GOVERNMENT OF NAGALAND HOME DEPARTMENT NAGALAND STATE DISASTER MANAGEMENT AUTHORITY NAGALAND: KOHIMA

NO. NSDMA-ER-COVID19/301/2020(Pt. II)/5537

Kohima, dated, the 30th July 2021.

NOTIFICATION

Sub: Revised Guidelines for Home Isolation.

Whereas, one of the primary interventions in the unfolding crises of COVID-19 pandemic is to break the chain of transmission by reducing people-to-people contact such as isolation of COVID-19 patients, home quarantine of contacts, social distancing measures etc.;

Whereas, the Government of Nagaland has been taking all possible measures including advocating COVID Appropriate Behaviours, strengthening health infrastructure for detection, treatment and management of COVID-19 patients and have put measures for isolation including imposing containment, lockdowns from time to time, etc for the management of the COVID-19 pandemic;

Whereas, in accordance with the Government of India advisory/ guideline on Home Isolation of COVID-19 patients, asymptomatic and mildly symptomatic patients cases, are permitted to undergo Home Isolation subject to conditions;

Whereas, a large number of patients who have opted for home isolation are falling seriously ill, which is compounded by not following Home Isolation guidelines and medication carefully;

Whereas, home isolation of COVID-19 patients comes at a risk of transmitting the infection to other residents of the household and neighbourhood;

Whereas, it is noted that forced hospitalization or forced institutional isolation of a person is against the principles of liberty and freedom of choice;

Whereas, it is observed that the severity of the disease is much higher as compared to the 1st Wave- higher infectivity rate, faster development of complications and deaths, especially among elderly and those with co-morbidities owing to highly transmissible and virulent variants of COVID-19 contagion;

Therefore, in view of the above mentioned situation, the Guidelines for home isolation is hereby revised as follows in supersession to the guidelines issued previously:

A. Definitions:

1. Asymptomatic patient:

Asymptomatic patients are those laboratory confirmed cases not experiencing any symptoms and having oxygen saturation at room air of more than 94%.

2. Mild symptomatic patient:

Mild symptomatic patients are those laboratory confirmed cases with any COVID-19 like symptoms without shortness of breath and oxygen saturation at room air of more than 94%.

NB: Any persons with any COVID-19 like symptoms whose test result is awaited or yet to be tested for COVID-19 shall be considered and treated as COVID-19 patient unless proved otherwise.

3. High risk cases:

High risk cases are persons who are-

a) Elderly and who are with comorbid conditions- Hypertension, Diabetes, Heart disease, Chronic lung/ liver/ kidney disease, Cerebro-vascular disease, immune compromised status (HIV, Transplant recipients, Cancer therapy etc).

Revised Guideline for Home IsolationPage 1 of 9



- b) Pregnant Women in their third trimester.
- c) Children below 10 years of age.

4. House under Isolation:

When COVID-19 cases is detected in a household and the COVID-19 patients has opted for Home Isolation where other members of the household who are tested negative will be residing, the house shall be declared as **House under Isolation**.

NB: If a separate/alternate building where there is no resident is arranged for COVID-19 patient to stay, then that building will be declared as <u>House under Isolation</u>. While the building where other members of the household who are tested negative are staying will be declared as <u>Home under Quarantine</u>.

5. Home under Quarantine:

In a household if all COVID-19 patients opt for COVID-19 Care Centre or get admitted to a COVID-19 hospital or arrangement is made for stay in a separate/ alternate building where there is no resident while other members of the household who are tested negative remain in the house, it shall be designated as **Home under Quarantine** subject to the following conditions

- a) Such household members shall undergo Home Quarantine for 7 days.
- b) All household members shall be retested on completion of 7 days Home Quarantine. If they are tested negative shall end Home Quarantine and will be allowed to resume normal life.
 - NB: Children below 2 years shall be exempted from testing unless they are symptomatic or with co-morbidity.
- c) Shall report to the DTF Control Room (dedicated Phone Number given in the Notice served) in case of development of symptoms in any members of the house hold.
- d) Shall keep their phones 'on' at all times and respond to the tele-monitoring team.
- e) All preventive and safety protocols as per the Guidelines for Home Quarantine (a copy may be obtained from the O/o of the Chief Medical Officer or may be downloaded from https://www.mohfw.gov.in/pdf/Guidelinesforhomequarantine.pdf) shall be imposed.

NB: If any of the household members are tested positive during the period of home quarantine or during the retests at the end of Home Quarantine period, the household shall be declared as House under Isolation, unless the COVID-19 patients are shifted to CCC or COVID-19 Hospital or to a separate/alternate building where there is no resident.

B. Eligibility Criteria for Home Isolation:

Confirmed cases of Covid-19 Patients who are clinically assigned to be mild /asymptomatic shall be eligible to undergo home isolation, however permission for home isolation shall be strictly granted subject to fulfillment of the undermentioned conditions:

- 1. Certification from the treating doctor:
 - a) COVID-19 patient without co-morbidity: That the COVID-19 patient is clinically assigned as mild/ asymptomatic case and does not require any hospitalization for their COVID-19 condition.
 - b) COVID-19 patient with co-morbidity/ high risk cases: That the COVID-19 patient is clinically assigned as mild/ asymptomatic case and is also having co-morbid conditions/ is a high risk case and any hospitalization for his/her COVID-19 condition or immediate specialized medical care for his/her co-morbid health condition(s) is not required.

NB: COVID-19 Patient(s) who are asymptomatic or with mild symptoms suffering from immune compromised status (HIV, Transplant recipients, Cancer therapy etc.) are not



recommended for home isolation and shall only be allowed home isolation after proper evaluation &certification by the treating doctor.

2. Verification Report from the Community COVID-19 Task Forces (Ward/ Colony/ Khel/ Village) on availability of a healthy care giver and separate room which is well-ventilated with attached toilet.

NB: The care-giver should be available to provide care on 24x7 basis. A communication link between the care giver and health worker is a prerequisite for the entire duration of home isolation.

3. Undertaking By COVID-19 patient/ Care-Giver/ Guardian For Home Isolation (Annexure I).

C. Protocol to be followed during home isolation:

- 1. All members of the household with or without symptoms shall be tested for COVID-19 within the same day the patient was tested positive or within 1 day of beginning of home isolation. Children below 2 years shall be exempted from testing unless they are symptomatic or with co-morbidity.
- 2. All COVID-19 patients under home isolation shall be subjected to daily clinical monitoring and they shall report any development of danger signs to the DTF Control Room (dedicated Phone Number given in the Notice served).
- 3. The COVID-19 patients wherever possible, shall make necessary arrangements to monitor (Temperature, Oxygen saturation by Pulse oximeter as well as Blood Pressure and/or Blood Sugar in case of hypertensive or diabetics). However, the DTF shall be responsible for clinical monitoring as given in Section E.
- 4. Development of symptoms in any members of the household shall be immediately reported to the Control Room DTF (dedicated Phone Number given in the Notice served).
- 5. All COVID-19 patients shall keep their phones 'on' at all times and respond to the telemonitoring team.
- 6. The caregiver and all close contacts of such cases should take Hydroxychloroquine prophylaxis as per protocol subject to prescription by the treating doctor.
- 7. The patient/ guardian will fill in an undertaking on self-isolation and shall follow home quarantine guidelines
- 8. In addition, the guidelines on home-quarantine for other members shall be also followed (a copy may be obtained from the O/o the Chief Medical Officer or may be downloaded from: https://www.mohfw.gov.in/pdf/Guidelinesforhomequarantine.pdf).
- 9. COVID-19 patients as well as other individuals should be advised to use AarogyaSetu App.
- 10. Undertaking By Care-Giver/ Guardian For Home Isolation as well as Instructions for the patient& care givers on various safety protocols etc will remain as per the protocols issued earlier (1) SOP for Home Isolation dt. 5th Aug 2020 by Home Department, (2). Step-by-Step Guidance for Home Isolation of asymptomatic/ mild COVID-19 positive patients dt. 15th Aug 2020 by Health & Family Welfare department and (3). Revised Guidelines for Home Isolation of Mild/Asymptomatic COVID-19 Cases dt. 2nd July 2020 by Ministry of Health & Family Welfare department. It may be downloaded from the following links:
 - a. https://covid19.nagaland.gov.in/storage/advisories/1596634946.pdf
 - b. https://covid19.nagaland.gov.in/storage/advisories/1599824388.pdf
 - c. https://www.mohfw.gov.in/pdf/RevisedguidelinesforHomelsolationofmildasymptomatic COVID19cases.pdf
- 11. Treatment for patients with mild/asymptomatic disease in home isolation

The treatment for patients with mild/asymptomatic disease in home isolation will be as per the State Clinical Management protocol issued from time to time. The latest treatment



protocol for patients under home isolation (asymptomatic & mild cases) dt.7th May 2021 is reproduced here under:

- a. Home Isolation/ COVID Care Center for symptomatic management (Antipyretics, Antitussives)
 - 1) Tab. Vit-C 500 mg 1 Tab BD x 14 days
 - 2) Tab. Zinc 50 mg 1 Tab daily x 7 days
 - 3) Tab. Ivermectin 12 mg (200 mg/Kg) once daily 3 to 5 days may be considered in patients with high-risk features. (Avoid in pregnant and Lactating women)
 - 4) Inhalational Budesonide 800 mcg BD for 5 days via Metered Dose Inhaler or Dry powder inhaler if fever and/or cough persists for more than 5 days.
- b. Further, the patients are advised the following:
 - 1) Patients must be in communication with a treating physician and promptly report in case of any deterioration.
 - 2) Continue the medications for other comorbid illness after consulting the treating physician.
 - 3) Patients to follow symptomatic management for fever, running nose and cough, as warranted.
 - 4) Patients may perform warm water gargles or take steam inhalation twice a day.
 - 5) If fever is not controlled with a maximum dose of Tab. Paracetamol 650mg four times a day, consult the treating doctor who may consider advising other drugs like non-steroidal anti-inflammatory drug (NSAID) (ex: Tab. Naproxen 250 mg twice a day).
 - 6) In case of falling oxygen saturation or shortness of breath, the person should require hospital admission and seek immediate consultation of their treating doctor/surveillance team.
 - 7) When to seek medical attention (Danger Signs)

Patient /Caregiver will keep monitoring their health. Immediate medical attention must be sought if serious signs or symptoms develop. These could include:

- a) Difficulty in breathing,
- b) Dip in oxygen saturation (SpO2 < 94% on room air)
- c) Persistent pain/pressure in the chest,
- d) Mental confusion or inability to arouse,
- e) Increasing fever or cough especially if more than 3 days

D. Restriction of Movement

- a. No Persons under Home Isolation, Home Quarantine and Home Under Quarantine will be allowed to leave their house till they are released from the isolation.
- b. No visitors are allowed to enter the house. Only authorized personnel will have access to these houses during the period of confinement.

E. Discharge from Home Isolation

- 1. Discharge from home isolation shall as per the Discharge policy of the State. The latest discharge policy dated 20th May 2021 is reproduced in case of asymptomatic and mild cases as follows:
 - Asymptomatic cases:

Patient has completed 10 days isolation from the day of sample collection or from onset of symptoms and have remained asymptomatic.

➤ Mild symptomatic cases:

Patients under home isolation will be discharged after at least 10 days have passed from onset of symptoms and no fever for the last 3 days.

NB: If immune-compromised, the patient will be tested 10 days from the day of first sample collection by RT-PCR/ Truenat/ CBNAAT. If positive, retest can be done after a gap of 3 days.

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- 2. After a patient is discharged from home isolation, he/she will further undergo home quarantine for 7 days more. While other members of the household will be allowed to resume normal life unless any member develop symptoms.
- 3. The release from the Home Quarantine and Home Under Quarantine will be done by Community Task Force.
- 4. There is no need for testing after the home isolation period is over. However, for those who wishto retest prior to discharge from home isolation may do the testing on payment at the rate approved by the Government.

F. Role of State Authorities/District Task Force:

- 1. The DTF shall issue necessary instructions to the testing centre/ hospital (public and private):
 - Reports of all positive cases are furnished on Real Time basis to the Control Room.
 - ➤ To arrange a dedicated area for isolation of the COVID-19 patients while waiting for the formalities for shifting to either Home Isolation or COVID-19 Care Centre or COVID-19 Hospital as the case may be is completed.
 - > The isolation area is always kept under supervision to avoid mingling with others.
 - All COVID-19 patients are to be transferred by dedicated ambulance to either Home Isolation or COVID-19 Care Centre or COVID-19 Hospital as the case may be.
- 2. The DTF shall ensure timely verification of availability of a healthy care giver and separate &well-ventilated room with attached toilet facilities by the Community COVID-19 Task Forces. In case of any unexpected delay, the patients opting for home isolation may be temporarily kept in the nearest COVID-19 Care Centre.
- 3. While earlier the buildings were sealed, now there will be no sealing per se but the focus is more on monitoring the residents and restricting the movements of patients.
- 4. The DTF shall serve the Notice of Home Isolation, Home Quarantine and Home Under Quarantine. However, the Notice shall be publicized under no circumstances. Besides, Home Isolation Kits, proper instruction on treatment, monitoring, Do's& Don'ts, IEC materials is to be provided to all patients.
- 5. There shall be no affixing posters or other signage outside the residences of those found COVID-19 patients as per Hon'ble Supreme Court order. However, a signage as given in **Annexure:** IImay be affixed at the entrance of the house to avoid visitors to such homes.
- 6. The DTF shall setup a dedicated call centre for tele-monitoring of patients under home isolation.
- 7. The health status of patients without co-morbidities shall be monitored through telemonitoring on a daily basis. However, all high risk patients shall be monitored daily by the field staff/surveillance teams through personal visits in addition to tele-monitoring.
- 8. The clinical status of each case shall be recorded by the field staff/call centre (body temperature, pulse rate and oxygen saturation as well as Blood Pressure and/or Blood Sugar in case of hypertensive or diabetics)(Annexure III). The field staff will guide the patient on measuring these parameters and provide the instructions (for patients and their caregivers). This mechanism to daily monitor those under home isolation shall be strictly adhered to.
- 9. The DTF shall ensure details about patients under Home Isolation are updated on COVID-19 portal and facility app (with DSO as user).
- 10. The Team headed by Director (FW) at State level and the Chief Medical Officer atDistrict level shall monitor all activities of Home Isolation, Home Quarantine and Home Under Quarantine as well updation of the records.

The State and District level monitors shall randomly call patients under Home Isolation or persons under Home Quarantine and Home Under Quarantine on a daily basis to assess the quality of services provided by the tele-monitoring & field staff/surveillance teams. Accordingly, remedial measures are to taken up swiftly wherever necessary.

11. The DTF shall ensure sufficient dedicated ambulances available to shift patients in case of violation or need for treatment.

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- 12. All eligible persons unless contraindicated should be motivated to take COVID-19 Vaccination. Vaccination should be taken up under Near to Home Vaccination Centre mode.
- 13. The Community Task Force in coordination with DTF shall monitor any violation of home isolation norms.

G. Penalty:

- 1. Patients under Home Isolation who repeatedly fails to respond to tele-monitoring team shall be shifted to COVID-19 Care Centre.
- 2. Violation of above mentioned SOP or any instances of non-cooperation or non-compliance including by patients under Home Isolation or persons under Home Quarantine shall be punishable as per the provisions of the relevant Laws and Acts.

(ABHIJIT SINHA) IAS

Principal Secretary to the Govt. of Nagaland

NO. NSDMA-ER-COVID19/301/2020(Pt. II)/5537

Kohima, dated, the 30th July 2021.

Copy to:

- 1. The Commissioner & Secretary to Governor, Nagaland for kind information
- 2. The Principal Secretary to Chief Minister, Nagalandfor kind information
- 3. The Sr. P.S. to Deputy Chief Minister, Nagaland for kind information
- 4. The Sr. P.S. to Speaker, Nagaland for kind information
- 5. The Sr. P.S. to all Ministers/ Advisors for kind information
- 6. The Director General of Police, Nagaland for kind information
- 7. The Commissioner, Nagalandfor kind information
- 8. All AHoDs for kind information
- 9. The Principal Accountant General, Nagalandfor kind information
- 10. The Chief of Staff Hq, 3 Corps, Rangapahar/ IGAR (N) Kohima for kind information
- 11. The Station Commander, Military Station, Jakhama/ Chief Engineer, Project Sewak, Dimapur/ DIG, CRPF, Kohima for information
- 12. All HoDs for information
- 13. The Deputy Commissioners of all the districts for information and necessary action.
- 14. The Commissioner of Police Dimapur and the SPs of all the districts for information.
- 15. The Director, IPR for wide publicity
- 16. The Station Director, AIR and Doordarshan, Kohima for information and publicity
- 17. The Commandant, 93 Bn. BSF, Chedema/ Commandant, 111 Bn. BSF, Satakha for information

(ABHIJIT SINHA) IAS

Principal Secretary to the Govt. of Nagaland

Application No:																									
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Annexure I

UNDERTAKING BY COVID-19 PATIENT FOR HOME ISOLATION

(To be submitted to the District Task Force)

			Smti:				
	• • • • • •	•••••	, House No:	Colony/	Village	•••••	
			, in sour	nd mind	and to the	best of	my
knowledge, do	here	eby decla	are the under mentioned requisite information for consideration	on of Ho	me Isolation	:	·

- 1. My application for Home Isolation is with the full knowledge of my family members and I have informed my village council/urban local body.
- 2. That the following facilities are available in my home:
 - a. A single room with proper ventilation with an attached bathroom at my house.
 - b. A dedicated young and healthy caregiver available to provide care 24×7.
 - c. Facility for communication is available.
 - d. Sufficient quantities of masks and hand gloves are available.
 - e. Appropriate disinfectants in sufficient quantities are available.
 - f. Fingertip pulse oximeter and thermometer may be made available.
- 3. That, <u>I do not haveany</u>or <u>I have(tick whichever is applicable)</u> medical history of Co-morbidities like hypertension, diabetes, obesity, thyroid disease, cancer, Chronic lung/ liver/ kidney disease including need for dialysis, heart disease, stroke, Tuberculosis, PLHA or immune-compromised, on steroids or immune-suppressants, etc.
- 4. That, I do hereby voluntarily undertake to maintain strict self-isolation and follow the guidelines of home isolation at all times throughout the prescribed period.
- 5. That, I shall monitor my own health and regularly inform the health status to the District Surveillance Officer (DSO) for further follow up by the surveillance teams.
- 6. That, I shall contact the District Task Force and, or call the toll free State Health Helpline 1800 345 0019, in case I suffer from any deteriorating symptoms or any of my close family contacts develops any symptoms consistent with COVID-19.
- 7. If any complication arises out of my non-disclosure, I shall be solely held responsible.
- 8. For any act of commission or omission or breach of the Guidelines on Home Isolation, I shall be liable for punishment as per the provision of the Nagaland Epidemic Disease (COVID-19) Regulations, 2020 under the Epidemic Disease Act 1897.
- 9. That in the event of non compliance of the mandatory requirement of the guidelines as stipulated as per the SOP formulated by the Government, I will not be eligible for the home isolation.

NB: Duly filled in Application to be submitted to the District Task Force by WhatsApp or by Email.

Signature	Date
Valid Contact Number	Valid Alternate Number:

FOR OFFICIAL USE ONLY

APPLICATION	APPROVED
AFFLICATION	REJECTED

Signature & Seal Impression of the Approving Authority

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SIGNAGE TO BE AFFIXED AT THE ENTRANCE OF THE HOUSE TO AVOID VISITORS TO HOMES UNDER ISOLATION/ HOME UNDER QUARANTINE

OUR HOUSE UNDER ISOLATION

OUR HOUSE UNDER QUARATINE

Annexure: 3

Daily Health Check-Up Chart

		Rate Min	Satur	gen ration O2)		erature gree iius)		ratory er Min	Blood P (mn	Blood Sugar*		
Day	Morning	Evening	Morning	Evening	Morning	Evening	Morning	Evening	Morning	Evening	Morning	Evening
1.												
2.												
3.												
4.												

NB: * For Hypertensive and Diabetic.