COVID-19

Standard Operating Protocol
For IT Companies/IT Parks

Updated on 20 April 2020
Case Definitions

a) Suspect case

- A patient with **acute respiratory illness** {fever and at least one sign/symptom of respiratory disease (e.g., cough, shortness of breath)}, **AND a history of travel** to or residence in a country/area or territory reporting local transmission (See NCDC website for updated list) of COVID-19 disease during the 14 days prior to symptom onset; **OR**

- A patient/Health care worker with **any acute respiratory illness AND** having been in **contact with a confirmed** COVID-19 case in the last 14 days prior to onset of symptoms; **OR**

- A patient with **severe acute respiratory infection** {fever and at least one sign/symptom of respiratory disease (e.g., cough, shortness breath)} **AND requiring hospitalization AND with no other etiology** that fully explains the clinical presentation; **OR**

- A case for whom **testing for COVID-19 is inconclusive.**

b) Confirmed Laboratory Case

- A person with **laboratory confirmation** of COVID-19 infection, irrespective of clinical signs and symptoms.
Definition of Contact

A contact is a person who is involved in any of the following:

- Providing direct care without proper personal protective equipment (PPE) for COVID-19 patients
- Staying in the same close environment of a COVID-19 patient (including workplace, classroom, household, gatherings).
- Traveling together in close proximity (1 m) with a symptomatic person who later tested positive for COVID-19.
Self Isolation Rules

- Live in a separate room for the entire isolation period
- DO not share vessels, towels, bedsheets, toiletries, washroom facilities, phones, other devices etc with others in the family
- Follow personal hygiene rules like holding a tissue to mouth when coughing / sneezing.
- Family members to wear disposable gloves when serving food to affected person in self-isolation
- Avoid visiting public places like entertainment hubs, restaurants, shopping malls, market places etc
Preventive Measures

Simple ways to prevent the spread of COVID-19 in your workplace

The measures below will help prevent the spread of infections in your workplace, such as colds, flu and stomach bugs and protect your customers, contractors and employees. Employers should start doing these things now, even if COVID-19 has not arrived in the communities where they operate. They can reduce lost working days due to illness, and stop/slow the spread of COVID-19.

- Make sure your workplaces are clean and hygienic
  - Surfaces (e.g. desks and tables) and objects (e.g. telephones, keyboards) need to be wiped with disinfectant regularly - as contamination on surfaces touched by infected people is one of the main ways that COVID-19 spreads
  - Bio-Metric Access: it is advised to disable Bio-Metric access to prevent finger to finger spread contact and use proximity card feature in the system
- Promote regular and thorough hand-washing by employees
  - Put sanitizing hand rub dispensers in prominent places around the workplace. Make sure these dispensers are regularly refilled
  - Combine this with other communication measures such as offering guidance from occupational health and safety officers, briefings at meetings and information on the intranet to promote hand-washing
- Screen all Visitors for Covid-19 Symptoms
  - Screen visitors for Covid-19 symptoms, if any and ask them to reschedule the meeting if they exhibit any of the symptoms
  - Create a barrier between employees workspace and visitors
  - Make sure that staff, contractors and customers have access to places where they can wash their hands with soap and water
  - Ask your employees to maintain safe distance from visitors while interacting with them
  - Sanitize lobby, security and visitors waiting area regularly
- Meetings & Gatherings
  - To the extent possible, discourage large gatherings which involves close proximity of persons and encourage use of technology for meetings
- Awareness Posters
  - Display posters shared by Coordination Committee on COVID-19 in all common areas like Lifts, Cafeteria etc
Scenarios to be dealt with Covid-19 by IT companies/IT parks

The following 3 scenarios have been identified to help IT companies/IT Parks follow standard operating procedure, in the event of a suspected Covid-19 case

- **Scenario-I**: An Employee returning from abroad (Business or Personal travel)
- **Scenario-II**: An Employee found to be having symptoms (Fever, Cough, Shortage of breath) at work place
- **Scenario-III**: An Employee tested positive for Covid-19 virus within the same building/IT Park/Near Proximity
Scenario I  An Employee returning from abroad (Business or Personal travel)

If returning employee shows symptoms, ask them get tested at listed hospital and WFH for 14 days

Any symptoms reported during 14 day period? YES

Employee to Complete 14 day WFH period & Rejoin office

NO

If returning employees does not show symptoms, but is returning from one of the risk zones, allow them to WFH for 14 days

Ask Employee to report to nearby designated hospital having isolation facility (list shared by Health Dept)

Employee tested Negative For covid-19 by Hospital

Employee to enter into Isolation ward and follow advise/await test results at Hospital

Check if any other employees have symptoms. If so, follow Scenario II guidelines. Need to vacate affected office area & follow disinfection guidelines by Municipal & Health Dept (You may contact State Nodal Officer for advise). All employees can return to workplace 24 hours after the disinfection

Employee tested Positive For covid-19 by Hospital

HR to call employee on a daily basis & check health condition and enquire about symptoms, if any

Hospital Rules out COVID-19? OR Refers Sample to Hospital

Sample referred to Hospital

Ruled Out

Employee to rejoin work by producing doctor certificate

Employee to complete the treatment as per Hospital advise. Company to be in regular touch

Rejoin after completion of treatment by producing doctor certificate

If returning employees does not show symptoms, but is returning from one of the risk zones, allow them to WFH for 14 days
Scenario II  An Employee has symptoms (Fever, Cough, Shortness of breath) at Workplace

Employee shows symptoms at workplace

Employee to re-join work by producing doctor certificate

Employee to complete the treatment as per Hospital advise. Company to be in regular touch

Employee tested Positive For covid-19 by Hospital

Rejoin after completion of treatment by producing doctor certificate

Employee tested Negative For covid-19 by Hospital

Employee to Rejoin office by producing Doctor certificate

Designated emergency response team members (wearing masks & gloves) to escort employee to the nearest listed hospital in an ambulance

Hospital Rules out COVID-19/ Refers Sample to Hospital

Sample referred to Hospital

Check if any other employees have symptoms. If so, follow Scenario II guidelines. Need to vacate affected office area & follow disinfection guidelines by Municipal & Health Dept (You may contact State Nodal Officer for advise). All employees can return to workplace 24 hours after the disinfection
Scenario III
An Employee tested positive for Covid-19 virus within the same building/IT Park/Near Proximity

1. Occupants in the building other than affected floor are not at risk as Covid-19 does not spread in the following scenarios:
   - If one is not in close contact or work in close proximity or same environment as affected person
   - It is not air borne

2. Action by IT Park/Building Management
   - To sanitize common touch points & surfaces in the building like elevator buttons, door handles, stair case rails & other common areas like reception, cafeteria, restrooms/conveniences
   - Communicate all other tenants in the building/IT Park on the measures taken by them to sanitize
   - Isolate area for visitors and bulk gatherings especially walk in interviews etc, as a preventive measure
Syngene/Biocon recommendation on testing strategy

All employees returning to work after lockdown

RT-PCR test performed

Yes

Shows ILI like symptoms

No

RT-PCR test results

+ ve

Influenza like illness

No

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Yes

After 14 days of quarantine, ILI symptoms exist

Yes

Staff reported to govt integrated disease management program

No

Resume work

ILI: Influenza like Illness
Definition of primary contact

**Primary contact definition**

- Working in the same close environment of a COVID-19 suspected person
- Traveling together in close proximity (1 m) with a symptomatic person who later tested positive for COVID-19.

**Level’s of contact tracing and outcome**

- Zone level
- Building level
- Floor level
- Specific Room/office area

The primary contacts of the laboratory/facility confirmed case/ suspect case of COVID-19 will be line-listed and tracked and kept under surveillance at home for 7 days and then tested by RT-PCR. (refer testing strategy slide 12)

**Existing measures will be closely monitored**

- Structurally limiting physical contact between employees (e.g. Zoning, marking, barriers for social distancing)
- Improve building air flow conditions
- Routine and targeted deep cleaning (e.g. if an employee tested COVID19 +)
- Mandate temperature checks and recording in microsite
- Mandatory wearing of masks for everyone including other personal protective equipment depending on work (e.g. gloves)
When an employee at workplace is tested positive

- Employee tested positive
- Zone identified within the campus and evacuated
  - Staff admitted and reported to Govt healthcare system
  - Deep sanitization initiated per facility sanitization protocol
  - Facility reusable 2 days after sanitation
  - All primary contacts traced and asked to self quarantine
  - Check After 7 days RT-PCR test
  - RT-PCR test results
    - + ve
      - Influenza like illness
        - Yes
        - Secondary contacts resume work after facility is reusable
        - No
      - After 14 days of quarantine ILI symptoms exist
        - Yes
        - Resume work
        - No
      - Resume work
    - - ve

- All the employees who resume after 7 days of quarantine – are monitored for symptoms every day for temperature, ILI and will answer questions administered by on duty physician/health worker- for at least 14 more days
- Two rounds of fogging, deep cleaning of AHU and office areas will be completed in 05 days.
- Risk: Various publications indicate incubation period to be around 5 days after exposure. Indian and WHO self quarantine guideline specifies 14 days period as data on incubation period is evolving. Risk of false negative of RT-PCR is duly noted, however, the strategy proposed above attempts to minimise health risk and bring workforce back to work early to ensure economic activity resumes with limited disruption.
Please refer to the respective state website for the list of Hospitals, Testing Centers and other Helpline nos