





COVID 19 AND SAFE SANITATION PRACTICES FOR URBAN CONTEXT

Resource Book of Gol Advisories and Practitioners' Resources for Indian Cities

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Acknowledgement

National Institute of Urban Affairs (NIUA) is India's leading national think tank on urban planning and development. As a hub for the generation and dissemination of cutting-edge research in the urban sector, NIUA seeks to provide innovative solutions to address the challenges of a fast urbanising India, and pave the way for more inclusive and sustainable cities of the future. NIUA is also the strategic partner of the MoHUA in capacity building for providing single window services to the MoHUA/states/ULBs.

A national working group was convened in January 2016 with the support of the Bill and Melinda Gates Foundation with the mandate to build consensus around and drive the discourse on Faecal sludge and Septage Management (FSSM) at a policy level, and promote peer learning among members to achieve synergies for scaled implementation and reduce duplication of efforts. The National Faecal Sludge and Septage Management Alliance (NFSSMA) currently comprises of 30 national and international organizations working synergistically towards sanitation solutions in India and works in close collaboration with the Ministry of Housing and Urban Affairs (MoHUA) and several state and city governments through its members.

The strength of the Alliance lies in its diverse membership, which includes research institutes, academic institutions, think-tanks, quasi-government bodies, implementing organizations, data experts, consultants and intermediaries. This enables a multi-disciplinary view of urban sanitation, with members building on each other's expertise. Coming together as a collaborative lent significant solemnity and credibility when approaching the Government, and resulted in policy recommendations that were inclusive, comprehensive, and had buy-in from several stakeholders in the sector. Having members who had worked closely with the government for decades was an added advantage.

Support of Gates Foundation in this initiative is acknowledged.



- Athena Infonomics
- BBC Media Action
- BMGF
- BORDA
- CEPT University
- CSTEP
- CDD

CSE

- CPR • CFAR
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- TIDE Technocrats
- USAID WASHi
- Water Aid World Bank Group

FOREWORD



The COVID 19 requires an emergency response from Urban Local Bodies and States on several fronts. The global crisis led to a month long lockdown in India that continues till today, at the time of releasing this Resource Book.

Several cities in India initiated massive drives for sanitization of public spaces, particularly in the hot spots of COVID infected areas and ensured a massive deployment of sanitation workers to address this crisis. Hygiene and cleanliness are the

strongest weapons in any public health crisis.

Door to door waste collection, emptying septic tanks, addressing safe disposal of bio medical waste and household waste generated from COVID infected people remains a top priority for all cities.

NIUA has collaborated with the National faecal Sludge and Septage Management Alliance (NFSSMA) to support the ULBs and States and any other CSR or Civil society initiatives, to respond effectively to the emergent challenges of urban sanitation. This also includes guidance on sanitation workers safety and protection gear and how to plan an Emergency Response (Proposal and budget for a 3-6 month response) specifically for sanitation work and workers' personal protection gear.

This Resource Book: COVID 19 and Safe Sanitation Practices for Urban Context: is a compilation of important Govt of India Advisories and other Knowledge Resources relating to Urban Sanitation and COVID.

A larger compilation of all available urban sanitation and COVID compiled by NIUA is available on the SCBP website (scbp.niua.org) and is now live.

This work has been anchored at NIUA by the Sanitation Capacity Building Team.

We remain committed to the national resolve, to win this battle against COVID 19.

Hitesh Vaidya

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Director, NIUA 22nd April 2020



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Acronyms

CT Community Toilet

CPCB Central Pollution Control Board
CSR Corporate Social Responsibility

CPHEEO Central Public Health and Environmental Engineering Organisation

FSTP Faecal Sludge Treatment Plant

Gol Government of India

GoUP Government of Uttar Pradesh

GoO Government of Odisha

IEC Information, Education and Communication

IIHS Indian Institute for Human SettlementsMoHUA Ministry of Housing and Urban AffairsMoHFW Ministry of Health and Family Welfare

MoSJ&E Ministry of Social Justice and Empowerment

MoEFCC Ministry of Environment, Forest and Climate Change

MoSJ&E Ministry of Social Justice and Empowerment

MoRD Ministry of Rural Development
PIB Press Information Bureau

PT Public Toilet

PPE Personal Protective Equipment

STP Sewage Treatment Plant

ULB Urban Local Body

UMC Urban Management Centre WHO World Health Organization

COVID 19 AND SAFE SANITATION PRACTICES FOR URBAN CONTEXT

Introduction

In the context of the unprecedented situation caused due to the Coronavirus (COVID-19) pandemic, health and sanitation workers tackling the crisis at the frontline are amongst the most vulnerable population.

As of mid-April 2020, more than 150,000 people have died after contracting the illness and more than 20 lakh people have been infected globally. This number Is continuously rising, and includes many frontline workers due to the nature of their work. Basic preventive measures are being promoted, such as regularly washing hands and using sanitisers and face masks, but these precautions aren't sufficient for sanitation workers.

In India, a sanitation worker is involved in many tasks, such as cleaning toilets, collecting household refuse, medical wastes and garbage, emptying pits and septic tanks, cleaning sewers and manholes, among others. These tasks become all the more dangerous in a health crisis due to the risk of infection. It is during these circumstances that one needs to invest time and energy in ingraining and re-enforcing hygiene related behaviour change and build the capacity of the sanitation workers. This task can be holistically implemented with the help of municipal bodies who are entrusted with the critical job of providing safe sanitation to its citizens.

Purpose

National Institute of Urban Affairs (NIUA) along with the National Faecal Sludge and Septage Management (NFSSM) Alliance Partners, has taken up this initiative of creating a repository of important government advisories and practitioners' guidance material for Urban Local Bodies (ULBs), state governments, elected representatives, professionals from private and public bodies, to prepare for and address the COVID 19 and Urban Sanitation challenges.

The documents collated in this resource book have been segregated into various categories as follows.

Part A: Government Advisories

Part B: Practitioners Resources

Part C: Preparing for Emergency COVID Response

Part A: Key Government Advisories include all Orders, Letters, Notifications, Guidelines etc. issued by the national and few state governments.

Government Advisories compilation is for putting in place sanitation related measures to mitigate the impact of Covid-19 in respective cities. This is primarily for state and ULB officials, elected representatives and other parastatal agencies, as references.

Part B: Key knowledge resources comprising practical and operational guidelines, research, posters, reports and publications. These have been collated from a range of resources including private and public organizations working on the ground.

This repository will serve government or non-government agencies, and private agencies who would like to access the knowledge materials, tools and skill sets to engage with COVID-19 related sanitation response.

Part C: Consists of practical guidance for Preparing for Emergency COVID Response.

State governments and ULBs have got into action to address the public health crisis with support of sanitation workers. To this effect, this section includes a categorisation of sanitation workers and their protective gear requirements (including protective outerwear, gloves, gum boots, goggles or a face shield and a mask). It also includes a template to develop a quick budget proposal. This will be able to help any state government, ULB, and public or private agency in developing proposals for funding from state and national government, and CSR funds for safety of sanitation workers.

This Resource Book is a living knowledge resource document, to be updated periodically and is expected to serve as a guidance for a range of sanitation work and workers' safety measures, till the COVID-19 pandemic lasts in India.

The Resource Book is a reference guide for action and implementation. It should be matched with the state and city specific contexts, the government advisories and guidance and used with discretion.

Important documents and knowledge resources have been collated under four themes as follows:

1. Solid Waste Management

The pandemic brings unforeseen challenges regarding safe collection, segregation, transportation, treatment and disposal of solid waste, which is being generated from quarantined households, quarantine and isolation centres, sample collection centres, healthcare facilities and hospitals.

The Central Pollution Control Board has released guidelines to be followed by all the stakeholders including isolation wards, quarantine centres, sample collection centres, laboratories, ULBs and common biomedical waste treatment and disposal facilities. This is in addition to pre-existing practices under Bio-medical Waste Management Rules, 2016. Specific provisions have also been incorporated for states not having Common Biomedical Waste Treatment Facilities and for allowing hazardous waste incinerators to dispose COVID-19 related waste. The guidelines also state the responsibilities of persons operating quarantine camps or home care facilities, the State pollution Control Boards and ULBs.

Ministry of Housing and Urban Affairs (MoHUA), Government of India (GoI) has also prepared an instruction note for steps to protect sanitation workers. The instructions may be issued to all municipal bodies for taking an immediate action on safe disposal of waste from quarantined households, focusing on collection, treatment and disposal of domestic hazardous waste and protective gear for sanitary workers etc. and sanitary workers' livelihoods.

2. Liquid Waste Management

Provision of safe water, sanitation and hygienic conditions are essential for protecting human health during the COVID-19 outbreak. Ensuring good and consistently implemented Water, Sanitation and Hygiene (WASH) and waste management practices in communities, homes, schools, market places and health care facilities will help prevent human-to-human transmission of the virus. The morphology and chemical structure of the COVID-19 virus are similar to those of other human corona viruses, for which there is evidence about both survival in the environment and effective inactivation measures.

Best practices in WASH, particularly handwashing with soap and clean water, should be strictly applied and maintained because these provide an important additional barrier to COVID-19 transmission and spreading of infectious diseases in general. Apart from this, workers should exercise safe social distancing while at work and wear appropriate protective gear. They should also maintain hand hygiene frequently and avoid touching eyes, nose and mouth with unwashed hands. Wastewater carried in sewerage systems should be treated in

well-designed and well-managed Sewage Treatment Plants (STPs), Septage Treatment Facilities and other wastewater treatment works. Each stage of treatment (as well as retention time and dilution) results in a further reduction of the potential risks from COVID-19.

3. Health and Safety of Sanitation workers

Sanitation workers at the frontline of the pandemic are amongst the most vulnerable segments of society due to the nature of their work.

It is difficult to identify households who may be suffering from COVID-19, hence precaution and safe management of all household solid waste generated in this pandemic is required. Therefore, solid waste collection and workers' safety during door to door collection, street sweeping and drain cleaning work must be put under essential public services and precaution has to be exercised to mitigate the impact of COVID-19.

GoI has released multiple guidelines and advisories to be followed by each state and local governments, as well as contractors employing sanitation workers. All the different categories of workers engaged in urban sanitation services and the risk they pose from COVID-19 need to be factored in for securing appropriate Protective Gear (PG). Their employment as contractual or regular staff with the ULBs should not come in the way of provisioning of protective gear.

The protective gear, at the very least, includes gloves, face masks and shoes and may also include other equipment depending on the nature of work being carried out.

4. Sanitisation of Public Places

In the critical phase of COVID-19, community transmission takes place. Hence, it is critical to sanitize public places that witness high number of footfalls (such as parks, markets, tourist spots etc). Areas such as markets, which are accessible even during lockdown periods need to be sanitised during the lockdown period at regular intervals to contain the risk of further spreading the infection. Most importantly, community and public toilets also need to be sanitised on a regular basis depending on the number of users per day, to prevent community transmission.

In addition, common places where many people gather, such as cinema and marriage halls, cremation grounds, railway stations, bus stands, airports, restaurants and dining areas, art and other exhibition centres, conferences and commercial/market places and mandis; need to be sanitised regularly.

Government has issued advisories to this effect which must be followed by all concerned establishments in the time to come.



Material Repository: Thematic Priorities for COVID 19 risk mitigation

Sr No	Sector	Name of Document	Aspects covered	Language	Organisation		
Part A	Part A: Government Advisories						
1	Solid Waste Management	Guidelines for Handling, Treatment and Disposal of Waste Generated during Treatment/Diagnosis/ Quarantine of COVID-19 Patients	Management of SW from isolation facilities, labs and hospitals and Role of the following stake holders: - Responsibilities of persons operating Quarantine Camps/Homes or Home-Care facilities - Duties of Common Biomedical Waste Treatment Facility (CBWTF) - Duties of SPCBs/PCCs - Duties of Urban Local Bodies	English	CPCB, MoEFCC, Gol		
2		Instructions for safe disposal of waste from quarantined households	Safe disposal of waste from quarantined households Sanitary workers' attendance	English	MoHUA, Gol		
3	Liquid Waste Management	Advisory on Safe Management of Water Supply and Sanitation Services during COVID19 crisis	Persistence of the COVID-19 Virus in Drinking Water, Keeping Water Supplies Safe, Safely Managing Wastewater and Faecal Waste, Toilet and Sanitation, Safely Disposing of Greywater or Water from Washing PPE, Surfaces and Floors, and Recommendations for Indian States, UTs, ULBs and Utilities	English	CPHEEO, MoHUA, GoI		
4	Health and Safety of Sanitation workers	Ensuring Health and Safety of Sanitation Workers and Waste- pickers in the wake of spread of COVID-19	Guided the ULBs to prepare the SOP covering: - Mandatory orientation, Social Distancing norms and key precautionary measures - List of Do's and Dont's during work - Providing PPE	English	NSKFDC, MoSJE, Gol		
5		Advisory for ensuring Health and Safety of Sanitation workers during COVID19	Standard operating procedures, Specific measures to be taken by sanitation workers, and PPE/Safety gears for sanitation workers and choice of disinfectant.	English	MoSJ&E, Gol		
6		Guidelines on rational use of Personal Protective Equipment	Personal Protective Equipment required for sanitary workers Rational for use of PPE in sanitation	English	MoHFW, Gol		
7		Role of Frontline workers in prevention and management of Corona virus	Role as a Frontline Worker What is COVID-19? How does COVID-19 spread? People which are at high risk Key messages for prevention Personal hygiene and safety Myths vs. reality for COVID-19	English	MoHFW, GOI		
8		Assistance from State Disaster response Fund	For PPE for healthcare, municipal, police and fire authorities	English	PIB, GOI		
9		Regarding proposal to support govt through CSR	CSR support for soap and N-95- masks to GoUP	English	GoUP		
10		Guidelines for Hygiene and Sanitation in Densely Populated Areas, During the COVID-19 Pandemic	Preventive Measures at home and public areas Face Cover Sanitation and Hygiene: - Hand Washing - Toilet usage - sanitization	English	PIB, Gol		

11		Poster: Do's and Dont's during Covid19	Personal hygiene and safety	English	MoHFW, GOI
12		Poster: Do's and Dont's during Covid19	Personal hygiene and safety	Hindi	MoHFW, GOI
13		Poster: Social distancing	Measures to be kept in mind while observing Social Distancing	English	MoHFW, GOI
14		Poster: Social distancing	Measures to be kept in mind while observing Social Distancing	Hindi	MoHFW, GOI
15	Sanitisation of public spaces	Advisory for maintaining cleanliness during lockdown period	Special cleaning of public places Safe disposal of waste from quarantined households Safe disposal of masks and other related waste from non-quarantined households Welfare and protection of Sanitary workers Awareness and enforcement	English	MoHUA, GoI
16		Guidelines on disinfection of common public places including offices	Guidelines on disinfection of: -Indoor areas including office spaces -Outdoor areas -Public toilets Personal Protective Equipment Handwashing technique Guidelines for use of mask	English	MoHFW, Gol
Part E	3: Practitioners' R	esources			
1	Liquid waste Management	Guidelines for Desludging operators	Safety measures to be taken by Desludging operators; -Before leaving home, -At work place and -After finishing work Required PPE Hand hygiene	English	IIHS
2		Guidelines for Desludging operators	Safety measures to be taken by Desludging operators; -Before leaving home, -At work place and -After finishing work Required PPE Hand hygiene	Hindi	IIHS
3		Desludging operators' poster	Safety measures to be taken by Desludging operators; -Before leaving home, -At work place and -After finishing work	English	UMC
4		Guidelines for FSTP operators	Safety measures to be taken by FSTP operators; -Before leaving home, -At work place and -After finishing work Required PPE Hand hygiene	English	IIHS
5		Guidelines for FSTP operators	Safety measures to be taken by FSTP operators; -Before leaving home, -At work place and -After finishing work Required PPE Hand hygiene	Hindi	IIHS
6		FSTP operators' poster	Safety measures to be taken by FSTP operator; -Before leaving home, -At work place and -After finishing work	English	UMC

7	Health and Safety of Sanitation workers	PPE for sanitation workers	When to use PPE Appropriate Combination of PPE Sanitation Workers in: -Liquid Waste Management -House Keeping -Solid Waste Management	English	Saniverse
8		D2D Waste collectors' poster	Safety measures to be taken by Waste collector; -Before leaving home, -At work place and -After finishing work	English	UMC
9		Street sweepers' poster	Safety measures to be taken by Street sweeper; -Before leaving home, -At work place and -After finishing work	English	UMC
10		Drain cleaners' poster	Safety measures to be taken by Drain cleaner; -Before leaving home, -At work place and -After finishing work	English	UMC
11		CT caretakers' poster	Safety measures to be taken by CT caretaker; -Before leaving home, -At work place and -After finishing work	English	UMC
12		Handwashing steps Poster	Pictorial representation of hand- washing steps	English	WaterAid
13		Handwashing steps Poster	Pictorial representation of hand- washing steps	Hindi	WaterAid
14		When to wash hands Poster	Important activities before (and after) which hand wash required	English	WaterAid
15		When to wash hands Poster	Important activities before (and after) which hand wash required	Hindi	WaterAid
16		Guidelines for Sanitation Workers (CT/PT)	Safety measures for CT/PT Operators while cleaning, at fee collection desk, emptying waste bins. Required PPE	English	IIHS
17	Sanitisation of public spaces	Guidelines for Sanitation Workers (CT/PT)	Safety measures for CT/PT Operators while cleaning, fee collection, emptying waste bins etc. Required PPE	Hindi	IIHS
18		Social distancing at CT images	Image showing people practicing Social Distancing at Community Toilet	NA	CWAS, CEPT University





Part A:

GOVERNMENT ADVISORIES

RECOMMENDED MEASURES



1. Guidelines for Handling, Treatment and Disposal of Waste Generated during Treatment/Diagnosis/Quarantine of Covid19 Patients by CPCB on 18 April 2020

Revision 2:

Guidelines for Handling, Treatment and Disposal of Waste Generated during Treatment/Diagnosis/ Quarantine of COVID-19 Patients

18th April, 2020

[In suppression of earlier guidelines uploaded at CPCB website on 25/03/2020. Text pertaining to additional information is underlined]



Central Pollution Control Board

(Ministry of Environment, Forest & Climate Change)

Parivesh Bhawan, East Arjun Nagar

Delhi – 110032

In order to deal with COVID-19 pandemic, State and Central Governments have initiated various steps, which include setting up of quarantine centers/camps, Isolation wards, sample collection centers and laboratories.

Following specific guidelines for management of waste generated during diagnostics and treatment of COVID-19 suspected / confirmed patients, are required to be followed by all the stakeholders including isolation wards, quarantine centers, sample collection centers, laboratories, ULBs and common biomedical waste treatment and disposal facilities, in addition to existing practices under BMW Management Rules, 2016.

These guidelines are based on current knowledge on COVID-19 and existing practices in management of infectious waste generated in hospitals while treating viral and other contagious diseases like HIV, H1N1, etc. These guidelines will be updated if need arises. This Revision-2 of guidelines is mainly to incorporate specific requirements and responsibilities of persons operating sewage treatment plants at Healthcare Facilities and to clarify on management of general waste from quarantine homes and masks/gloves from other households.

Guidelines brought out by WHO, MoH&FW, ICMR, CDC and other concerned agencies from time to time may also be referred.

Guidelines for handling, treatment and disposal of COVID-19 waste at Healthcare Facilities, Quarantine Camps/ Quarantine-homes/ Home-care, Sample Collection Centers, Laboratories, SPCBs/PCCs, ULBs and CBWTFs is give below;

(a) COVID-19 Isolation wards: (isolation wards are those where COVID-19 positive patients are being kept for treatment / diagnosis)

Healthcare Facilities having isolation wards for COVID-19 patients need to follow these steps to ensure safe handling and disposal of biomedical waste generated during treatment;

- Keep separate color coded bins/bags/containers in wards and maintain proper segregation of waste as per BMWM Rules, 2016 as amended and CPCB guidelines for implementation of BMW Management Rules.
- As precaution double layered bags (using 2 bags) should be used for collection of waste from COVID-19 isolation wards so as to ensure adequate strength and no-leaks;
- Collect and store biomedical waste separately prior to handing over the same CBWTF. Use a
 dedicated collection bin labelled as "COVID-19" to store COVID-19 waste and keep separately
 in temporary storage room prior to handing over to authorized staff of CBWTF. Biomedical
 waste collected in such isolation wards can also be lifted directly from ward into CBWTF
 collection van.
- In addition to mandatory labelling, bags/containers used for collecting biomedical waste from COVID-19 wards, should be labelled as "COVID-19 Waste". This marking would enable CBWTFs to identify the waste easily for priority treatment and disposal immediately upon the receipt.
- General waste not having contamination should be disposed as solid waste as per SWM Rules,
 2016.

- Maintain separate record of waste generated from COVID-19 isolation wards
- Use dedicated trolleys and collection bins in COVID-19 isolation wards. A label "COVID-19 Waste" to be pasted on these items also.
- The (inner and outer) surface of containers/bins/trolleys used for storage of COVID-19 waste should be disinfected with 1% sodium hypochlorite solution daily.
- Report opening or operation of COVID-19 ward and COVID ICU ward to SPCBs and respective CBWTF located in the area.
- Depute dedicated sanitation workers separately for biomedical waste and general solid waste so that waste can be collected and transferred timely to temporary waste storage area.
- Feces from COVID-19 confirmed patient, who is unable to use toilets and excreta is collected in diaper, must be treated as biomedical waste and should be placed in yellow bag/container. However, if a bedpan is used, then faeces to be washed into toilet and cleaned with a neutral detergent and water, disinfected with a 0.5% chlorine solution, then rinsed with clean water.^{a1}
- Collect used PPEs such as goggles, face-shield, splash proof apron, Plastic Coverall, Hazmet suit, nitrile gloves into Red bag; a²
- Collect used masks (including triple layer mask, N95 mask, etc.), head cover/cap, shoe-cover, disposable linen Gown, non-plastic or semi-plastic coverall in Yellow bags. a³

[a1 to a3 Inserted in Rev. 2 of guidelines dated 18/04/2020]

(b) Sample Collection Centers and Laboratories for COVID-19 suspected patients

Report opening or operation of COVID-19 sample collection centers and laboratories to concerned SPCB. Guidelines given at section (a) for isolation wards should be applied suitably in in case of test centers and laboratories. Pre-treat viral transport media, plastic vials, vacutainers, eppendorf tubes, plastic cryovials, pipette tips as per BMWM Rules, 2016 and collect in Red bags.^{b1}

[b1 Inserted in Rev. 2 of guidelines dated 18/04/2020]

(c) Responsibilities of persons operating Quarantine Camps/Homes or Home-Care facilities*

Less quantity of biomedical waste is expected from quarantine Camps / Quarantine Home/ Homecare facilities. However, the persons responsible for operating quarantine camps/centers/home-care for suspected COVID-19 persons need to follow the below mentioned steps to ensure safe handling and disposal of waste;

- General solid waste (household waste) generated from quarantine centers or camps should be handed over to waste collector identified by Urban Local Bodies or as per the prevailing local method of disposing general solid waste.

- Biomedical waste if any generated from quarantine centers/camps should be collected separately in yellow colored bags (suitable for biomedical waste collection) provided by ULBs. These bags can be placed in separate and dedicated dust-bins of appropriate size.
- Persons operating Quarantine camps/centers should call the CBWTF operator to collect biomedical waste as and when it gets generated. Contact details of CBWTFs would be available with Local Authorities.
- Persons taking care of quarantine home / Home-care should deposit biomedical waste if any generated from suspected or recovered COVID-19 patients, by following any of the following methods as may be arranged by ULBs;
 - Hand over the yellow bags containing biomedical waste to authorized waste collectors at door steps engaged by local bodies; or
 - Deposit biomedical waste in yellow bags at designated deposition Centers established by ULBs. The bag again be stored in yellow bag or container; or
 - Handover the biomedical waste to waste collector engaged by CBWTF operator at the doorstep.
- Persons operating Quarantine camps/centers or Quarantine-homes/Home-care should report to ULBs in case of any difficulty in getting the services for disposal of solid waste or biomedical waste.

Clarifications:

- Quarantine Camps / Quarantine-Home are the places where suspected people or the contacts
 of suspected / confirmed cases who have been directed by authorized hospitals or local
 authorities to stay at home for at least 14 days or more for observation for any symptom of
 COVID-19, if any.
- Homecare Home care facility is a home where care is to be provided to a COVID-19 positive patient at home. C1
- Biomedical waste at Quarantine Camps / Home-care may also comprise of used syringes, date expired or discarded medicines, used masks/gloves and in case of patients with other chronic diseases may also include drain bags, urine bags, body fluid or blood soaked tissues/cotton, empty ampules etc.
- Biomedical waste generated from Quarantine Camps / Quarantine-Home / Home-care would be treated as 'domestic hazardous waste' as defined under Solid Waste Management Rules, 2016, and shall be disposed as per provisions under Biomedical Waste Management Rules, 2016 and these guidelines.
- General waste from Quarantine Camps / Quarantine-Home / Home-care shall be disposed as solid waste as per provisions under SWM Rules, 2016
- Used masks and gloves generated form home quarantine or other households should be kept in paper bag for a minimum of 72 hours prior to disposal of the same as general waste. It is advisable to cut the masks prior to disposal to prevent reuse.^{c2}

[*Amended in Rev. 1 of guidelines dated 25/03/2020]

[c1 and c2 Amended in Rev. 2 of guidelines dated 18/04/2020]

[c2: Criteria for 72 hours is as per CDC guidelines for Decontamination and Reuse of Filtering Facepiece Respirators]

(d) Duties of Common Biomedical Waste Treatment Facility (CBWTF):

- Report to SPCBs/PCCs about receiving of waste from COVID-19 isolation wards / Quarantine Camps / Quarantined homes / COVID-19 Testing Centers;
- Operator of CBWTF shall ensure regular sanitization of workers involved in handling and collection of biomedical waste;
- Workers shall be provided with adequate PPEs including three layer masks, splash proof aprons/gowns, nitrile gloves, gum boots and safety goggles;
- Use dedicated vehicle to collect COVID-19 ward waste. It is not necessary to place separate label on such vehicles;
- Vehicle should be sanitized with sodium hypochlorite or any appropriate chemical disinfectant after every trip.
- COVID-19 waste should be disposed-off immediately upon receipt at facility.
 - In case it is required to treat and dispose more quantity of biomedical waste generated from COVID-19 treatment, CBWTF may operate their facilities for extra hours, by giving information to SPCBs/PCCs.
- Operator of CBWTF shall maintain separate record for collection, treatment and disposal of COVID-19 waste.
- Do not allow any worker showing symptoms of illness to work at the facility. May provide adequate leave to such workers and by protecting their salary.

(e) Duties of SPCBs/PCCs

- Shall maintain records of COVID-19 treatment wards / quarantine centers / quarantines homes in respective States.
- Ensure proper collection and disposal of biomedical waste as per BMW Rules, 2016 and SoPS given in this guidance document;
- Allow CBWTFs to operate for extra hours as per requirement;
- May not insist on authorisation of quarantine camps as such facilities does not qualify as health facilities. However, may allow CBWTFs to collect biomedical waste as and when required;
- In case of States not having CBWTFs as well as rural or remote areas, not having access to CBWTFs, the existing captive facilities of any hospital may be identified for disposal of COVID-19 waste as per provisions under BMWM Rules, 2016 and these guidelines. This may include permitting use of deep burial pits for disposal of yellow category waste as per standards prescribed in Schedule II of Bio-medical Waste Management Rules, 2016.g1
- Coordinate with CBWTFs and ULBs in establishing adequate facilities for collection and disposal of COVID-19 waste.
- In case of generation of large volume of yellow color coded (incinerable) COVID-19 waste, permit HW incinerators at existing TSDFs to incinerate the same by ensuring separate arrangement for handling and waste feeding.

[e¹Amended in Rev. 2 of guidelines dated 18/04/2020]

(f) Duties of Urban Local Bodies +

Urban Local Bodies are responsible for ensuring safe collection and disposal of biomedical waste, if any, generated form Quarantine Camps/ Quarantine Homes/ Home Care for COVID-19 suspected persons.

- Information on each Quarantine Camps/ Quarantine Homes/ Home-Care should be available with local administration and provide updated list to SPCBs from time to time;
- In case of quarantine camps, ensure that biomedical waste is collected directly by CBWTFs identified by ULB. Waste from quarantine camps to be lifted by CBWTFs on call basis as and when the biomedical waste gets generated. Provide contact details of CBWTF operator at Quarantine Camps;
- Provide necessary support, security including authorisation to staff of CBWTFs;
- ULB shall engage CBWTF operator for ultimate disposal of biomedical waste collected from quarantine home/home care or waste deposition centers or from door steps as may be required depending on local situation; ULB shall make agreement with CBWTF in this regard.
- ULBs envisage following options to facilitate safe collection and disposal of biomedical waste from quarantined homes/Home care;
 - a) Engage authorized waste collectors for door steps collection of biomedical waste and transfer to collection points for further pick-up by CBWTF; and/or
 - b) In case number of quarantined homes/Home-care units are less, ULBs may engage services of CBWTFs to collect the waste directly from door-steps.
- Provide yellow colored bags (designated for BMW) to the persons responsible for operating Quarantine Camp or home-care. If required, such bags may be provided through CBWTF.
- ULBs shall ensure the following in engaging authorized waste collectors at door-steps or at waste deposition centers;
 - Create a separate team of workers who shall be engaged in door step waste collection at waste deposition centres or at quarantine homes or home care.
 - Ensure that only designated staff collects biomedical waste from quarantine homes or home care.
 - Training should be provided for sanitization, about collection of biomedical waste, precautionary measures to handle biomedical waste.
 - Impart training to waste collector in handling of biomedical waste including methods of sanitization. Training to waste collectors should be arranged through CBWTF operators;
 - The staff involved in handling and collection of waste from quarantine homes or home care centers shall be provided with adequate Personnel Protective Equipment such as three layer masks, splash proof aprons/gowns, heavy-duty gloves, gum boots and safety goggles. These PPEs are required to be worn all the time while collecting of waste from quarantine center/quarantine homes/home care/waste deposition centres.

- Use dedicated carts / trolleys / vehicles for transport of biomedical waste. Ensure sanitization of vehicles with 1% hypochlorite after each trip.
- Ensure that, waste collectors arriving at quarantine center or at home care shall spray the disinfectant (1% hypochlorite solution) on the bin used for yellow bag.
- Establish common waste deposition centers (as stipulated under SWM Rules, 2016) for receiving / collection of biomedical waste. For this purpose, existing Dhalaos if any may be converted suitably.
- The general solid waste collected from quarantine homes or home care shall be disposed off as per SWM Rules, 2016.
- Services of Common Biomedical Waste Treatment & Disposal Facilities (CBWTFs) and staff associated with CBWTFs for collection, transportation, treatment and disposal of biomedical waste generated from hospitals including COVID-19 isolation wards, Quarantine Camps, etc. may be considered an essential service as part of health infrastructure.
- Facilitate smooth operations of CBWTFs.
- Local agencies / ULBs may take additional measures considering prevailing ground situations and feasibility, however while implementing such measures requirements outlined in these guidelines should be complied.^{f1}

[*Inserted in Rev. 1 of guidelines dated 25/03/2020] [f1 Amended in Rev. 2 of guidelines dated 18/04/2020]

(g) Management of wastewater from HCFs / Isolation Wards **

As per the information available at CDC, the risk of transmission of virus that causes COVID-19 through sewerage systems is thought to be low. Transmission to operators may be possible during treatment of sewage treatment plants, however there is no evidence to date that this has occurred. Therefore, following guidance recommended for HCFs and the operators of STPs;

- Responsible agencies are Healthcare Facilities / Isolation Wards / operators of terminal sewage treatment plants (PHED/Jal Board/etc.).
- <u>HCFs</u> and the agencies operating Sewage Treatment Plants should continue to ensure disinfection of treated wastewater as per prevailing practices to inactivate coronaviruses.
- Operators of ETPs/STPs attached with discharge from Healthcare Facilities and isolation wards should adopt standard operational practices, practice basic hygiene precautions, and wear personal protective equipment (PPE) prescribed for operation of STPs. PPEs should include Goggles, face mask, liquid repellant coveralls, waterproof gloves and Rubber boots.
- During the period of COVID-19 pandemic, utilization of treated wastewater in utilities within HCFs may be avoided.

[++inserted in Rev. 2 of guidelines dated 18/04/2020]

2. Instructions for safe disposal of waste from quarantined households by MoHUA, GoI on 21 March 2020

COVID-19: Instructions for safe disposal of waste from quarantined households

Under Swachh Bharat Mission (Urban), we are collectively working to ensure <u>scientific</u> <u>disposal of municipal solid waste</u> in all cities and towns. Parallely, we are also committed to ensure that the <u>welfare of our sanitary workers</u> are taken care of. Accordingly, given the COVID-19 situation evolving across the country and the associated health hazards, instructions may be issued to all municipal bodies to take the following steps immediately:

1. Safe disposal of waste from quarantined households:

- For all households where residents are under quarantine, ULB may provide them with **specially marked** garbage bags for disposing of their wet and dry wastes.
- Waste from such quarantined households should be treated as **domestic** hazardous waste.
- Hence, these wastes should be collected by ULBs separately (preferably in separate collection vehicles) and transported separately, without mixing with the regular waste from other households
- Waste from quarantined households should be disposed off only through incineration.
- All sanitary workers (including contractual workers and informal sector waste pickers) involved in collection and transportation of waste from quarantined households should be trained to handle such wastes safely and should be provided with Personal Protective equipments.

2. Sanitary workers' attendance:

In case, because of lockdown or any other related situation in any city, sanitary
workers are unable to report for duty, their daily / regular wages should
continue to be paid, and care taken to ensure that their employment /
livelihoods are not affected because of their absence.

3. Advisory on Safe Management of Water Supply and Sanitation Services during COVID19 crisis by CPHEEO, MoHUA, GoI on April 2020



ADVISORY ON

SAFE MANAGEMENT OF WATER SUPPLY AND SANITATION SERVICES DURING COVID-19 CRISIS

CENTRAL PUBLIC HEALTH AND ENVIRONMENTAL ENGINEERING ORGANISATION

MINISTRY OF HOUSING AND URBAN AFFAIRS
GOVERNMENT OF INDIA

April 2020

1.0 Background

This advisory on the water supply and sanitation is relevant to virus contamination including Corona virus. It is intended for Urban Local Bodies and water supply and sewage practitioners and services providers who want to know more about the risk and practices associated with water supply and sewage in the States/UTs. It identifies sanitation workers as a vulnerable frontline category of essential services of water supply and sewage highlights the potential for services providers to step-up their performance and customer-orientation, and underlines the criticality of maintaining the supply chain of material for the sector.

The provision of safe water supply and sanitation services is essential to protect human health during all infectious disease outbreaks, including the COVID-19 outbreak. The application of good and consistently water and sewage management practices at Urban Local Body will help to prevent indirect human-to-human transmission of the COVID-19 virus.

WHO has brought out Interim guidance document on 19 March 2020 which supplements the infection prevention and control (IPC) documents by summarizing WHO guidance on water, sanitation and health care waste relevant to viruses, including corona viruses. It is intended for water and sanitation practitioners and providers and health care providers who want to know more about water, sanitation and hygiene (WASH) risks and practices.

The following recommendations have been made by WHO concerning WASH and the COVID-19 virus.

- (a) Frequent and proper hand hygiene is one of the most important measures that can be used to prevent infection with the COVID-19 virus. WASH practitioners should work to enable more frequent and regular hand hygiene by improving facilities and using proven behavior-change techniques.
- (b) Safe management of drinking-water and sanitation services is essential during COVID-19 outbreak. Extra measures are not needed. Disinfection will facilitate more rapid die-off of the COVID-19 virus.
- (c) Many co-benefits will be realized by safely managing water and sanitation services and applying good hygiene practices.

2.0 Persistence of the COVID-19 Virus in Drinking Water

There are two main known routes of transmission of the COVID-19 virus: respiratory and contact. Therefore, the immediate environment of an infected individual can serve as a source of transmission (contact transmission). Although persistence of corona virus in drinking water is possible, there is no evidence from surrogate human corona viruses that they are present in surface or groundwater sources or transmitted through contaminated drinking water. The COVID-19 virus is an enveloped virus, with a fragile

outer membrane. Generally, enveloped viruses are less stable in the environment and are more susceptible to oxidants, such as chlorine. While there is no evidence to date about survival of the COVID-19 virus in water or, the virus is likely to become inactivated significantly faster than non-enveloped human enteric viruses with known waterborne transmission.

The COVID-19 virus survival time depends on a number of factors, including the type of surface, temperature, relative humidity, and specific strain of the virus. It was reported that effective inactivation could be achieved within 1 minute using common disinfectants, such as 70% ethanol or sodium hypochlorite.

3.0 Keeping Water Supplies Safe

The COVID-19 virus has not been detected in drinking-water supplies, and based on current evidence, the risk to water supplies is low. Laboratory studies has indicated that the virus could remain infectious in water contaminated with faeces for days to weeks. Mostly in all Indian cities, due to intermittent water supply, there are high chances of the sewage influx in the water supply pipelines.

As per the WHO guidelines, a number of measures can be taken to improve water safety, starting with protecting the source water; treating water at the point of distribution, collection, or consumption; and ensuring that treated water is safely stored at home in regularly cleaned and covered containers.

Conventional, centralized water treatment methods that use filtration and disinfection (chlorine, ultraviolet (UV) light, and other oxidants) should inactivate the COVID-19 virus. In India, the acceptable limit of free residual chlorine in drinking water is 0.2 mg/l under normal conditions and when protection against viral infection, it should be minimum 0.50 mg/l as per the BIS Indian Standard for Drinking Water (IS 10500:2012). WHO guidelines recommend, a residual concentration of free chlorine of ≥0.5 mg/L after at least 30 minutes of contact time at pH<8 shall be applied for the centralized disinfection during the outbreak. This has to be taken care by all water supply utilities across India.

In places where centralized water treatment and safe piped water supplies are not available, a number of household water treatment technologies are effective in removing or destroying viruses, including boiling or using high-performing ultrafiltration or Nano membrane filters, solar irradiation and, in non-turbid waters, UV irradiation and appropriately dosed free chlorine.

4.0 Safely Managing Wastewater and Faecal Waste

There is no evidence that the COVID-19 virus has been transmitted via sewerage systems with or without wastewater treatment. However, there are evidences of

excretion of SARS-CoV-2 coronavirus in an infected person's stool. Although it's unlikely that sewage will become an important route of transmission, the pathogen's increasing circulation in communities will increase the amount of it flowing into the sewer system. The detection of the virus in sewage, even when the Covid-19 prevalence is low, indicates that sewage surveillance could be a sensitive tool to monitor the circulation of the virus in the population.

As part of an integrated public health policy, it is advised that the wastewater carried in sewerage systems should be treated in well-designed and well-managed centralized or decentralized wastewater treatment works, with a final disinfection to avoid possible virus contamination.

Moreover, sewage treatment plants in India include disinfection - this is a requirement to meet coliform discharge standards; surrogate for pathogens. Since the COVID 19 virus is an enveloped virus with a fragile outer membrane and thus, less stable in the environment and susceptible to oxidants, like chlorine, this disinfection is deemed capable of its inactivation.

There is a need to emphasize that the already-prescribed protocols are followed properly in the operations and maintenance of sewage/septage treatment plants (STPs and FSTPs) and monitoring must be strengthened at this juncture. Further, while the WHO guideline indicates that there is no evidence that sewage and wastewater treatment workers contracted Severe Acute Respiratory Syndrome, another type of Coronavirus in 2003, it is highly recommended that workers be provided with personal protective equipment (PPE; protective outer wear, gloves, boots, goggles or face shield and mask) and motivated to use these at all times, a major lapse in practice in India. In addition, workers need to be educated on frequent hand washing, and avoidance of touch - eyes, nose and mouth - with unwashed hands.

5.0 Toilet and Sanitation

Consideration should be given to safely managing human excreta throughout the entire sanitation chain, starting with ensuring access to regularly cleaned, accessible, and functioning toilets or latrines and to the safe containment, conveyance, treatment, and eventual disposal of sewage.

For majority of Indian sanitary installations both in urban and rural areas (that do not have centralized sewerage), it is recommended that households are encouraged to use their toilets and keep these clean. For users of community and public toilets, it is recommended that these facilities are properly maintained and cleaned, and all sanitary workers are protected.

The toilet should be cleaned and disinfected at least twice daily by a trained cleaner wearing PPE (gown, gloves, boots, mask, and a face shield or goggles). Sodium

hypochlorite at 0.5% (equivalent to 5000 ppm) may be used for disinfecting surfaces. Particular care should also be taken to avoid splashing and the release of droplets while cleaning or emptying tanks.

Monitoring of the full fecal sludge management chain to be strengthened at this juncture, as a measure of precaution. All de-sludging operations, if being carried out to clean on-site tanks and pits, should be done only following the safety protocols and using the occupational safety equipment. All disposal of fecal matter must be done in designated treatment facilities (STPs, FSTPs, septage receiving stations, etc.) and not let out in open areas and water bodies, irrespective of distances.

6.0 Safe Management of Domestic Health Care Waste

The health care waste must not be mixed with the municipal solid waste. It should be collected and handed over separately. Best practices for safely managing health care waste should be followed. There is no evidence that direct, unprotected human contact during the handling of health care waste has resulted in the transmission of the COVID-19 virus. All health care waste produced during the care of COVID 19 patients should be collected safely in designated containers and bags, treated, and then safely disposed of.

7.0 Personal Protective Equipment

Best practices for protecting the health of workers should be followed. Workers should wear appropriate personal protective equipment (PPE), which includes protective outerwear, gloves, boots, long-sleeved gown, goggles or a face shield, and a mask; after which the individuals should safely remove their PPE and soiled PPE should be put in a sealed bag for later safe laundering. They should perform hand hygiene with an alcohol-based hand rub or soap and water after removing PPE. They should avoid touching eyes, nose, and mouth with unwashed hands.

8.0 Safely Disposing of Greywater or Water from Washing PPE, Surfaces and Floors

It is utmost important to dispose of the greywater or water from washing PPE, surfaces and floors. Currently, WHO recommends to clean utility gloves or heavy duty, reusable plastic aprons with soap and water and then decontaminate them with 0.5% sodium hypochlorite solution after each use. Single-use gloves (nitrile or latex) and gowns should be discarded after each use and not reused; hand hygiene should be performed after PPE is removed.

If greywater includes disinfectant used in prior cleaning, it does not need to be chlorinated or treated again. However, it is important that such water is disposed of in drains connected to a septic system or sewer or in a soak away pit. If greywater is disposed of in a soak away pit, the pit should be fenced off within the health facility grounds to prevent tampering and to avoid possible exposure in the case of overflow.

9.0 Recommendations for Indian States, UTs, ULBs and Utilities

Along with the above global recommendations, there is a need for prioritizing the following actions:

- (i) Water Supply: The WHO Guidelines indicates low-risk to drinking water supplies if treated, however, laboratory studies show risks of virulence in fecal-contaminated water and therefore, chlorination and maintenance of residual chlorine is very important throughout of the distribution system. It is therefore recommended to increase a residual chlorine to ≥0.5 mg/l from the present residual chlorine level of 0.2 mg/l, as per BIS 10500 for protection against viral infection during the COVID-19 Crisis.
- (ii) Sewage: While there is no evidence of transmission of the COVID-19 virus transmission via sewerage systems with or without sewage treatment, O&M protocols must be followed properly in all STPs, and their performance may be monitoring closely at this juncture. A final disinfection step may be considered if existing wastewater treatment plants are not optimized to remove viruses. Appropriate dosage of chlorination may be decided, depending upon the quality of the effluent, as per the Manual of Sewerage and Sewage Treatment Systems, 2013, published by the Ministry of Housing and Urban Affairs, Govt. of India.
- (iii) **Toilet:** It is recommended that households are encouraged to use their individual household toilets and keep these clean. A person who has been suspected or confirmed COVID-19 disease and quarantined should be provided with their own flush toilet or latrine. The toilet should be cleaned and disinfected at least twice daily by a trained cleaner wearing PPE. For users of community and public toilets, it is recommended that these facilities are properly maintained and cleaned by using disinfectants and all sanitary workers are protected with PPE.
- (iv) Fecal Sludge: Monitoring of the full fecal sludge management chain needs to be strengthened at this juncture, as a measure of precaution. Use of individual and community/public toilets must be ensured, and safety and safe-disposal of fecal wastes from on-site structures must be enforced and monitored. disinfectants, and all sanitary workers are protected with PPE.
- (v) **Sanitation Workers' Health and Safety:** Sanitation workers in India are particularly vulnerable to water and sanitation related risks and will be at the frontline of the essential services including sanitation, solid waste management,

etc. Therefore, their safety and welfare must be accorded highest priority by Urban Utilities and ULBs. Proper PPE gear to be provided and their use should be encouraged. Chennai Metro Water Supply and Sewerage Board (CMWSSB) has provided safety suits, N95 masks and gloves to their engineers, workers, tanker drivers and cleaners and the cost of the safety suits sourced from the State Rs. 800 (US\$11.50) (This may be accessed https://www.thehindu.com/news/cities/chennai/metrowater-procures-protective -gear-for-field-workers-steps-up-checks-at facilities/article 31241675.ece and Times of India, April 5, 2020). All sanitary workers need to be educated on frequent hand washing, and avoid touching eyes, nose and mouth with unwashed hands.

- (vi) **Income and Wages to be Protected:** Especially since the majority are employed in the informal sector, as personnel of contractors, and not directly employed by public agencies food and essential supplies to be guaranteed if need be, with supplementary public provision.
- (vii) **Provisions in Sanitation Management Facilities:** These facilities treatment sites or waste management sites (segregation, processing of solid waste, pumping stations, decanting stations, transfer stations for liquid waste, etc.) should have:
 - (a) facilities for regular hand hygiene using appropriate technique;
 - (b) provision for regular cleaning and disinfection of facilities, equipment and PPE;
 - (c) protocols and facilities for safe management of PPE and waste including any domestic hazardous waste and greywater arising from washing of facilities, PPE and equipment;
 - (d) adequate and accessible toilets facilities for staff, safe excreta management including keeping excreta (faeces and urine) separated from human contact and safe treatment and disposal in the environment;
 - (e) provision of safe drinking-water to staff; water supply for personal hygiene, laundry and cleaning.
- (viii) Utilities Strengthening Customer Services and Relaxing Revenue Collection for say, a three-month Period: As shortages of drinking water supplies could affect all protective individual actions and cleaning operations in health-care settings to prevent outbreak, imperative to ensure adequate water supply. Now more than ever with the onset of summer and dwindling water availability. Therefore, utilities must be encouraged to not only use ICT-based solutions for the management of operations, but also use these aggressively for keeping customers informed of water supply timings, minimize waste, quality issues, and so on. Further, like the RBI has recommended to banks, utilities may be provided budgetary subvention by the State Governments so that they are able to relax revenue collection and stop any disconnection or service-

outage that may inconvenience any customer, or public users of WASH facilities.

- (ix) Supply Chain not to be Disrupted for Chemicals and Material Needed for WASH Installations: Discuss with vendors and contractors to ensure supply of material and labour at WASH facilities. Diagnose supply chain linkages for materials ascertain challenges production and distribution of chemicals needed for WATSAN services and hygiene in household / community, health care and waste treatment facilities. While production and transportation of such chemicals should be considered as an essential commodity there is also the need to identify and suggest alternates to commonly used chemicals.
- (x) Recycle and Reuse of Sewage: Study and develop options for reuse of treated sewage for industries and agriculture to improve water availability and financial sustainability. Considering the hygiene requirements to battle COVID-19, water security across population groups is a necessity and sectoral swaps that ensure clean water availability for residents need to be analyzed and worked out in a phased manner.

4. Ensuring Health and Safety of Sanitation Workers and Waste-pickers in the wake of spread of COVID-19 by NSKFDC, MoSJE, GoI on 7 April 2020

Ensuring Health and Safety of Sanitation Workers and Wastepickers in the wake of spread of COVID-19

As you may be aware, National Safai Karamcharis Finance and Development Corporation (NSKFDC) is an apex corporation under the Ministry of Social Justice and Empowerment, Govt. of India working for the all round socio economic upliftment of its target group which includes Safai Karamcharis including Wastepickers, Manual Scavengers and their Dependents through various loan and non loan based programmes.

Considering the countrywide health crisis due to Coronavirus disease (COVID-19), which has also been declared a pandemic by World Health Organisation (WHO), it is necessary to take effective measures to prevent its spread across the country and also protect our frontline workers who are our best defence to contain and mitigate this pandemic.

You would appreciate that Sanitation workers, Wastepickers and other informal waste collectors are among these silent groups of people who are working tirelessly to prevent the spread of Coronavirus. When it comes to risking their lives for the protection of others, in the present times, they are at par with doctors, healthcare workers and policemen. Therefore, it is imperative for us to understand and provide best support, manage, and protect these individuals as they also face highest risk of becoming infected themselves given their nature of work and exposure.

In view of the above, it is requested to kindly arrange to put in place a Standard Operating Procedure (SoP) for each ULB to ensure health and safety of Sanitation workers and Wastepickers. The SoP may also include following to prevent the spread of COVID-19:

- 1. Mandatory orientation of Sanitation Workers and Wastepickers on COVID-19, Social Distancing norms and key precautionary measures to be taken including frequent hand-washing, avoid touching their face and wearing Personal Protective Equipments (PPE).
- 2. List of Do's and Dont's to be practiced while performing their duties and extending necessary support to them.
- 3. Providing appropriate Personal Protective Equipments, which may include masks, gloves, gumboots, jackets etc. and hand sanitizers, soaps for their safety.

It is requested to take immediate action on above to ensure health and safety of our Sanitation workers and Wastepickers so that we are able to collectively fight and overcome the unprecedented health crisis posed by COVID 19.

5. Advisory for ensuring Health and Safety of Sanitation Workers during COVID19 by MoSJ&E, GoI on 20 April 2020

Advisory for ensuring Health and Safety of Sanitation Workers during COVID-19

In the war against COVID-19 the role of the sanitation workers working in municipalities and other local bodies is of crucial importance.

Considering that sanitation workers are in the frontline in the fight against COVID-19, it is imperative to ensure their health and safety. Keeping this in view, the Ministry of Social Justice has prepared an advisory to be conveyed to all Municipalities and local bodies for strict implementation. Further, these bodies may be asked to orient all the sanitation workers on ways to protect themselves from infection.

I would request for immediate attention to the above.

GUIDELINES FOR SANITATION WORKERS IN VIEW OF COVID -19

Following is expected from departments engaging Sanitation Workers such as Urban Local Bodies/Gram Panchayats/Railways etc to ensure the health and safety of Sanitation Workers/ while performing their sanitation related duties during COVID 19.

- **A.** Putting in Place a Standard Operating Procedure (SoP): A Standard Operating Procedure (SoP) for Sanitation Workers and may be prepared and practiced in view of COVID-19 to ensure their health and safety. The SoP may inter alia include following to prevent the infection of COVID-19 to them:
 - 1. Mandatory orientation of Sanitation Workers on COVID-19, Social Distancing norms and key precautionary measures to be taken including frequent hand-washing, avoid touching their face and wearing Personal Protective Equipments/Safety Gears.
 - 2. List of Do's and Dont's to be practiced while performing their duties and extending necessary support to them in following the same.
 - 3. Providing appropriate Personal Protective Equipments/Safety Gears, which may include masks, gloves, gum boots, jackets etc. along with hand sanitizers, soaps for their safety.
 - 4. Designate a Nodal Officer to lead and monitor the implementation of SoP at the department/ULB level.
- **B.** Specific Measures to be taken by Sanitation Workers: Following good practices are recommended for Sanitation Workers as precautionary measures to prevent the spread of COVID-19:
 - 1. Obtain ID card or permission letter from the ULB and always carry them for movement during the lockdown period.
 - 2. Work clothes must be worn at designated changing areas before starting the day's work. Always use mask, gloves, footwear and appropriate clothing (like long sleeved shirt, long trousers and apron) while at work.
 - 3. Ensure that soaps or hand sanitizers are available while at work place.

- 4. Avoid putting your gloves in your pocket (better to store them in a designated plastic bag). Never touch your face with gloves.
- 5. Wash hands with soap and water before and after performing sanitation activities and any time you remove your gloves.
- 6. Never touch waste/garbage with bare hands. Wash hands and any body-surface accidentally coming in contact with waste material.
- 7. Workers should maintain at least 1 meter of distance from each other and general public. If workers are in groups, maintain smaller groups and be in the same groups day after day so that if someone falls ill with COVID-19 it will be easier to identify and quarantine others who were exposed.
- 8. Clean frequently touched surfaces in the work place (door handles, water taps etc.) frequently (once every 2- 4 hours) with disinfectant.
- 9. After work, wash and clean the work tools and PPE with water and disinfecting cleaner. Keep them for drying under the sun.
- 10. Remove your work cloth, take a bath using soap and put on your personal clothes at the changing area, before you exit the workplace. Wash the work cloth using disinfectant and get it dried under the sun before next use.
- 11. In case where there is no bathing facility available at the work place, ensure that you take a bath using soap before entering home.
- 12. Use speaker phones when using mobile phone to avoid touching face.
- 13. Encourage co-workers to take leave if they are found to be ill.
- C. Personal Protective Equipments (PPE)/Safety Gears for Sanitation Workers and Choice of Disinfectant: Sanitation Workers may be provided appropriate Personal Protective Equipments/Safety Gears to safeguard the health of workers by minimizing the exposure to a biological agent. Following minimum set of safety Gears/PPE to be used by them while carrying out their sanitation related activities.
 - 1. Mask.
 - 2. Gloves.
 - 3. Head band and wrist band.
 - 4. Footwear covering whole foot/ gum boots.
 - Apron/Jacket

Choice of disinfectant

- 1. Hand wash- preferred option:
 - a. Soap and water
 - b. Alcohol-based hand rub with minimum 60% alcohol (if hands are not visibly dirty)
- 2. Sodium hypochlorite at 1% (equivalent 10000ppm) for disinfection of surfaces and reusable gloves.
- 3. Mildly alkaline all-purpose detergent for cleaning surfaces.



6. Guidelines on rational use of PPE in sanitation (abstracts from the guidelines) by MoHFW, GoI on March 2020

Ministry of Health and Family Welfare Directorate General of Health Services

Novel Coronavirus Disease 2019 (COVID-19): Guidelines on rational use of Personal Protective Equipment

1. About this guideline

This guideline is for sanitation workers in points of entries (POEs), quarantine centers, hospital, laboratory and primary health care / community settings. The guideline uses setting approach to guide on the type of personal protective equipment to be used in different settings.

2. Introduction

Coronaviruses are a large family of viruses, some causing illness in people and others that circulate among animals, including camels, cats and bats. Rarely, animal coronaviruses can evolve and infect people and then spread between people such as has been seen with MERS and SARS.

The outbreak of Novel coronavirus disease (now named COVID-19) was initially noticed from a seafood market in Wuhan city in Hubei Province of China in mid-December, 2019, has spread to more than 185 countries/territories worldwide including India.

The causative agent for COVID-19, earlier termed provisionally as novel Coronavirus has been officially named as SARS-CoV-2.

3. Mode of transmission

There is clear evidence of human-to-human transmission of SARS-CoV-2. It is thought to be transmitted mainly through respiratory droplets that get generated when people cough, sneeze, or exhale. SARS-CoV-2 also gets transmitted by touching, by direct touch and through contaminated surfaces or objects and then touching their own mouth, nose, or possibly their eyes. Healthcare associated infection by SARS-CoV-2 virus has been documented among healthcare workers in many countries.

The people most at risk of COVID-19 infection are those who are in close contact with a suspect/confirmed COVID-19 patient or who care for such patients.

4. Personal Protective Equipment (PPE)

Personal Protective Equipments (PPEs) are protective gears designed to safeguard the health of workers by minimizing the exposure to a biological agent.

4.1 Components of PPE

4.1.1. Masks

Respiratory viruses that includes Coronaviruses target mainly the upper and lower respiratory tracts. Hence protecting the airway from the particulate matter generated by droplets / aerosols prevents human infection. Contamination of mucous membranes of the mouth and nose by infective droplets or through a contaminated hand also allows the virus to enter the host. Hence the droplet precautions/airborne precautions using masks are crucial while dealing with a suspect or confirmed case of COVID-19/performing aerosol generating procedures.

Masks are of different types. The type of mask to be used is related to particular risk profile of the category of personnel and his/her work. There are two types of masks which are recommended for various categories of personnel working in hospital or community settings, depending upon the work environment:

- 1. Triple layer medical mask
- 2. N-95 Respirator mask

4.1.1.1 Triple layer medical mask

A triple layer medical mask is a disposable mask, fluid-resistant, provide protection to the wearer from droplets of infectious material emitted during coughing/sneezing/talking.

4.1.1.2. N-95 Respirator mask

An N-95 respirator mask is a respiratory protective device with high filtration efficiency to airborne particles. To provide the requisite air seal to the wearer, such masks are designed to achieve a very close facial fit.

Such mask should have high fluid resistance, good breathability (preferably with an expiratory valve), clearly identifiable internal and external faces, duckbill/cup-shaped structured design that does not collapse against the mouth.

If correctly worn, the filtration capacity of these masks exceeds those of triple layer medical masks. Since these provide a much tighter air seal than triple layer medical masks, they are designed to protect the wearer from inhaling airborne particles.

4.1.2 Gloves

When a person touches an object/surface contaminated by COVID-19 infected person, and then touches his own eyes, nose, or mouth, he may get exposed to the virus. Although this is not thought to be a predominant mode of transmission, care should be exercised while handling objects/surface potentially contaminated by suspect/confirmed cases of COVID-19.

Nitrile gloves are preferred over latex gloves because they resist chemicals, including certain disinfectants such as chlorine. There is a high rate of allergies to latex and contact allergic dermatitis among health workers. However, if nitrile gloves are not available, latex gloves can be used. Non-powdered gloves are preferred to powdered gloves.

5. Rational use of PPE for sanitation

The PPEs are to be used based on the risk profile of the health care and sanitary worker. The document describes the PPEs to be used in different settings.

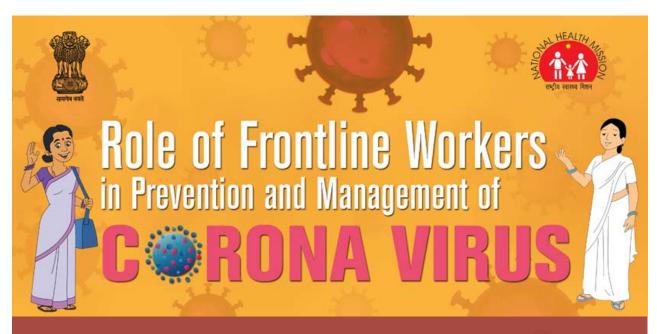
S.no.	Setting		Activity	Risk	Recommended PPE
1	Point of		Cleaning frequently touched	Moderate risk	N-95 mask
	Sanitary Staff		surfaces/ Floor/ cleaning		Gloves
			linen		
2	Hospital	setting-	Cleaning frequently touched	Moderate risk	N-95 mask
	Sanitary Staff at		surfaces/ Floor/ cleaning		Gloves
	Out	Patient	linen		
	Department		in COVID treatment areas		

3	Hospital setting-	Cleaning frequently touched	Moderate risk	N-95 mask
	Sanitation at In	surfaces/ Floor/ cleaning		Gloves
	Patient Department	linen		
4	Hospital setting-	Cleaning frequently touched	Moderate risk	N-95 mask
	Sanitation at Other	surfaces/ Floor/ cleaning line		Gloves
	Supportive/Ancillary	in COVID treatment areas		
	Services			

Points to remember while using PPE:

- 1. PPEs are not alternative to basic preventive public health measures such as hand hygiene, respiratory etiquettes which must be followed at all times.
- 2. Always (if possible) maintain a distance of at least 1 meter from contacts/suspect/confirmed COVID-19 cases
- 3. Always follow the laid down protocol for disposing off PPEs as detailed in infection prevention and control guideline available on website of MoHFW.

7. Role of Frontline Workers in Prevention and Management of Corona virus by MoHFW, GOI



As you know a new respiratory disease called COVID-19 is spreading across the world. India has also reported cases from states and the government is trying to contain the spread of the disease. As an important frontline worker, you play a major role in preventing its spread.

Your Role as a Frontline Worker is two-fold:

- 1. Spread key messages in the community about measures to prevent the infection.
- 2. Take actions for early detection and referral of suspected COVID-19 cases.

As a key member of the primary health care team, we want you and your family to be safe. Following the advice in this document will help you in staying safe.



What is COVID-19?

COVID-19 is a disease caused by the "novel corona virus". **Common symptoms** are:

- Fever
- Dry cough
- Breathing difficulty
- Some patients also have aches and pains, nasal congestion, runny nose, sore throat or diarrhoea

About 80% of confirmed cases recover from the disease without any serious complications. However, one out of every six people who gets COVID-19 can become seriously ill* and develop difficulty in breathing. In more severe cases, infection can cause severe pneumonia and other complications which can be treated only at higher level facilities (District Hospitals and above). In a few cases it may even cause death.

* Source: WHO

How does COVID-19 spread?

- COVID-19 spreads mainly by droplets produced as a result of coughing or sneezing of a COVID-19 infected person. This can happen in two ways:
 - Direct close contact: one can get the infection by being in close contact with COVID-19 patients (within one Metre of the infected person), especially if they do not cover their face when coughing or sneezing.
 - Indirect contact: the droplets survive on surfaces and clothes for many days. Therefore, touching any such infected surface or cloth and then touching one's mouth, nose or eyes can transmit the disease.
- The incubation period of COVID 19 (time between getting the infection and showing symptoms) is 1 to 14 days
- Some people with the infection, but without any serious symptoms can also spread the disease.

Which group of people are at higher risk of getting infected?



- ▶ People who have travelled to other countries in last 14 days and their family members.
- People coming from other states if they have been working with people who travelled to other countries in last 14 days.
- Family members and contacts of patients confirmed to have COVID-19.
- People older than 60 years of age and people with medical problems like high blood pressure, heart problems, respiratory disease/asthma, cancer or diabetes are at higher risk for developing serious complications..

Key messages to spread for prevention of COVID-19



1. How to avoid getting COVID-19 or spreading it?

a) Practice Social Distancing:

- Avoid gatherings such as melas, haats, gatherings in religious places, social functions etc.
- Maintain a safe distance of at least one Metre between you and other people when in public places, especially if they are having symptoms such as cough, fever etc. to avoid direct droplet contact.
- **Stay at home** as much as possible.
- Avoid physical contact like handshakes, hand holding or hugs.
- Avoid touching surfaces such as table tops, chairs, door handles etc.

b) Practice good hygiene

- Wash your hands frequently using soap and water:
 - After coming home from outside or meeting other people especially if they are ill.
 - After having touched your face, coughing or sneezing.
 - Before preparing food, eating or feeding children.
 - Before and after using toilet, cleaning etc.











Steps of hand washing









Duration 20 seconds



- While coughing or sneezing cover your nose and mouth with handkerchief.
 Wash the handkerchief at least daily
- It is preferable to cough/sneeze into your bent elbow rather than your palms.



- **Do not Spit or shout** in public places to avoid the spread of droplets.
- **Do not touch your eyes**, **nose** and **mouth** with unclean hands.
- Ensure that the surfaces and objects are regularly cleaned.

2. What to do if you are having symptoms or have travelled to other countries or states in past two weeks?

- Symptoms of COVID 19 and seasonal respiratory illness (common cold/flu) are similar. All people with these symptoms may not have COVID 19.
- Following persons should be quarantined for 14 days at home as a precaution:
 - People who have travelled to COVID 19 affected countries/areas in past 14 days
 - Those who have come in close contact with a suspected/confirmed COVID 19 patient
 - Those who develop symptoms
- These persons should inform you. If symptoms become severe then the person should visit a health facility after speaking with you.



For any COVID 19 related queries, call your State Helpline/Ministry of Health & Family Welfare's 24X7 helpline at 1075 or 011-23978046.

Your role in early detection and referral



- As a community worker you may be asked to prepare a line list of all people who have travelled to other countries or other states inside India in last 14 days:
 - Share their names with your Medical Officer at PHC but not with others
 - Teach them Home Quarantine for next 14 days
 - Tell them to monitor themselves for symptoms of COVID-19
 - Tell them to inform you if symptoms develop and call the COVID 19 Helpline

Instructions for the person being Home Quarantined



- Stay in a separate room at home, if possible with an attached/separate toilet. Try
 to maintain a distance of at least 1 meter from others
- Wear a mask at all times. If masks are not available, take a clean cotton cloth, fold it into a double layer and tie it on your face to cover your nose and mouth
- Use separate dishes, towels, bedding etc. which should be cleaned separately
- The surfaces such as floor, table tops, chairs, door handles etc. should be cleaned at least once a day
- Make sure that only one assigned family member is the caretaker

Instructions for the caretaker of the Home Quarantined person:

- Keep a distance of one metre when entering the room
- Wear a mask or cover your face with double layered cotton cloth
- Wash your hands after coming out of the room

▶ How to use masks (or cloth covering the nose and mouth)

- Wash your hands before putting on the mask
- Make sure that it covers both mouth and nose and is not loose.
- Do not touch the mask from the front, touch only from the sides.
- Make sure to wash your hands after changing the mask
- Change the mask every 6-8 hours or when it becomes moist
- If using disposable masks, have a dustbin with cover and a plastic bag lining to throw the masks in.
- If using cloth masks, wash them at least daily

How to take care of yourself and carry on with your duties as a frontline worker?

- Take all preventive measures that you are talking about in the community such as keeping safe distance, washing hands frequently including before and after home visits. Carry your own soap if necessary
- If you are visiting or **accompanying a suspected case** to any health facility, make sure to cover both your mouth and nose with folded cloth or mask.
- If you are conducting community meetings or supporting outreach sessions the **groups should not be larger than 10-12 people**.
- Maintaining safe distances for those living in crowded areas or the homeless is going to be difficult. Even then you should inform them about preventive measures and support them as required.
- **Self-monitor** for signs of illness and report to the Medical Officer, immediately if any symptoms develop.
- **Ensure that you continue to undertake tasks** related to care of pregnant women, newborns and sick children, Post Natal Care, Breastfeeding and Nutritional Counselling, TB and NCD patient follow up while taking preventive measures.
- Remember older people are at higher risk, so take special care to visit homes of elderly people.
- Continue to pay special attention to the marginalized, as is your routine practice.
- Also as the people's trusted health worker, try to **reassure them** that while those with symptoms and high risk need close attention, for others, prevention measures will decrease the risk of getting the disease.

Myths vs. reality for COVID-19

As COVID-19 is a new condition, there are many common myths.

Myths	Facts		
The corona virus can be transmitted through mosquitoes.	The corona virus CANNOT be transmitted through mosquito bites.		
2. Everyone should wear a mask.	People who should wear a mask are: Those having symptom of fever, cough etc. Healthcare workers in facilities caring for ill people The assigned care taker of a home quarantined person Even those wearing masks should wash their hands frequently		
3. Only people with symptoms of COVID-19 can spread the disease.	Even people with the COVID-19 infection but no symptoms can spread the disease.		
Eating garlic and drinking alcohol can prevent COVID 19	Eating garlic and drinking alcohol DOES NOT prevent COVID 19		



Ministry of Health & Family Welfare Government of India



8. Assistance from State Disaster Response Fund by PIB, GOI

Novel Coronavirus (COVID-19) Assistance from State Disaster Response Fund (SDRF)

ITEMS

Procurement of essential equipments/ labs for response to COVID-19:

- Cost of setting up additional testing laboratories within the Government and the cost of consumables.
- Cost of personal protection equipment for healthcare, municipal, police and fire authorities.
- Cost of Thermal Scanners, ventilators, air purifiers, and consumables for Government hospitals.

NORMS OF ASSISTANCE

Expenditure is to be incurred from SDRF only (and not from NDRF), as assessed by the State Executive Committee (SEC) to strengthen the surveillance and control measures against COVID-19 virus outbreak.

Total expenditure on equipment should not exceed 10% of the annual allocation of the SDRF.

9. Regarding proposal to support govt through CSR by GoUP on 6 April 2020

Regarding Reckitt Benckiser's proposal to support GoUP regarding COVID – 19 pandemic.

At the outset I would like to put on record my sincere appreciation for the kind offer you are giving to the State Governments to support them during the COVID-19 pandemic.

I would like to invite Reckitt Benckiser to join our efforts in the prevention of the spread of Coronavirus in Uttar Pradesh. As part of the Dettol Banega Swasth India Challenge we would invite you to donate 20 lakh soaps to facilitate the beneficiaries of the state towards exercising hand washing which is an important preventive measure and 5 lakh N-95 masks for our front-line workers in the state.

You may kindly inform the districts you would like to distribute and we would coordinate the required support.

10. Guidelines for Hygiene and Sanitation in Densely Populated Areas, During the COVID-19 Pandemic by PIB, Gol

Office of the Principal Scientific Adviser to the Government of India_ April, 2020

Guidelines for
Hygiene and
Sanitation in
Densely Populated
Areas, During the
COVID-19 Pandemic





Coronavirus disease (COVID-19) is an infectious disease caused by a newly discovered coronavirus. Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness.

The best way to prevent and slow down transmission is to be well informed of Coronavirus disease. The COVID-19 virus spreads primarily through droplets of saliva while coughing or discharge from the nose while sneezing.

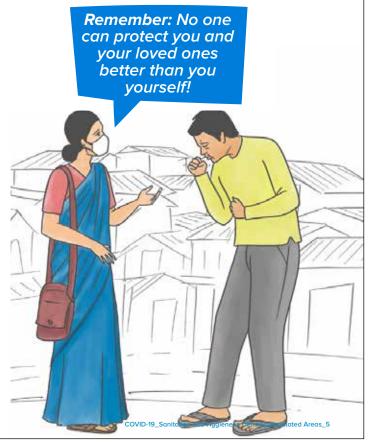
Protect yourself and others from infection by washing your hands frequently, not touching your face, coughing or sneezing into a handkerchief and wearing a mask.

1. Preventive Measures

There is currently no cure available for COVID-19. The most effective way of containing the disease in densely populated areas, where common facilities such as bathrooms and toilets are shared, is to implement measures that can catalyse behaviour change and promote strict adherence to hygiene and sanitation practices. Simple precautions and interventions implemented in a coordinated manner at the community level, by volunteers and authorities can help control spread of the disease.

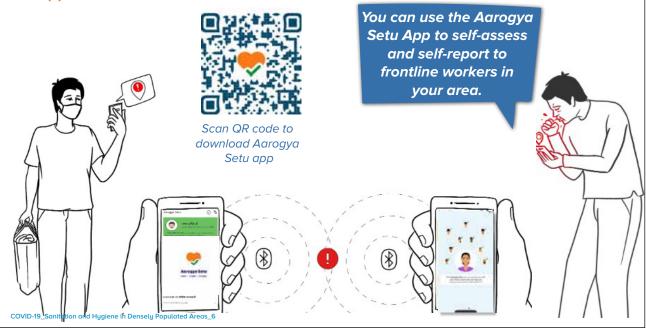


It is important that
all patients in the
community with ILI
(Influenza-like Illness)
symptoms such as fever,
chills, dry cough, running
nose etc. immediately
report to the nearest
ASHA/Anganwadi/
frontline worker.



Aarogya Setu App for COVID-19

The Aarogya Setu app (available in 11 languages) will alert you if there are COVID cases near you, help you diagnose symptoms and get you medical support.







Remember: people with no symptoms can infect others, so ensure everyone uses a face cover to protect themselves and others





Never touch the front of the face cover with your hands, only touch its sides while wearing and removing it.

Ensure everyone knows how to reuse their face covers by cleaning and sanitising







Ensure that you clean your face cover by washing it with soap in hot water and drying it in the sun (specified in manual link below)



Those living in close proximity with others should distance themselves as far as possible, ventilate the room with a fan and open window. Always use face covers when in close proximity



Scan QR Code for Manual on Face Cover available in 15 languages

Guidelines on Making, Using and Cleaning Face Covers are available here: https://www.mohfw.gov.in/pdf/Advisory&ManualonuseofHomemadeProtectiveCoverforFace&Mouth.pdf

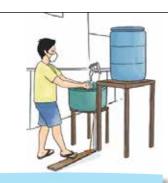
COVID-19_Sanitation and Hygiene in Densely Populated Areas_8

3. Sanitation and Hygiene: **HANDWASHING**

Common use surfaces such as handles, knobs, doors etc. are a major source of disease spread in a community. It is recommended that footoperated handwashing stations are installed at all public areas to enable residents to frequently wash their hands.

Two designs for affordable and self-assembled handwashing stations are proposed. A third design is recommended for installation in all public/community toilets permanently.

These handwashing stations will control the spread of the disease while reducing amount of water used. To eliminate use of soap, chlorine can be added to the water.



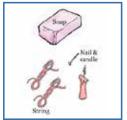
Foot operated handwashing stations are globally adopted measures during epidemics for controlling the spread of disease.





Making a Tippy-Tap Illustrations and Process from Tippytap.org

Identify a place such as stairs outside the house, poles supporting roof, etc. Ensure this is near a drain or naali so that the used water can flow into it.



Get a nail, string and a bar of soap



Make 2 holes with warm nail into plastic canister



Make 1 hole in bar of soap



Tie a long string on canister



Tie the other end of the string on foot pedal



Hand the soap and the canister on a hanging bar or available surface



You may place some stones in large flat bowl under the water so it can slowly flow into the drain



Your Tippy Tap handwashing device is ready to use. You can now clean your hands without fear of re-contamination.

Option 2: Installing Foot Operated Handwashing Stations at Community Toilets and Other Areas





Several examples of Foot Operated Handwashing Systems exist as shown. For rapid deployment, we recommend a mechanical version shown above (Courtesy Dr. Dorje Angchuk) Outside Community Toilets



Handwashing Station Components:
1) Container
2) Bip cock (Tap cock, single turn operated)
3) CP nipple (to extend the neck of tap)
4) Metallic spring (To return tap to closed position)

5) Metal strips (support for wire rope and spring) 6) Metallic wire rope (To extend the wire rope to ground level for foot lever)

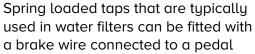
7) Nuts & Bolts.





Other Do-It-Yourself Variations on creating Portable Handwashing Stations









Foot operated Iron bars can be fitted on a tap to create a motion of pushing inside to open the valve





4. Sanitation and Hygiene:

TOILET USE

Individuals must not defecate in the open and instead must use the toilet. The toilet must be kept clean after every use. Poorly used or maintained community toilets can serve as a major source of disease. **To prevent infection caused by people who do not take proper precautions while using toilets, the following best practices must be observed.**



Always wear face cover even in the toilet



Do not touch your nose, eyes or mouth, especially inside the toilet



Wash hands with soap right after toilet use, both after defecating and urinating

COVID-19_Sanitation and Hygiene in Densely Populated Areas_18



Maintain safe distancing from each other near toilets and in other public areas. Try not touching door surfaces including handle, latch or the edge. Put soap water on them if touched.



Do not spit or sneeze in the toilet. Always use a face cover in the toilet.



Never enter a toilet with bare feet. Always wear footwear.



Avoid overcrowding at the wash area.

5. Sanitation and Hygiene:

DISINFECTANTS

*Authorities and Volunteers: Clean streets, toilets and walls with chlorine-containing disinfectant by thorough floor mopping, spraying or wiping three times a day.

Concentration of Chlorine based Disinfectant Solution to be used:

Available Hypochlorite Solution (Bleach,	Required Chlorine Concentration	To Prepare 1000ml	
Phenyl)		Chlorine Solution	Add water in ml
		in ml	
5%	1%	200	800
10%	1%	100	900

- Authorities may consider spray cleaning of specific areas as needed.
- Authorities may consider providing a **alternative to soap-based handwashing**, using a chlorine based hand rub solution, dispersed in controlled conditions in public areas. This measure will reduce the amount of water needed.

*Individuals: Mix 2-3 spoons-full of Phenyl, Chlorine bleach or Lysol available in stores in 5 litre bucket of water and wipe the floor and other surfaces (chair, table, doorknob, switches, etc.) with this water, nsuring that the disinfectant lasts at least 2 minutes at a time on a surface.

* Distribution of cleaning disinfectants can be arranged by community health workers.

COVID-19_Sanitation and Hygiene in Densely Populated Areas_`20



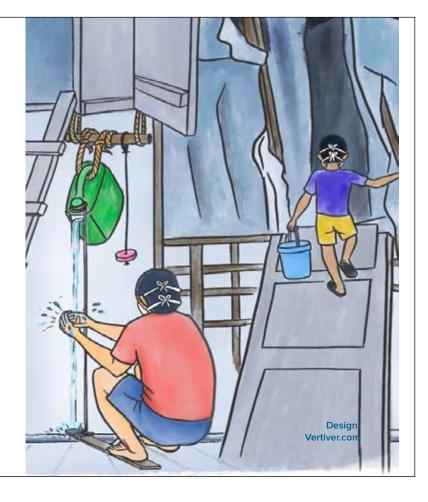
- a. Thoroughly wash fruit and vegetables before use
- b. Always clean milk bags and other packaged food items and related materials with soap water before use

To ensure the sustainability of proposed interventions, authorities and volunteers must ensure the following:

- Undertake intensive community outreach and awareness on importance of washing hands frequently and social distancing
- 2. **Co-manage and maintain** handwashing stations with communities
- 3. Ensure water availability to communities
- 4. Continually replenish soap and disinfectants
- 5. Follow all precautions strictly and rigorously
- 6. It is essential to cooperate with and respect all frontline workers and sanitation staff to control the spread of disease

Note: Wastewater surveillance (regular testing of wastewater) can be used as an early warning tool, especially when social distancing measures are lifted.

Office of the Principal Scientific Adviser to the Government of India_ April, 2020



Design and Illustrations in this guideline are available to all Government of India departments to create custom/vernacular IEC materials if necessary and can be provided separately upon request.

11. Poster: Do's and Dont's during Covid19 by MoHFW, GOI



Protect yourself and others! Follow these Do's and Don'ts

Do's **⊘**



Practice frequent hand washing. Wash hands with soap and water or use alcohol based hand rub. Wash hands even if they are visibly clean



Cover your nose and mouth with handkerchief/tissue while sneezing and coughing



Throw used tissues into closed bins immediately after use



See a doctor if you feel unwell (fever, difficult breathing and cough). While visiting doctor wear a mask/cloth to cover your mouth and nose



If you have these signs/symptoms please call State helpline number or Ministry of Health & Family Welfare's 24X7 helpline at 011-23978046



Avoid participating in large gatherings



Have a close contact with anyone, if you're experiencing cough and fever



Touch your eyes, nose and mouth



Spit in public

Together we can fight Coronavirus

For further information:

Call at Ministry of Health, Govt. of India's 24X7 control room number +91-11-2397 8046 Email at ncov2019@gmail.com

mohfw.gov.in

∮ @MoHFWIndia



mohfwindia

12. Poster: Do's and Dont's during Covid19 by MoHFW, GOI



— खुद रहें सुरक्षित, दूसरों को रखें सुरक्षित — ्र क्या करें और क्या ना करें

क्या करें 🤡



बार-बार हाथ धोएं। जब आपके हाथ स्पष्ट रूप से गंदी न हों, तब भी अपने हाथों को अल्कोहल - आधारित हैंड वॉश या साबुन और पानी से साफ करें



छींकते और खांसते समय, अपना मुंह व नाक टिशू/रूमाल से ढकें



प्रयोग के तुरंत बाद टिशू को किसी बंद डिब्बे में फेंक दें



अगर आपको बुखार, खांसी और सांस लेने में कठिनाई है तो डॉक्टर से संपर्क करें। डॉक्टर से मिलने के दौरान अपने मुंह और नाक को ढंकने के लिए मास्क/कपड़े का प्रयोग करें



अगर आप में कोरोना वायरस के लक्षण हैं,तो कृपया राज्य हेल्पलाइन नंबर या स्वास्थ्य मंत्रालय की 24X7 हेल्पलाइन नंबर 011-23978046 पर कॉल करें



भीड़-भाड़ वाली जगहों पर जाने से बचें



यदि आपको खांसी और बुखार का अनुभव हो रहा हो, तो किसी के साथ संपर्क में ना आयें



अपनी आंख, नाक या मुंह को ना छूयें



सार्वजनिक स्थानों पर ना थूकें

क्या न करें 🛇

हम सब साथ मिलकर कोरोनावायरस से लड़ सकते हैं

अधिक जानकारी के लिए

स्वास्थ्य एवं परिवार कल्याण मंत्रालय भारत सरकार के 24x7 हेल्पलाइन नं. +91-11-2397 8046 पर कॉल करें या ई-मेल करें ncov2019@gmail.com

mohfw.gov.in

f @MoHFWIndia



mohfwindia

13. Poster: Social distancing by MoHFW, GOI



14. Poster: Social distancing by MoHFW, GOI



15. Additional advisory for maintaining cleanliness during lockdown period by MoHUA, GoI on 26 March 2020

COVID-19: Additional advisory for maintaining cleanliness during lockdown period

Further to the instructions issued on 21^{st} March 2020 for safe disposal of waste from quarantined households, the following additional actions may be taken by ULBs, especially in light of the nationwide lockdown currently in force:

1. Special cleaning of public places:

- ULBs may undertake special cleaning campaign for all public places (commercial areas, places of worship, popular tourist spots, parks, gardens, and any other public place which normally sees high footfall from citizens, and hence may be difficult to clean thoroughly during normal days) through sweeping, bleaching, disinfecting and complete sanitization during this lockdown period, before they are permitted to be reopened to public.
- This would help ensure that cities are clean and sanitized when the lockdown is lifted and citizens can come out of their homes.

2. Safe disposal of waste from quarantined households:

- For all households where residents are under quarantine, ULBs may provide them with **especially marked, yellow garbage bags** for disposing of their wet and dry wastes.
- Waste from such quarantined households should be treated as bio-medical waste.
- Hence, these wastes should be collected by ULBs separately (preferably in separate collection vehicles) and transported separately, without mixing with the regular waste from other households.
- The vehicles collecting these quarantined wastes should be thoroughly disinfected and cleaned daily.
- Waste from quarantined households should be disposed off **only through incineration**.
- In case incineration facilities are not available, **as a last resort**, these waste may be buried in a deep pit in the ground, so that they cannot contaminate any other surface

3. Safe disposal of masks and other related waste from non-quarantined households

• Other wastes used for protection like mask or gloves etc. from non-quarantined households should be treated as domestic hazardous waste, wrapped in separate wrapper, collected and transported separately without mixing with normal household waste.

4. Welfare and protection of Sanitary workers engaged in collection and transportation of COVID-19 waste:

- All sanitary staff involved in collecting and transporting the above hazardous wastes should be compulsorily provided with **personal protective kits**.
- Fresh protective kits should be provided daily to staff engaged in collection of waste from quarantined households.

- Before leaving for collection duty, and after returning to their duty station, every sanitary staff shall be subjected to **thermal checking**, and **mandatory handwashing with soap**.
- In case any staff should be feeling any physical discomfort, he / she should be sent for **medical examination** and subsequent treatment as may be required.
- Each staff should deposit their used masks / gloves / protective gear in a designated, cordoned-off area, and such used protective gear is to be treated as hazardous biomedical waste, to be disposed off through incineration.
- In case, because of the ongoing lockdown, sanitary workers (including those employed on contract) are unable to report for duty, their daily / regular wages **should continue to be paid**, and care taken to ensure that their employment / livelihoods are **not affected** because of their absence.

5. Awareness and enforcement:

- All community and frontline workers may be supplied with copies of the MoHFW guidelines for Prevention and Management of COVID-19: (https://www.mohfw.gov.in/pdf/PreventionandManagementofCOVID19FLWEnglish.pdf; https://www.mohfw.gov.in/pdf/PreventionandManagementofCOVID19FLWHindi.pdf). These may be translated into local language wherever necessary.
- ULBs may widely disseminate relevant guidelines and awareness messages on COVID-19 for citizens through local print and electronic media
- **Strict penalty and enforcement** may be ensured for any unregulated disposal of COVID-19 waste by any person (s), including waste collectors.
- ULBs may work closely with District health authorities to ensure all of the above.

16. Guidelines on disinfection of common public places including offices on 29th March 2020

COVID-19: Guidelines on disinfection of common public places including offices

Scope: This document aims to provide interim guidance about the environmental cleaning /decontamination of common public places including offices in areas reporting COVID-19.

Coronavirus Disease 2019 (COVID -19) is an acute respiratory disease caused by a novel Coronavirus (SARS-CoV-2), transmitted in most instances through respiratory droplets, direct contact with cases and also through contaminated surfaces/objects. Though the virus survives on environmental surfaces for varied period of time, it gets easily inactivated by chemical disinfectants.

In view of the above, the following guidelines are to be followed, especially in areas reporting COVID-19. For ease of implementation the guideline divided these areas into (i) indoor areas, (ii) outdoor areas and (iii) public toilets.

1. Indoor areas including office spaces

Office spaces, including conference rooms should be cleaned every evening after office hours or early in the morning before the rooms are occupied. If contact surface is visibly dirty, it should be cleaned with soap and water prior to disinfection. Prior to cleaning, the worker should wear disposable rubber boots, gloves (heavy duty), and a triple layer mask.

- Start cleaning from cleaner areas and proceed towards dirtier areas.
- All indoor areas such as entrance lobbies, corridors and staircases, escalators, elevators, security guard booths, office rooms, meeting rooms, cafeteria should be mopped with a disinfectant with 1% sodium hypochlorite or phenolic disinfectants. The guidelines for preparing fresh 1% sodium hypochlorite solution is at Annexure I
- High contact surfaces such elevator buttons, handrails / handles and call buttons, escalator handrails, public counters, intercom systems, equipment like telephone, printers/scanners, and other office machines should be cleaned twice daily by mopping with a linen/absorbable cloth soaked in 1% sodium hypochlorite. Frequently touched areas like table tops, chair handles, pens, diary files, keyboards, mouse, mouse pad, tea/coffee dispensing machines etc. should specially be cleaned.
- For metallic surfaces like door handles, security locks, keys etc. 70% alcohol can be used to wipe down surfaces where the use of bleach is not suitable.
- Hand sanitizing stations should be installed in office premises (especially at the entry) and near high contact surfaces.
- In a meeting/conference/office room, if someone is coughing, without following respiratory etiquettes or mask, the areas around his/her seat should be vacated and cleaned with 1% sodium hypochlorite.
- Carefully clean the equipment used in cleaning at the end of the cleaning process.
- Remove PPE, discard in a disposable PPE in yellow disposable bag and wash hands with soap and water.

In addition, all employees should consider cleaning the work area in front of them with a disinfecting wipe prior to use and sit one seat further away from others, if possible

2. Outdoor areas

Outdoor areas have less risk then indoor areas due to air currents and exposure to sunlight. These include bus stops, railway platforms, parks, roads, etc. Cleaning and disinfection efforts should be targeted to frequently touched/contaminated surfaces as already detailed above.

3. Public toilets

Sanitary workers must use separate set of cleaning equipment for toilets (mops, nylon scrubber) and separate set for sink and commode). They should always wear disposable protective gloves while cleaning a toilet.

Areas	Agents / Toilet cleaner	Procedure
Toilet pot/ commode	Sodium hypochlorite 1%/ detergent Soap powder / long handle angular brush	 Inside of toilet pot/commode: Scrub with the recommended agents and the long handle angular brush. Outside: clean with recommended agents; use a scrubber.
Lid/ commode	Nylon scrubber and soap powder/detergent 1% Sodium Hypochlorite	 Wet and scrub with soap powder and the nylon scrubber inside and outside. Wipe with 1% Sodium Hypochlorite
Toilet floor		 Scrub floor with soap powder and the scrubbing brush Wash with water Use sodium hypochlorite1% dilution
Sink	Soap powder / detergent and nylon scrubber 1% Sodium Hypochlorite	 Scrub with the nylon scrubber. Wipe with 1% sodium hypochlorite
Showers area / Taps and fittings	Warm water Detergent powder Nylon Scrubber 1% Sodium Hypochlorite/ 70% alcohol	detergent
Soap dispensers	Detergent and water	 Should be cleaned daily with detergent and water and dried.

- > 70% Alcohol can be used to wipe down surfaces where the use of bleach is not suitable, e.g. metal. (Chloroxylenol (4.5-5.5%)/ Benzalkonium Chloride or any other disinfectants found to be effective against coronavirus may be used as per manufacturer's instructions)
- Always use freshly prepared 1% sodium hypochlorite.

- Do not use disinfectants spray on potentially highly contaminated areas (such as toilet bowl or surrounding surfaces) as it may create splashes which can further spread the virus.
- To prevent cross contamination, discard cleaning material made of cloth (mop and wiping cloth) in appropriate bags after cleaning and disinfecting. Wear new pair of gloves and fasten the bag.
- Disinfect all cleaning equipment after use and before using in other area
- · Disinfect buckets by soaking in bleach solution or rinse in hot water
- Personal Protective Equipment (PPE): Wear appropriate PPE which would include the following while carrying out cleaning and disinfection work.
- · Wear disposable rubber boots, gloves (heavy duty), and a triple layer mask
- · Gloves should be removed and discarded damaged, and a new pair worn.
- All disposable PPE should be removed and discarded after cleaning activities are completed.
- Hands should be washed with soap and water immediately after each piece of PPE is removed, following completion of cleaning. (Refer to Annexure II: Steps of Hand Hygiene)

Masks are effective if worn according to instructions and properly fitted. Masks should be discarded and changed if they become physically damaged or soaked. (Annexure-III: Guidelines for use of mask)

Annexure-I

Guidelines for Preparation of 1% sodium hypochlorite solution

Product	Available chlorine	1percent	
Sodium hypochlorite – liquid bleach	3.5%	1 part bleach to 2.5 parts water	
Sodium hypochlorite – liquid	5%	1 part bleach to 4 parts water	
NaDCC (sodium dichloro-	60%	17 grams to 1 litre water	
isocyanurate) powder			
NaDCC (1.5 g/ tablet) – tablets	60%	11 tablets to 1 litre water	
Chloramine – powder	25%	80 g to 1 litre water	
Bleaching powder	70%	7g g to 1 litre water	
Any other	As per manufacturer's Instructions		

Hand-washing technique with soap and water



Wet hands with water



Apply enough soap to cover all hand surfaces



Rub hands palm to palm



Rub back of each hand with palm of other hand with fingers interlaced



Rub palm to palm with fingers interlaced



Rub with back of fingers to opposing palms with fingers interlocked



Rub each thumb clasped in opposite hand using a rotational movement



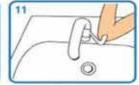
Rub tips of fingers in opposite palm in a circular motion



Rub each wrist with opposite hand



Rinse hands with water



Use elbow to turn off tap



Dry thoroughly with a single-use towel



Hand washing should take 15-30 seconds

Guidelines for use of mask

The correct procedure of wearing triple layer surgical mask

- Perform hand hygiene
- 2. Unfold the pleats; make sure that they are facing down.
- 3. Place over nose, mouth and chin.
- Fit flexible nose piece over nose bridge.
- 5. Secure with tie strings (upper string to be tied on top of head above the ears –lower string at the back of the neck.)
- 6. Ensure there are no gaps on either side of the mask, adjust to fit.
- 7. Do not let the mask hanging from the neck.
- 8. Change the mask after six hours or as soon as they become wet.
- 9. Disposable masks are never to be reused and should be disposed off.
- 10. While removing the mask great care must be taken not to touch the potentially infected outer surface of the mask
- 11. To remove mask first untie the string below and then the string above and handle the mask using the upper strings.
- 12. Disposal of used masks: Used mask should be considered as potentially infected medical waste. Discard the mask in a closed bin immediately after use.



Part B:

PRACTITIONERS' RESOURCES



1. Guidelines for Desludging operators by IIHS, Bengaluru





- Wash your hands regularly with an alcohol-based hand rub or with soap and clean water. If your hands are visibly dirty use only soap and water.
- Avoid touching your eyes, nose, and mouth.
- Cover your mouth and nose when coughing or sneezing.
 Cough/ sneeze into a tissue or flexed elbow and immediately dispose of the tissue.
- Wear a medical mask if you have respiratory symptoms and wash hands using soap after disposing of the mask.
- Maintain physical distance (a minimum of 1 metre) from persons with respiratory symptoms.
- Avoid unnecessary travel and stay away from large groups of people.
- · Stay at home if you feel unwell.
- Use headphones/ speaker phones when using mobile phone to avoid touching face.













- · After reaching the FSTP reconnect the pipe, open the release valve and transfer the fecal sludge to the receiving facility.
- Avoid spillage of fecal sludge throughout the operations. In case of spillage sprinkle lime powder over the spillage and clean the surface using disinfectant.
- Wash hands after performing any task with possible exposure to fecal sludge.





Recommended Good Practices for De-sludging Operators



- Working cloths and reusable PPE must be cleaned thoroughly using water added with disinfectant.
- Wear personal cloth before leaving from work.

Choice of Disinfectant

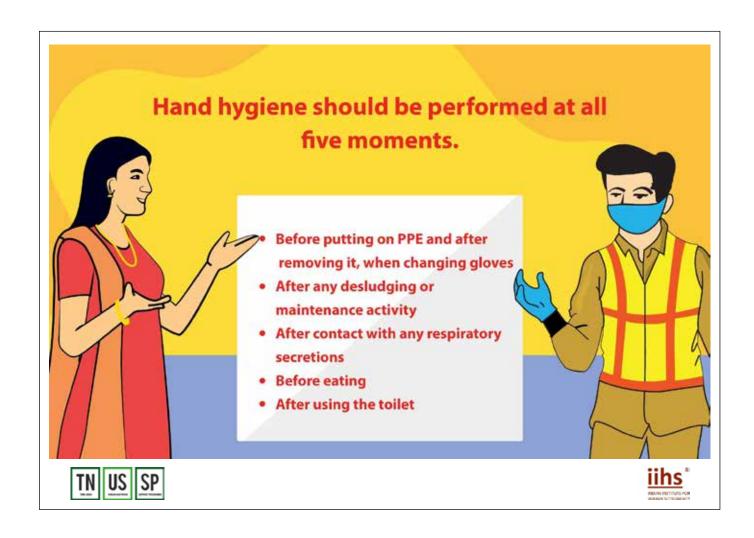
- Hand wash- preferred option:
- a. Soap and water.
- Alcohol-based hand rub (if hands are not visibly dirty).
- Sodium hypochlorite at 0.5% (equivalent 5000ppm) for disinfection of surfaces and reusable gloves.
- Mildly alkaline all-purpose detergent for cleaning surfaces.











2. Guidelines for Desludging operators by IIHS, Bengaluru





- अपने हाथों को अल्कोहॉल-आधारित हैंड रब (हाथों पर मलने वाला तरल) या साबुन और साफ पानी के साथ रगड़कर नियमित रूप से धोए। यद आपके हाथ गंदे दिखाई दे रहे हैं तो साबुन और पानी का इस्तेमाल करें।
- अपनी आंखों, नाक और मुंह को छूने से बचें। खांसते या छीकते समय अपना मुँह और नाक ढक लें। टशि या कोहनी मोड़कर मुँह के सामने लगाकर खाँसें / छीकें और टशि को तुरंत फेक दें।
- यद आपमें साँस संबंधी लक्षण है तो मेडकिल मास्क पहनें और मास्क को फेंकने के बाद साबुन से हाथ धोएं।
- साँस संबंधी लक्षणों वाले व्यक्तयों से (कम से कम 1 मीटर) शारीरिक दूरी बनाए रखें।
- बिना मतलब बाहर जाने से बर्चे और लोगों के बड़े समूहों से दूर
- यद आप अस्वस्थ महसूस करते हैं तो घर पर रहें।
- चेहरा छूने से बचने के लिए मोबाइल फोन का उपयोग करते समय हेडफोन या स्पीकर फोन का उपयोग करें।













- एफ़एसटीपीFSTP पहुँचने के बाद पाइप को फिर से कनेक्ट करें, रिलीज वाल्व खोलें और मल कीचड़ को जमा करने वाले सथान पर खाली करें।
- पूरी गतविधि के दौरान मल कीचड़ के रिसाव से बचें। कीचड़ छलक जाए तो छलकाव पर चूने का पाउडर छड़िकें और कीटाणुनाशक का उपयोग करके सतह को साफ करें।
- काम के दौरान मल कीचड़ के संपर्क में आने पर साबुन से हाथ धोएं।



http://tnussp.co.in/



डीस्लजगि ऑपरेटरों (डीएसओDSO) के लिए अच्छे अभ्यासों के सुझाव



- काम के दौरान इस्तेमाल किए जाने वाले कपड़ों और दोबारा इस्तेमाल किए जाने वाले व्यक्तगित सुरक्षा उपकरण (पीपीई) को पानी के साथ कीटाणुनाशक मिलाकर अच्छी तरह से साफ करें।
- काम से घर जाने से पहले कपड़े बदलने वाले स्थान पर अपने खुद के कपड़े पहनलें।

कीटाणुनाशक / वसिंक्रामक का चुनाव

- हैंड वाश बेहतर विकल्प: क. साबुन और पानी ख. अलुकोहॉल-आधारित हैंडरब (अगर हाथ गंदे नहीं दिखे रहे हैं)
- सतहों और दोबारा इस्तेमाल किए वाले दस्तानों के कीटाणुशोधन के लिए 0.5% (बराबर) सोडियम हाइपोक्लोराइट
- सतहों को साफ करने के लिए सभी कामों में इस्तेमाल होने वाले हल्के क्षारीय डिट्रुजेंट











3. Desludging operators' poster by UMC, Ahmedabad



Hi, I am Sattu and this is my wife - Hema. We work as desludging operators with the private contractor of our city.

I know, like us many of you are also providing this service to citizens during this CORONA pandemic.

And that's why I would like to share a few safety tips with you....

Disclaimer: These instructions are not SOPs for their regular work but intended to highlight additional safety measures to be taken by sanitation workers

Before leaving home for your work, you must



1. Wear full sleeve and full-length clothes



3. Carry the **Emergency pass** issued by ULB



5. Gloves, mask, apron (if mask is not available, then use a clean cloth in 2-3 layers to cover your nose and mouth)



2. Cover wounds with water-proof band-aid



4. Carry water and soap to wash hands



6. Carry extra set of clothes

When you reach the workplace, you must



Wash hands with soap



Wear PPEs as per recommended steps (if damaged, ask officer to replace)





Sit at opposite corners of the seats to maintain distance



Pick cleaning equipment and vehicle only after wearing PPE





Avoid touching your eyes, nose, and mouth and mask while wearing it

When you start your work, follow these steps...





Carry water in the vehicle, soap/

alcohol-based sanitizer

Maintain distance while interacting with people



Barricade the desludging area



Hold desludging pipe with gloved hands





After the sluage is emptied, clean the pipe and barricades





Sprinkle lime powder if there is any spillage of sludge



Wash hands after performing any task with possible exposure to fecal sludge





equipments used during desludging using disinfectant

When we return to your work base (transfer station, ward office, office)







and face



Wash hands Change clothes Disinfect clothes safety and gears



Hang safety gears in sunny dry space



Wear mask and return home

Contact a doctor immediately if you have any cough/fever or running nose

Let's conquer the virus by ensuring our safety

Safety and Dignity to Sanitation Work | Urban Management Centre with support from BMGF | manvita@umcasia.org

4. Guidelines for FSTP operators by IIHS, Bengaluru





- Wash your hands regularly with an alcohol-based hand rub or with soap and clean water. If your hands are visibly dirty use only soap and water.
- Avoid touching your eyes, nose, and mouth.
- Cover your mouth and nose when coughing or sneezing.
 Cough/ sneeze into a tissue or flexed elbow and immediately dispose of the tissue.
- Wear a medical mask if you have respiratory symptoms and wash hands using soap after disposing of the mask.
- Maintain physical distance (a minimum of 1 metre) from persons with respiratory symptoms.
- Avoid unnecessary travel and stay away from large groups of people.
- · Stay at home if you feel unwell.
- Use headphones/ speaker phones when using mobile phone to avoid touching face.



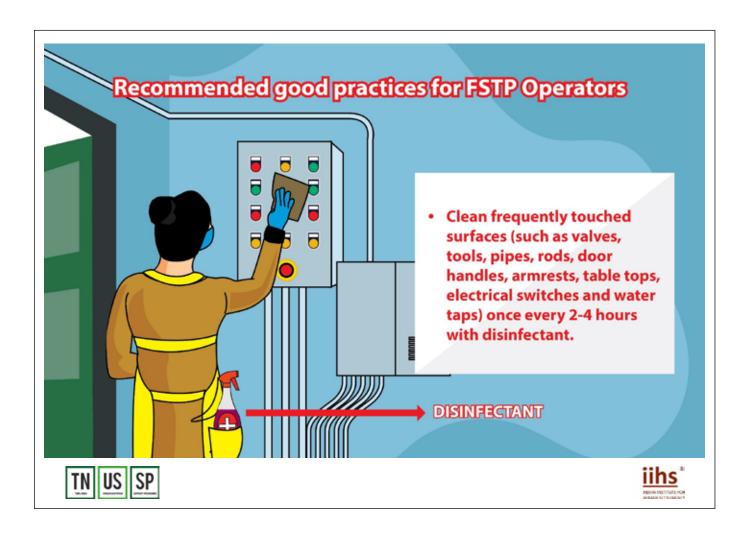


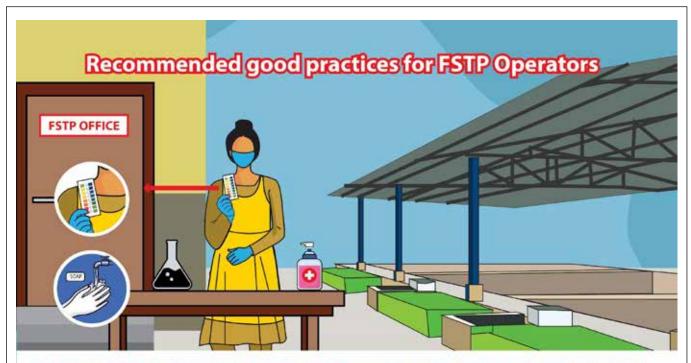


- Work cloths must be worn at the changing area before starting the day's work. Always use mask, gloves, footwear and appropriate clothing (like long sleeved shirt, long trousers and apron).
- Ensure hand sanitizers and soap is available at the FSTP premises and encourage its usage by all staff.









- While receiving fecal sludge, conduct tests with extreme caution. Wash hands and any surface which accidentally comes in contact with fecal sludge.
- Wash hands after performing any task with possible exposure to fecal sludge.





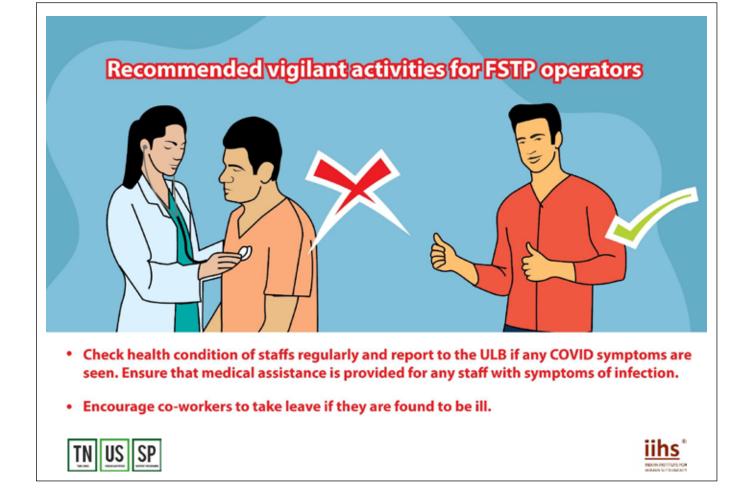


















5. Guidelines for FSTP operators by IIHS, Bengaluru





- अपने हाथों को अल्कोहॉल-आधारित हैंड रब (हाथों पर मलने वाला तरल) या साबुन और साफ पानी के साथ रगड़कर नियमिति रूप से धोए। यद आपके हाथ गंदे दिखाई दे रहे है तो साबुन और पानी का इस्तेमाल करें।
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- साँस संबंधी लक्षणों वाले व्यक्तयों से (कम से कम 1 मीटर) शारीरिक दूरी बनाए रखें।
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TN US SP

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- दिन का काम शुरू करने से पहले, काम के दौरान पहने जाने वाले कपड़े, कपड़े बदलने वाले स्थान में पहने। सीटी / पीटी हमेशा मास्क, दस्ताने, जूते और उपयुक्त कपड़े (जैसे लंबी आस्तीन वाली शर्ट, लंबी पतलून) का उपयोग करें।
- सुनश्चिति करें कि शौचालय परिसर में साबुन या हैंड सैनटि।इज़र उपलब्ध है और शौचालय उपयोगकर्ताओं को इसका उपयोग करने के लिए परोतसाहति करें।





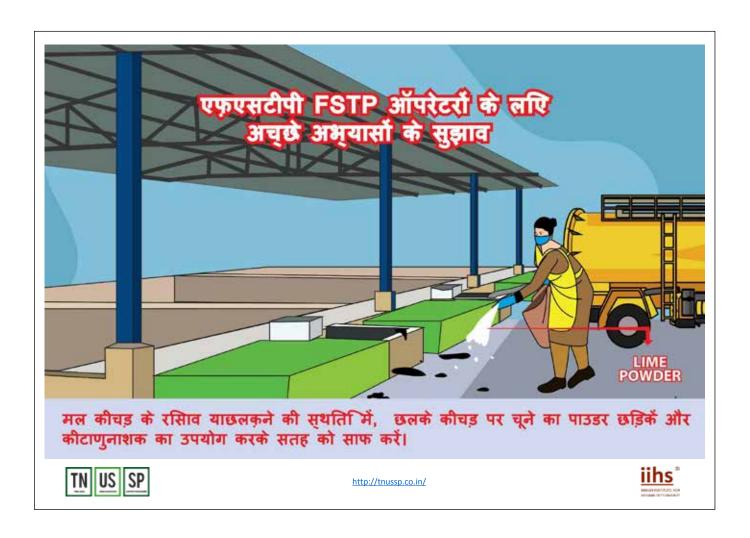




 मल (फेकल) कीचड़ प्राप्त करते समय, सावधानी के साथ जांच करें। काम के दौरान मल कीचड़ के संपर्क में आने पर हाथ साबुन से घोएं।

















भी करमचारी के लिए चिकितिसा सहायता प्रदान की जाए।

TN US SP

• सहकर्मियों को बीमार होने पर छुट्टी लेने के लिए प्रोत्साहित करें।







6. FSTP operators' poster by UMC, Ahmedabad



Hi, I am Mahesh. I work as a FSTP operator for the municipality.

I know that many of you are also providing such services to citizens during this Covid-19 pandemic. And that's why I would like to share some safety tips with you to protect you from the Novel Corona Virus...

Disclaimer: These instructions are no SOPs for their regular work but intended to highlight additional safety measures to be taken by sanitation workers

Before leaving home for your work, you must



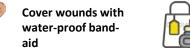
Wear full sleeve and full-length clothes



Bottles of water and soap to wash hands during break



Sit on opposite corner of vehicles if travelling together





Carry extra set of clothes



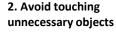
Carry the emergency pass issued by ULB

When you reach the workplace, you must



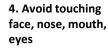
seconds at least

1. Wash hands with soap for 20





3. Wear gloves, mask/cloth, apron, boots





5. Maintain safe distance while traveling together to work site

When you start your work, follow these steps...



Maintain safe distance with co-workers, don't sit together if possible



Do not touch unnecessary objects



Collect sample with caution when receiving fecal sludge



Wash eyes, nose, face in case waste touches



soap before and after having lunch Also, after having performing any task with possible exposure to faecal sludge, touching register or cleaning

the surrounding

Wash hands with

Disinfect high touch surfaces - water taps, stair rails, door handles Lime powder etc. once every 2-4 hours



Spillage of fecal matter to be sprinkled with lime powder and disinfected

At the end of the day,



Remove safety gears



and face



Wash hands Change clothes and put all in a bag



Wear mask/cloth and return to home



Before meeting anyone in the family, first wash clothes and PPEs with soap and hang them in a sunny dry place

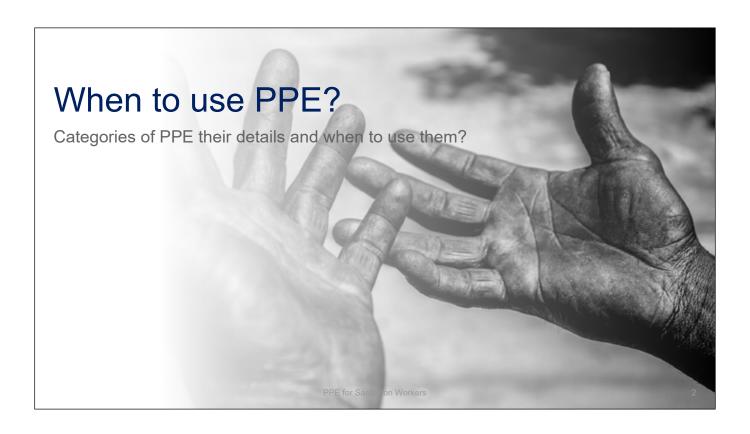
Contact a doctor immediately if you have any cough/fever or running nose

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7. Personal Protective Equipments (PPE) for Sanitation Workers by Saniverse





When to use PPE?



Head Protection

Should be worn in case of physical hazards such as impact due to falling object or collision with fixed objects at workplace. Type of helmet depends on the physical risk present at the workplace.



Ear Protection

Should be worn in case of risk of exposure to high decibels noise at the workplace. They are also recommended where continuous exposure to mist or droplets of fluid / spray is expected.



Face Protection

Should be worn where there is risk of continuous droplets or splashes of fluids, heat from hot solid bodies and electric arcs.



Eye Protection

Should be worn in case of risk of incidental impact of fragments and dusts, gases and droplets or splashes of fluids.



Lung protection: Respirators

Should be worn when working in confined space where there is risk of oxygen deficiency and / or when concentration of toxic substances are at dangerous levels.



Lung protection: Face Masks

Should be worn when there is risk of solid and liquid particles including nanoparticles such as dusts, fumes, mists, fibers, vapors, gases and microorganisms.

PPE for Sanitation Workers

When to use PPE?



Hand Protection

Hand protection are classified as mechanical resistant and chemical resistant gloves.

Mechanical resistant are recommended where there is higher risk of abrasion, cut, tear or puncture and incidental contact with hazardous liquids.

Chemical resistant gloves are recommended where intentional contact with the hazardous liquid is expected and there is higher risk of penetration or permeation of chemicals into the glove.



Body Protection

Body protection are used for as chemical & biological hazards, thermal hazards and high visibility. Further intentional and incidental exposure to hazard determines the type of body protection.

These hazards in sanitation are mostly due to incidental exposure to hazardous substance. Intentional exposure is only observed in case of sewer workers engaged in manual cleaning of sewerage systems and septic tanks.



Foot Protection

Foot protection is recommended to protect the workers from physical and chemical hazards at the workplace.

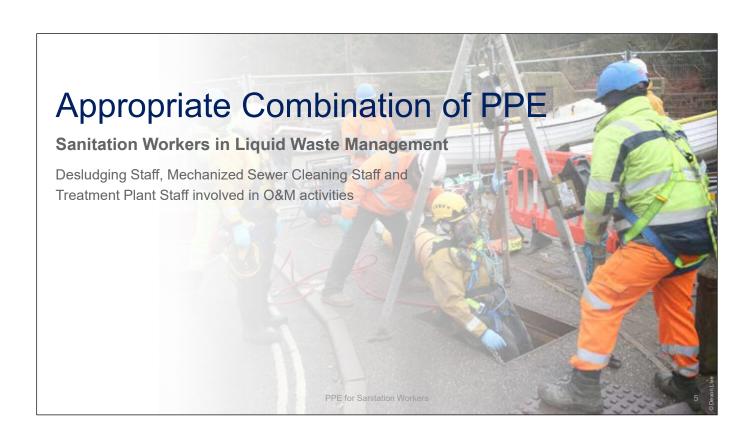
Foot protection helps to avoid injuries arising from contact from falling, rolling or cutting object, penetration from soles and uppers, contact with hazardous substances and slipping and falling on wet surfaces.

Types include – safety footwear, protective footwear and occupational footwear

Material – Leather and similar material, rubber or all polymeric material.

PPE for Sanitation Workers

4



HEAD PROTECTION



Hard Hat

Hard Hat with shell made out of Polypropylene Co-Polymer with headband, harness, sweatband, peak and chinstrap.

Recommended for use only when hazard of falling object, working at height or near open chambers.

EAR PROTECTION



Ear Plugs

Corded, flanged shaped ear plugs made out of non irritant and non allergic material. The ear plugs should be washable and reusable. Recommend for use only in case of noise hazard.

FACE PROTECTION



Face Shield

Face shield made out of clear Polycarbonate having size 8.0" x 15.5" and thickness of 1.0 mm. The shield should be compatible with the safety hard hat.

EYE PROTECTION



Safety Goggles

Safety goggles must be light weight made out of clear Polycarbonate material offering high impact resistance and 99.9% UV protection.

PPE for Sanitation Workers

6

LUNG PROTECTION



N 95 Face Mask

N 95 face mask with exhalation valve and straps made out of Thermoplastic Elastomer, Aluminium nose clip, Polyurethane nose foam, Polypropylene filter, Polyester shell and cover web.

HAND PROTECTION



Mechanical Resistant Gloves

Mechanical resistant, nitrile coated gloves having nylon lining, specialized grip such as dotted or sandy and knitted cuffs.

Recommended to be worn for jobs which might include incidental contact with liquid hazardous waste or chemical.

PPF for Sanitation Workers

HAND PROTECTION



Chemical Resistant Gloves

Chemical resistant, nitrile gloves having flock lined inners, diamond finish grip, straight cuff, minimum thickness of 0.38 mm and length of 330 mm.

Recommended to be worn on jobs which includes continuous and intentional contact with liquid hazardous waste or chemical.

7

BODY PROTECTION



Full Sleeves Shirt

High visibility full sleeves shirt made out of high wicking polyester for comfortable use in hot and humid conditions.

Presence of reflective strips for high visibility in low light conditions is optional.

BODY PROTECTION



Full Length Pants

High visibility full length pants made out of polyurethane coated breathable polyester for comfortable use in hot and humid conditions and easy cleaning.

Presence of reflective strips for high visibility in low light conditions is optional.

FOOT PROTECTION

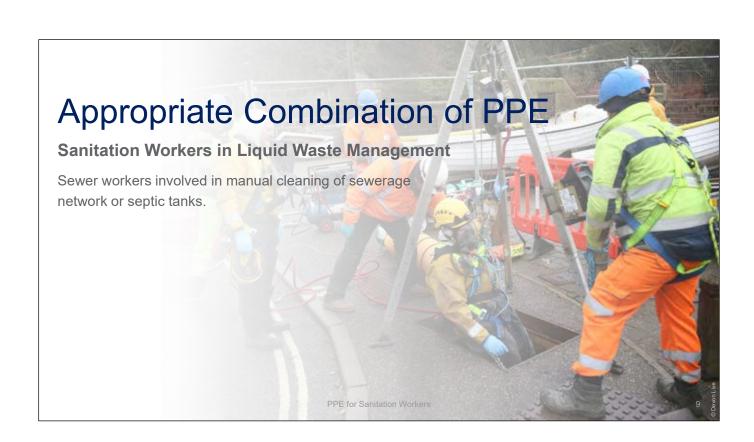


Protective Footwear

Protective footwear having steel toe with upper body made out of grain leather and polyurethane outsole for protection against physical hazards.

Ankle length shoes when paired with full pants provides complete protection from incidental splashes of hazardous liquids.

PPE for Sanitation Workers



HEAD PROTECTION



Hard Hat

Hard Hat with shell made out of Polypropylene Co-Polymer with headband, harness, sweatband, peak and chinstrap.

Use of hard hat is mandatory when working in confined spaces such as sewerage system or tanks.

EAR PROTECTION



Ear Plugs

Corded, flanged shaped ear plugs made out of non irritant and non allergic material. The ear plugs should be washable and reusable. Recommend for use only in case of noise hazard.

LUNG PROTECTION



Full Face Respirator

Full face respirators with replaceable filter cartridge. The mask is made out of clear Polycarbonate material and have high impact resistant. The silicone seal around the mask and thermoplastic elastomer, makes it air tight.

LUNG PROTECTION



PAPR

Powered Air Purifying Respirator are full face respirator with battery powered blower.

It is recommended for use in confined spaces which are well ventilated having concentration of the toxic substances at dangerous levels.

PPE for Sanitation Workers

LUNG PROTECTION



SCBA

Self Contained Breathing Apparatus is a full face respirator which comes with a cylinder which provides necessary oxygen for breathing.

It is recommended for use in confined spaces having deficiency of oxygen such as sewers or underwater.

HAND PROTECTION



Chemical Resistant Gloves

Chemical resistant, nitrile gloves having flock lined inners, diamond finish grip, straight cuff, minimum thickness of 0.38 mm and length of 330 mm.

Recommended to be worn on jobs which includes continuous and intentional contact with liquid hazardous waste or chemical

BODY PROTECTION



Full Sleeves Shirt

High visibility full sleeves shirt made out of high wicking polyester for comfortable use in hot and humid conditions.

Presence of reflective strips for high visibility in low light conditions is optional.

PPE for Sanitation Workers

BODY PROTECTION



Body Protection

Disposable Coveralls made out of non woven polypropylene with polyethylene barrier film.

The coveralls are breathable and protect the worker from incidental splashes of hazardous liquid waste.

FOOT PROTECTION



Foot Protection

Chest Wader Suits made out of polyester coated with PVC, steel toe rubber shoes molded into the suit to provide complete water tightness.

These are recommended for use where the lower body of the worker will be continuous contact with hazardous liquid waste.

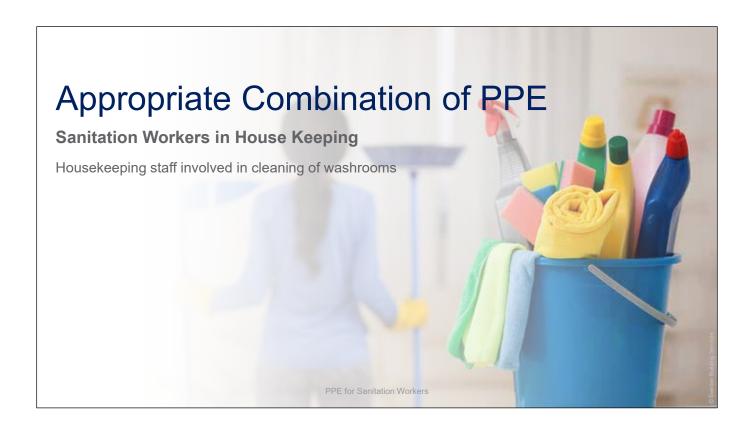
PPE for Sanitation Workers

BODY PROTECTION



Body Protection

The sewage proof diving suit are completely water tight from head to toe with integrated gloves and shoes. It comes with a diving helmet and inline air blower kept above the ground. This ensures continuous supply of fresh air for prolonged work under wastewater.



LUNG PROTECTION



Face Mask

Foldable respiratory half mask made of non-woven polypropylene Wide adjustable elastic straps, Aluminium nose clip. Reinforcement nose foam

Recommended to be worn on job while cleaning water closets and using aerosols containing chemicals.

HAND PROTECTION



Chemical Resistant Gloves

Chemical resistant, nitrile gloves having flock lined inners, diamond finish grip, straight cuff, minimum thickness of 0.38 mm and length of 330 mm.

Recommended to be worn on jobs which includes continuous and intentional contact with liquids or cleaning chemical.

PPE for Sanitation Workers

BODY PROTECTION



Work Shirt

Short sleeve work shirt made out of polyester and cotton. This material is comfortable to prolonged wearing and helps to wick out moisture.

The work shirt is to be worn on the iob as a uniform and is combined with apron or a bib to protect the from liquid splashes.

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BODY PROTECTION



Cargo Pants

Full length cargo pants made out of polyester and cotton. The pants should have gusseted crotch, wide belt loops and reinforced front and cargo pockets.

The cargo pants shields the legs of the worker from incidental splash of water or chemicals used for cleaning.

BODY PROTECTION



Bib Apron

Unisex multipurpose bib apron made of polycotton fabric, Neck strap adjusted with snap buttons for length, Back width adjustable with strap & buttons.

Recommended to be worn as worker might be exposed to incidental contact / splashes of liquids.

PPF for Sanitation Workers

FOOT PROTECTION



Protective Footwear

Protective footwear having steel toe with upper body made out of grain leather and polyurethane outsole for protection against physical hazards.

Ankle length shoes when paired with full pants provides complete protection from incidental splashes of hazardous liquids.



HEAD PROTECTION



Hard Hat

Hard Hat with shell made out of Polypropylene Co-Polymer with headband, harness, sweatband, peak and chinstrap Recommend for use in case of physical hazard from falling object or when working at height.

EAR PROTECTION



Ear Plugs

Corded, flanged shaped ear plugs made out of non irritant and non allergic material. The ear plugs should be washable and reusable. Recommend for use only in case of noise hazard at

SWM Plant.

FACE PROTECTION



Face Shield

Face shield made out of clear Polycarbonate having size 8.0" x 15.5" and thickness of 1.0 mm. The shield should be compatible with the safety hard hat.

Recommended when using sprays / aerosols.

LUNG PROTECTION



Face Mask

Foldable respiratory half mask made of non-woven polypropylene Wide adjustable elastic straps, Aluminium nose clip, Reinforcement nose foam Recommend in case of collection or handling organic waste and protect from hazardous gases.

PPF for Sanitation Workers

LUNG PROTECTION



N 95 Face Mask

N 95 face mask with exhalation valve and straps made out of Thermoplastic Elastomer, Aluminium nose clip, Polyurethane nose foam, Polypropylene filter, Polyester shell and cover web

Recommended to be worn for jobs where there is collection or processing of dry waste or C&D waste

HAND PROTECTION



Mechanical Resistant Gloves

Mechanical resistant, nitrile coated gloves having nylon lining, specialized grip such as dotted or sandy and knitted cuffs.

Recommended to be worn for jobs which might include incidental contact with dry waste or inert waste

PPE for Sanitation Workers

HAND PROTECTION



Chemical Resistant Gloves

Chemical resistant, nitrile gloves having flock lined inners, diamond finish grip, straight cuff, minimum thickness of 0.38 mm and length of 330 mm.

Recommended to be worn on jobs which includes continuous and intentional contact with wet waste or hazardous waste

18

BODY PROTECTION



Bib Apron

Unisex multipurpose bib apron made of polycotton fabric, Neck strap adjusted with snap buttons for length, Back width adjustable with strap & buttons.

Recommended to be worn when continuous and intentional contact with liquid hazardous waste such as organic waste segregation station.

BODY PROTECTION



Full Sleeves Shirt

High visibility full sleeves shirt made out of high wicking polyester for comfortable use in hot and humid conditions.

Presence of reflective strips for high visibility in low light conditions is optional.

BODY PROTECTION



Full Length Pants

High visibility full length pants made out of polyurethane coated breathable polyester for comfortable use in hot and humid conditions and easy cleaning.

Presence of reflective strips for high visibility in low light conditions is optional.

PPF for Sanitation Workers

FOOT PROTECTION



Protective Footwear

Protective footwear having steel toe with upper body made out of grain leather and polyurethane outsole for protection against physical hazards.

These shoes are recommended for most of the jobs in SWM. Ankle length shoes when paired with full pants provides complete protection from incidental splashes of hazardous waste like wet waste slurry or leachate or processed liquid fuel.

FOOT PROTECTION

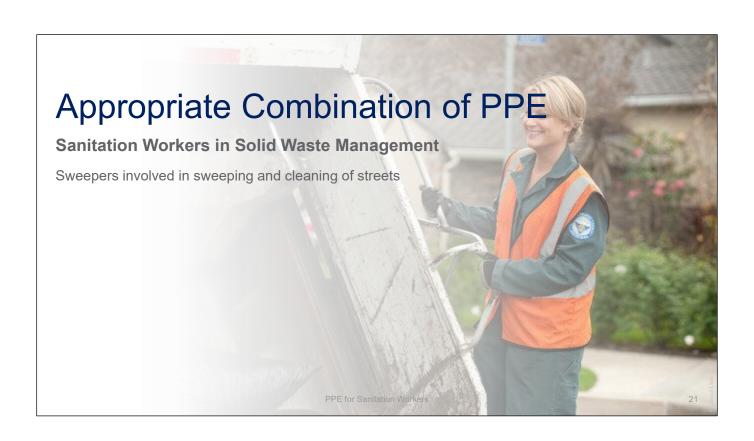


Protective Footwear

Protective footwear made out of poly vinyl chloride and has energy absorption heel. Antiskid, highly flexible and extra strong for protection against physical hazards.

These shoes are recommended for jobs in SWM where the worker is going to come in continuous contact with liquid. Ankle length shoes should be paired with full pants provides complete protection.

PPE for Sanitation Workers



LUNG PROTECTION



Face Mask

Foldable respiratory half mask made of non-woven polypropylene Wide adjustable elastic straps, Aluminium nose clip, Reinforcement nose foam Recommend to use in case of sweeping activity to protect from dust particles.

HAND PROTECTION



Mechanical Resistant Gloves

Mechanical resistant, nitrile coated gloves having nylon lining, specialized grip such as dotted or sandy and knitted cuffs.

Recommended to be worn for jobs which include incidental contact with dry waste in street cleaning.

BODY PROTECTION



Full Sleeves Shirt

High visibility full sleeves shirt made out of high wicking polyester for comfortable use in hot and humid conditions.

Presence of reflective strips for high visibility in low light conditions is mandatory.

PPE for Sanitation Workers

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BODY PROTECTION



Cargo Pants

Full length cargo pants made out of polyester and cotton. The pants should have gusseted crotch, wide belt loops and reinforced front and cargo pockets.

Presence of reflective strips is mandatory. The full length pants protects the worker from coming in contact with dusts and harmful substances.

BODY PROTECTION



High Visibility Safety Vests

Safety Vests made of plain or mesh polyester, 1 or 2 inch high gloss white or yellow horizontal & vertical reflective tape.

Recommended to be worn with apparel in street sweeping activity for high visibility in low light conditions.

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FOOT PROTECTION



Protective Footwear

Protective footwear having steel toe with upper body made out of grain leather and polyurethane outsole for protection against physical hazards.

Ankle length shoes when paired with full pants provides complete protection from dusts, particulate matters and splashes of liquids.

PPE for Sanitation Workers



8. D2D Waste collectors' poster by UMC, Ahmedabad



Hi, I am Mahesh. My wife, Leela and I work with a contractor who provides door-to-door waste collection service for the municipality.

I know that like us, many of you are also providing these services to citizens during this Covid-19 pandemic.

And that's why I would like to share some safety tips with you to protect you from the Novel Corona Virus....

Disclaimer: These instructions are no SOPs for their regular work but intended to highlight additional safety measures to be taken by sanitation workers

Before leaving home for your work, you must



1. Wear full sleeve and full-length clothes



3. Carry the **Emergency pass** issued by ULB



5. Gloves, mask, apron (if mask is not available, then use a clean cloth in 2-3 layers to cover your nose and mouth)



2. Cover wounds with water-proof band-aid



4. Carry water and soap to wash hands



6. Carry extra set of clothes

When you reach the workplace, you must

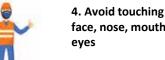


1. Wash hands with soap for 20 seconds at least

2. Avoid touching unnecessary objects



3. Wear gloves, mask/cloth, apron, boots





face, nose, mouth,



When you start your work, follow these steps...



1. Blow horn to open the gate



4. Do not touch dustbins and waste with bare hands



6. Ask citizens to dispose used masks and gloves in a separate bag

work site



2. Keep distance of minimum 4 feet from citizens

3. Ask citizens to

throw their waste

vehicle/ your bin

directly in the



5. Do not collect waste from a quarantined household unless you are informed by the municipality



7. Use sheet/pan to pick up littered waste



8. Take extra care while picking up waste may carry saliva i.e. ice-cream stick, etc.

When you return to your work base (transfer station/ ward office etc.)



Wash hands Remove safety gears and face



Change clothes and put all in a bag



and return to home



Wear mask/cloth Before meeting anyone in the family, first wash clothes and PPEs with soap and hang them in a sunny dry place

Contact a doctor immediately if you have any cough/fever or running nose

Let's conquer the virus by ensuring our safety

Street sweepers' safety poster by UMC, Ahmedabad



Hi, I am Rashmi. I work with a contractor who provides street cleaning service for the municipality.

I know that like us, many of you are also providing these services to citizens during this Covid-19 pandemic.

And that's why I would like to share some safety tips with you to protect you from the Novel Corona Virus....

Disclaimer: These instructions are no SOPs for their regular work but intended to highlight additional safety measures to be taken by sanitation workers

Before leaving home for your work, you must



1. Wear full sleeve and full-length clothes



3. Carry the **Emergency pass** issued by ULB



5. Gloves, mask, apron (if mask is not available, then use a clean cloth in 2-3 layers to cover your nose and mouth)



2. Cover wounds with water-proof band-aid



4. Carry water and soap to wash hands



6. Carry extra set of clothes

When you reach the workplace, you must



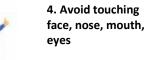
1. Wash hands

with soap for 20

2. Avoid touching unnecessary objects, only your PPEs, cart and broom



3. Wear gloves, mask/cloth.





5. Maintain safe distance while traveling together to work site

seconds at least apron, boots



1. Blow horn to open the gate



When you start your work, follow these steps...

4. Do not touch dustbins and waste with bare hands



6. Wash eyes, nose, face in case waste touches



2. Keep distance of minimum 4 feet from citizens

3. Ask citizens to

throw their waste

vehicle/ your bin

directly in the



5. Do not collect waste from a quarantined household unless you are informed by the municipality



7. Use sheet/pan to pick up littered waste



8. Take extra care while picking up waste that may carry saliva i.e. icecream stick, etc.

When you return to your work base (transfer station/ ward office etc.)













Remove safety gears Wash hands and face

Change clothes and put all in a bag

and return to home

Wear mask/cloth Before meeting anyone in the family, first wash clothes and PPEs with soap and hang them in a sunny dry place

Contact a doctor immediately if you have any cough/fever or running nose

Let's conquer the virus by ensuring our safety

10. Drain cleaners' poster by UMC, Ahmedabad



Hi, I am Riyaz. My wife- Gul and I work as drain cleaners for our municipality I know that like us, many of you are also providing these services to citizens during this Covid-19 pandemic.

And that's why I would like to share some safety tips with you to protect you from the Novel Corona Virus....

Disclaimer: These instructions are not SOPs for regular work but intended to highlight additional safety measures to be taken by sanitation workers

Before leaving home for you work, you must

1. carry our ID card



2. Pack a spare pair of clean clothes in a plastic bag, water and soap



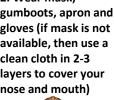
3. Cover wounds with water-proof band-aid



When you reach the workplace, you must



1. Wash hands with soap for 20 seconds at least

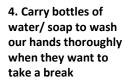




2. Wear mask, gumboots, apron and gloves (if mask is not available, then use a clean cloth in 2-3 layers to cover your nose and mouth)



3. Pickup the equipment like shovel, hoe & barricade cone & ribbon only after wearing PPE





5. Carry own food for lunch along with drinking water

When you reach the workplace, you must

1. maintain 1 meter distance with your coworkers or with others



2. Remove debris and trash from the drain and surrounding area using equipment only. Do not touch anything with bare hands



3. Clean the area by sweeping, bleaching, disinfecting and complete sanitization



When you return to your work base (ward office)



Remove

Wash hands safety gears and face



clothes and put all in a bag



and return to home



Wear mask/cloth Before meeting anyone in the family, first wash clothes and PPEs with soap and hang them in a sunny dry place

Contact a doctor immediately if you have any cough/fever or running nose

Let's conquer the virus by ensuring our safety

11. Community toilet (CT) caretakers' poster by UMC, Ahmedabad



Hi, I am Raghu. My wife, Sushma and I work as caretaker of a community toilet in our ward.

I know that like us, many of you are also providing these services to citizens during this Covid-19 pandemic. And that's why I would like to share some safety tips with you to protect you from the Novel Corona Virus....

Disclaimer: These instructions are not SOPs for regular work but intended to highlight additional safety measures to be taken by sanitation workers

Before leaving home for your work, you must



1. Wear full sleeve and full-length clothes



3. Carry the **Emergency pass** issued by ULB



5. Gloves, mask, apron (if mask is not available, then use a clean cloth in 2-3 layers to cover your nose and mouth)



2. Cover wounds with water-proof band-aid



4. Carry water and soap to wash hands



6. Carry extra set of clothes

When you reach the workplace, you must



Wash hands with soap



Wear PPEs as per recommendations



Draw circles outside the toilet block to make users maintain distance



Clean the toilet block by wearing PPEs



Instruct users to maintain distance of at least 1 m & to wash their hands with soap after using toilet



Collect user charges while wearing gloves



Clean and disinfect frequently touched objects and surfaces.



Wash hands with soap before having having any food



Remove gloves and masks, clean them thoroughly with soap water

When you finish your work



Remove

safety gears

and face

Wash hands Change clothes and put all in a bag



and return to home



Wear mask/cloth Before meeting anyone in the family, first wash clothes and PPEs with soap

and hang them in a sunny dry place

Contact a doctor immediately if you have any cough/fever or running nose

Let's conquer the virus by ensuring our safety

12. Handwashing steps Poster by WaterAid



HANDWASHING STEPS



We all can keep ourselves, our family and our community healthy and safe from Coronavirus, COVID 19 and other diseases by washing hands with soap and water thoroughly following simple steps. This way, every part of our hands are clean.

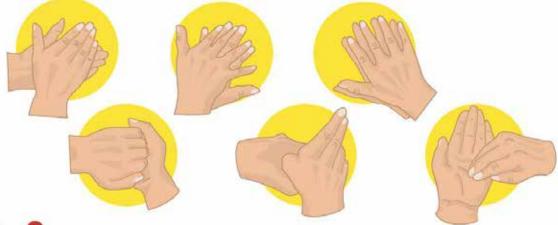
All of us can follow these simple steps:

Wet your hands with clean water & apply soap.



Lather your hands by rubbing them together with the soap.

Lather your palms, the backs of your hands, between your fingers, around your thumbs, and under your nails. SCRUB YOUR HANDS FOR AT LEAST 20 SECONDS.



4

Rinse your hands well with clean water
Dry your hands using a clean towel or air dry them.



REMEMBER

Next time you wash your hands - use soap and follow these simples steps!

Protect yourself and your family from Coronavirus and COVID-19, and keep healthy

13. Handwashing steps Poster by WaterAid



हाथ धोने की सही विधि



कोरोना-वायरस व अन्य बीमारियों से हम स्वयं को, अपने परिवार को एवं अपने समुदाय को स्वस्थ और सुरक्षित रख सकते हैं, अगर हम अपने हाथों को साबुन एवं पानी से चरणबद्ध तरीके से धोएं । ऐसा करने से, हमारे हाथ का हर हिस्सा साफ होता है।

आइए जाने इन सरल चरणों को:

सबसे पहले अपने हाथों को साफ पानी से गीला करें, और हथेलियों में साबुन लगाएं।



पहले हथेलियों के धारियों के ऊपर, उसके बाद पीछे, उँगलियों के बीच में, अँगूठों के चारों ओर एवं नाखूनों के नीचे व अंदर के हिस्से को, कम से कम 20 सेकेंड तक अच्छे से मलें।



इसके बाद साफ पानी से अपने हाथों को अच्छी तरह से धो लें। अंत में, एक साफ तौलिया या हवा का उपयोग करके अपने हाथों को सूखा लें।



याद रखें

अगली बार आप जब भी हाथ धोएँ, साबुन का प्रयोग करें एवं इन सरल तरीके व चरणों का जरूर पालन करें। ऐसा कर, आप अपने और अपने परिवार को कोरोना वायरस से सुरक्षित रख सकते हैं।

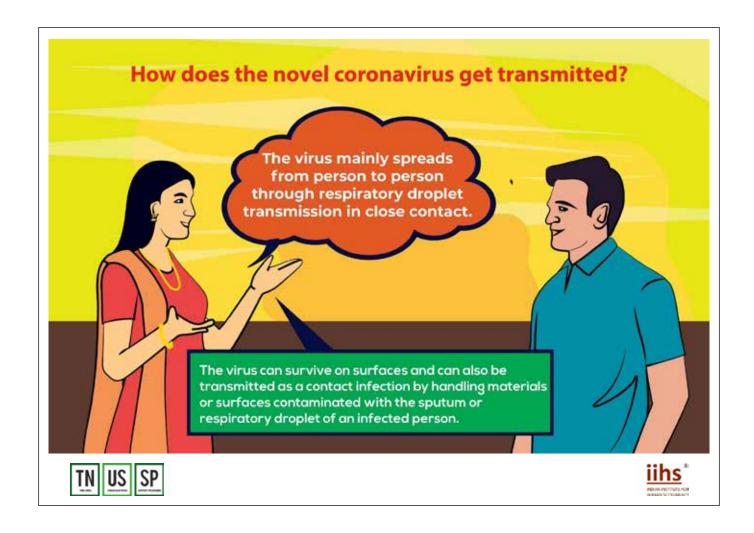
14. When to wash hands Poster by WaterAid



15. When to wash hands Poster by WaterAid



16. Guidelines for Sanitation Workers (CT/PT) by IIHS, Bengaluru





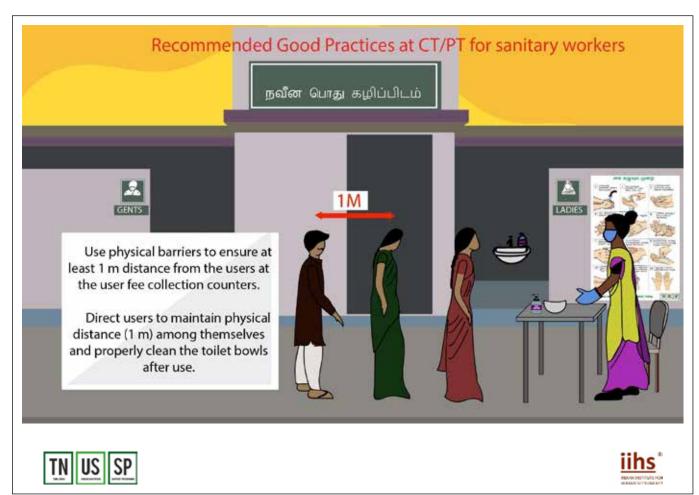
- Wash your hands regularly with an alcohol-based hand rub or with soap and clean water. If your hands are visibly dirty use only soap and water.
- Avoid touching your eyes, nose, and mouth.
- Cover your mouth and nose when coughing or sneezing.
 Cough/ sneeze into a tissue or flexed elbow and immediately dispose of the tissue.
- Wear a medical mask if you have respiratory symptoms and wash hands using soap after disposing of the mask.
- Maintain physical distance (a minimum of 1 metre) from persons with respiratory symptoms.
- Avoid unnecessary travel and stay away from large groups of people.
- · Stay at home if you feel unwell.
- Use headphones/ speaker phones when using mobile phone to avoid touching face.

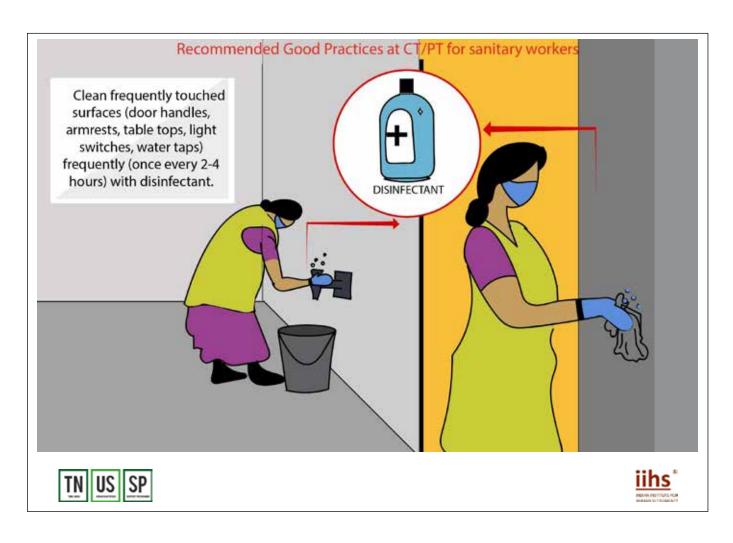




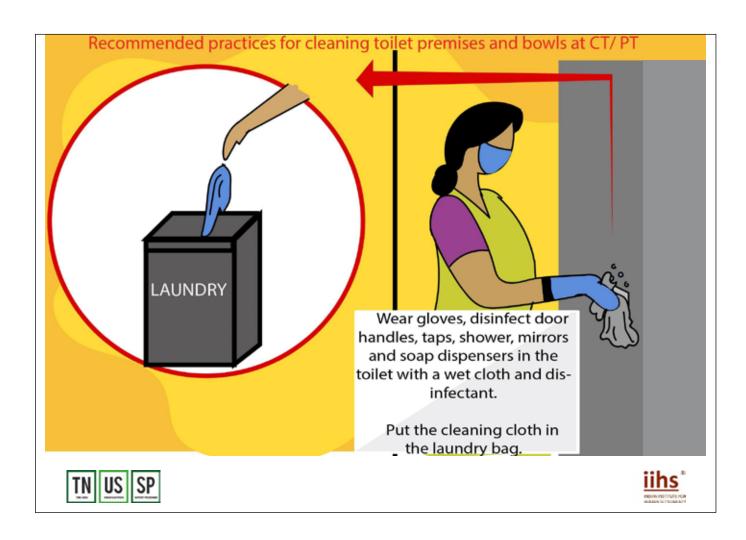


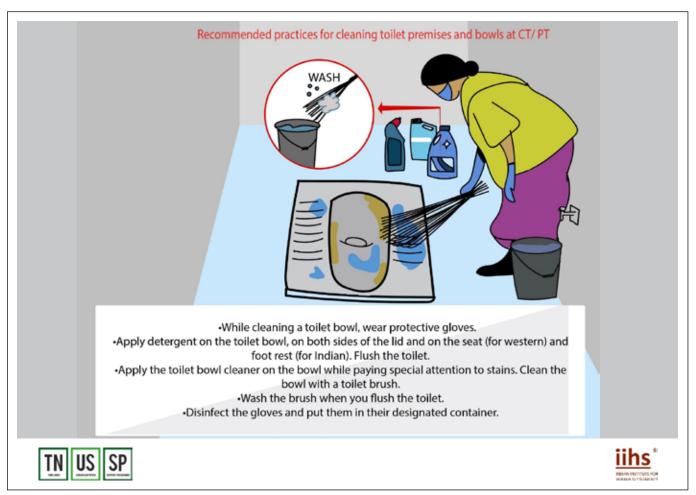


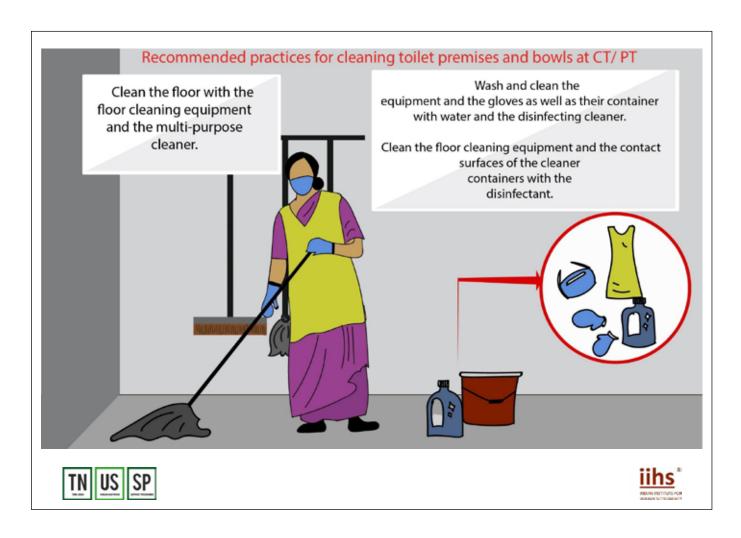




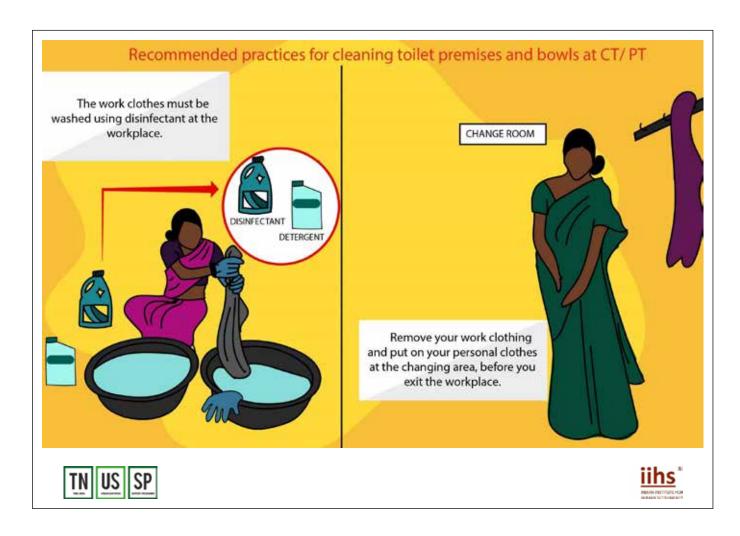




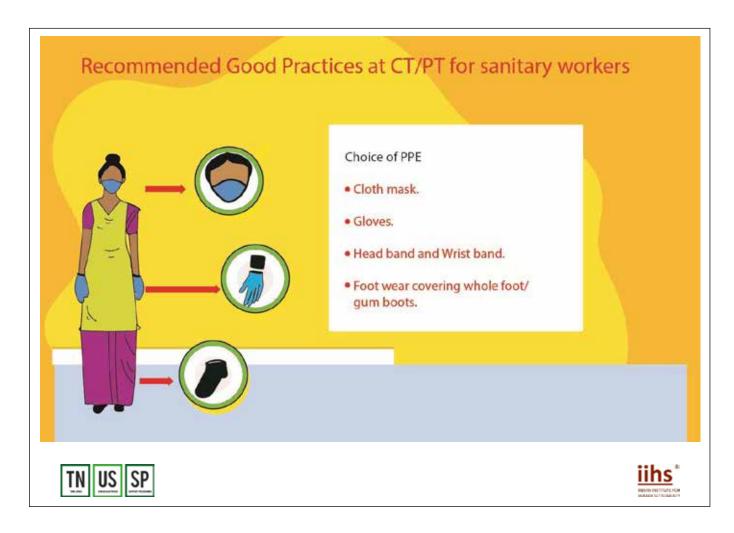
















17. Guidelines for Sanitation Workers (CT/PT) by IIHS, Bengaluru





- अपने हाथों को अल्कोहॉल-आधारति हैंड रब (हाथों पर मलने वाला तरल) या साबुन और साफ पानी के साथ रगड़कर नयिमति रूप से धोए। यद आपके हाथ गंदे दखाई दे रहे है तो साबुन और पानी का इस्तेमाल करें।

 • अपनी आंखों, नाक और मुंह को छूने से बचें।

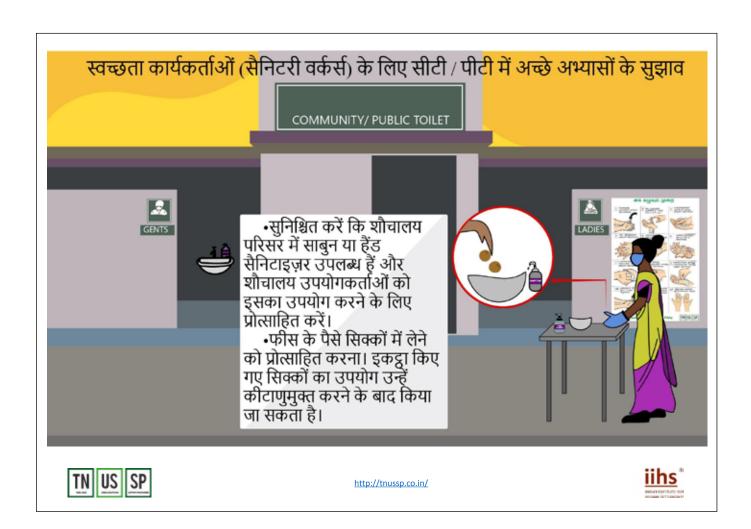
 • खांसते या छीकते समय अपना मुंह और नाक ढक लें। टिशू या
- कोहनी मोड़कर मुँह के सामने लगाकर खाँसें / छींकें और टशि को तुरत फेक दे।
- यद आपमें साँस संबंधी लक्षण है तो मेडकिल मास्क पहनें और मास्क को फेंकने के बाद साबुन से हाथ धोएं।
- साँस संबंधी लक्षणों वाले व्यक्तयों से (कम से कम 1 मीटर) शारीरिक दूरी बनाए रखें।
- बिना मतलब बाहर जाने से बर्च और लोगों के बड़े समूहों से दूर
- यद आप अस्वस्थ महस्स करते हैं तो घर पर रहें।
- चेहरा छूने से बचने के लिए मोबाइल फोन का उपयोग करते समय हेडफोन या स्पीकर फोन का उपयोग करें।



http://tnussp.co.in/















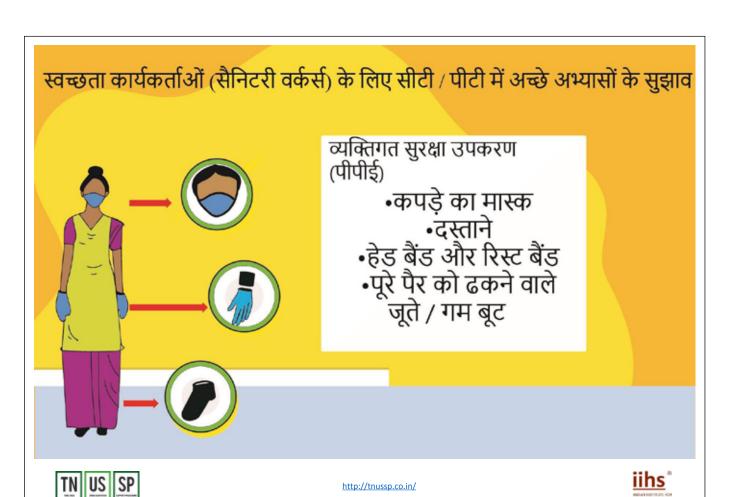






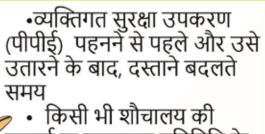








हाथ की सफाई निम्न पाँच मौकों पर ज़रूर की जानी चाहिए



र् । कसा भा शाचालय का सफाई या रखरखाव गतिविधि के बाद

•साँस से निकली किसी भी चीज़ के संपर्क् में आने के बाद

•खाने से पहले

•शौचालय का उपयोग करने के बाद





http://tnussp.co.in/

18. Social distancing at CT pictures



Source: Centre for Water and Sanitation (CWAS), CEPT University, Ahmedabad



Source: Centre for Water and Sanitation (CWAS), CEPT University, Ahmedabad



Source: Centre for Water and Sanitation (CWAS), CEPT University, Ahmedabad



Source: Centre for Water and Sanitation (CWAS), CEPT University, Ahmedabad



Source: Centre for Water and Sanitation (CWAS), CEPT University, Ahmedabad





Part C:

PREPARING FOR EMERGENCY COVID RESPONSE

CONSIDERATIONS FOR BUDGET PREPARATION FOR URBAN SANITATION



Waste management is an essential public service in response to combat with the novel coronavirus disease (COVID-19). The pandemic is continuing to spread and its impacts upon human health and the economy intensifying day-by-day, Urban Local Bodies (ULBs) are urged to treat and manage the waste, including of medical, household and other hazardous waste, as an urgent and essential public service in order to minimise possible secondary impacts upon health and the environment. Ensuring safe water supply, solid waste management, safe sanitation and hygiene practices in communities, residentials, schools, marketplaces, and health care facilities are important. When it comes to risking their lives for the protection of others, in the present times, sanitation workers are at par with doctors, healthcare workers and policemen. Sanitation workers-'SafaiYodhas' are standing in front line of the battle against this global pandemic and we need to support them with all means including protective gear, to fight this crisis.

This section provides guidance to State governments and Urban Local Bodies and any other agency working for sanitation workers safety, for developing proposals for funding for protective gear and materials for addressing COVID 19 risk. However, any proposal must conform to the Government of India and relevant State Government Advisories, hence it is important to read this section together with Part-A of this Resource Book.

Following Steps may be undertaken at the Town Level:

1. Prepare a Sanitation Workers Safety Risk Matrix

Some typical sanitation work and the risks involved is tabled below so that the ULBs and agencies identify, purchase and utilise the proactive gears in a best possible manner. An initial assessment of sanitation workers activities, hazardous events and associated severity of risk are identified arbitrary by many journals. Any more activities that are state and ULB specific, may be added or removed from this list.

Sanitation Activity	Possible Hazardous Events	Severity of the Risks Involved
Sanitary workers in hospital/ Quarantine centers	Coming in direct contact with infected patient's refuse, contaminated surfaces and infectious bio medical waste.	Very high risk
Door to Door(D2D) waste collection	Coming in contact with infected person/waste	Moderate Risk
Street sweeping	Exposure to surfaces infected through respiratory droplets	Low risk to moderate risk
Sewer and drain cleaning and Desludging of septic tanks	Coming in direct contact with excreta from infected person	Moderate risk
Community/Public Toilets cleaners/caretaker	Coming in contact with surfaces infected through respiratory droplets	Moderate to High risk
STP/ FSTP operator	P/ FSTP operator Coming in contact with wastewater carrying virus especially at screens unit and grit chambers	

2. Checklist of Priority Tasks and Actions

Planning at state level should factor in the following priorities:

	Priority	Tasks and Actions
1		Initiate State and ULB level Task Forces to coordinatework; Activate multi-sectoral, multi-partner coordination mechanisms to support preparedness and response
2		Take a stock of all permanent and contractual sanitation workers employed for Solid Waste Management (including hotspots, Hospitals and Quarantined homes), landfills, Street sweeping, sewer and drains cleaning, cleaning at market yards, haats/mandis, parks and common places, STPs and FSTPs. Identify who may need financial support if laid off by private contractors.
3		Issue Passes for sanitation workers to move across sealed boundaries and defy curfew in residential areas
4		Disseminate collaterals through What's App, for simple yet clear understanding of the COVID-19 pathogen spread and its risk and immediate safety steps to be followed by all sanitation workers
5		Prepare a list of sanitation worker's safety gears requirement. Discuss with Anganwadis, Schools, self-help groups and Health Departments, to prioritize procurement items for a given duration of requirement(3 to 6 months).
6		 Plan Sanitation work in order to minimize risk of infection 1. Teams that serve areas of a town or Colonies, that are NOT declared HOTSPOTS. 2. Teams that do routine cleaning work in public areas such as parks, streets, markets and commercial areas. 3. Teams engaged in direct contact with HOTSPOTS: Collection and treatment of waste under BMW rules, QuarantinedHomes/Hospitals/Centers

3. Preparing a budget

The time of COVID-19 pandemic is a time when the demand for protective gear has skyrocketed and the supplies have dwindled.

- Prioritize the categories of workers who require protective gear and also category wise required protective gear.
- The Government of India and various state governments have detailed out the **Essential protective gear** and this needs to be factored in the budget making process.
- Some Civil Society Organisations who possess expertise in the area of sanitation have also drafted documents highlighting the need for protective gear for sanitation workers, FSTP operators, operators of community and public toilets and other categories of workers. The protective gear specified in these documents and not found in government advisories have been considered as Desirable protective gear. Providing **Desirable protective gear** may be considered optional, if funds do not permit.

Considerations for Sanitation Workers Protective Gear and Sanitization materials:

- Protective gear must be disinfected, washed and sun dried as per guidelines issued by Govt from time to time.
- Based on the current circumstances and to ensure uninterrupted service, the items can be procured for next few months phase wise.
- For disinfection purpose Sodium Hypochlorite solution (1%) can be considered or any other material designated by the national/state govt.
- For temporary storage of Bio Medical Waste (BMW) yellow colored garbage bags can be considered.
- Mandatory orientation of Sanitation Workers and Waste pickers on COVID-19, Social Distancing norms and

key precautionary measures to be taken including frequent hand-washing, avoid touching their face and wearing Protective gears.

- List of Do's and Dont's to be practiced while performing their duties and extending necessary support to them.
- For transportation of BMW to Common Biomedical Waste Treatment Facility, Light Commercial Vehicles can be considered which can be easily maneuvered through narrow roads.

4. Budget Templates for estimating cost for protective gear and essential items

For the benefit of ULBS, NIUA has come up with a DIY Budget Template toolkit for the purpose of estimating the budget for procuring protective gear and other essential items during COVID-19 pandemic. When the required data is entered in the toolkit, the budget estimate is calculated and presented the last table. The toolkit along with the calculation can also be printed. The excel based toolkit can be downloaded here https://drive.google.com/file/d/1TGxDSreE07t4LA3l17crQzLWFA02 OhhT/view?usp=sharing. The process in the toolkit is explained below. And budget calculation for a sample town is provided in Annexure I.

Step 1 Fill the following details

Date	
Name of the ULB	
Name of the State	
Name of Contact person	
Designation	
Email ID	
Contact no.	
Current Population of the ULB	
No. of months for which Budget is to be estimated(n)	

Step 2 Kindly enter the breakup of no. of Sanitary Workers/Allied workers in each category(ignore if the particular category is not applicable for your ULB)

S. No.	Category	Estimated number of sanitary workers/allied workers requiring protective gear	Protective Gear requirement as per Gol advisories and guidelines	Relevant government guideline/ advisory
1	Sanitary workers involved in handling and collection of waste from houses of people under self-quarantine		Triple layer masks, Aprons, Nitrile gloves, Gum boots and Safety goggles	Guidelines for waste disposed from quarantine facilities, CPCB, MoEFCC and Advisory for Health and Safety of Sanitation Workers during COVID-19 by MoSJE
2	Sanitary Workers involved in Cleaning of CTs and PTs		Triple layer masks, Aprons, Gum boots and Nitrile gloves	Guidelines on disinfection of common public places including offices by MoHFW and Advisory for Health and Safety of Sanitation Workers during COVID-19 by MoSJE
3	Sanitary workers collecting waste from regular households		Triple layer masks, Aprons, Gum boots and Nitrile gloves	Additional advisory for maintaining cleanliness during lockdown period by MoHUA and Advisory for Health and Safety of Sanitation Workers during COVID-19 by MoSJE
4	Street sweepers and drain cleaners		Triple layer masks, Aprons, Gum boots and Nitrile gloves	Guidelines on disinfection of common public places including offices by MoHFW and Advisory for Health and Safety of Sanitation Workers during COVID-19 by MoSJE
5	Desludging operators		Triple layer masks, Nitrile Gloves , Aprons , Gum boots	Advisory on safe management of water supply and sanitation services during COVID-19 crisis by MoHUA
6	Workers employed at STP/FSTP		Triple layer masks, Nitrile Gloves , Aprons , Gum boots, Safety goggles	Advisory on safe management of water supply and sanitation services during COVID-19 crisis by MoHUA
7	Sanitary workers in COVID-19 Hospitals and all other Healthcare		N95 Mask, Nitrile gloves	Guidelines for rational use of PPE by MoHFW
8	Sanitary workers involved in cleaning quarantine centres		Triple layer masks, Nitrile gloves	Guidelines for rational use of PPE by MoHFW
9	Workers at Common Biomedical Waste Treatment Facility(CBWTF)		Triple layer masks, Aprons, Nitrile gloves, Gum boots and Safety goggles	Guidelines for waste disposed from quarantine facilities, CPCB, MoEFCC
	Total no. of Sanitary and allied workers to be given we protective gear			

Step 3 Kindly enter the specification, quantity requirement(in per person per month) and rates of the protective gear mentioned below as per their market/manufacturer available.

S. No.	List of consumables	Enter the specifications	Enter the required number of pieces/pairs per person per month *	Rate in Rs/item **
1	N95 face mask			
2	Triple layer masks			
3	Chemical resistant Nitrile gloves			

S. No.	List of non- consumables	Enter the specifications	Enter the required number of pieces/pairs per person per month *	Rate in Rs/item **
1	Gum boots			
2	Safety Goggles			
3	Aprons			

^{*}For eg. for mask you can go for single use surgical mask (30 masks required in 30 days) or multiple use Ng5 mask (one mask for 30 days). **Rates can be found here on GEM portal https://gem.gov.in/. For certified PPE manufacturers visit http://texmin.nic.in/covid/certificates.php.

Step 4 Enter the numbers/quantity along with rates of other essential items required. If something is left out, kindly add them along with their required quantities and rates. Kindly leave the cell empty, if not applicable.

S. No.	List of consumables	Enter the quantity required per month	Rate in Rs. *	Amount in Rs.
1	Yellow garbage bags for infectious waste storage			
2	Disinfectant (Sodium Hypochlorite solution 1l)			
3	Bleaching powder (1kg)			
4	Anything else			
5	Anything else			
		Total		

S. No.	List of non-consumables	Enter the quantity required	Rate in Rs. *	Amount in Rs.
1	Light Commercial Vehicle for transporting Biomedical waste			
2	Handwashing units			
3	Digital Contactless Infrared			
4	Anything else			
5	Anything else			
		Total		

^{*}Rates can be found here on GEM portal https://gem.gov.in/

Total Budget

S. No.	Budget estimation	Rate in Rs. lakhs
1	For Essential protective gear alone for the given number of months	
2	For Essential protective gear and essential items for the given number of months	
3	For Essential protective gear alone for 1 year	
4	For Essential protective gear and essential items for 1 year	

Annexure I

Step 1 Fill the following details

Date	29/05/2020	
Name of the ULB	Devprayag Nagar Palika	
Name of the State	Uttarakhand	
Name of Contact person	Ms. X	
Designation	Chairperson	
Email ID	X@gmail.com	
Contact no.	(+91)	
Current Population of the ULB	5000	
No. of months for which Budget is to be estimated(n)	6	

Step 2 Kindly enter the breakup of no. of Sanitary Workers/Allied workers in each category(ignore if the particular category is not applicable for your ULB)

S. No.	Category	Estimated number of sanitary workers/ allied workers requiring protective gear	Protective Gear requirement as per Gol advisories and guidelines	Relevant government guideline/advisory
1	Sanitary workers involved in handling and collection of waste from houses of people under self quarantine	20	Triple layer masks, Aprons, Nitrile gloves, Gum boots and Safety goggles	Guidelines for waste disposed from quarantine facilities, CPCB, MoEFCC and Advisory for Health and Safety of Sanitation Workers during COVID-19 by MoSJE
2	Sanitary Workers involved in Cleaning of CTs and PTs	10	Triple layer masks, Aprons, Gum boots and Nitrile gloves	Guidelines on disinfection of common public places including offices by MoHFW and Advisory for Health and Safety of Sanitation Workers during COVID-19 by MoSJE
3	Sanitary workers collecting waste from regular households	50	Triple layer masks, Aprons, Gum boots and Nitrile gloves	Additional advisory for maintaining cleanliness during lockdown period by MoHUA and Advisory for Health and Safety of Sanitation Workers during COVID-19 by MoSJE
4	Street sweepers and drain cleaners	20	Triple layer masks, Aprons, Gum boots and Nitrile gloves	Guidelines on disinfection of common public places including offices by MoHFW and Advisory for Health and Safety of Sanitation Workers during COVID-19 by MoSJE
5	Desludging operators	2	Triple layer masks, Nitrile Gloves , Aprons, Gum boots	Advisory on safe management of water supply and sanitation services during COVID-19 crisis by MoHUA
6	Workers employed at STP/FSTP	4	Triple layer masks, Nitrile Gloves , Aprons, Gum boots, Safety goggles	Advisory on safe management of water supply and sanitation services during COVID-19 crisis by MoHUA
7	Sanitary workers in COVID-19 Hospitals and all other Healthcare	10	N95 Mask, Nitrile gloves	Guidelines for rational use of PPE by MoHFW

S. No.	Category	Estimated number of sanitary workers/ allied workers requiring protective gear	Protective Gear requirement as per Gol advisories and guidelines	Relevant government guideline/ advisory
8	Sanitary workers involved in cleaning quarantine centres	5	Triple layer masks, Nitrile gloves	Guidelines for rational use of PPE by MoHFW
9	Workers at Common Biomedical Waste Treatment Facility(CBWTF)	0	Triple layer masks, Aprons, Nitrile gloves, Gum boots and Safety goggles	Guidelines for waste disposed from quarantine facilities, CPCB, MoEFCC
	Total no. of Sanitary and allied workers to be given we protective gear	121		

Step 3 Kindly enter the specification, quantity requirement(in per person per month) and rates of the protective gear mentioned below as per their market/manufacturer available.

S. No.	List of consumables	Enter the specifications	Enter the required number of pieces/pairs per person per month *	Rate in Rs/item **
1	N95 face mask		5	130
2	Triple layer masks		5	30
3	Chemical resistant Nitrile gloves		3	50

S. No.	List of non- consumables	Enter the specifications	Enter the required number of pieces/pairs per person per month *	Rate in Rs/item **
1	Gum boots		1	300
2	Safety Goggles		1	80
3	Aprons		3	150

*For eg. for mask you can go for single use surgical mask (30 masks required in 30 days) or multiple use N95 mask (one mask for 30 days). **Rates can be found here on GEM portal https://gem.gov.in/ . For certified PPE manufacturers visit http://texmin.nic.in/covid/certificates.php .

Step 4 Enter the numbers/quantity along with rates of other essential items required. If something is left out, kindly add them along with their required quantities and rates. Kindly leave the cell empty, if not applicable.

S. No.	List of consumables	Enter the quantity required per month	Rate in Rs. *	Amount in Rs.
1	Yellow garbage bags for infectious waste storage	500	2	1000
2	Disinfectant (Sodium Hypochlorite solution 1l)	50	50	2500
3	Bleaching powder (1kg)	50	50	2500
4	Anything else			0
5	Anything else			0
		Total		6000

S. No.	List of non-consumables	Enter the quantity required	Rate in Rs. *	Amount in Rs.
1	Light Commercial Vehicle for transporting Biomedical waste			0
2	Handwashing units			0
3	Digital Contactless Infrared	10	3000	30000
4	Anything else			0
5	Anything else			0
		Total	·	30000

^{*}Rates can be found here on GEM portal https://gem.gov.in/

Total Budget

S. No.	Budget estimation	Rate in Rs. lakhs
1	For Essential protective gear alone for the given number of months	2.98
2	For Essential protective gear and essential items for the given number of months	3.64
3	For Essential protective gear alone for 1 year	5.45
4	For Essential protective gear and essential items for 1 year	6.47

The total amount required for procuring the protective gears is 6.47 lakhs.

Annexure II

List of Vendors for Protective Gear

SR.	NAME OF	LOCAL/	ADDRESS	CONTACT DETAIL	LS
NO.	COMPANY	INTERNATIONAL		CONTACT NUMBER	EMAIL
1	Cabson Enterprises	Dealer of 3M, HONEYWELL, JCB, TIGER & WORKTOES and has manufactured the PPEs with S1 and SPARTAN brands (Local)	5-1-526, Hill Street, Ganji Complex 2nd Floor, Ranigunj, Secunderabad : 500 003	040-6453 9461, 09949601427	sarah. enterprises@ rediffmail.com
2	Karam	Indian Manufacturer	T-19 Towers, Block 2, Unit 901, 9th Floor, Karbala Maidan,Besides Ranigunj Bus Depot, Ranigunj ,Secunderabad- 500 003 Telangana	040-27807675, 09985953535	karam@karam. in
			5-5-51/1, 2nd Floor, SL Complex, Ranigunj, Secunderabad- 500003 Hyderabad, Telangana 500003 India	096033 05355, 097000 00708	
3	Unique Industrials	Indian Manufacturer / Local	5-1-570, Hill Street, Rani Gunj, Hyderabad-500003, Telangana (India)	8037304413	
4	Mallcom	Indian Manufacturer	EN-12, Sector-V, Salt Lake Kolkata 700 091	033-40161000	sales@ mallcom.in
5	Udyogi	Indian Manufacturer	294, B.B.Ganguly Street, 2nd Floor, Kolkata-700 012	033-2225-1470 033-2225-1471 033 2225-1472	info@udyogi. net
6	Safewell	Indian Manufacturer / Local	BP-7, Suit No. 504, 5th Floor, Ecostation, Sec-V, Salt Lake City, Kolkata – 700091, India.	033-23674444	kolkata@ acmesafety.in hyderabad@ acmesafety.in
7	Venus Safety and Health Pvt. Ltd.	Indian Manufacturer / Local	L75/76,Tondre village, MIDC, Taloja, Maharashtra, 410208.	022-27410018	info@ venusohs.com
8	3M India Ltd	International Manufacturer - India Office			
9	DuPont India Pvt Ltd.	International Manufacturer - India Office	ICICI Knowledge Park, Genome Valley, Survey No.542/2, DS -9 Turkapally(Village), Shameerpet (Mandal), Ranga Reddy(District), Hyderabad- 500078 (Andhra Pradesh)	040-66247000	
10	Honeywell Safety India	International Manufacturer - India Office	5th Floor, Unitech Trade Center, Sector 43, Block-C, Sushant Lok, Phase-1, Gurgaon 122002, Haryana	0124-4975000	hsp-india@ honeywell. com

11	Jayco Safety Products Pvt. Ltd.	Indian Manufacturer / Local	125,Neha Industrial Estate, Dattapada Cross Road, Near Su Swagat Restaurant, Borivali(East), Mumbai - 400066.	022-49791200	info@ jaycosafety. com
			82/84, 2nd Floor, Above Satkar Hotel, Masjid Bunder, Mumbai - 400 003.	022-23456395	mumbai@ jaycosafety. com
12	Uviraj Global Private Limited	Indian Manufacturer / Local	S 17-18, Panki Industrial Area, Site-IV, Kanpur, Uttar Pradesh, 208022	0512-2690031, 0032	sales@ uviraj.com, support@ uviraj.com, enquiry@ uviraj.com
13	Neo Safety Products Pvt. Ltd.	Indian Manufacturer / Local	23, N.S. Road, 6 Commercial Building 1st Floor, Kolkata - 700 001, India.	09836582791, 033-22421664	sales@ neosafety.in
14	Sairam Safety Engineers	Local Dealer	Safety House, Plot no 55, Malany Colony, New Bowenpally Road, Secunderabad, Telangana	040-42300068	info@ subhamsafety. com
15	Hi-Tech Surgical Company	Local Dealer	A-37, DSIIDC, Engineering Complex, Mangolpuri Industrial Area, Phase 1, Delhi 110083	9891116766	sales@ htscindia.com
16	Alko Plus Technosafe Pvt. Ltd.	Indian Manufacturer / Local	Plot No. 69 - 70, Sector 17, HSIIDC Industrial Estate, Bahadurgarh, Haryana - 124507	9811000742	info@alkoplus. com
17	Unicare Emergency Equipments Pvt. Ltd.	Indian Manufacturer / Local	Leslico House, 2nd Floor, Prof. V. S. Agashe Road, Dadar (W), Mumbai- 400028 (India)	022-2422 7198 / 1878 /1880	mumbai@ unicaremail. com

Source: Saniverse and others

Notes:	



National Institute of Urban Affairs

1st Floor, Core 4B, India Habitat Centre, Lodhi Road, New Delhi - 110003 Phone: 011-24617517, 24617543, 24617595, Fax: 011-24617513 Website: www.niua.org, scbp.niua.org

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