



**THE ADMINISTRATION OF UNION TERRITORY OF LADAKH  
Disaster Management, Relief, Rehabilitation &  
Reconstruction Department.  
(State Executive Committee, Ladakh Disaster Management  
Authority)**

Tele/Fax: 01982-255567, 01982-255568; e-mail:ladakhdivcom@gmail.com

**Subject: - COVID-19 Management - Guidelines/instructions -reg.**

**Order No: - 44-DM (UTL) of 2021,  
Dated: - 01.03.2022**

Whereas, the National Disaster Management Authority, (NDMA) vide Order No.40-3/2020-DM-I(A) dated: -25.02.2022 has directed all the States/UTs authorities to consider implementing a risk assessment based approach on opening of economic activities, as conveyed vide Ministry of Health & Family Welfare (MoHFW) DO No. Z.26015/1/2022-DM Cell dated 18.02.2022.

Now, therefore, under the directions of the aforesaid orders of NDMA, GoI and in exercise of the powers conferred under section 24 of the Disaster Management Act, 2005, the State Executive Committee, Ladakh Disaster Management Authority hereby directs that compliance to the aforesaid MoHFW advisory dated 18.02.2022 (**Annexure – I**) be enforced in the Union Territory of Ladakh for effective control of COVID-19, **until 31.03.2022** with the following COVID-19 containment guidelines.

**General instructions:**

- (i) All passengers arriving in Ladakh both by air and road are advised to get themselves tested for COVID-19, not earlier than 72 hours before their arrival in Ladakh from ICMR approved test laboratories. **The passengers (visitors / tourists / local inhabitants / labour) arriving in Ladakh both by air and road must have a negative RT-PCR report not older than 72 hours.** Such passenger(s) who is/are without a valid COVID-19 test report of not older than **72 hours** before their arrival may have to undergo COVID-19 RTPCR/RAT test as mandated by the administration; and if found positive, shall be quarantined at quarantine center or place of stay, at his/her own expense till the time they are declared Covid negative. However mandatory production of a negative RTPCR report not older than 72 hours before arrival into Ladakh will be exempted for such visitors who have been inoculated with both the doses of COVID-19 vaccine, provided such visitor has no clinical symptoms of COVID-19. The District Administrations - Leh & Kargil, will put in place a reliable and verifiable system in consultation with the Health Department for the purpose.

*Aschen*

Detection of any fraudulent test report by any incoming passenger will be dealt with strictly under Law.

- (ii) Notwithstanding the above {para (i) of General Instruction}, the District Magistrates may make RTPCR test/RAT for Covid-19 mandatory for visitors coming into Ladakh by road or air depending upon the risk assessment.
- (iii) Incoming passenger(s) who is/are declared suspects in the Aarogya Setu app will mandatorily be home quarantined for 7 days. In case, they develop any symptoms, they shall inform the District Surveillance Officer of the respective district immediately. Such persons will be administered a COVID-19 test by the District Surveillance Officer and till such time their test report is declared negative, they will have to stay under home quarantine along-with other family members.
- (iv) Any person(s) reported with severe COVID-19 symptom will be isolated by the District Administration along with their contacts irrespective of the mode of travel.
- (v) Persons arriving in Ladakh on official duty or duty which entails visiting offices or coming in contact with large number of people, or tourists, must strictly follow COVID-19 precautionary measures such as hand sanitization, social distancing, wearing of face mask at all times during the course of their stay in Ladakh. In case, they develop any symptoms, they shall inform the District Surveillance Officer of the respective districts immediately. Such persons will be administered a COVID-19 test by the District Surveillance Officer and till such time their test report is declared negative, they will have to stay under mandatory quarantine.
- (vi) The personnel of Defense and Central Armed Police Forces returning to duty by road or special flights are exempted from the above provisions and shall be allowed to proceed to their respective Units/Formations for necessary quarantine as per their internal procedures.
- (vii) All offices and workplaces in the Union Territory shall be sanitized on daily basis and in accordance with the SOP of the Ministry of Health & Family Welfare issued from time to time. Every Officer/Official/Employee will maintain sanitization facility outside their rooms and waiting areas, for each and every visitor and ensure compulsory wearing of face masks by each visitor. The office in-charge/head of the office will nominate an officer/official/employee by formal orders for ensuring that such hand sanitization and mask compliance by every visitor visiting their offices is ensured. Every office will ensure thermal temperature screening at the gate.

*Dechen*

- (viii) All Hotels and other hospitality services will follow the SOP of Ministry of Health and Family Welfare, Government of India issued from time to time. Hotel/Guest house that accept bookings for guests (irrespective of their mode of arrival) will maintain details of guests with entire travel history, ensure daily screening of all their guests and report any guest who is symptomatic to the District Surveillance Officer. Daily reports of screening will be submitted to the District Surveillance Officer by every Hotel/Guest house of both the Districts in a devised format to be circulated by the respective District Magistrates.
- (ix) The owners of Hotels/Guest houses/Home stays must also ensure social distancing, availability of hand sanitizer at their lobbies, restaurants, lawns and business centers and ensure frequent sanitization of common areas and spaces. The District Administration of the respective Districts shall get these facilities inspected periodically.
- (x) All shopping complexes, restaurants (including in hotels), bars, barber-shops, saloons, beauty parlors, gyms and spas will follow the SOPs of Ministry of Health & Family Welfare, Govt. of India issued from time to time. The District Magistrates will ensure regular inspections of shops/barbershops/ restaurants/kitchens of restaurants etc.
- (xi) There shall be regulated parking on roads of bazaars, market areas by the respective District Administration to prevent congestion and ensure social distancing.
- (xii) Schools/educational institutes shall mandatory follow the Standard Operating Procedure (SOP), regarding health and safety precautions issued by School Education Department/Higher Education Department from time to time.
- (xiii) Swimming pools being used for training of sportspersons shall mandatory follow Standard Operating Procedure (SOP), regarding health and safety precautions issued by the Ministry of Youth Affairs & Sports, GoI.
- (xiv) Cinemas/theatres/multiplexes shall mandatory follow the Standard Operating Procedure (SOP), regarding health and safety precautions as per SOP issued by the Ministry of Information and Broadcasting, GoI.
- (xv) Entertainment parks and similar places shall mandatory follow the Standard Operating Procedure (SOP), regarding health and safety precautions issued by the Ministry of Health & Family Welfare (MoHFW), GoI.

*Dec 2020*

- (xvi) Business to Business (B2B) Exhibitions shall mandatory follow the Standard Operating Procedure (SOP), regarding health and safety as per SOP issued by the Department of Commerce, GoI.
- (xvii) Religious places/places of worship will follow the Standard Operating Procedures (SOP) as per the precaution issued by the Ministry of Health & Family Welfare (MoHFW).
- (xviii) Social / religious / academic / entertainment / cultural / sports / political /festival related and other congregations will be permitted outside the containment zones. Wearing of masks, maintaining social distancing, provision of thermal scanning and use of hand wash or sanitizer will be mandatory. **However as a matter of abundant caution, no mass gatherings without written permission of the respective District Magistrate shall be allowed in areas identified as containment zones and in districts reporting more than 10% case positivity in the last one week OR occupancy of more than 40% of ICU beds or beds on oxygen support. In such cases the District Magistrate may make an exception only with the enforcement of reasonable restrictions, depending upon the local risk assessment.** Gatherings shall also be monitored and in case of violation of physical distancing and mask usage norms, necessary enforcement and penal action will be taken.
- (xix) Marriages and funerals/last rites may be allowed outside the containment zone however within the norms as mentioned in the previous paragraph. Public transport (buses, taxis or any other authorized vehicle of public transport) will ply without any capacity restrictions.
- Decided*  
(xx) The District Magistrates based on their assessment of the situation in their respective districts may impose night curfew, weekend curfew and other restrictions with a view to contain the spread of COVID-19.
- (xxi) The District Magistrates shall take all necessary measures to promote COVID-19 appropriate behavior within their respective Districts and shall also ensure strict enforcement of wearing of face masks, hand hygiene and social distancing norms. They shall also take necessary steps to regulate crowds in markets, public transport and various gatherings as per SOPs issued by MoHFW, GoI.

## 2. Guiding Principles

- i. Monitoring of cases by District Magistrates in their respective districts be done on a regular basis. Necessary action for containment and health infrastructure up-gradation be done, by further micro analysis based on cluster of cases at the district level.
- ii. Case positivity calculated based on total positive cases vis-à-vis samples tested during the week, to be considered as one of the prime indicators of spread of infection in the district. District level containment measures and restrictions shall be put in place, **if the test positivity is 10% or more in the last one week OR if the bed occupancy is 40% or more on oxygen supported or ICU beds.**
- iii. The districts need to analyze bed occupancy oxygen and ICU beds vis-a-vis availability of health infrastructure to ensure that it doesn't get overwhelmed. It is important to emphasize on up-gradation of health infrastructure and district shall plan such upgrades after having duly analyzed the case trajectory on a regular basis.
- iv. Restriction and relaxation shall be imposed and monitored based on weekly case positivity or a high bed occupancy (Oxygen and ICU beds) and restrictions if any shall be imposed without delay and for a minimum to 14 days besides continued focus on the **fivefold strategy of Test-Track-Treat-Vaccinate and adherence to Covid Appropriate Behavior.**
- v. Any laxity in implementation of Covid Appropriate Behavior could lead to serious consequences and can result in a surge in cases. It is important that the districts shall diligently follow the **five pillars of Covid -19 Management** i.e "**Test-Track- Treat- Vaccinate and adherence to Covid Appropriate Behavior.**"

*Decision*

➤ Test

- a) To ensure availability of sufficient testing facilities across the UT with particular focus on rural areas. For timely detection, Rapid Antigen Test (RAT) shall be made available in rural and remote areas. Testing should be ramped up in areas reporting high number of cases, and/or increasing trend/high positivity to aid early identification.
- b) To ensure sufficient RT-PCR machines and RAT kits to enable required level of testing across the two districts particularly during the whole festival season and adequate logistics planning accordingly.

- c) Undertake testing in areas with specific and vulnerable population to aid early detection.

➤ **Track**

- d) Containment Zones shall be clearly delineated as per the guidelines issued by MoHFW based on cluster to contain spread of infection.
- e) Active case search through formation of special team in containment zones.
- f) Effective contact tracing, their testing and monitoring of high risk contacts.

➤ **Treat**

- g) Upgradation of health infrastructure based on case trajectory in the district is crucial to avoid case fatality.
- h) Availability of oxygen through oxygen cylinders and concentrators particularly in rural areas.
- i) Adequate availability of drugs in all Covid dedicated facilities including maintaining buffer stock of drugs.
- j) Availability of required health infrastructure in rural as per the SOP on Covid-19 Containment & Management in Rural, Peri-Urban & Tribal Areas dated 12 June, 2021.
- k) Similarly, upgrading health infrastructure to manage pediatric Covid-19 cases vide Guidelines for Management of Covid 19 in Children.
- l) Undertaking upskilling/reskilling of medical staff and fields functionaries on latest Clinical Management Protocol and availability of sufficient trained manpower in all Covid dedicated facilities.
- m) To monitor mutations, the Health Department shall send required number of samples as per the SOPs already issued for Whole Genome Sequencing to INSACoG Labs.

*Dechen S*

➤ **COVID Appropriate Behavior:**

- n) Community engagement is a critical element of sustained Covid 19 management.
  - o) Effective IEC in local language duly utilizing medical professionals and local influencers to promote Covid safe festivities.
  - p) Need to undertake effective communication with community on elements of Covid appropriate behavior which includes use of masks/face covers, following physical distancing (2 gaj ki doori) and practicing respiratory & hand hygiene.
  - q) Need for monitoring the adherence to Covid Appropriate Behavior and guidelines.
  - r) The **National Directives for Covid 19 Management** as specified in **Annexure II**, shall be strictly followed throughout UT Ladakh.
- vi. Some of the strategic areas of intervention focusing on **containment, test, track, surveillance, clinical management, vaccination and Covid Appropriate Behavior** to be taken up are as follows:

➤ **Containment**

- dechen*
- s) Imposition of night curfew, strict regulation of large gatherings, curtailing numbers in marriages and funeral, restricting numbers in offices, industries, public transport etc. In cases of all new clusters of Covid positive cases, prompt notification of "Containment Zones", "Buffer Zones" should be done, strict perimeter control of containment zone as per the extant guidelines must be ensured. All cluster samples must be sent to INSACOG Labs for Genome Sequencing without delay.

➤ **Testing and surveillance**

- t) Testing as per ICMR & MoHFW guidelines, door to door case search, testing of all SAR/ILI and vulnerable/co-morbid people, ensuring right proportion of RT-PCR test in total tests being conducted daily, contact tracing of all covid positive persons & their timely testing, utilizing the access to "AIR SUVIDHA" Portal by District Surveillance officers to monitor the international passengers who has arrived in the districts

➤ **Clinical Management:**

- u) Ensure stringent enforcement of home isolation as per the extant guidelines: customized kit for person undergoing home isolation, their regular monitoring through call centers as well as home visits etc. This will be very critical activity in days to come specially to ensure that persons under home isolation don't spread the virus to others in view of its higher transmissibility.

➤ **Community engagement and Covid Appropriate Behavior:**

- v) Ensure advance engagement and information so that there is no misinformation or panic. Transparent communication on hospital and testing infrastructure availability, regular press briefings etc. Participation of community backed by strict enforcement is necessary for ensuring covid appropriate behavior.

➤ **Vaccination:**

- w) UT-wide vaccination of eligible age groups may be accelerated. Door to door vaccination campaign need to be strengthened.
- x) Coverage of eligible second dose beneficiaries shall be prioritized.
- y) Optimal usage of allocated doses through minimal wastage.
- z) Ensure 100% coverage of left out first and second dose eligible beneficiaries in an accelerated manner. Additionally, precaution dose & adolescent vaccination shall also be taken up for all eligible people.

*deciding*

3. **Strict Adherence to the prescribed SOPs:**

- i. All activities have been permitted outside Containment Zones and SOPs have been prescribed for various activities. These include: movement by passenger trains; air travel; metro trains; schools; higher educational institutions; hotels and restaurants; shopping malls, multiplexes and entertainment parks; yoga centers and gymnasiums; exhibitions, assemblies and congregations, etc.
- ii. The SOPs, as updated from time to time, shall be strictly enforced by the authorities concerned, who shall be responsible for their strict observance.

4. **Local Restrictions:**

- i. The District Magistrates shall take constant review of emerging data based on sustained and critical level of testing to facilitate decision for

restrictions/relaxation based on evidence. Such decisions should be taken after proper analysis of the local situation, such as emergence of new cases/clusters, case positivity, population affected, the geographical spread of cases & hospital infrastructure preparedness as mentioned in MoHFW advisory vide DO no: Z.26015/1/2022-DM Cell dated 18.02.2022. (**Annexure I**)

- ii. There shall be no restriction on inter-State and intra-State movement of persons and goods including those for cross land-border trade under treaties with neighbouring countries. No separate permission/ approval/ e-permit will be required for such movements.

**5. Protection of vulnerable persons:**

- i. Persons above 65 years of age, persons with co-morbidities, pregnant women, and children below the age of 10 years are advised to take necessary precautions.

**6. Use of Aarogya Setu:**

- i. Use of Aarogya Setu may continue on best effort basis on compatible mobile phones. This will facilitate timely provision of medical attention to those individuals who are at risk.

**7. Strict enforcement of the guidelines:**

- i. The District Magistrates shall strictly enforce the above guidelines/ measures.
- ii. For the enforcement of social distancing, the District Magistrates may, as far as possible, use the provision of section 144 of the Criminal Procedure Code. (Cr.PC) of 1973.

*decoher*

**8. Penal provisions:**

- i. Any person violating the above guidelines/measures will be liable to be proceeded against as per the provision of section 51-60 of the Disaster Management Act, 2005, besides, legal action under Section 188 of IPC and other legal provisions as applicable.

**9. Rigorous Surveillance of International Passengers:**

- i. Considering the emergence of highly mutant Covid-19 variant i.e B.1.1.529, named Omicron cases in few countries of Africa. It is essential that rigorous surveillance of international arrivals from countries designated as '**At Risk**' is done. Past travel details of

passengers coming through international flights should be reviewed and the protocol provided by the MoHFW shall be strictly ensured including testing on disembarkation of international travelers coming from 'At **Risk**' countries and to send all positive samples for genome sequencing for INSACOG Labs in a prompt manner.

**10. Enhanced Testing:**

- i. Strengthening of testing infrastructure and strictly implement the testing guidelines.

**11. Monitoring of Hotspots:**

- i. Continued monitoring of Hotspots with intensive testing and sending of positive samples quickly to genome sequencing to designated INSACOG labs.

**12. Ensuring prompt dispatch of samples for Genome Sequencing:**

- i. Contact of international travelers must be closely tracked and tested as per MoHFW guidelines and the sample resulting positive are to be sent to designated INSACOG Genome Sequencing Laboratories (IGSLs), as per the Indian SARS-CoV-2 Genomics Consortium (INSACOG) Guidance Document.

**13. Regular Press Briefing for promoting Covid Appropriate Behavior & Vaccination:**

- i. To regularly address the concerns of community through press briefings, so that the community is well informed regarding the measures undertaken and advised to follow measures like Covid Appropriate Behavior & getting vaccination.

*Saugat*

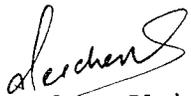
**Sd/-**  
**(Saugat Biswas), IAS**  
Member Secretary,  
State Executive Committee,  
Ladakh Disaster Management Authority.

No:-DMRRR/UTL/SOP/COVID-19/2021/642-61.

Dated: - 01.03.2022

Copy for information to the:-

1. Principal Secretary, Health & ME, Ladakh
2. Joint Secretary, Jammu, Kashmir & Ladakh, Ministry of Home Affairs, GoI
3. Joint Secretary, Disaster Management, Ministry of Home Affairs, GoI
4. Additional DGP, Ladakh
5. Divisional Commissioner, Ladakh
6. Secretary Civil Aviation/Tourism/Information Department, Ladakh
7. Deputy Commissioner, Leh/Kargil
8. Sr. Superintendent of Police, Leh/Kargil
9. Director, Health & Medical Education, Ladakh
10. All Heads of the Departments, UT of Ladakh
11. Chief Medical Officer, Leh/Kargil
12. OSD with the Lieutenant Governor for information of the Hon'ble Lieutenant Governor.
13. Pvt. Secretary to Advisor to the Hon'ble Lieutenant Governor for information of the Advisor.
14. Pvt. Secretary to the Chairman/Chief Executive Councilor, LAHDC Leh/Kargil for information of the Hon'ble CECs.
15. Director, KBR Airport, Leh.
16. District Informatics Officer, (NIC), Leh for uploading on the UT Ladakh website.
17. Assistant Director Information, Leh/Kargil for necessary action.
18. President Hotel/Guest House owners Association, Leh/Kargil.
19. All heads of religious organizations of Leh/Kargil.
20. Order/Stock file. (w.2.s.c).

  
**Deachen Chondol**  
**Under Secretary**  
**DMRRR.**



राजेश भूषण, आईएएस  
सचिव

**RAJESH BHUSHAN, IAS**  
SECRETARY



भारत सरकार  
स्वास्थ्य एवं परिवार कल्याण विभाग  
स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
Government of India  
Department of Health and Family Welfare  
Ministry of Health and Family Welfare

D.O No. Z.26015/1/2022-DMCell  
18<sup>th</sup> February 2022

*Dear Chief Secretary,*

This is regarding measures that need to be taken in view of the sustained decline in the number of new Covid-19 cases across the country. From time to time, this Ministry has been advising and guiding the States/UTs regarding recommended strategies for testing, surveillance, containment and restrictions keeping in view the District as a unit.

2. Taking into account the significant decline in the Covid-19 cases across the country, the States have been undertaking various measures to reopen economic and social activities. There is a need to follow a risk assessment-based approach on the opening of economic activities without losing the gains made so far in the fight against the virus.

3. In this context, this Ministry's earlier guidance shared with States/UTs on multiple occasions regarding the recommended strategies for testing, surveillance and containment based restrictions, keeping the District as a unit for decision making, are still valid.

4. **Evidence-Based Decision making:** At the district level there should be constant review of emerging data based on a sustained and critical level of testing to facilitate decision for restrictions/relaxation based on evidence. Such decisions should be taken at State/UT level after proper analysis of the local situation, such as the emergence of new cases/clusters, case positivity, population affected, the geographical spread of cases & hospital infrastructure preparedness.

5. **Broad-based framework for relaxation/restrictions:** In order to identify areas where restrictions need to be imposed/continued in districts/areas, the following broad-based framework is provided to aid States UTs:

S. No.	Parameter	Thresholds
1	Test positivity	Test positivity of 10% or more in the last week
<i>OR</i>		
2	Bed occupancy	Bed occupancy of more than 40% on either oxygen supported or ICU beds

- a) States need to watch the trajectory of cases in particular geographies to ensure that the areas reporting positivity rate above 10% and/or bed occupancy more than 40% on either oxygen supported or ICU beds should undertake required enforcement, containment, and restriction measures.
- b) As the case trajectory may vary from State to State and there would be variation in the spread of infection within States also, there is a need to take decisions with respect to containment and restriction measures primarily at the local/sub-national level by concerned State and District Administration.
- c) Continued focus on community participation for adherence to Covid Appropriate behavior including proper wearing of mask and physical distancing (2 gaz ki doori), as directed under the national directives for Covid-19 management under Disaster Management Act, will however be important measures to be undertaken across the country.

6. Some of the **strategic areas of intervention** focusing on containment, test, track, surveillance, clinical management, vaccination and Covid Appropriate Behaviour to be taken up are as follows:

**I. Relaxation in various activities duly following the National Directives for Covid-19 management under Disaster Management Act**

- i. Focus will be on graded relaxation to support the resumption of economic activities.
- ii. Social/sports/entertainment/academic/cultural/religious/festival-related and other gatherings and congregations may be resumed. The decision for allowing these activities shall be taken up by the concerned States duly guided by the principles as enunciated above.
- iii. Offline classes can be resumed in academic institutes without any restrictions. However, the school administration may also leverage a hybrid model of imparting education through online and offline modes.
- iv. Marriages and funerals/last rites may be allowed.
- v. All shopping complexes, cinema halls, restaurants & bars, sports complexes, gyms, spas, swimming pools, and religious places may be allowed to operate at full capacity.
- vi. Public transport (railways, metros, buses, cabs) to operate without any capacity restrictions.
- vii. There shall be no restrictions on inter-state and intra-state movement including transportation of essential goods.
- viii. All offices, both government and private, may function without any capacity restrictions.
- ix. All industrial and scientific establishments, both government and private may be allowed.
- x. While allowing all such activities, it is imperative that the national directive including use of mask & physical distancing shall be strictly followed in all public places.
- xi. The activities as mentioned above are primarily indicative and States/UTs should make a careful analysis of the local situation, areas to be covered, and extent of case positivity and transmission to decide on the relaxations/restrictions. Such decisions by States/UTs must be linked to the local epidemiological situation of Covid-19, based on a sustained critical level of testing and monitoring of case positivity.

**II. Testing and surveillance:**

States will continue with the strategy of 'Test-Track-Treat-Vaccinate' and implementation of Covid Appropriate Behavior across the district as the ongoing strategy in managing COVID-19.

- a) Ensure sustained critical level of testing as per the testing guidelines.
- b) Monitoring of Influenza-like illness (ILI) & SARI cases to be taken up in all Health facilities for early warning signals of the spread of infection.
- c) The surge in cases including clustering of cases should be monitored.
- d) States to ensure continued focus on genomic sequencing of international passengers, collection of samples from sentinel sites (identified health facilities) and local clusters of cases, duly following the guidelines laid by MoHFW to capture early warning signals on variants.

**III. Clinical Management**

- i. States to ensure **sufficient availability of dedicated Covid health infrastructure** as per the ongoing case trajectory.
- ii. Ensure that **Home isolation protocol** is followed wherever required for asymptomatic and mild cases and specific monitoring shall be continued for **high-risk cases**.
- iii. **Non-Covid health services** shall also be fully operationalized in all health facilities.

**IV. Vaccination:** Ensure 100% coverage of left out first and second dose eligible beneficiaries in an accelerated manner. Special focus to be given to those districts where the first & second dose coverage is less than the national average. The door-to-door vaccination campaign need to be strengthened. Similarly, precaution dose & adolescent vaccination shall also be taken up for all eligible people.

As far as schools are concerned, the district administration, in collaboration with school management, may ensure vaccination of **all teaching and non-teaching staff**.

All activities, like restaurants, gym, spas, sports, swimming pools, etc. considered for resumption of services shall **promote 100% vaccination of the eligible staff**.

**V. Community engagement and Covid Appropriate Behaviour:**

Ensure advance engagement and information so that there is no misinformation or panic, transparent communication on hospital and testing infrastructure availability, regular press briefings etc. Participation of community backed by strict enforcement is necessary for ensuring Covid Appropriate Behaviour. **Evidence-based information** shall be regularly made available to the community accordingly.

*Narm Legarda.*

Yours sincerely,

  
(Rajesh Bhushan)

To : Chief Secretary/ Administrators of all States/UTs

**Annexure II**

**NATIONAL DIRECTIVES FOR COVID-19 MANAGEMENT**

1. **Face covering:** Wearing of face cover is compulsory in public places; in workplaces; and during transport.
  2. **Social distancing:** Individuals must maintain an adequate distance in public place and at work places.
  3. **Spitting in public places** will be punishable with fine, as may be prescribed by the State/ UT local authority in accordance with its laws, rules or regulations.
  4. **Screening & hygiene:** Provisions for hand wash or sanitizer will be made at work places.
  5. **Ventilation:** In closed places, proper ventilation should be ensured.
-