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ಆಯುಕ್ತಾಲಯ

ಆರೋಗ್ಯ ಮತ್ತು ಕುಟುಂಬ ಕಲ್ಯಾಣ ಸೇವೆಗಳು

ಪತ್ರ ಸಂಖ್ಯೆ:DD/SSU/Covid-19/42 Part(B)/2020-21

ದಿನಾಂಕ:02.12.2020.

ಗೆ,

ಆಯುಕ್ತರು

ಮಹಿಳಾ ಮತ್ತು ಮಕ್ಕಳ ಅಭಿವೃದ್ಧಿ,

ಬೆಂಗಳೂರು.


ಆತ್ಮೀಯರೆ,

ವಿಷಯ: ಅಂಗನವಾಡಿ ಕೇಂದ್ರಗಳನ್ನು ಪ್ರಾರಂಭಿಸುವ ಕುರಿತು.

- ಉಲ್ಲೇಖ: 1. ಶ್ರೀ ಸಂಜೀವ್ ಗಜರಾಜ್, ಎಕ್ಸಿಕ್ಯೂಟಿವ್ ಡೈರೆಕ್ಟರ್, ಪೋಷಣ್ ಅಭಿಯಾನ, ಎಂಡಬ್ಲ್ಯೂಸಿಡಿರವರ ಪತ್ರ ಸಂಖ್ಯೆ:ಪಿಎ/85 /2020-ಸಿಪಿಎಂಯುಸಿ ನಂ:85941, ದಿ:11.11.2020 ಹಾಗೂ ಮಹಿಳಾ ಮತ್ತು ಮಕ್ಕಳ ಅಭಿವೃದ್ಧಿ ಮಂತ್ರಾಲಯ, ಭಾರತ ಸರ್ಕಾರ, ಇವರ ಮಾರ್ಗಸೂಚಿ.
2. ನಿಮ್ಮ ಕಛೇರಿಪತ್ರ ಸಂಖ್ಯೆ:ಡಿಡಬ್ಲ್ಯೂಸಿ:ಐಸಿಡಿ:ಸಿಎನ್ ಪಿ-2:ಅಂ.ಕೇ.ರಜೆ:2019-20, ದಿ:20.11.2020.
3. ಕೋವಿಡ್ 19 ರಾಜ್ಯ ಮಟ್ಟದ ತಾಂತ್ರಿಕ ಸಲಹಾ ಸಮಿತಿ 51ನೇ ಸಭೆಯ ನಡಾವಳಿಗಳು, ಅಜೆಂಡಾ ಕ್ರಮ ಸಂಖ್ಯೆ:1, ದಿ:21.11.2020.

ಪ್ರಸ್ತುತ, ಕೋವಿಡ್-19 ಹರಡುವಿಕೆಯ ಪ್ರಮಾಣವು ಗಣನೀಯವಾಗಿ ಕಡಿಮೆಯಾಗಿದ್ದು, ರಾಜ್ಯಾದ್ಯಂತ ಅಂಗನವಾಡಿ ಕೇಂದ್ರಗಳನ್ನು ಪ್ರಾರಂಭಿಸುವ ನಿಟ್ಟಿನಲ್ಲಿ, ಕೇಂದ್ರ ಸರ್ಕಾರವು ನೀಡಿರುವ ಮಾರ್ಗಸೂಚಿ (ಉಲ್ಲೇಖ-1)ಗಳನ್ನು ಉಲ್ಲೇಖ(2)ರಲ್ಲಿ ವಿಶದವಾಗಿ ಚರ್ಚಿಸಲಾಗಿದೆ. ಅದರಂತೆ, ರಾಜ್ಯದಲ್ಲಿ ಅಂಗನವಾಡಿ ಕೇಂದ್ರಗಳನ್ನು ಪುನರಾರಂಭಿಸಲು ಮಾರ್ಗಸೂಚಿಯನ್ನು ಸಿದ್ಧಪಡಿಸಲಾಗಿದ್ದು, ಅನುಬಂಧದಲ್ಲಿ ಲಗತ್ತಿಸಿದೆ.

ಅಂಗನವಾಡಿ ಮಕ್ಕಳ ಸುರಕ್ಷತೆಯ ದೃಷ್ಟಿಯಿಂದ, ಸದರಿ ಮಾರ್ಗಸೂಚಿಯಲ್ಲಿ ತಿಳಿಸಿರುವ ಕ್ರಮಗಳನ್ನು ಸಮಗ್ರವಾಗಿ ಹಾಗೂ ಪರಿಣಾಮಕಾರಿಯಾಗಿ ಅನುಷ್ಠಾನಗೊಳಿಸುವಿರಂದು ಆಶಿಸುತ್ತೇನೆ.


ಆಯುಕ್ತರು

ಆರೋಗ್ಯ ಮತ್ತು ಕುಟುಂಬ ಕಲ್ಯಾಣ ಸೇವೆಗಳು

ಪ್ರತಿಯನ್ನು ಸಲ್ಲಿಸಲಾಗಿದೆ:

1. ಸರ್ಕಾರದ ಅಪರ ಮುಖ್ಯ ಕಾರ್ಯದರ್ಶಿಗಳು, ಮಹಿಳಾ ಮತ್ತು ಮಕ್ಕಳ ಅಭಿವೃದ್ಧಿ ಹಾಗೂ ವಿಕಲಚೇತನರ ಮತ್ತು ಹಿರಿಯ ನಾಗರಿಕರ ಸಬಲೀಕರಣ ಇಲಾಖೆ, ಬೆಂಗಳೂರು.

COVID – 19: TECHNICAL ADVISORY COMMITTEE

Proceedings of the 51st meeting of State COVID-19–Technical Advisory Committee, Dept. of Health & Family Welfare held on Saturday, 21st Nov. 2020 at 12.00 Noon by Zoom Video conference

Members Present:

In person at Arogya Soudha

1. Dr. M.K Sudarshan – Chairperson, TAC
2. Dr. M Shariff -Member secretary, TAC
3. Dr. Lokesh Alahari, SRTL-WHO

By zoom link

4. Dr. Ravi V, Senior Virologist, NIMHANS
5. Dr. Ashish Satapathy, RTL-WHO
6. Dr. Shashi Bhushan BL, Professor & Head of Pulmonary Medicine, BMCRI
7. Dr. Anitha Desai, Senior Virologist, NIMHANS

Special Invitees

8. Dr Arundhati Chandrashekar, MD-NHM
9. Dr K R Nischit-WHO

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Dr M K Sudarshan, Chairman TAC welcomed the members present.

Agenda-1: Ministry of Women and Child Development-GOI guidance note on operations of Anganwadi services dated 11.11.2020. (Document shared in TAC group) [Reference: Mission Director-NHM]

The TAC deliberated the need for opening AWCs. The COVID-19 pandemic affecting the state since March 2020 has resulted in the closure of AWCs. There is a disruption in providing nutritional supplements to the preschool children, pregnant women, and lactating mothers. Besides the preschool children are denied of nonformal education, monitoring of growth and development, health checkup, etc. There is also a court ruling in this regard. On 11-11-2020 Ministry of WCD, GOI issued a guidance note for States to consider opening of AWCs.

In the State recently there is a declining trend of COVID-19, the colleges are opened from 17th November and there is a move to open schools soon in the State. The medical and paramedical institutions are planned to open from 1st December.

In this context TAC recommends that the State to consider opening of AWCs after careful assessment of local COVID-19 scenario and due consultations with all the stakeholders.

A SOP for opening and running the AWCs is provided as Annexure

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Agenda-2: Patient X (of Bidar) - Aged 45 years, male, Diabetic, SARI – Tested Covid positive on 06.11.2020 has the following history of hospitalizations: [Ref. Mission Director – NHM] Summary of the case based on scanned records received is as follows.

The patient X was admitted to District hospital, Bidar – on 9th Oct. – Discharged on 17th Oct.; Navajeevan Hospital (Pvt), Bidar – Admitted on 17th Oct – Discharged on 28th Oct.; Mallareddy hospital, Hyderabad – Admitted on 28th Oct – Discharged on 7th November.; District hospital, Bidar – Admitted on 8th November (12.30 am) – Died on 8th November (3.30 am). Can the cause of death be attributed to Covid – 19?

The members deliberated after inputs from Dr Shashibhushan B L. It was concluded that the cause of death was COVID-19. However, TAC expressed concern for inordinate delay in RT-PCR testing for this case of SARI. It is recommended that this issue shall be brought to the notice of concerned authorities for suitable measures to prevent occurrence of such instances in the future.

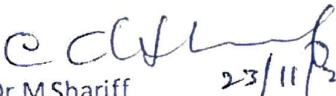
Agenda-3: The Aircraft Employees house building cooperative society Ltd. Bangalore – Requests for holding of its elections in February – March 2021 [Ref. Mission Director – NHM]

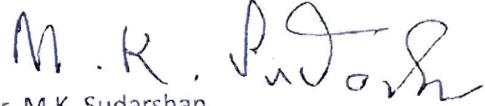
TAC noted that the association plans to hold the elections in February – March, 2021 in the context of the ongoing Covid – 19 pandemic in the state and country. As the disease is quite dynamic and the scenario is changing frequently in the state/country, a final decision in this regard may be taken in January, 2021.

Any other subject:

Dr Shashibhushan B L informed the need for discussing the preparedness of the State for the second wave of COVID-19 pandemic. The chairman after consultations with the members present fixed the 52nd TAC meeting on Tuesday 24th November 2020, at 4:30 pm to discuss this subject.

The TAC, Chairman thanked all the members for their participation in the meeting


Dr M Shariff
Member secretary, TAC COVID- 19
21st November 2020


Dr. M.K. Sudarshan
Chairperson, TAC COVID-19
21st November 2020

(Annexure attached)

23/11/2020

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Annexure

Subject: Guidelines for resuming Anganwadi services in the context of COVID-19

Reference: 1. Ministry of Women & Child Development, Government of India, guidance note on operations of Anganwadi services, dated 11.11.2020
2. Proceedings of the 51st State COVID-19 Technical Advisory Committee meeting, Department of Health and Family Welfare, Government of Karnataka, dated 21.11.2020

In view of Covid-19 pandemic globally, functioning of Anganwadi centres was suspended to avoid spread of COVID 19. However, since it is imperative to ensure simultaneously, that the beneficiaries do not suffer on account of suspension of Anganwadi services, the door to door distribution of supplementary nutrition under the scheme has continued. Subsequently, unlock guidelines have been issued by the Ministry of Home Affairs-GOI, recommending phased reopening of services while adhering to preventive protocols.

As undernutrition is one of the leading causes of morbidity and mortality in children under the age of 6 years, provision of essential services like growth monitoring, referral and supplementary nutrition, etc. to ensure the health and well-being of children below 6 years along with the pregnant women & lactating mothers is most important to mitigate the challenges of malnutrition. Continuation/resumption of these services is also necessary to minimize the impact of the pandemic on vulnerable women and children.

Necessary vaccination and other health related interventions also need to be resumed to ensure the children do not miss timely vaccine doses and follow the mandatory protocol. These essential services shall be resumed, with due caution, to provide essential services including supplementary nutrition, health interventions and early childhood care and education (ECCE) services at Anganwadi centres.

In view of declining trend of COVID-19 in Karnataka, Anganwadi services may be resumed outside containment zones duly complying with the following measures:

1. Pre-school education may be resumed at the Anganwadi centre in **small groups of five to eight children on any day**. Children may visit Anganwadi centre **once a week for one hour** and follow up on the lessons at home, with help of parents.
2. Anganwadi centres shall be open on all working days but children may be permitted to come in rotation so that not more than 5 to 8 children attend on any given day. Based on total number of children enrolled in the Anganwadi centre, a roster shall be prepared. This roster/schedule may be shared with parents/caregivers in advance, through mobile phone messages, or any other suitable manner.
3. All Anganwadi workers and Anganwadi helpers shall compulsorily undergo COVID-19 testing by RT-PCR (1:5 pooling in lab) and only those with negative report of the test done within 72 hours shall be permitted to resume work at Anganwadi centres.

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4. All Anganwadi centres (floor and walls) shall be sanitized at the end of everyday using 1% sodium hypochlorite solution (readily available in market) or household detergent solution.
5. All toys, touch surfaces, etc. shall be cleaned at the end of day using 2.5% Lysol (readily available in market) or hand sanitizer or household detergent solution. Scales used for measuring height and weight of children shall be cleaned with 2.5% Lysol or hand sanitizer or household detergent solution after using for every child.
6. Compulsory provision of liquid soap, hand sanitizer, 1% sodium hypochlorite solution, household detergent solution, 2.5% Lysol, etc. in sufficient quantity shall be made available in all Anganwadi centres
7. Facemasks in sufficient number shall be provided to all Anganwadi workers and Anganwadi helpers
8. Parents shall be strictly instructed not to bring their child to Anganwadi centre, if the child or any person in the family:
 - a. have tested positive for COVID-19
 - b. has been identified as a primary/high risk contact of a confirmed COVID-19 case
 - c. is in home quarantine
 - d. is having symptoms such as fever, cough, cold, throat pain, loss of taste, loss of smell, body pains, difficulty in breathing, loose motions, etc.

All such children can attend the Anganwadi centre only after all member/s of family have completed treatment/period of quarantine as per guidelines.

9. Parents/caregivers who bring the child to Anganwadi centre shall orally inform the Anganwadi teacher/helper that the child does not have any COVID-19 symptoms.
10. It is equally important for the Anganwadi teacher/helper to ensure that no child with COVID-19 symptoms is permitted to attend the Anganwadi centre
11. Any child or adult showing symptoms of COVID-19 (fever, cough, cold, throat pain, diarrhoea, difficulty in breathing, etc.) at the Anganwadi centre shall be immediately referred to the nearest health centre/hospital for testing and medical consultation.
12. Persons above 65 years of age and persons with co-morbidities, should avoid visiting Anganwadi centre.
13. Instructions to the Anganwadi teacher and helper
 - a. Shall use face masks compulsorily
 - b. Shall clean hands using soap and water or hand sanitizers at regular intervals
 - c. Shall maintain cough etiquette - to cover their mouth and nose with a hand kerchief/ cough into inner elbow when they sneeze/cough
 - d. Shall not report to duty if they have symptoms of fever, cough, cold and throat pain. They shall immediately visit nearest fever clinic/hospital for medical consultation and COVID-19 testing

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- e. Daily inspection of children- watch out for symptoms such as fever, cough, throat pain and difficulty in breathing. Such children must be separated from others and the parent immediately called to take the child for medical check-up at the nearest health facility/hospital
14. Regular and periodic supervision of each Anganwadi centre for compliance to COVID-19 precautions shall be undertaken by supervisory officers
15. Cleanliness, hygiene, and sanitization shall be ensured in and around the premises of Anganwadi centre. The toilets shall be cleaned everyday using 1% sodium hypochlorite solution.
16. Use of mask/face covers shall be mandatory for everyone visiting the Anganwadi centre.
17. Appropriate messages/display posters in Kannada for prevention from COVID-19 (i.e. recommending physical distancing, use of face mask, hand washing, sanitization, identification of COVID symptoms, primary health care at home etc.,) shall be suitably displayed in and around every Anganwadi centre.
- 18. Providing Supplementary Nutrition:**
- a. Anganwadi centres shall provide cooked food & take-home ration either at the AWCs or delivered at home based on the prevailing local situation, while observing necessary physical distancing and hygiene protocols during storage, preparation and distribution of the same.
 - b. Food-handlers shall wear facemask, head-cap and apron. The mask should cover nose and mouth properly.
 - c. Milk packets, vegetables, etc. should be cleaned immediately with running water and stored appropriately.
 - d. The prepared foods shall be stored in clean and closed containers.
 - e. Utensils shall be washed thoroughly with detergent.
- 19. Growth Monitoring Services**
- a. A roster of children shall be maintained by Anganwadi worker to avoid accumulation of beneficiaries at the same time in AWC. The schedule may be shared with parents/caregivers in advance, through mobile phone messages, or any other suitable manner.
 - b. Growth monitoring services shall be carried out on the day when the child visits Anganwadi centre or during VHSND as per guidance from Department of Health & Family Welfare, Government of Karnataka and GOI. Growth monitoring services shall also be done during home visits, while ensuring hand hygiene, sanitization of weighing equipment and other COVID-19 protocols.
 - c. Severely malnourished children, high risk pregnancy and lactating mothers should be monitored strictly and continued with the home-based service delivery and take-home cooked food.

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20. Counselling Services

- Counselling or mediated relief and strong solidarity and bonding practices may be carried out during some days during PABE, or video/telephone calls and WhatsApp messages.
- Automatically issued messages (CBE) may be organized in-person in small groups for short duration following all COVID-19 protocols or virtually through video/audios medium.

21. Early Childhood Care and Education (ECCE) Services

- Preschool education may be resumed at the centre in small groups of five to eight children on any day. Children may visit Anganwadi Centre once a week for one hour and follow up on the lessons at home with help of parents.
- Online pre-school education using satellite service and sharing lessons through mobile network, etc. may be encouraged wherever possible.

22. Standard precautions shall be followed during immunization session at the Anganwadi centre as per guidelines issued from Department of Health and Family Welfare, Government of Karnataka.

23. Protocol after identification of COVID-19 suspect child/adult

- Any child or adult showing any symptoms of COVID-19 should be sent to nearest health facility/PHC for medical consultation and COVID-19 testing. AWW/AWH shall inform ASHA/ANM/PHC or nearest health facility regarding them.
- In case of confirmed COVID-19 positive person/ patient visiting AWC, the premises should be re-sanitized using 1% sodium hypochlorite solution. The centre shall closed for the day and reopened from next day. There is no need to seal down the Anganwadi centre.
- Persons who came in contact with the COVID-19 positive person/ patient shall be asked to self-isolate and report to health authorities in case of COVID-19 symptoms. All primary/high risk contacts shall be advised home quarantine and COVID-19 testing as per protocol.

24. Department of Women and Child development and Department of Health and family welfare shall ensure training and sensitization on the above COVID-19 precautionary measures to all Anganwadi workers, helpers, supervisors and CDPOs before reopening of Anganwadi centres.

Note: All districts are expected to comply with the COVID-19 related directions issued by Department of Health and Family Welfare, Government of Karnataka from time to time. Deputy Commissioners of the districts/ Commissioner-BBMP may decide extent of opening and service delivery at Anganwadi centres, guiding the field staff within the district, based on local COVID-19 scenario. They shall conduct regular review meetings for ensuring the smooth functioning of Anganwadi centres as per the laid down guidelines.
