

**Implementing the
Guidelines for Human
Resource Management
in Dedicated COVID-19
Facilities**

Government of Gujarat
Order No.NCV/102020/SFS-3/G
Health and Family welfare Department,
Sachivalaya, Gandhinagar.

Dated : **28 APR 2020**


Order:

The Government of Gujarat has published the notification No. GP/9/NCV/102020/SF-1/G of The Gujarat Epidemic Regulation-2020 on Dated:13/03/ 2020.

Gujarat is a progressive state with a large pool of medical and paramedical human resources. Government of Gujarat has created wide network of health and medical care facilities in the State to provide primary, secondary and tertiary health care at the door step of every citizen of Gujarat. The State is well equipped with adequate medical and paramedical manpower and health facilities. Similarly the private health sector in the State is most modern and technically advanced. Managing human resource is a new challenge in this crisis. The objectives of the Human Resource Management span right from the manpower needs assessment to management and retention of the same.

Under the guidelines of Government of India, the Departmental Crisis Management Committee along with Expert Group has prepared the Policy on Human Resource Management- Dedicated Covid19 Facilities and published herewith.

By order and in the name of Governor of Gujarat,


(Dr. Jayanti Ravi)
Principal Secretary
Health & Family welfare Department
Government of Gujarat

Copy To:

- P.S. to Hon. Chief Minister, Government of Gujarat, Sachivalaya, Gandhinagar
- P.S. to Hon. Dy. Chief Minister, Government of Gujarat, Sachivalaya, Gandhinagar
- P.S. to Hon. Minister of State(Health),Government of Gujarat, Sachivalaya, Gandhinagar
- P.S. to Chief Secretary, Government of Gujarat, Sachivalaya, Gandhinagar
- The commissioner, Health and Medical Services and Medical Educations, Gandhinagar
- All the Municipal Commissioners in the State of Gujarat
- All the District Collectors/District Development Officer in the State of Gujarat.
- Chief Personal officer,
- All Addl Director,
- Directorate of Information, Block No-19,Jivraj Mehta Bhavan, Gandhinagar. For broadly publishing the Guidelines.
- System Manager, Health & Family welfare Department, Gandhinagar
- Select file-2020

Government of Gujarat

Human Resource Management

Dedicated Covid-19 Isolation Facilities

Date: 28 April, 2020

Government of Gujarat

Advisory/ Policy on Human Resource Management In Dedicated COVID Facilities

India reported first case of covid19 on 30th January 2020. In Gujarat, first case reported on 19th March 2020. The highly contagious viral infection spread is slowed down by social distancing methods and lockdown. Gujarat is progressive state with large pool of medical and paramedical human resources. Along with the robust government health facilities, we have a vibrant private health sector. Managing Human resource is a new challenge in this crisis time.

The Departmental Crisis Management committee along with expert group has prepared the policy on human resource management after studying the prevailing literature and guidelines into consideration.

The Departmental Crisis Management committee:

Sr. No.	Officer	Designation
1.	Shri Jenu Divan, IAS, MD, Tourism, Gandhinagar	Chairman
2.	Shri J D Desai, IAS, MD, NHM	Member
3.	Dr. Navnath Gavhane, IAS, CPO	Member
4.	Dr. R. Dixit, AD, M.E & S.	Member
5.	Dr. H K Bhavsar, AD, M.S.	Member
6.	Dr. Prakash Vaghela, AD, PH	Member
7.	Shri Hareh Parmar, Under Secretary, Public Health,	Member

1. District Covid19 Task Force:

In every district and corporation of Gujarat, the Task force should be created. Municipal Commissioner/District Collectors will chair this task force. This task force will take regular review of the HR deployment and adjustment as per demography, number of cases and availability of human resource.

Members:

Sr. No.	Officer	Designation
1.	Municipal Commissioner/District Collectors	Chairman
2.	District Development Officers	Member
3.	CDMO/MOH	Member
4.	Dean of Medical Collage	Member
5.	M.S. of Civil Hospital	Member
6.	IMA President	Member
7.	Dean of Paramedical colleges	Member
8.	and any person who is required chair may decide.	Member

Mandate:

1. Coordination, mobilization and overall management of HR for Covid19 Isolation facilities.
2. Coordination with IMA and Private Practitioners/associations.
3. Preparation of Pool of Medical and Paramedical Personnel (Government + Private)
4. Identify the gap and prepare plan for deployment of HR
5. Covid Volunteer, NSS, Ex Servicemen, NCC, Civil Society group participation
6. Implementation of guidelines, circulars and advisories issues by the government.
7. Daily/Weekly Review HR Management

1. Dedicated Covid19 Facilities:

There are three types of facilities we have to consider when it comes to managing human resource.

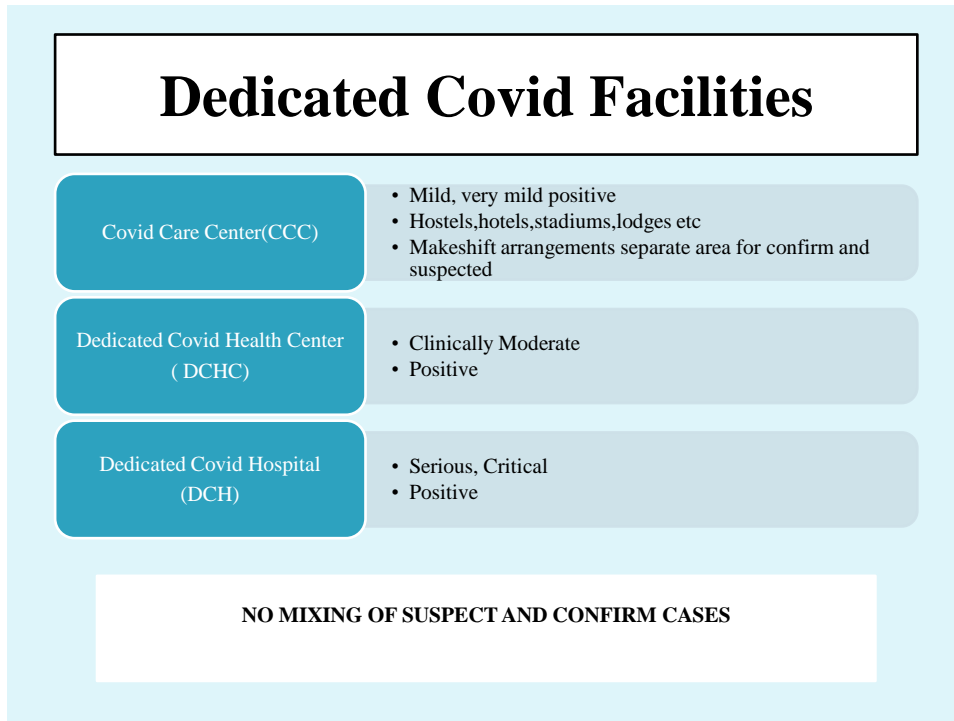


Figure 1 Dedicated Covid19 Isolation Facilities

District can identify the makeshift places as per guidelines for the Covid care center (CCC). As per our current planning, we can consider the facilities as shown in next slide.

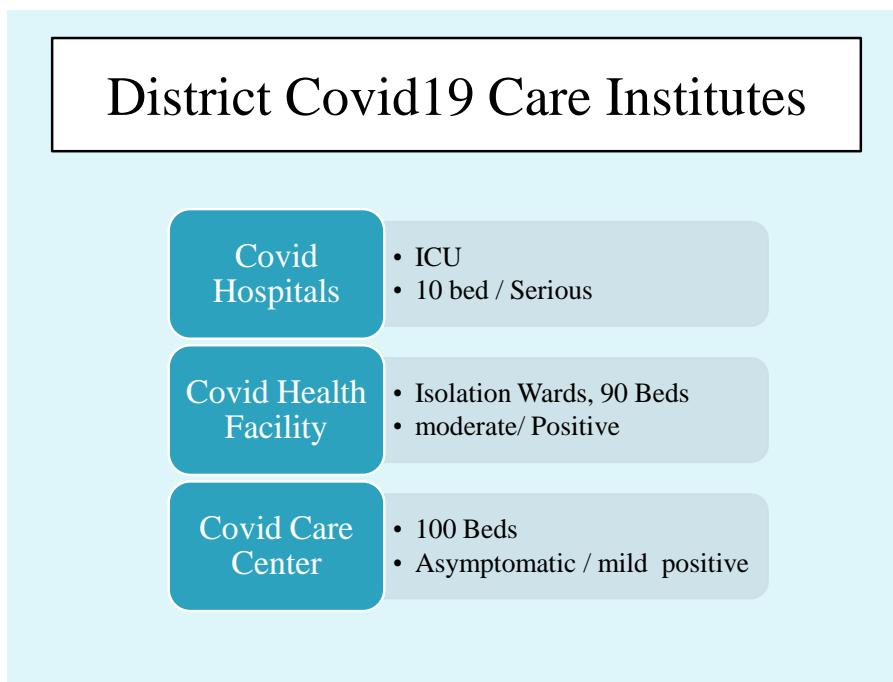


Figure 2 Current Status of Covid19 Facilities in Gujarat

ICU and Isolation bed facilities are already identified and functional in most of districts. The Covid Care Centers activation is in process.

2. Patient Flow Algorithm:

While planning the deployment of human resources, we need to consider the patient flow.

Current situation of COVID – 19 diseases, Suspected Patients can be tracked by analyzing data of House to House Survey, 104/108/1100 Helpline Numbers and samples from clusters. Cases of SARI/ILI /FLU/Suspected Cased of COVID – 19 to Flu OPD/Corner should be screened using risk analysisi questionnaire along with physical examination.

Sample for Covid test of suspected Patient should be taken. If test comes negative, they can be transferred to non COVID -19 Facilities.

If Patient comes positive then depending on severity, patient can be admitted in COVID Care Centre/ isolation ward/ICU.

Kindly go through the algorithms figures.

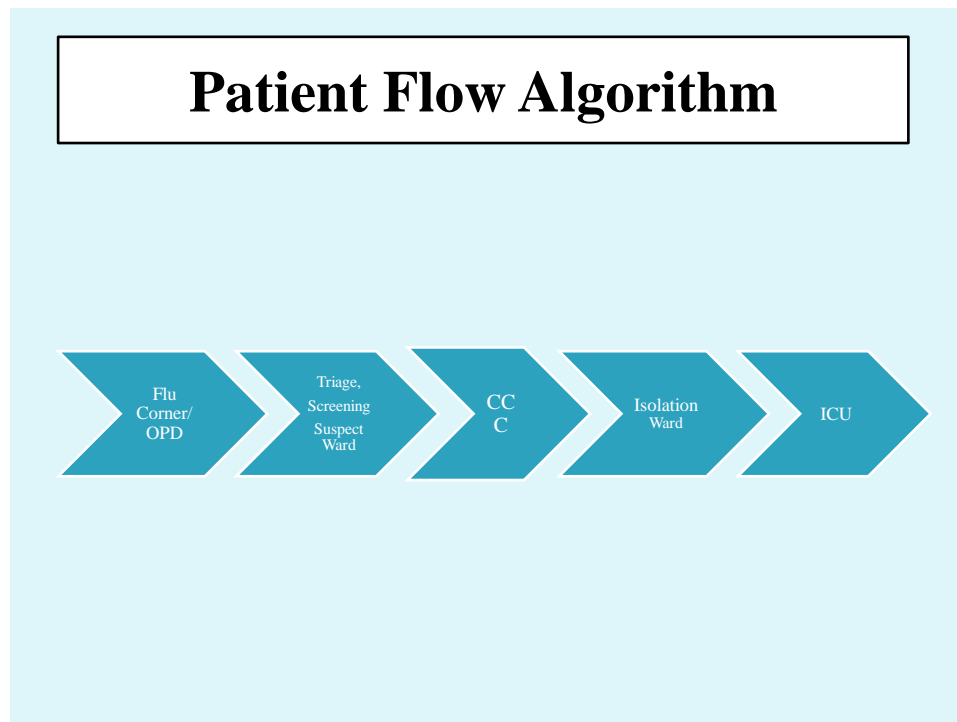


Figure 3 Patient Flow

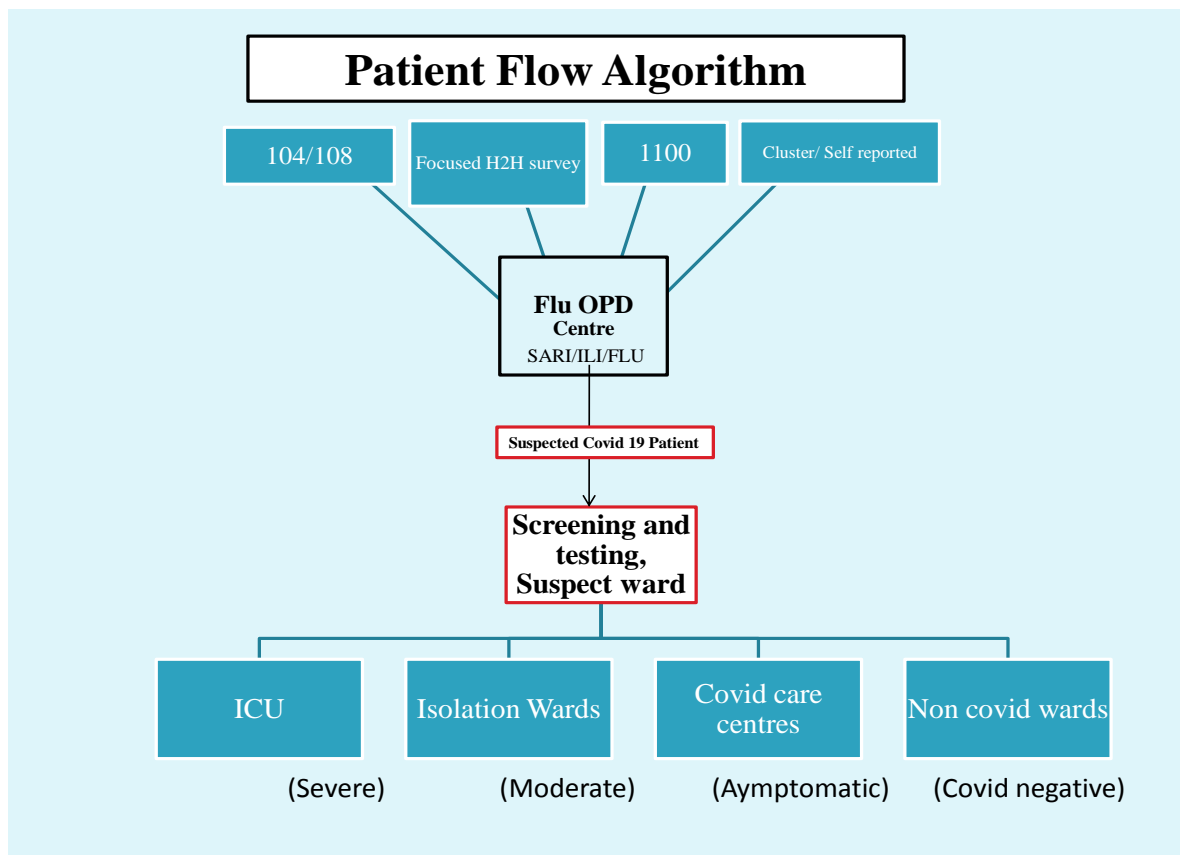


Figure 4 Patient Flow Algorithm

3. Deployment and Rotation of Human Resources

A. Dedicated COVID 19 Hospitals:

There will be ‘Four Teams’ in each dedicated Covid hospital. These teams will consist of physicians, anesthetists, medical officers, Paramedical and service staff. Each team will work seven Days in ICU, 7 Days in Isolation Wards and 14 days in Quarantine. (14 Days of Work + 14 Days of Quarantine).

The Rotation of team will be as follows.

A team works 7 Days in Isolation ward then after they will posted in ICU for another 7 Days. After Completion of 14 Days duty, they will be in quarantine for 14 Days.

The non deployed staff who can be kept as reserve/stand- by as the requirements of ICU and Isolation ward are different. Such reserve and standby staff should be placed as and when necessary.

During the quarantine period, the team will be engaged in training activities using Zoom / Webex / i- Got Platforms. There will also be experience sharing with the State Expert group.

The Quarantine Team will be tested on 7th Quarantine day. If it comes negative then they can be deployed directly in to dedicated COVID Hospitals isolation wards.

B. COVID Care Centre(CCC):

In the Covid Care Centre, we require less number of staff as compare to hospital. In CCC, patients are asymptomatic or mildly symptomatic. The staff deployed there can be rotated as 7/14+14 days depending on availability and patient load. They will also be kept in 14 days quarantine at the end of their Covid duty. The training and experience sharing activities in quarantine will be continued as mentioned above. If RDT on the 7th day turns negative then they can be deployed in Covid duty or kept as reserve.

All Teams will be residing in Hospital campus during the time of deployment.

The above mentioned plan of HR deployment and rotation should be considered in the in the background of number of occupancy, demography and availability of HR.

All the staff placed in Covid duty must be trained in Infection Control and prevention protocols. They are our frontline Covid Worriers.

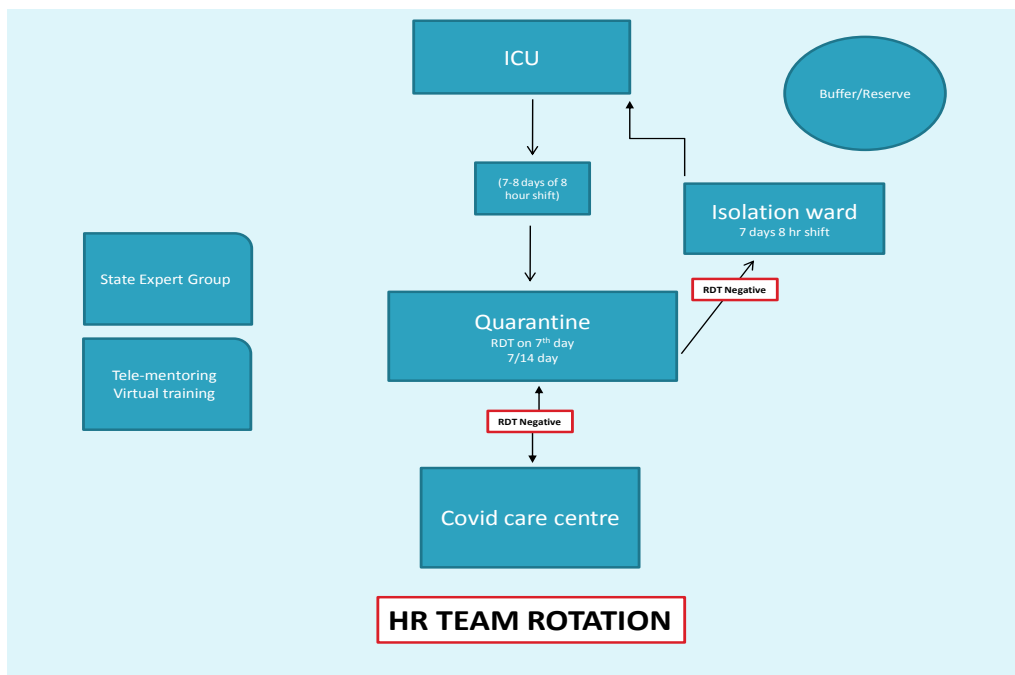


Figure 5 Team Rotation Protocol

If we consider that there are four teams in the hospital as A,B,C,D then rotation can be done in the following manner.

HR Rotation in Covid19 Hospital				
	1 st week	2 nd week	3 rd week	4 th week
ICU	A	B	C	D
Isolation	B+C	C+D	D+A	A+B
Quarantine/ non covid duty	D	A	B	C

Figure 6 Team Rotation Example

4. Ideal Requirements of Staff:

A. Covid Care Centre:

In the Covid care centre, we need SR Medicine or Trained CPS/DNB/MO (24*7 standby for exigencies), MO, Nursing Staff and Service staff. A consultant / physician should be made available to guide the working staff. The maximum use of Telemedicine platform should be encouraged. A dedicated ambulance should be kept standby for any exigencies.

HR Requirements can be calculated in ratio like 1:25 Nursing staff, 1:50 MO, 1:10 service staff. Additional 25% buffer should be kept ready.

Category (100 BED)	8 hour Shift	Day (3 shifts)	25% Buffer	Total
Consultant	1	1	1	2
MO	2	6	2	8
Nurse	4	12	4	16
Service staff	10	30	10	40

Figure 7 Ideal Requirement HR in CCC

A. Dedicated Special four Covid Hospitals

In the four special Covid hospitals started in Ahmedabad, Vadodara, Surat and Rajkot the requirements are as mentioned in the table. This will also be applicable for any such future project.

Cadre	Team	Indicative Requirement for ICU	Indicative Requirement for Isolation ward
		25 (Beds)	60 (Beds)
AP Medicine	1	3	3
	4	12	12
AP Anaesthesia	1	3	0
	4	12	0
SR Medicine	1	0	3
	4	0	12
Resident Medicine	1	3	3
	4	12	12
Resident	1	3	0

Anaesthesia	4	12	0
Non medicine Resident	1	0	6
	4	0	24
Nursing Staff	1	24	15
	4	96	60
Service Staff	1	18	12
	4	72	48

Figure 8 Ideal Requirement HR in Special four Covid Facilities

B. Dedicated District Covid19 Isolation Facility:

Requirements in the dedicated Covid19 Isolation facilities can be calculated on following formula.

These facilities may be in District Hospitals, Medical college attached hospitals, private hospitals.

HR Requirement for 100 Beds Hospital	Week	Indicative Requirement for ICU (10 Beds)	Indicative Requirement for Isolation Beds (45 Beds)
Physicians	1	3	3
	4	12	12
Anesthesiologists	1	3	0
	4	12	0
Medical Officers	1	3	6
	4	12	24
Nursing Staff	1	15	15
	4	60	60
Service Staff	1	12	12
	4	48	48

Figure 9 Ideal Requirement HR in District Facilities

5. Deployment of Residents and Nursing Students:

As per the new guidelines of MoHFW, The Residents and Nursing staff can be deployed in following manner.

In the medical and paramedical colleges the residents can be deployed in three different levels. These three levels are screening area, non-critically ill admission area and critically admission areas. In the critically ill hospitalized patient area, Residents only from category A and B should be posted.

In the category A, Residents from anesthesiology and Critical Care Medicine, Pulmonary medicine, Geriatric medicine and emergency medicine needed to be considered.

In the category B, Residents of Cardiology, Gastroenterology, Urology Nephrology, Pediatrics, Medical oncology, Hematology, neurosurgery, ENT Etc Residents should be deployed.

Category E is of medically trained residents from pre or Para clinical departments like Anatomy, Physiology. Category E can be deployed in any of three levels.

In the facility for non-critical hospitalizations, Team leader should be either from A or B category and resident should be primarily from C&D.

Deployment of Residents and Nursing Staff				
LEVEL	Patient Category	Facility	Team leader	Primary staff
A	Screening Area	Triage Area, Screening, Suspect Ward	B,C	C,D,F,E
B	Non Critically Ill	CCC, Isolation Ward	A,B	C, D,E
C	Critically Ill	ICU	A,B	A,B,E

<https://www.mohfw.gov.in/pdf/COVID19SOPfordoctorsandnurses.pdf>

Figure 10 Residents and Nursing Student Deployment

A: Core Departments

B: Clinical specialties already running ICU/HDU under their care

C: Other specialties with clinical post-graduates, but not running ICU/HDU under their care

D: All other clinical specialties with limited or no responsibility for critically ill patients

E: Medically trained (MBBS) residents from pre-clinical and Para-clinical departments

Dental students can also be deployed after training whenever necessary.

NON COVID -19 patients (Screening)	Mild to Moderate COVID -19 patients	Critical COVID- 19 patients
B.Sc (Hons)1 st and 2 nd year Nursing students	B.Sc (Hons) 2 nd and 3 rd students	M.Sc (Hons) Nursing students (1 st and 2 nd students) B.Sc.(PB) nursing students (Both 1st and 2nd year)

For nursing students, it is advisable to post M.Sc and B.Sc. nursing students in a critical area. B.Sc. (hon) third and fourth years nursing students should be to mild and moderate critical area. While first and second year students should be deployed in screening area. They all must be under gone training Related to infection control prevention.

For further details, kindly refer below mentioned linked of guidelines issued by government of India.

<https://www.mohfw.gov.in/pdf/COVID19SOPfordoctorsandnurses.pdf>

6. Pooling of HR

The medical and paramedical staff can be pooled from following available institutes or cadres. The authority to pool the HR for such dedicated hospital delegated to Municipal commissioners and District Collectors. **This has to be done as per governments prevailing guidelines, circulars and resolutions.**

1. Residents
2. Medical Students
3. CPS/DNB
4. Medical officers, Paramedical Staff of all government departments - available and deployed in district.
5. IMA members, Private Practitioners and other medical paramedical associations.
6. Ayush, Dentists, RBSK doctors
7. Retired medical and Para medical staff
8. Extension of retirement for field staff
9. GMC Non registered medical paramedics
10. New Recruitments.
11. Private Medical college's staff

The care and protection of all our staff from Covid19 or any other infection should be given priority. Before deploying them into Covid dedicated facilities, adequate training and protective equipments must be assured.

