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

NO. NSDMA-ER-COVID19/301/2020(Pt. II)/ 5538

Kohima, dated, the 30th July 2021

NOTIFICATION

Sub: STANDARD OPERATING PROCEDURE FOR MICRO-ISOLATION ZONE (MIZ)

In the unfolding crises of COVID-19 pandemic, one of the primary intervention to break the chain of transmission is reducing people-to-people contact. To this effect the Government has issued SoPs on (1) Updated Containment Plan for Large Outbreaks and (2) Cluster Containment Plan.

Containment of large geographic areas inevitably causes wide-ranging disruption of normal life and economic activities. The concept of Micro-Isolation Zone (MIZ) has been conceived with the aim to cause minimal disruption to normal life and economic activities by isolating a defined small geographical area which might be as small as a building from the rest. As in Containment Zones, restriction of movements, social distancing, enhanced active surveillance, testing all suspected cases, isolation of cases and intensive IEC on Covid Appropriate Behaviours and other preventive & safety public health measures will be put in place.

Any of the three types of containment strategies- (1) Containment Plan for Large Outbreaks (2) Cluster Containment Plan and (3) Micro-Isolation Zone, may be imposed/ declared as a measure to contain and break the chain of transmission according to extent of geographic involvement.

MICRO-ISOLATION ZONES (MIZ)

A. Definition:

Any specific area within an urban locality/village where COVID-19 is detected in more than one house and there is a likelihood of further spread in the locality/village can be designated as Micro Isolation Zone (MIZ). The Micro Isolation Zone could be declared when it fulfils the conditions as mentioned below:

- 1. There is more than one case emerging from an urban locality/villageor in a clearly defined geographically contiguous area.
- 2. There are cases emerging in an area due to proximity of dwellings or working environment.
- 3. There is a medical opinion on the need for declaring a containment zone to prevent any further spread of the disease.

B. Criteria for Declaration of Micro-Isolation Zone:

A cluster of houses or a locality- colony/ block/ khel of a ward/ village depending on the number of COVID-19 cases and number of houses with COVID-19 cases will be declared as MIZ on fulfilment of/ under the following criteria:

- 1. A cluster of houses where COVID-19 Cases are detected in 2 or more houses in a locality.
- 2. An apartment building where COVID-19 Cases are detected in 2 or more households/flats.
- 3. A small cluster in closed environment such as residential school, hostel, hotel etc.

- ➤ Apartment building for the purpose of declaring MIZ is defined as building with more than 1 household.
- A building for the purpose of declaring MIZ may be household(s), business establishments, institutions- hostel, orphanage, old age home, hotels, etc with residents.
- Hospitals and Schools/ Colleges/ Training Centres, offices or other establishments which is not a residential facility will be outside the purview of MIZ. Such buildings may be closed for 48 hours for disinfection and sanitization.

C. Size/ Extent for Micro-Isolation Zone:

- 1. Micro-Isolation Zone will be determined by the mapping of COVID-19 cases, suspected cases and their contacts in the affected area.
- 2. There will be no fixed criteria in respect of distance for notifying a Micro-Isolation Zone, and the geographical boundaries will be decided based on geographical dispersion of cases and contacts as stated in Sl.No: B.
- 3. The decision to follow Isolation/ containment protocol will be based on the risk assessment and feasibility of perimeter control.

D. Buffer Zones:

- 1. Houses including business establishments which are immediately adjacent to the house with COVID-19 Cases as defined under Sl. No: B above will be declared as buffer zone.
- 2. All members of household and business establishment in the buffer zone with no contact history will be compulsorily tested as early as possible and if tested negative will continue their normal life.
- 3. All members of household and business establishments in the buffer zone who have history of contact with the positive case even if tested negative, shall remain in home quarantine for a period of 7 days from the date of contact.
- 4. Any person from outside the buffer zone who has history of contact with the positive case shall be tested between 5 to 10 days of contact and even if tested negative, shall remain in home quarantine for a period of 7 days from the date of contact.
- 5. All RAT negative cases but are symptomatic including ILI/SARI cases shall be further tested through RT-PCR platform.

NB: If positive case(s) is/ are detected in any household under buffer zone, the perimeter of MIZ will extended to include the affected houses and accordingly the buffer zone will be expanded by including the adjacent to the houses.

E. Risk Assessment and Mapping:

- 1. The outbreak may be single or multiple foci of local transmission and may or may not be epidemiologically linked to single index case.
- 2. To determine the potential spread of the disease the Rapid Response Teams/Surveillance Units shall:
 - a. collect details of all COVID-19 Cases as well as their Contacts and prepare the line listing as per Guideline.
 - b. undertake mapping of cases and contacts in these areas.
- 3. Continuous risk assessment is required to determine the potential spread of the disease.
- 4. If the residential address of the contact is beyond that district, the district IDSP will inform the concerned District IDSP/State IDSP.
- 5. Every positive case shall mandatorily disclose the details of his/her contacts.

F. Power to Notify Micro Isolation Zones:

- 1. The Deputy Commissioner may notify Micro Isolation Zones in consultation with the District Medical Team and Community COVID-19 Management Team, after demarcation and taking into consideration the guidelines prescribed by MoHFW in this regard.
- 2. The list of such Micro Isolation Zones will be published including the district website by the respective District and also be shared with State War Room on COVID-19 management and the Health & Family Welfare department.
- 3. The Deputy Commissioner shall notify the Micro Isolation Zones after demarcation and taking into consideration the guidelines prescribed by MoHFW in this regard.

G. Duty Magistrate and Rapid Response Team (RRT) for MIZ:

- 1. The Deputy Commissioner shall appoint appropriate and adequate officials as Duty Magistrate for the MIZ.
- 2. The Deputy Commissioner shall notify constitution of RRT for each MIZ notified, which may be comprised of the following:
 - a. Representative of the District Administration not below the rank of EAC as Team leader.
 - b. Representative of the District Health Authority, Medical Officer of the nearest Health Unit or an officer nominated by the CMO.
 - c. Representative of the District Police, not below the rank of Sub-Inspector.
 - d. Representative of the Food & Civil Supply Department not below the rank of Inspector.
 - e. Representative of the PHED not below the rank of Junior Engineer.
 - f. Representative of the PWD (R&B) not below the rank of Junior Engineer.
 - g. Representative of the Power Department not below the rank of Junior Engineer
 - h. Representative of the Municipal Council/ Town Council wherever applicable.
 - i. Representative of the Community COVID-19 Management Team.
- 3. The RRT is to investigate the outbreak and initiate control measures as assessing the situation.

H. Perimeter Control& Monitoring in declared MIZ:

- 1. District administration shall establish clear entry and exit points for the MIZ, particularly when multiple houses are involved. No other routes to be used for entry and exit.
- 2. District administration to put up clearly visible signage declaring the area as MIZ at entry and exit points and in strategic points outside MIZ.
- 3. There will be strict perimeter control in place to ensure that there is no outward or inward unchecked movement from and to MIZ.
- 4. The DTF shall deploy necessary personnel at the exit/ entry points to perform:
 - a. screening (e.g. interview travellers, measure temperature, record the place and duration of intended visit and keep complete record of intended place of stay),
 - b. decontamination with appropriate disinfectants of all vehicles moving out of the perimeter control.
- 5. Details of all persons moving out of the perimeter zone for essential/emergency services will be recorded and they will be followed up through IDSP.
- 6. The DTF along with the Community COVID-19 Management Team will monitor compliance of SOP in the designate MIZ.

I. Restrictions & Confinement:

The following measures shall be put in place within the MIZ for limiting interaction between infected persons and susceptible hosts.

No Persons under the MIZ will be allowed to leave or enter the MIZ during the period of
containment except for medical or other emergencies and for unavoidable and critical
Government duties. Additionally, the following activities may be allowed under strict
monitoring:



- a. Garbage Collection and Cleaning Staff (Garbage of the household with positive cases to be collected and disposed in conformity with CPCB guidelines (a copy may be obtained from the O/o the Chief Medical Officer or may be downloaded from: http://cpcbenvis.nic.in/pdf/1595918059 mediaphoto2009.pdf).
- b. Domestic helpers, drivers, Private Security Services etc if they are residents within the same MCZ. Commuting from outside to the MCZ shall not be permitted.
- c. Veterinary and Animal Husbandry related services.
- d. Medicine and other essential products delivered through E-Commerce to be allowed for delivery at a common place accessible by the residents of the MIC. The place being visited by outside delivery persons must be sanitized frequently.
- e. Persons who have no contact history and are without any COVID-19 like symptoms or those who are released from Home under Quarantine/ Home Quarantine will be allowed to resume normal life within the MIZ.
- 2. All vehicular movement, movement of public transport and movement of persons will be restricted except for medical emergencies and for maintaining supply of essential goods and services.
- 3. Closure of shops, markets, restaurants, schools, colleges, work places, sports, entertainment, swimming pools, gyms, parks, common areas etc. Cancellation/ prohibition of mass gatherings including cultural, religious, festival, public transport etc. Cancellation of public transport (bus/rail) or imposition of stricter restrictions based on the local situation.
- 4. The District Task Force based on local conditions may take additional stricter measures if in its opinion such measures are urgently required for containing the spread of COVID-19 or may relax restrictions in a staggered manner.

J. Effective enforcement of the Test-Track-Treat protocol and Vaccination in declared MIZ:

Index Case: Index Case in the cluster to be identified based on possible origin of the infection. However, the outbreak may be single or multiple foci of local transmission and may or may not be epidemiologically linked to single index case (Time: within 12 hours of the Test Report).

> Test: Testing of Contacts, Household members & ILI/SARI case

- 1. All Contacts of the case(s) shall be compulsorily tested as per the State Testing Policy (Time: within 12 hours of the Index Case Test Report)
- 2. All members of the household & business establishments of the COVID-19 patient(s) shall be compulsorily tested
- 3. All ILI/SARI Cases and symptomatic cases shall be mandatorily tested.
- 4. Children below 2 years shall be exempted from testing unless they are symptomatic or with co-morbidity.
- 5. All symptomatic RAT negative cases shall be further tested through RT-PCR platform.
- 6. The type of Testing unless specified shall be through Rapid Antigen Test (RAT).

> Track- Contact Tracing & Surveillance:

Local HCW including ASHA & Anganwadi Workers and Community COVID-19 Management Teams (Ward/ Colony/ Village Authority/ Task Forces) will undertake:

- 1. House-to-House survey with line listing recording any fever and cough related symptoms and those shall be tested as per the State Policy for testing in containment zones [Time: Within 48 hours of the index case test report]
- 2. All ILI/SARI Cases and symptomatic cases should be identified through Active Case Search
- 3. Tracking and review of all SARI/ILI cases reported in the last 14 days by the IDSP in the containment zone. Any other SARI cases reported in the nearby medical facilities to be tested and reviewed (Time: Within 72 hours of the index case test report).



> Treat- Treatment of COVID-19 patients & management and disposal of dead bodies:

- 1. Treatment of COVID-19 patients shall be as per prevailing Clinical Management protocol of the State.
- 2. The District Health Authority will ensure availability of logistics, supplies and manpower for health check-up, Infection Prevention & Control, testing as well as ambulances.
- 3. The District Disaster Management Authority will ensure availability of logistics, supplies and manpower for management and disposal of dead bodies.
- 4. The care giver and all close contacts of such cases should take Hydroxychloroquine prophylaxis as per protocol subject to prescription by the treating doctor.
- 5. Discharge Policy of COVID-19 patients:
 - a. Discharge of COVID-19 patients either from Home isolation, CCC or COVID-19 Hospital shall be as per the prevailing Discharge Policy of the State.
 - b. Release of persons in Home Quarantine shall be as per the prevailing SOP of Home Quarantine of the State.

COVID-19 Vaccination:

- All eligible persons unless contraindicated should be motivated to take COVID-19 Vaccination.
- 2. Vaccination should be intensified in the MIZs through Near to Home Vaccination Centre facility.

K. Quarantine and Isolation:

COVID-19 Patients depending on the health conditions will be either managed as per the prevailing SOP of Home Isolation, CCC or COVID-19 Hospital of the State.

NB: Any person with any COVID-19 like symptoms whose test result is awaited or not tested for COVID-19 shall be considered and treated as COVID-19 patient unless proved otherwise.

Any contact including members of Household where COVID-19 is detected and are tested negative shall be managed as per the prevailing SOP of Home Quarantine of the State.

L. Other Measures:

- The DTF should issue advisory to avoid public places and enforce adherence to SOP and COVID-19 Appropriate Behaviours.
- 2. The DTF should undertake Intensive Risk communications and IEC activities
 - a. on Covid Appropriate Behaviour- hand hygiene, respiratory etiquette, environmental sanitation and wearing of mask/face covers.
 - b. adherence to SoPs and other public health safety protocols.
 - c. importance of early detection and prompt treatment and vaccination.
- 3. The DTF should facilitate essential support services, personal assistance, and physical and communication accessibility particularly to vulnerable sections as well as to PwDs.
- 4. COVID-19 patients as well as other individuals should be advised to use Aarogya Setu App.

M. Duration of and withdrawal of declaration of Micro Isolation Zone:

1. First Review on the de-notification of the Isolation zone has to be done within 72 hours of the Notification.



- 2. The Deputy Commissioner in consultation with the District Health Team shall de-notify the Micro-Isolation Zone after 10 days following the notification subject to:
 - a. All the High Risk Contacts have been tested and on being satisfied that no further testing is required to assess the spread.
 - b. There is sufficient evidence to suggest that there is no threat of further spread within the designated zones
 - c. No new cases have emerged for at least 5 days (depending on the nature of the locality and assessment of the Medical team).

N. Penalty:

1. Refusal for testing, non-disclosure of contact information or any instance of non-cooperation by any person within the MIZ 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)/5538 Copy to:

Kohima, dated, the 30th July 2021

- 1. The Commissioner & Secretary to Governor, Nagaland for kind information
- 2. The Principal Secretary to Chief Minister, Nagaland for 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 Registrar, Guwahati High Court, Kohima Bench for kind information
- 7. The CRC Nagaland House New Delhi for kind information
- 8. The Director General of Police, Nagaland for kind information
- 9. The Commissioner, Nagaland for kind information
- 10. All AHoDs for kind information
- 11. The Chief of Staff Hq, 3 Corps, Rangapahar/ IGAR (N) Kohima for kind information
- 12. The Station Commander, Military Station, Jakhama/ Chief Engineer, Project Sewak, Dimapur/ DIG, CRPF, Kohima for information
- 13. All HoDs for information
- 14. All the Deputy Commissioners& Chairmen DTF for information and necessary action
- 15. The Commissioner of Police Dimapur and all the SPs for information.
- 16. The Director, IPR for wide publicity
- 17. The Station Director, AIR and Doordarshan, Kohima for information and publicity
- 18. The Commandant, 93 Bn. BSF, Chedema/ Commandant, 111 Bn. BSF, Satakha for information
- 19. The DRC/ ARC, Nagaland House, Delhi, Kolkata, Guwahati, Shillong for information

Principal Secretary to the Govt. of Nagaland