संचालनात्मक स्वास्थ्य सेवायें
मध्य प्रदेश

क्रमांक/आई.डी.एस.पी/2020/444

भोपाल, दिनांक 30/5/2020

प्रति,

समस्त जिला कलेक्टर
(म.प.)

विषय: होम क्वारंटाइन के आदेश का उल्लंघन करने वाले के विरुद्ध कार्यवाही के सम्बन्ध में |

उपरोक्त विषयान्तरगत लेख है कि, भारत सरकार के निर्देशानुसार COVID-19 के संदर्भ में संबंधित व्यक्ति दलाल होम क्वारंटाइन के नियमों का पालन नहीं करने के कारण अन्य लोगों को संक्रमित होने का खतरा बना रहता है। इस हेतु संबंधित के विरुद्ध कार्यवाही करने के अधिकार मध्य प्रदेश पंचायत हेल्थ अधिनियम, 1949, मध्य प्रदेश एपिडेमिक डिजीज कोविड-19, विनियमन 2020 एवं डिजास्ट मैनेजमेंट अधिनियम, 2005 के अंतर्गत प्रदत्त है।

इन अधिकारों का उपयोग करने हुए संबंधित व्यक्ति से संलग्न प्राप्त में अंदरटिकिंग लिया जाना अनिवार्य होगा। होम क्वारंटाइन के नियमों का प्रथम उल्लंघन किये जाने पर संबंधित व्यक्ति पर रु. 2,000/- का अर्धदंड लगाया जाना एवं पुनः उल्लंघन किये जाने पर उस व्यक्ति को तत्काल क्वारंटाइन सेंटर/सीरीसी केंद्र पर भेजा जाना सुनिश्चित करें।

(पैल आर्थर फिशबर्ग)

विकु.अधि सह्य स्वास्थ्य आयुक्त
म.प.

पु.क्रमांक/आई.डी.एस.पी/2020/

1. अमर मुद्रा सचिव, मध्यप्रदेश शासन, लोक स्वास्थ्य एवं परिवार कल्याण (म.प.) |
2. समस्त समभाग आयुक्त (म.प.) |
3. संचालक, स्वास्थ्य सेवायें, मध्यप्रदेश |
4. मिशन संचालक, राष्ट्रीय स्वास्थ्य मिशन, मध्यप्रदेश, भोपाल |
5. अतिरिक्त मिशन संचालक, राष्ट्रीय स्वास्थ्य मिशन, मध्यप्रदेश, भोपाल |
6. समस्त मुद्रा चिकित्सा एवं स्वास्थ्य अधिकारी (म.प.) |
7. उप संचालक (आई.डी.एस.पी), संचालनात्मक स्वास्थ्य सेवायें (म.प.) |

विकु.अधि सह्य स्वास्थ्य आयुक्त
म.प.
Undertaking on Home Quarantine

I, s/w/d of resident of being home quarantined, do hereby undertake to maintain home quarantine at all times for days (prescribed period). During this period I shall monitor my health and those around me and interact with the assigned surveillance team/with the call Center (104), in case I suffer from any detoriating symptoms or any of my close family contact develops any symptoms consistent with COVID-19.

I have been explained in detail about the precautions that I need to follow while I am under quarantine.

I will abide by all guidelines/protocols/orders issued by the Health Department/District Authorities from time to time. I am liable to be fined Rs 2,000 for non-adherence to the order of quarantine issued by the District Magistrate, as provided u/s 7 of the Madhya Pradesh Epidemic Diseases, Regulation 2020. In case of subsequent non-adherence to the order, I will be liable to be shifted to Quarantine Centre/CCC Center.

Additionally, I am liable to be acted under the prescribed law for any non-adherence to quarantine protocol.

*Prescribed Law

- The Madhya Pradesh Public Health Act, 1949
- The Disaster Management Act, 2005.

Name
Signature
Date
Full Address and Contact Number:
No. PS/Health/17/Medi-3/595  In exercise of the powers conferred under Section 2, 3 & 4 of The Epidemic Diseases Act, 1897, the Governor of Madhya Pradesh is pleased to issue the following regulations regarding COVID-19 (Corona Virus Disease 2019)


2. “Epidemic Disease” in these regulations means COVID-19 (Corona Virus Disease 2019) which has been notified as Notified Epidemic disease and “Notified Infectious Disease” under Madhya Pradesh Public Health Act, 1949 by notification dated 18.03.2020.

3. Authorized persons under this Act are Principal Secretary (Public Health & Family Welfare) at the State Level, District Magistrate, Commissioner of Municipal Corporation, Sub Divisional Magistrate (SDM), Chief Medical and Health Officer and Civil Surgeon cum Hospital Superintendent in the districts.

4. Staff of all Government Departments and Organization of the concerned area will be at the disposal of the District Magistrate, Sub Divisional Magistrate (SDM), and officers authorized by the Department of Public Health and Family Welfare, for discharging the duty of containment measures in the districts. If required, District Magistrate may order requisition of services and facilities of any other person/institution.
5. No persons/institution/organization will use any print or electronic or social media for dissemination of any information regarding COVID-19 without ascertaining the facts and prior clearance of the Principal Secretary ((Public Health & Family Welfare), Commissioner, Health, Commissioner Medical Education, Director (Public Health & Family Welfare), Director (Medical Education) or the District Magistrate as the case may be. This is necessary to avoid spread of any unauthenticated information and/or rumors regarding COVID-19. If any person/institution/organization is found indulging in such activity, it will be treated as a punishable offence under these Regulations.

6. All hospitals, nursing homes and clinical establishments (government or private) during screening of specified cases shall record the history of travel of the person to any country or area (as per the guidelines issued from time to time by Government of India) where COVID-19 has been reported. The history of contacts with the suspected or confirmed case of COVID-19 is required to be recorded. Contact tracing for patients (required as per the guidelines issued from time to time) will be conducted by the Health Department or by other identified staff. Information of all such cases must be given to District Integrated Disease Surveillance Unit and District Magistrate immediately.

7. If the owner or occupier(s) of any premises or any individual suspected/confirmed with COVID-19, refuses to take measures for prevention or treatment i.e., Home Quarantine/Institutional Quarantine/Isolation or any such person refuses to co-operate with, render assistance to, or comply with the directions of the Surveillance Personnel, the concerned District Magistrate having jurisdiction specifically in this regard, may pass an appropriate order and may proceed with proceedings under Section 133 of the Code of Criminal Procedure, 1973 (2 of 1974), or take any other coercive action as deemed necessary and expedient for enforcing such cooperation and assistance. In case of a minor, such Order shall be directed to the guardian or any other adult member of the family of the minor.

8. All advisories issued/or to be issued by the Government of India on COVID-19 will ipso facto be treated as directions under the Epidemic Diseases Act, 1897 in the State of Madhya Pradesh.

9. With the concurrence of Health and Family Welfare Department, Madhya Pradesh, District Disaster Management Committee headed by District Magistrate is authorized for planning strategy regarding containment measures for COVID-19 in their respective districts. The District Magistrate may co-opt more officers from different departments for District Disaster Management Committee for this activity under these regulations.
10. **Penalty**: Any person/institution/organization found violating any provisions of this regulation shall be deemed to have committed an offence punishable under Section 187/188/269/270/271 of the Indian Penal Code (45 of 1860). District Magistrate of a District may penalize any person/institution/organization if found violating provisions of these regulation or any further orders issued by the Government under these Regulations.

11. **Protection to persons acting under the Act**: No suit or legal proceedings shall lie against any person for anything done or intended to be done in good faith under this Act unless proved otherwise.

12. These regulations shall come into force immediately and shall remain valid for a period of one year from the date of publication of this notification.

By order and in the name of the Governor of Madhya Pradesh,

RAJEEV CHANDRA DUBEY, Secy.
लघुजनात्मक स्वास्थ्य सेवाएँ
मध्य प्रदेश
कामना-आए ही एक मिला 2020

प्रदेश

समस्त जिले महास्थान
समस्त मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी
समस्त सिंचाई सज्जन तथा मृदु स्वागतिक अधिकार

विषयः मध्य प्रदेश स्वास्थ्य हेल्थ एवं 1949 के माहरम COVID-19 के समाचार इत्यादि का भायोगानुसार
काम्यता होने के सम्बन्ध में

सन्दर्भः 1. मध्यप्रदेश शासन लोक स्वास्थ्य एवं परिवार कल्याण विभाग जालियाण, उदयपुर 18 अर्थव अधिसूचना
दिनांक 18 एवं 23 मार्च 2020।
2. मध्यप्रदेश शासन लोक स्वास्थ्य एवं परिवार कल्याण विभाग सरकार भारत उदयपुर अधिसूचना
दिनांक 23 मार्च 2020।

COVID-19 के तीव्र में जनम एवं तीन ग्रीष्मकालीन महीनों के जन्मभर अपने के दौरान विनम्रता का बढ़ावा करने की अधिकार होगी। आपके दौरान यह काम्यता होनी चाहिए नियम के अनुसार भी जान्ते। इसके लिए
COVID-19 के मध्य प्रदेश स्वास्थ्य हेल्थ एवं 1949 की माहरम अधिसूचना विभाग जालियाण की होना अधिसूचित किया गया है। मध्यप्रदेश में सरकारी स्वास्थ्य अधिकारी की जिला महास्थान, मध्य
चिकित्सा एवं स्वास्थ्य अधिकारी सभा समस्त निर्मल सज्जन तथा मृदु स्वागतिक अधिकारी की COVID-
19 के सन्दर्भ में इसी की तद्वित्तिकों (Complaints) में अभाव, परीक्षण एवं उपचार के संबंध में सम्बन्ध
की विधिविधाता विशेषज्ञता का बढ़ाकर दूरात्मक अधिकारियों को दृष्टि को हेल्थ पर विचार करने के
अधिकार प्राप्त है। (मध्यप्रदेश शासन लोक स्वास्थ्य एवं परिवार कल्याण एवं इत्यादि) विभाग महारत इत्यादि,
अधिसूचना दिनांक 18 एवं 23 मार्च 2020।

मध्य प्रदेश स्वास्थ्य हेल्थ एवं 1949 के माहरम अधिसूचना विभाग जालियाण के जन्मभर जनमार्ग के अनुसार अभाव, परीक्षण एवं उपचार के संबंध
सम्बन्ध में अधिकारियों का बढ़ाया होना होगा। इसके लिए जिला महास्थान, मध्यप्रदेश का उत्तराधिकारी को इमारत
करना है तो उसके लिए आधुनिक जालियाण के अधिकार तथा इन्कार्डिट अधिकारियों - जिला महास्थान - को
प्रदान किया गया है।

इसी अनुसार The Machya Pradesh Epidemic Diseases - COVID-19 Regulation 2020 के अनुसार COVID-19 के संक्रमण के जन्मभर अधिकारियों के जन्मभर जनमार्ग के अनुसार करने हेतु उचित किये गए है।

आपके दौरान COVID-19 के जन्मभर हेल्थ मध्य प्रदेश हेल्थ एवं 1949 एवं The Machya Pradesh Epidemic Diseases - COVID-19 Regulation 2020 के प्रतिक्रिया को बिना
परिस्थितियों/कार्यवाहियों हेतु उपयोग किया जाना है। इस सम्बन्ध में मालतिकाविविधताओं की क्षुद्र एवं शुद्ध है।

सबरू: उपरोक्तानुसार

पु.क्रमांक/आई.डी.एस.पी/2020/

भाषा: दिलाक /2020

1. प्रमुख सचिव, स्वास्थ्यसेवा संगठन, अप्र. राजस्थान, भारत प्रवासी: 3/83.
2. मिशन सचालक, राष्ट्रीय स्वास्थ्य मिशन, स्वास्थ्यसेवा संगठन, भारत
3. अतिरिक्त मिशन सचालक, राष्ट्रीय स्वास्थ्य मिशन, स्वास्थ्यसेवा संगठन, भारत
4. सचालक, स्वास्थ्य सेवायें, स्वास्थ्यसेवा संगठन
5. सामस्त क्षेत्रीय सचालक, समस्त राज्य स्वास्थ्य सेवायें, स्वास्थ्यसेवा संगठन

वि.क.अ. सह.स्वास्थ्य सेवा संगठन
OFFENCES AND PENALTIES FOR VIOLATION OF LOCKDOWN MEASURE

A. SECTION 51 TO 60 OF THE DISASTER MANAGEMENT ACT, 2005

51. Punishment for obstruction, etc.—Whoever, without reasonable cause—
(a) obstructs any officer or employee of the Central Government or the State Government, or a person authorised by the National Authority or State Authority or District Authority in the discharge of his functions under this Act; or
(b) refuses to comply with any direction given by or on behalf of the Central Government or the State Government or the National Executive Committee or the State Executive Committee or the District Authority under this Act,

shall on conviction be punishable with imprisonment for a term which may extend to one year or with fine, or with both, and if such obstruction or refusal to comply with directions results in loss of lives or imminent danger thereof, shall on conviction be punishable with imprisonment for a term which may extend to two years.

52. Punishment for false claim.—Whoever knowingly makes a claim which he knows or has reason to believe to be false for obtaining any relief, assistance, repair, reconstruction or other benefits consequent to disaster from any officer of the Central Government, the State Government, the National Authority, the State Authority or the District Authority, shall, on conviction be punishable with imprisonment for a term which may extend to two years, and also with fine.

53. Punishment for misappropriation of money or materials, etc.—Whoever, being entrusted with any money or materials, or otherwise being, in custody of, or dominion over, any money or goods, meant for providing relief in any threatening disaster situation or disaster, misappropriates or appropriates for his own use or disposes of such money or materials or any part thereof or wilfully compels any other person so to do, shall on conviction be punishable with imprisonment for a term which may extend to two years, and also with fine.

54. Punishment for false warning.—Whoever makes or circulates a false alarm or warning as to disaster or its severity or magnitude, leading to panic, shall on conviction, be punishable with imprisonment which may extend to one year or with fine.

55. Offences by Departments of the Government.—(1) Where an offence under this Act has been committed by any Department of the Government, the head of the Department shall be deemed to be guilty of the offence and shall be liable to be proceeded against and punished accordingly unless he proves that
Undertaking on Quarantine

I........................s/w/d of .................................... resident of ............................................being home quarantined, do hereby undertake to maintain home quarantine at all times for .....................days (prescribed period). During this period I shall monitor my health and those around me and interact with the assigned surveillance team/with the call Center (104), in case I suffer from any deteriorating symptoms or any of my close family contact develops any symptoms consistent with COVID-19.

I have been explained in detail about the precautions that I need to follow while I am under quarantine.

I will abide by all guidelines/protocols/orders issued by the Health Department/District Authorities from time to time. I am liable to be fined Rs 2,000 for non-adherence to the order of quarantine issued by the District Magistrate, as provided u/s 7 of the Madhya Pradesh Epidemic Diseases, Regulation 2020.

Additionally, I am liable to be acted under the prescribed law* for any non-adherence to quarantine protocol.

*Prescribed Law

- The Madhya Pradesh Public Health Act, 1949
- The Disaster Management Act, 2005.

Name..............................
Signature...........................
Date...................................
Full Address and Contact Number:
Government of India
Ministry of Health & Family Welfare

Guidelines for Home Isolation of very mild/pre-symptomatic COVID-19 cases

1. Scope
The present guidelines are in addition to guidelines on appropriate management of suspect/confirmed case of COVID-19 issued by MoHFW on 7th April, 2020. All suspected (awaiting test results) and confirmed cases of COVID-19 disease are currently being isolated and managed in a hospital setting with the intent to break the chain of transmission.

As per existing guidelines, during the containment phase the patients should be clinically assigned as very mild/mild, moderate or severe and accordingly admitted to (i) COVID Care Center, (ii) Dedicated COVID Health Center or (iii) Dedicated COVID Hospital respectively. However, very mild/pre-symptomatic patients having the requisite facility at his/her residence for self-isolation will have the option for home isolation.

2. Eligibility for home isolation
   i. The person should be clinically assigned as a very mild case/ pre-symptomatic case by the treating medical officer.
   ii. Such cases should have the requisite facility at their residence for self-isolation and also for quarantining the family contacts.
   iii. A care giver should be available to provide care on 24 x7 basis. A communication link between the caregiver and hospital is a prerequisite for the entire duration of home isolation.
   iv. The care giver and all close contacts of such cases should take Hydroxychloroquine prophylaxis as per protocol and as prescribed by the treating medical officer.
   v. Download Aarogya Setu App on mobile (available at: https://www.mohfw.gov.in/aarogya-setu-app/) and it should remain active at all times (through Bluetooth and Wi-Fi)
   vi. The patient shall agree to monitor his health and regularly inform his health status to the District Surveillance Officer for further follow up by the surveillance teams.
   vii. The patient will fill in an undertaking on self-isolation (Annexure I) and shall follow home quarantine guidelines. Such individual shall be eligible for home isolation.
   viii. In addition to the guidelines on home-quarantine available at: https://www.mohfw.gov.in/pdf/Guidelinesforhomequarantine.pdf, the required instructions for the care giver and the patient as in Annexure II shall be also followed.

3. When to seek medical attention
Patient / Care giver will keep monitoring their health. Immediate medical attention must be sought if serious signs or symptoms develop. These could include
   (i) Difficulty in breathing,
   (ii) Persistent pain/pressure in the chest.
   (iii) Mental confusion or inability to arouse,
   (iv) Developing bluish discolorations of lips/face and
   (v) As advised by treating medical officer

4. When to discontinue home isolation
Patients under home isolation will end home isolation if symptoms are clinically resolved and the surveillance medical officer certifies him to be free of infection after laboratory testing
Annexure I

**Undertaking on self-isolation**

I ........................................... S/W of ................................., resident of .................................................. being diagnosed as a confirmed/suspect case of COVID-19, do hereby voluntarily undertake to maintain strict self-isolation at all times for the prescribed period. During this period I shall monitor my health and those around me and interact with the assigned surveillance team with the call center (1075), in case I suffer from any deteriorating symptoms or any of my close family contacts develops any symptoms consistent with COVID-19.

I have been explained in detail about the precautions that I need to follow while I am under self-isolation.

I am liable to be acted on under the prescribed law for any non-adherence to self-isolation protocol.

Signature ______________________
Date ______________________
Contact Number ______________________
Instructions for care-givers

- **Mask:** The caregiver should wear a triple layer medical mask appropriately when in the same room with the ill person. Front portion of the mask should not be touched or handled during use. If the mask gets wet or dirty with secretions, it must be changed immediately. Discard the mask after use and perform hand hygiene after disposal of the mask.

- He/she should avoid touching own face, nose or mouth.

- **Hand hygiene** must be ensured following contact with ill person or his immediate environment.

- Hand hygiene should also be practiced before and after preparing food, before eating, after using the toilet, and whenever hands look dirty. Use soap and water for hand washing at least for 40 seconds. Alcohol-based hand rub can be used, if hands are not visibly soiled.

- After using soap and water, use of disposable paper towels to dry hands is desirable. If not available, use dedicated clean cloth towels and replace them when they become wet.

- **Exposure to patient:** Avoid direct contact with body fluids of the patient, particularly oral or respiratory secretions. Use disposable gloves while handling the patient. Perform hand hygiene before and after removing gloves.

- Avoid exposure to potentially contaminated items in his immediate environment (e.g. avoid sharing cigarettes, eating utensils, dishes, drinks, used towels or bed linen).

- **Food must be provided to the patient in his room**

- Utensils and dishes used by the patient should be cleaned with soap/detergent and water wearing gloves. The utensils and dishes may be re-used. Clean hands after taking off gloves or handling used items.

- **Use triple layer medical mask and disposable gloves** while cleaning or handling surfaces, clothing or linen used by the patient. Perform hand hygiene before and after removing gloves.

- The care giver will make sure that the patient follows the prescribed treatment.

- The care giver and all close contact will self-monitor their health with daily temperature monitoring and report promptly if they develop any symptom suggestive of COVID-19 (fever/cough/difficulty in breathing)

Instructions for the patient

- Patient should at all times use triple layer medical mask. Discard mask after 8 hours of use or earlier if they become wet or visibly soiled.

- Mask should be discarded only after disinfecting it with 1% Sodium Hypochlorite.

- Patient must stay in the identified room and away from other people in home, especially elderslies and those with co-morbid conditions like hypertension, cardiovascular disease, renal disease etc.

- Patient must take rest and drink lot of fluids to maintain adequate hydration

- Follow respiratory etiquettes all the time.

- Hands must be washed often with soap and water for at least 40 seconds or clean with alcohol based sanitizer.

- Don’t share personal items with other people.

- Clean surfaces in the room that are touched often (tabletops, door knobs, handles, etc) with 1% hypochlorite solution.

- The patient must strictly follow the physician’s instructions and medication advice.

- The patient will self-monitor his/her health with daily temperature monitoring and report promptly if develops any deterioration of symptom as detailed below.