everyone.
9. Stay home for a prolonged period of time.
10. Have enough household items and groceries on hand to be prepared to stay at home for a considerable period of time.
11. Clean and disinfect home to remove germs: practice routine cleaning of frequently touched surfaces (for example: tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks & cell phones) using available disinfectant.

General Don'ts for the vulnerable population:

1. Do not touch eyes, nose and mouth with unclean, unwashed hands.
2. Do not travel if not necessary or essential.
3. Do not go to the hospital for routine health checkups and use e-sanjeevani OPD for e-consultation. If needed, a specialist consultation can be done at the nearest PHC – HWC or HSC- HWC.
4. Do not come in close contact with those who are sick/ not well
5. Do not go for gatherings with friends and family and stay away from large gatherings.
6. Do not keep sitting or lying down for prolonged period to prevent the development of Deep Vein Thrombosis.

Health related advisory for the vulnerable population and the Frontline workers of Health Department:


1. The NCD patients shall ensure that they are taking their medication regularly.
2. The NCD patients and the elderly shall be motivated to use e-sanjeevani OPD/e-sanjeevani portal for online consultation and prescription.
3. The local ASHA shall enlist the NCD patients and the elderly in her area along with the list of the medicines being taken/prescribed.
4. Similar list shall be compiled at the Subcentre and PHC level.

5. The MO PHC will submit the indent to the concerned Block Medical Officer for ensuring at least 3 month supply of medicine in favor of each patient from medicines available in the EDL, if already not available at the PHI. If the medicines prescribed/taken by the patient are not listed in EDL, the MO PHC/CHO shall obtain a specialist consultation for amendment of prescription from amongst the EDL.
6. The medicine can be stocked at HWCs/SC and the ASHA shall further distribute the medicine to the concerned patient after indent/receipt from the store.
7. The CHO/ANM shall monitor the blood sugar and the blood pressure of the patients, if advised by the doctor (may be on routine OPD slip or E-Sanjeevani slip).
8. Irrespective of the prescribed monitoring schedule, the ANM/CHOs shall undertake two visits per month to all such NCD and elderly persons during the period of outbreak, to assess for onset of symptoms/complications and to monitor treatment adherence. However, universal safety precautions like use of mask/face cover, hand washing, sanitization, proper distancing shall be maintained during the visits.
9. The ASHA workers shall undertake frequent visits to such households and telephonically connect with such vulnerable persons for confidence building.
10. The CHO/HWs shall be in constant touch/communication on mobile phone with the MO-PHC for seeking guidance.
11. The patient with NCDs shall be counselled for healthy diet, proper exercise, proper sleep and to avoid any risk of COVID infection. They should be counseled that in case they develop fever/cough or difficulty in breathing, they should inform the ASHA/ANM who in turn shall inform the MO PHC and the BMO for sampling. The symptoms may also be reported on the 104 comprehensive call centre, which shall forward the details to the concerned BMO for further action including sampling.
12. The NCD patients and elderly shall be counseled for maintenance of proper immunity through healthy diet, exercise, proper sleep and use of Ayyurvedic/homeopathic supplements. The Director Ayurveda shall disseminate guidelines regarding use of such supplements to their field level staff, who shall coordinate with the Health Department staff, if required for administration of such supplements.

13. In case of any emergency, the nearest MO shall be contacted on phone for the necessary advise or 104 comprehensive call centre shall be contacted. 108 ambulance shall be called if the patient needs emergency transportation.

Guidelines for the PHC/Subcentre

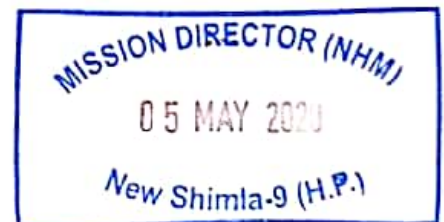
1. Proper data base of the number of disease wise patients and distribution of medicine shall be maintained at PHC and Subcentre level for future audit.
2. The patients coming to the Subcentre or PHC shall be guided to maintain proper social distance and to take universal precautions.
3. Soap and water shall be available for hand washing to clean the hands of patients before screening at the Subcentre/PHC.
4. The patients waiting for their turn in OPD shall be distanced at least 1 metre from each other and it shall be ensured that all of them are wearing face cover. Any person visiting the Subcentre/PHC and not wearing a face cover shall not be attended to and shall be asked to wear a face cover before registration. If possible, the CHO/HW shall sit in open space outside the Subcentre while attending OPD, so that the unnecessary crowding inside the building can be avoided.


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

Endst No.as above Dated:

Copy for information and necessary action is forwarded to:-

1. All the Deputy Commissioners, in Himachal Pradesh
2. Director Ayurveda, Himachal Pradesh
3. Director IPR for widespread publicity
4. The Director of Health Services, HP, Shimla-9
5. The Director of Medical Education & Research HP, Shimla-9
6. All the Chief Medical Officers in Himachal Pradesh
7. SPO IEC for dedicated IEC campaign on the theme
8. Project Head, 104 comprehensive call centre for necessary action
9. All the DPO NCD, Himachal Pradesh
10. Guard file




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