



स्वास्थ्य एवं परिवार कल्याम विभाग स्वास्थ्य एवं परिवार कल्याम मंत्रालय Government of India Department of Health and Family Welfare Ministry of Health and Family Welfare

D.O. No. Z.28015/19/2020-EMR (Pt.)

Dated the 17th May, 2020

Dear Calleague,

- Please refer to Ministry of Health & Family Welfare DO letter No. Z.28015/19/2020-EMR dated 30th April, 2020 regarding categorizing districts as hotspots/red zones/orange zone and green zones. Following the video conference of the Hon'ble Prime Minister with Hon'ble Chief Ministers on 11th May 2020 and taking into consideration the feedback received from states, the following guidelines are issued.
- States may categorize districts/municipal corporations as red / orange /
 green zones. States may, however, also choose to categorize a subdivision/ward or any other appropriate administrative unit as
 red/orange/green zone after detailed analysis at their end, duly taking into
 consideration the geographical spread of cases, contacts and their zone of
 influence in terms of disease spread.
- 3. While deciding the categorization, the States may take into consideration the parameters indicated below. Information on these parameters will be shared by MoHFW from time to time. As a normative guidance, the benchmarks/thresholds with respect to these parameters mentioned in the table below may be taken into consideration. However, the benchmarks/thresholds for critical and desirable levels are dynamic and may be revised by MoHFW as per evolving situation at the field level. A decision regarding aforesaid categorization of administrative units into zones may be

taken by States by undertaking a multi-factorial analysis based on the combination of these parameters.

S. No.	Parameter	Critical	Desirable
1	Total Active cases	> 200	Zero cases or no reported case in last 21 days
2	Active Cases per Lakh population	>15	9
3	Doubling rate (calculated over 7 days period)	< 14 days	> 28 days
4	Case Fatality rate	> 6%	< 1%
5	Testing Ratio (No of Tests per Lakh population)	< 65	> 200
6	Sample positivity rate (confirmation rate)	>6%	< 2%

4. The most important task, once the zones are identified is field action in terms of implementation of Containment Plan of Action. Guidelines in this regard have already been made available to states and may be accessed at:

https://www.mohfw.gov.in/pdf/Containmentplan16052020.pdf and https://www.mohfw.gov.in/pdf/UpdatedContainmentPlanforLargeOuthreak sofCOVID19Version3.0.pdf

This entails identification of **Containment Zones** and **Buffer Zones** inside red/orange zones, from where cases have been primarily reported.

- It is important to ensure that the Containment Zones are delineated based on:
 - Mapping of cases and contacts
 - ii. Geographical dispersion of cases and contacts
 - iii. Area having well demarcated perimeter
 - Enforceability of perimeter control

- 6. It is reiterated that this is the primary area where intensive action is to be carried out with the aim of breaking the chain of transmission. This area should therefore be appropriately defined by the district administration/local urban bodies with technical inputs at local level. For effective containment, it is advisable to err on the side of caution.
- Once the Containment Zone is delineated the perimeter will be defined and there would be strict perimeter control with:
 - Establishment of clear entry and exit points,
 - No movement to be allowed except for medical emergencies and essential goods and services,
 - iii. No unchecked influx of population to be allowed and
 - People transiting to be recorded and followed through IDSP.
- Stringent action needs to be initiated within these Containment Zones in terms of:
 - Active search for cases through physical house to house surveillance by Special Teams formed for the purpose
 - Testing of all cases as per sampling guidelines
 - iii. Contact tracing
 - Identification of local community volunteers to help in surveillance, contact tracing and risk communication
 - v. Extensive inter-personal and community based communication
 - vi. Strict enforcement of social distancing
 - vii. Advocacy on hand hygiene, respiratory hygiene, environmental sanitation and wearing of masks / face-covers
 - viii. Clinical management of all confirmed cases
- 9. A Buffer Zone has to be delineated around each containment zone. It shall be appropriately defined by the district administration/local urban bodies with technical inputs at local level. Buffer zone will be primarily the area wherein additional & focused attention is needed so as to ensure that infection does not spread to adjoining areas. For effective containment, it is of paramount importance that the buffer zone is sufficiently large.

- The focus areas of action in the Buffer Zone include: 10.
 - Extensive surveillance for cases through monitoring ILI/SARI cases in health facilities
 - ii. Identify health facilities (Govt & private), healthcare workforce available (ASHAs/ANMs/AWW & doctors in PHCs/CHCs/District Hospitals)
 - iii. All health facilities (including clinics) to report clinically suspect cases of COVID-19 on real time basis to the control room at the district level
 - iv. Create community awareness on preventive measures such as personal hygiene, hand hygiene and respiratory etiquettes.
 - v. Use of face cover, physical distancing through enhanced IEC activities.
 - vi. Ensure social distancing
- A Containment Operation (large outbreak or cluster) is deemed successful when no case is reported in last 28 days from the containment zone.
- Effective field action in these containment zones and buffer zones will be 12. critical to contain the disease.
- All States are accordingly requested to initiate necessary action in terms 13. of categorization of red/orange/green zones, delineation of containment zones and buffer zones and their notification.

I would once again place on record my appreciation of your leadership and the efforts of your team in managing COVID-19. I look forward to your continued support in containing COVID-19.

Yours sincerely

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Adar 17.5.20

(Preeti Sudan)