

ક્રમાંક: વિ-૧/કઅવ/૧૦૨૦૨૦/૪૮૨
ગૃહ વિભાગ, સચિવાલય,
ગાંધીનગર
તા.૦૩.૦૫.૨૦૨૦.

પ્રતિ,

- પોલીસ મહાનિર્દેશક અને મુખ્ય પોલીસ અધિકારીશ્રી, ગુજરાત રાજ્ય, ગાંધીનગર.
- ગૃહ વિભાગ હેઠળના તમામ ખાતાના વડા.
- સર્વે પોલીસ કમિશનરશ્રીઓ/પોલીસ રેન્જના વડાશ્રીઓ/ જિલ્લા મેજિસ્ટ્રેટશ્રીઓ/ જિલ્લા પોલીસ અધિક્ષકશ્રીઓ/ મ્યુનિસિપલ કમિશનરશ્રીઓ.

વિષય:- COVID-19 સંદર્ભે હરજ પરના સલામતિ દળોની સુરક્ષા સંબંધમાં
ગાઇડલાઇન્સ તથા પ્રોટોકોલ બાબત

શ્રીમાન,

ઉપરોક્ત વિષય અન્વયે જણાવવાનું કે, COVID-19 સંદર્ભે હરજ બજાવતા પોલીસ અને સુરક્ષા દળોનું COVID-19 સામે પુરતું રક્ષણ થાય તે માટે કેન્દ્ર સરકાર દ્વારા ગૃહ મંત્રાલયના તા.૦૨.૦૫.૨૦૨૦ના પત્ર ક્રમાંક: 23011/44/2020-BPR&D થી Guidelines and protocol મોકલવામાં આવેલ છે.

પોલીસ તથા સલામતિ દળોના જવાનોને કોરોના સંક્રમણ સામે જરૂરી રક્ષણ મળી રહે તે માટે કેન્દ્રીય ગૃહ મંત્રાલયના પત્રમાં જણાવ્યાનુસારની બાબતોનો ચુસ્તપણે પાલન થાય તે જોવા વિનંતી છે.

નિર્દાણ: ઉપર મુજબ

આપનો વિશ્વાસુ,
(પંકજ દવે)

ઉપ સચિવ (કા.વ્ય.-૧)
ગૃહ વિભાગ

નકલ જાણ અર્થે રવાના:-

- મા.મુખ્ય મંત્રીશ્રીના મુખ્ય અગ્ર સચિવશ્રી, સ્વર્ણિમ સંકુલ, સચિવાલય, ગાંધીનગર.
- માન. રા.ક.મંત્રીશ્રી(ગૃહ)ના અંગત સચિવશ્રી, સ્વર્ણિમ સંકુલ - ૨, સચિવાલય, ગાંધીનગર.
- મુખ્ય સચિવશ્રીના સંયુક્ત સચિવશ્રી, બ્લોક નં.૧, સચિવાલય, ગાંધીનગર.
- અધિક મુખ્ય સચિવશ્રી(ગૃહ)ના અંગત સચિવશ્રી, સચિવાલય, ગાંધીનગર.

No 23011/44/2020-BPR&D
Government of India
Ministry of Home Affairs
IS-I Division

New Delhi

Dated: 2nd May, 2020

To,

The Chief Secretaries of all States and UTs
DGs/IGs of all States/UTs/CAPFs

Subject: Guidelines and protocols on prevention of COVID-19 for Police/Security Personnel (CAPTs) managing public.

The novel Corona virus disease (COVID-19) pandemic is a global health crisis which has affected a huge population the world over. The virus which causes the disease is highly infectious and even pre-symptomatic people can infect others. Any person who is in close contact with someone who has suspected or confirmed COVID-19 (e.g.: fever, cough, breathing difficulty, etc.) is at risk of contracting the disease.

2. Police and security personnel are among the frontline workers performing duties to implement lockdown orders and government guidelines for containing the spread of the disease. Since they have to interact with the public on a daily basis, they are likely to be more vulnerable to the coronavirus disease (COVID-19). **Instances have been noticed of police/security personnel getting infected.** Hence, it is imperative to make police personnel aware of the precautions to be taken while performing their assigned tasks in order to ensure that the strategy adopted for containing COVID-19 spread remains sustainable. In view of such cases, **it is considered expedient to issue these guidelines to reiterate the precautions and measures to be taken.**

3. Police authorities may take necessary precautions to sanitise the physical environment at the place of duty of police/security personnel. In this context, **Guidelines issued by the Ministry of Health and Family Welfare on Disinfection of Common Public Places (Annexure-I) may be followed by Police/CAPFs.**

4. Lot of awareness has been generated about COVID-19 through various campaigns by the Government. Police/Security personnel may be advised to keep themselves safe by practicing proper hygiene and physical distancing. Police authorities should also take care of safety and hygiene of its personnel by providing all necessary safety materials like hand sanitizers, soaps, masks, face shield, gloves, safe food, etc. and also train the personnel in their proper usage/disposal.

5. While it is likely that a majority of police personnel are deployed for attending to COVID-19 related duties and other policing duties, Head of Police Forces (HoPFs) may consider the option of Work from Home for personnel not deployed on frontline and where feasible.

6. To meet the challenge of COVID-19, and to ensure sustainment of control strategy for COVID-19, police forces need to prepare an effective second line of defence to make up for the police personnel who may be rendered ineffective due to COVID infection during the pandemic. Home Guards, Civil Defence, NCC cadets, Scouts and Guides and Student Police Cadets may be utilised in areas where there are not imminent law and order issues. They can especially be of help in maintaining order at the relief centres and in facilitating the maintenance of supply chain and for coordinating other essential services.

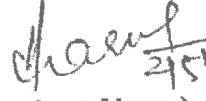
7. While performing COVID related duties, Police/Security personnel should help general public and deal with them with empathy and compassion especially with the weaker sections of the society. They should monitor religious and religious and social congregations during festivals to ensure social distancing. Police should also be watchful of migrant labourers/ slums to contain any unexpected and undesirable mass movement.

8. **Monitoring and Control:** Most State Police have already set up Control Rooms. It is reiterated that Control Rooms are the nerve centres of policing and must monitor, round the clock, the minutest concerns of policing during the pandemic. The Control Rooms may be expanded, resourced and designed to incorporate special COVID-19 Cells, to exclusively look after all issues relating to the pandemic. The staff manning these COVID-19 cells should be trained on elementary modules relating to the epidemic and briefed about appropriate responses to help engage with issues and scenarios they are likely to be confronted with. Such COVID-19 Cells should be adequately equipped with men and material, including Drones which may be used for aerial reconnaissance, if required on urgent basis.

9. Police authorities should strictly apply self-quarantine rules to its members, when needed, as per the guidelines issued by the Ministry of Health and Family Welfare.

10. **Guidelines (Annexure-II)** have been drawn in consultation with the Ministry of Health and Family Welfare on prevention of COVID-19 for Police/Security personnel managing public. Authorities concerned in all States and UTs and the CAPFs are requested to follow these guidelines and disseminate information in appropriate format and language for easy understanding by the police/security personnel deployed for COVID-19 related duties.

Yours faithfully,


(Archana Varma)
Deputy Secretary (IS-I)

Page 2 of 18

Annexure-I

COVID-19: Guidelines on disinfection of common public places including offices

Scope: This document aims to provide interim guidance about the environmental cleaning /decontamination of common public places including offices in areas reporting COVID-19.

Coronavirus Disease 2019 (COVID -19) is an acute respiratory disease caused by a novel Coronavirus (SARS-CoV-2), transmitted in most instances through respiratory droplets, direct contact with cases and also through contaminated surfaces/objects. Though the virus survives on environmental surfaces for varied period of time, it gets easily inactivated by chemical disinfectants.

In view of the above, the following guidelines are to be followed, especially in areas reporting COVID-19. For ease of implementation the guideline divided these areas into (i) indoor areas, (ii) outdoor areas and (iii) public toilets.

1. Indoor areas including office spaces

Office spaces, including conference rooms should be cleaned every evening after office hours or early in the morning before the rooms are occupied. If contact surface is visibly dirty, it should be cleaned with soap and water prior to disinfection. Prior to cleaning, the worker should wear disposable rubber boots, gloves (heavy duty), and a triple layer mask.

- Start cleaning from cleaner areas and proceed towards dirtier areas.
- ☐ All indoor areas such as entrance lobbies, corridors and staircases, escalators, elevators, security guard booths, office rooms, meeting rooms, cafeteria should be mopped with a disinfectant with 1% sodium hypochlorite or phenolic disinfectants. The guidelines for preparing fresh 1% sodium hypochlorite solution is at **Annexure I-A**.
- High contact surfaces such elevator buttons, handrails / handles and call buttons, escalator handrails, public counters, intercom systems, equipment like telephone, printers/scanners, and other office machines should be

cleaned twice daily by mopping with a linen/absorbable cloth soaked in 1% sodium hypochlorite. Frequently touched areas like table tops, chair handles, pens, diary files, keyboards, mouse, mouse pad, tea/coffee dispensing machines etc. should specially be cleaned.

- For metallic surfaces like door handles, security locks, keys etc. 70% alcohol can be used to wipe down surfaces where the use of bleach is not suitable.
- Hand sanitizing stations should be installed in office premises (especially at the entry) and near high contact surfaces.
- In a meeting/conference/office room, if someone is coughing, without following respiratory etiquettes or mask, the areas around his/her seat should be vacated and cleaned with 1% sodium hypochlorite.
- Carefully clean the equipment used in cleaning at the end of the cleaning process.
- Remove PPE, discard in a disposable PPE in yellow disposable bag and wash hands with soap and water.
- In addition, all employees should consider cleaning the work area in front of them with a disinfecting wipe prior to use and sit one seat further away from others, if possible.

2. **Outdoor Areas:** Outdoor areas have less risk than indoor areas due to air currents and exposure to sunlight. These include bus stops, railway platforms, parks, roads, etc. Cleaning and disinfection efforts should be targeted to frequently touched/contaminated surfaces as already detailed above.

3. Public toilets :

Sanitary workers must use separate set of cleaning equipment for toilets (mops, nylon scrubber) and separate set for sink and commode). They should always wear disposable protective gloves while cleaning a toilet.

Areas	Agents / Toilet cleaner	Procedure
Toilet pot/ commode	Sodium hypochlorite 1%/ detergent Soap powder / long handle angular brush	<ul style="list-style-type: none"> • Inside of toilet pot/commode: • Scrub with the recommended agents and the long handle angular brush. • Outside: clean with recommended agents; use a scrubber.
Lid/ commode	Nylon scrubber and soap powder/detergent 1% Sodium Hypochlorite	<ul style="list-style-type: none"> • Wet and scrub with soap powder and the nylon scrubber inside and outside. • Wipe with 1% Sodium Hypochlorite
Toilet floor	Soap powder /detergent and scrubbing brush/ nylon broom 1% Sodium Hypochlorite	<ul style="list-style-type: none"> • Scrub floor with soap powder and the scrubbing brush • Wash with water • Use sodium hypochlorite 1% dilution
Sink	Soap powder / detergent and nylon scrubber 1% Sodium Hypochlorite	<ul style="list-style-type: none"> • Scrub with the nylon scrubber. • Wipe with 1% sodium hypochlorite
Showers area / Taps and fittings	Warm water Detergent powder Nylon Scrubber 1% Sodium Hypochlorite/ 70% alcohol	<ul style="list-style-type: none"> • Thoroughly scrub the floors/tiles with warm water and detergent • Wipe over taps and fittings with a damp cloth and detergent. • Care should be taken to clean the underside of taps and fittings. • Wipe with 1% sodium hypochlorite/ 70% alcohol
Soap dispensers	Detergent and water	<ul style="list-style-type: none"> • Should be cleaned daily with detergent and water and dried.

- 70% Alcohol can be used to wipe down surfaces where the use of bleach is not suitable, e.g. metal. (Chloroxylenol (4.5-5.5%)/ Benzalkonium Chloride or any other disinfectants found to be effective against coronavirus may be used as per manufacturer's instructions)
 - Always use freshly prepared 1% sodium hypochlorite.
 - Do not use disinfectants spray on potentially highly contaminated areas (such as toilet bowl or surrounding surfaces) as it may create splashes which can further spread the virus.
 - To prevent cross contamination, discard cleaning material made of cloth (mop and wiping cloth) in appropriate bags after cleaning and disinfecting. Wear new pair of gloves and fasten the bag.
 - Disinfect all cleaning equipment after use and before using in other area.
 - Disinfect buckets by soaking in bleach solution or rinse in hot water.
4. **Personal Protective Equipment (PPE):** Wear appropriate PPE which would include the following while carrying out cleaning and disinfection work.
- Wear disposable rubber boots, gloves (heavy duty), and a triple layer mask
 - Gloves should be removed and discarded damaged, and a new pair worn.
 - All disposable PPE should be removed and discarded after cleaning activities are completed.
 - Hands should be washed with soap and water immediately after each piece of PPE is removed, following completion of cleaning. (Refer to **Annexure I-B: Steps of Hand Hygiene**)

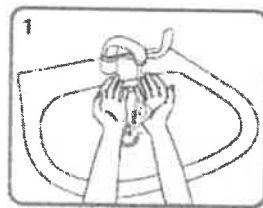
Masks are effective if worn according to instructions and properly fitted. Masks should be discarded and changed if they become physically damaged or soaked. (**Annexure-I-C: Guidelines for use of mask**)

Annexure-I -A

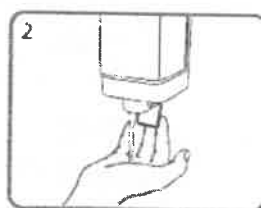
Guidelines for Preparation of 1% sodium hypochlorite solution		
Product	Available chlorine	1percent
Sodium hypochlorite – liquid bleach	3.5%	1 part bleach to 2.5 parts water
Sodium hypochlorite – liquid	5%	1 part bleach to 4 parts water
NaDCC (sodium dichloro-isocyanurate) powder	60%	17 grams to 1 litre water
NaDCC (1.5 g/ tablet) – tablets	60%	11 tablets to 1 litre water
Chloramine – powder	25%	80 g to 1 litre water
Bleaching powder	70%	7g to 1 litre water
Any other	As per manufacturer's Instructions	

Steps of Hand Hygiene

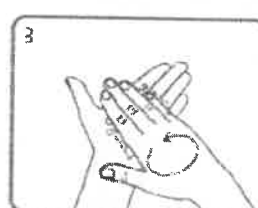
Hand-washing technique with soap and water



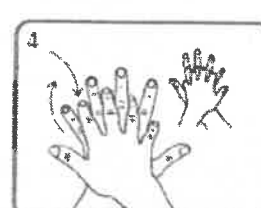
Wet hands with water



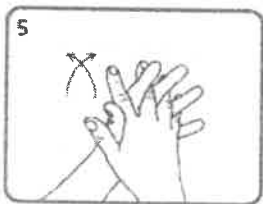
Apply enough soap to cover all hand surfaces



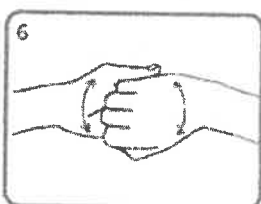
Rub hands palm to palm



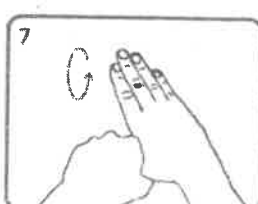
Rub back of each hand with palm of other hand with fingers interlaced



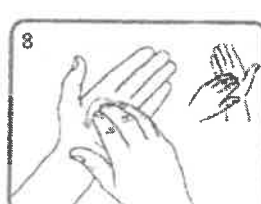
Rub palm to palm with fingers interlaced



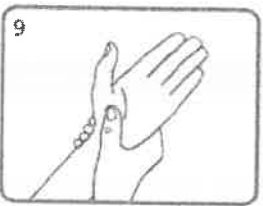
Rub with back of fingers to opposing palms with fingers interlocked



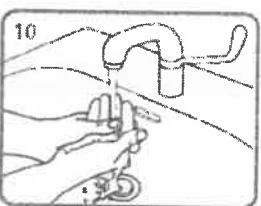
Rub each thumb clasped in opposite hand using a rotational movement



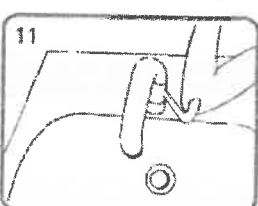
Rub tips of fingers in opposite palm in a circular motion



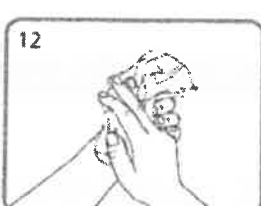
Rub each wrist with opposite hand



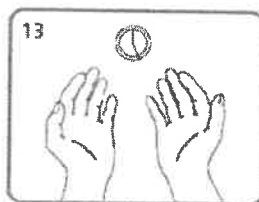
Rinse hands with water



Use elbow to turn off tap



Dry thoroughly with a single-use towel



Hand washing should take 15-30 seconds

Annexure I-C

Guidelines for use of mask

The correct procedure of wearing triple layer surgical mask

1. Perform hand hygiene
 2. Unfold the pleats; make sure that they are facing down.
 3. Place over nose, mouth and chin.
 4. Fit flexible nose piece over nose bridge.
 5. Secure with tie strings (upper string to be tied on top of head above the ears – lower string at the back of the neck.)
 6. Ensure there are no gaps on either side of the mask, adjust to fit.
 7. Do not let the mask hanging from the neck.
 8. Change the mask after six hours or as soon as they become wet.
 9. Disposable masks are never to be reused and should be disposed off.
 10. While removing the mask great care must be taken not to touch the potentially infected outer surface of the mask
 11. To remove mask first untie the string below and then the string above and handle the mask using the upper strings.
 12. Disposal of used masks: Used mask should be considered as potentially infected medical waste. Discard the mask in a closed bin immediately after use.
-

Guidelines on prevention of COVID-19 for Police/Security Personnel managing public

1. Background

Police/Security personnel interface with public who are potentially exposed to COVID-19. Instances have been reported of police/security personnel getting affected with COVID-19, while performing their duty. It is therefore imperative to make such personnel aware of the risks and actions for preventing COVID-19.

2. Scope

This document outlines the hazards associated with policing/security duty, the risks involved and the risk mitigation measures that should be followed to protect themselves against COVID-19.

3. Potential exposure to COVID-19 while on duty by police/security personnel

Police/security personnel are being deployed for various functions where they interface with public, who could be potentially infective to others. Hence police/security personnel are vulnerable to contract the COVID-19 infection while on duty for the following reasons:

- (a) Continuous exposure and close contact with public, even to the extent of physical handling of people, some of whom may be transmitting infection.
- (b) Deployment in areas especially in the COVID Hotspots, Hospitals, Quarantine facilities, which need their presence to maintain law and order.
- (c) Lack of awareness on infection prevention and personal protection, including correct use of protective gears like masks, gloves, etc.
- (d) Close proximity in dwelling units like barracks/police quarters further increases the risk of transmission leading to infection-amplification and swift spread of infection.

4. Guidelines for Prevention of COVID-19

4.1 Risk Communication

Although awareness is being created through print, visual and social media about the basics of COVID-19, it is important for the police administration to reiterate the same to their personnel through health lectures, advisories and talks in the daily roll-call or any other method considered effective.

The risks peculiar to the police personnel (as outlined in paragraph 3 above) must be emphasised, in order to insist upon police personnel to constantly observe preventive measures, while they are on duty. The following points need to be reiterated:

- Advice on preventive measures, especially (i) hand hygiene practices (frequent hand washing even when the hands are not visibly dirty using soap and water or an alcohol based

- hand sanitizer), (ii) respiratory etiquette (covering mouth and nose while sneezing/coughing using a disposable tissue/handkerchief or coughing/sneezing in flexed elbow) and (iii) physical distancing (at-least 1 meter)
- Information on self-protection using appropriate protective gears such as face mask, face shield and gloves and their proper disposal.
- At the police post, the police personnel on duty, should maintain physical distancing (of at least 1 meter) among themselves
- Personnel must be aware of self-monitoring for symptoms of COVID-19 (like fever/cough/difficulty in breathing) and not to ignore even minor flu like symptoms such as sore throat, running nose, sneezing etc.
- They must immediately seek medical help if they develop symptoms like fever, cough and difficulty in breathing. Also they must immediately inform their superiors about the same, for the latter to take appropriate actions, including enforcing quarantine of such personnel.
- Advice about accessing health care advice (e.g. from own medical officer or Helpline no. 1075)

4.2 Training

Training of staff for prevention of COVID-19 is a key element of the preparedness against the disease. No personnel protective gear would be of help unless the person is trained properly on proper usage and safe disposal of same. Training activities should cover the following areas (i) Basic disease knowledge, including pathogen, transmission route, signs and clinical disease progression, (ii) Hand hygiene practice, (iii) Respiratory etiquette, (iv) Appropriate use of protective gear and its safe disposal, (v) Environmental prevention measures, including cleaning and disinfection.

Short training capsule course (available at IGOT platform) on many of the above activities may be utilized for training security personnel.

4.3 Infection Prevention Control (IPC) Practices

The police personnel, while on COVID-19 duty (as outlined in para 3) should follow standard precautions such as hand hygiene, respiratory etiquettes, physical distancing and use of protective gears (**triple layer medical mask, gloves and face shields**) as detailed below.

4.3.1 Hand hygiene:

- Hand washing (40 sec): wet hands and apply soap; rub all surfaces; rinse hands and dry thoroughly with a single use towel; use towel to turn off faucet. (Guidance on procedure to be adopted is available at:

<https://www.youtube.com/watch?v=8Dt1BTGXn5I&list=PL1a9DHjZmejE-Ep2PAu2OR8HBfLP0BLIk&index=2>)

- Hand sanitization using alcohol sanitizer (20 sec): apply enough product (with alcohol content > 70%) to cover all areas of the hands; rub hands until dry. (Guidance on procedure to be adopted is available at: <https://www.mohfw.gov.in/pdf/Poster3GHFGA.pdf>)

4.3.1.1 When to perform hand hygiene

- Before and after any direct contact with a person, if gloves are not worn.
- Immediately after gloves are removed
- On coming in contact with blood or body fluids and contaminated items and after contact with inanimate objects, instead of using a hand sanitizer, wash hands with soap and water even if hand is not visibly dirty.
- If hands are visibly dirty, then also wash hands with soap and water
- When you have coughed or sneezed into the palm of your hand

4.3.2 Respiratory hygiene and cough etiquettes

- Cover your nose and mouth when coughing/sneezing with tissue or mask, dispose off used tissues and masks, and perform hand hygiene after contact with respiratory secretions.
- Consider making hand hygiene resources, tissues and masks available in common areas
- Used tissues should be disposed off carefully, as detailed in **Annexure-II-D**.

4.3.3 Physical distancing measures

Physical distancing of minimum 1 meter must be followed, while dealing with public. While inspecting vehicles and interacting with personnel, the police personnel should NOT put his head inside/near to the window shield of the vehicle. Non-compliant persons who need to be interrogated should be asked to come out of the vehicle.

At the police post/police station the police personnel on duty, should maintain physical distancing (of at least 1 meter) among themselves.

The number of personnel in police vehicle should be restricted to maintain physical distancing.

4.3.4 Environmental measures

Objects and surfaces like batons, helmets, barriers, vehicle door handles, mobile and landline phones etc. require frequent cleaning and disinfection. Cleaning with water and household detergents / or 1% sodium hypochlorite is sufficient. Mobile phone, credit/debit card swipe machines should be wiped frequently with alcohol. Safai staff should be protected from COVID-19 infection and wear disposable gloves when cleaning or handling surfaces, clothing or linen soiled with body fluids, and should perform hand hygiene before and after removing gloves.

Police/Security personnel on duty in moderate/high risk zones should especially be advised to sanitise uniform items such as all uniform items such as headgear, belt, baton, shoes and other things like mobile, wallet, etc., after duty hours.

At their residential barracks or police quarters, clothes, bedclothes, bath and hand towels, handkerchief etc. can be cleaned using regular laundry soap and water or machine-washed at 60–90 °C with common laundry detergent.

Steering wheel, gear shift, door handles, ignition keys, etc., of vehicles being used by police personnel should be sanitized frequently.

4.3.5 Use of Protective Gears

4.3.5.1 Gloves

- Wear gloves at all times while on duty
- Remove gloves properly and perform hand hygiene on coming in contact with blood or body fluids and then put on a new pair of gloves
- The procedure of wearing and taking off gloves is at **Annexure-II-A**

4.3.5.2 Facial protection

Use of triple layer medical mask for facial protection is recommended while on duty. Using a mask incorrectly may hamper its effectiveness and may cause harm to the personnel. So it must be used correctly. The correct steps in wearing and taking of the mask are at **Annexure-II-B**.

4.3.5.3 Face shields

- A face shield to protect mucous membranes of the eyes, nose, and mouth during activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.
- A security personnel on COVID duty will wear a face-shield at all times while on duty
- While taking off the face shield, ensure that the front surface is NOT touched. If one accidentally touches the same, perform hand hygiene as detailed in the document.
- The face shield is re-usable. The front portion can be decontaminated by wiping with 70% alcohol or 1% sodium hypochlorite solution. This is to be followed by hand hygiene.

The specification of protective gears (triple layer mask, gloves and face shield) is available at **Annexure II-C**.

4.3.4 Safe disposal of used protective gears

For disposal of used mask/gloves, guidance is available at **Annexure II-D**.

5. Precautions to be taken at the Police Stations:

- a) Ministry of Health and Family Welfare 'Guidelines for disinfection of common public places' may be followed for sanitising the entire premises and Hand sanitizers should be placed at the entry point and other convenient places at all times.
- b) Cleaning and disinfection efforts should especially be targeted to touched/contaminated surfaces that are frequently in use.
- c) All visitors to Police Stations should be handled with due caution and non- essential personal visits should be discouraged.
- d) A separate place should be earmarked for visitors and they should be allowed entry only to the designated area. Interaction with visitors should be restricted to this designated area.
- e) A separate waiting area may also be identified, to accommodate visitors in case greater numbers of visitors are visiting the police station.
- f) All police personnel should wear disposable or cloth face mask and gloves while interacting with visitors duly maintaining physical distance of at least six feet.
- g) If a visitor comes without a face mask, a face mask should be provided to him.

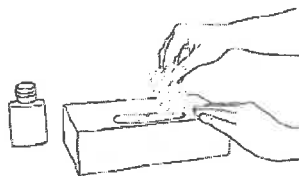
6. Policemen at Home:

- a) Identify a separate area to quarantine sick members
 - b) Limit close contact with outsiders as much as possible
 - c) Clean and disinfect frequently touched objects and surfaces at home.
 - d) Avoid sharing personal items with other family members
-

Technique for donning and removing gloves

When the hand hygiene indication occurs before a contact requiring glove use, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water.

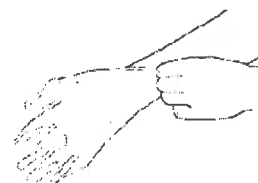
I. HOW TO DON GLOVES:



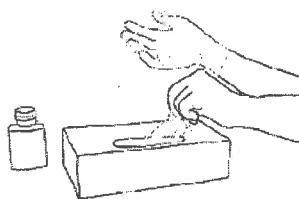
1. Take out a glove from its original box



2. Touch only a restricted surface of the glove corresponding to the wrist (at the top edge of the cuff)



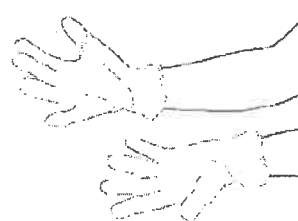
3. Don the first glove



4. Take the second glove with the bare hand and touch only a restricted surface of glove corresponding to the wrist

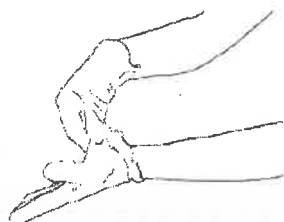


5. To avoid touching the skin of the forearm with the gloved hand, turn the external surface of the glove to be donned on the folded fingers of the gloved hand, thus permitting to glove the second hand

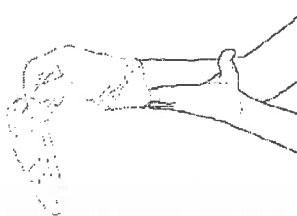


6. Once gloved, hands should not touch anything else that is not defined by indications and conditions for glove use

II. HOW TO REMOVE GLOVES:



1. Pinch one glove at the wrist level to remove it, without touching the skin of the forearm, and peel away from the hand, thus allowing the glove to turn inside out



2. Hold the removed glove in the gloved hand and slide the fingers of the ungloved hand inside between the glove and the wrist. Remove the second glove by rolling it down the hand and fold into the first glove



3. Discard the removed gloves

4. Then, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water

Wearing and taking off Triple layer medical mask

- Hold the Triple layer medical mask in right alignment for the nasal clip to be placed over the nose. The external pleats of the triple layer mask should face downwards.
- Open the mask pleats and place the mask carefully to cover mouth and nose.
- For the triple layer mask, tie the upper strings first, followed by the lower string. Fix securely to minimize any gaps between face and mask.
- **While in use, avoid touching the mask especially its front side, because this surface is likely to be highly contaminated and may pose a risk of infection.**
- Remove the triple layer mask by untying the lower string first, followed by the upper string.
- Be careful NOT to touch the front surface of mask while removing.
- Disposed off in the recommended manner as mentioned in the document.
- After removal or whenever you inadvertently touch a used mask, clean hands by using an alcohol-based hand rub (if available) or soap and water
- Replace masks with a new clean, dry mask after 8 hours or as soon as they become damp/humid
- Do not reuse single-use masks

Annexure-II-C**Specifications of Personal Protective Gears required by police/security personnel performing duty in COVID-19 affected areas****Gloves**

- Latex (examination) gloves
- Non-sterile
- Powder free
- Gloves preferably reach mid-forearm (minimum 280 mm total length)
- Different sizes (6.5 & 7)
- Quality compliant with the below standards, or equivalent:
 - a) EU standard directive 93/42/EEC Class I, EN 455
 - b) EU standard directive 89/686/EEC Category III, EN 374
 - c) ANSI/SEA 105-2011

Face Shield

- Made of clear plastic and provides good visibility to both the wearer and the patient
- Adjustable band to attach firmly around the head and fit snugly against the forehead
- Fog resistant (preferable)
- Completely covers the sides and length of the face
- Re-usable (made of material which can be cleaned and disinfected)
- Quality compliant with the below standards, or equivalent:
 - a) EU standard directive 86/686/EEC, EN 166/2002
 - b) ANSI/SEA Z87.1-2010

Triple Layer Medical Mask

- Three layered medical mask of non-woven material with nose piece, having filter efficiency of 99% for 3 micron particle size.
 - a) ISI specifications or equivalent

Procedure to dispose off used masks and gloves

Option 1:

Used masks/gloves and disposable tissues should be placed in a disposable leak-proof garbage bag and sprayed with 1% sodium hypochlorite allowing a contact time of 30 mins and allow it to air dry. Thereafter it can be disposed of through the general waste management system.

Option 2:

Soak the mask, gloves and used tissues in 1% sodium hypochlorite solution. The solution can be bought from medical stores. Soak the used mask, gloves etc. in this solution for minimum of 30 minutes. Ensure the masks and/or other wastes are below the surface of the liquid. After 30 minutes, discard the remaining solution in drain. Secure the disinfected waste (masks, disposable gloves, tissues etc.) in a polybag and discard in a bin meant for dry waste or non-biodegradable waste.

Option 3:

In cities, where authorized waste collectors are available and provisioning has been made for them to collect bio-medical waste, hand over the bags containing biomedical waste to them.
