GOVERNMENT OF MEGHALAYA HEALTH & FAMILY WELFARE DEPARTMENT

ORDERS BY THE GOVERNOR

NOTIFICATION

Dated Shillong, the 21st March, 2020.

No.Health.83/2020/Pt./1: With a view to set up a response mechanism to tackle the threat of the Coronavirus disease in the State, the Governor of Meghalaya is pleased to notify the State Response Team with the following units for effective management of the Coronavirus disease as follows with immediate effect:-

SI.	Name of Unit/ Cell	Team Leader
No.		I I a lela 0.
1.	Overall coordination	Commissioner & Secretary, Health &
		F.W.Department
2.	Surveillance Unit	State Epidemiologist
3.	Call Centre Management Unit	108
4.	Human Resources Management Unit	
5.	Training and Capacity Building Unit	Health Department
6.	Material Management Unit	IEC personnel
7.	Infrastructure (Isolation ward and	Dr. A. Warr
	facilities) Management Unit	
8.	Media Surveillance, IEC Media	IEC personnel, MBDA
	Management Unit	
9.	Documentation Unit	IEC personnel
10.	Private Hospital Surveillance Unit	IDSP
11.	Expert Study Coordination Unit	IIPH
12.	Inter Departmental and Coordination Unit	Secretary & M.D.,NHM
13.	Community Level Volunteer Coordination	ASHA Coordinator
	Unit	
14.	Psychological Support Unit	Dr. Blah and Flourish
15.	Data Compilation Unit	IDSP data manager
16.	Budget and Financing Unit	Malcolm, State Finance Manager

ACTIVITIES OF VARIOUS UNITS/ CELLS

1. SURVEILLANCE UNIT

Guidelines are to be prepared for surveillance and management of corona virus disease.

The state is to support and supervise surveillance activities at district level.

A support system is to be established with SMO (WHO), where a mechanism to strengthen IDSP disease surveillance system is to be placed.

There should be daily district wise monitoring from the state level.

There should be detailed data monitoring at IDSP state unit.

Areas for inter-sectoral action need to be identified along with steps for the same.

Hospital surveillance

The conditions of symptomatic patients admitted in isolation wards of hospitals will be closely monitored and reports will be updated to hospital surveillance team. All reports will show detailed analysis.

Field surveillance

Patients discharged from hospitals will be monitored by field workers in their corresponding PHC area.

Asymptomatic travellers/ contacts will undergo home quarantine and will be monitored for 28 days by field workers and reports are to be sent to DM&HO/DSO.

Lab surveillance

DM&HO/DSO/ District Nodal Officers entrusted with sample collection will inform the lab surveillance unit before collection of sample.

Sample requisition forms are to be scrutinized before sending to National Institute of Virology, Pune

Liaison with districts and sample collection point

Lab Surveillance Unit will include SAMPLE TRACING

The unit should keep a close eye on samples sent to NEIGRIHMS, Shillong and Pune from all the districts and answer all queries regarding the sending of samples

The unit should guide the district in transportation of samples, filling formats, collecting reports and intimate to the authorities the status of result.

All samples test results are to be reported to the respective Superintendent of MCH, Deputy Commissioner, DHS,DME and Commissioner & Secretary on a daily basis.

Description	Number	Results received	Positive
Total Sample Collected			
Blood			
Urine			
Throat Swab			
Samples sent to NIV			
Pune			
Blood			
Urine			
Throat Swab			

2. CALL CENTRE MANAGEMENT UNIT

A 24*7 Control Room call centre is to be set up. Control Rooms are to be set up in the districts as well. The call centre should have 3 laptops, 3 mobiles and landline telephone facility.

All call centre operators are to be assigned a telephone and a laptop. Outgoing mobile facility should also be available for answering pending calls.

Two WhatsApp numbers are to also be made available in the disaster control management room.

Call centre supervisors are to maintain sign in/sign out sheets to keep track of operators.

Each work station should have the following items:

Headset for hands free answering

Reference materials which would have been issued upon activation of call centre operations

Necessary items such as paper, pen, pencils, registers etc..

All laptops and phones are to be set up in close proximity to power, telephone and data sockets/ ports.

MANDATES FOR CALL CENTRE OPERATORS

Maintenance of Discipline

Time Management

Documentation on all activities in the call centre

A daily consolidated report at 5 pm

To answer medical queries, logistics and administrative issues regarding health and health related problems.

Daily maintenance of second and third level call referral

Total number of call till date	No of call on Date	Case follow up till date	Cases reported on Date	Total reported fever cases
or carr till date	onDate	tili date	OII Date	1CVCI Cases

TRANSPORTATION AND AMBULANCE MANAGEMENT will also be handled by Call Centre Management Unit (EMRI)

The unit shall compile the data regarding availability of slots, training of drivers of ambulances and vehicles carrying patients from home isolation to hospital isolation facilities. The unit is to ensure that vehicles are available 24*7. All possible challenges should be addressed immediately and decisions taken at the state level can be compiled and addressed during control room meetings.

The data should be compiled in the following format:

Vehicle number	Driver	From	To	Post trip sanitization

3. HUMAN RESOURCES MANAGEMENT

HRM happens mostly at the district level but if the district requires additional support, the needs can be communicated to the state.

The team should have thorough knowledge of all district HR distribution.

HRM should also communicate with the districts regarding the optimum redistribution policies according to the needs.

HRM should maintain all details of isolation facilities and timely decisions should be made from the control room when necessary.

Data of isolation facilities should be compiled on a daily basis to ensure no shortage in any category.

4. TRAINING AND CAPACITY BUILDING UNIT

All trainings are to be done in a timely manner in all districts and data should be compiled at the state level. The state is to prepare training materials according to needs discussed in control room meetings. The manuals are to be vetted by a group of experts and should be disseminated only through the control room mail id.

Roles and responsibilities

Preparation of segment specific relevant modules

Preparation of training manuals

Dissemination of IEC materials

Preparation and dissemination of FAQs

Training for district level officers, health workers and volunteers

Conducting training and demonstration sessions

Conducting mock drills

Segment	Subject	Place	Number of persons attended
GOVERNMENT SECTOR			
1. Doctors			
2. Paramedical staff			
3. Attendants			
PRIVATE SECTOR			
4. Doctors			
5. Paramedical staff			
6. Attendants			
OTHERS			
7. ASHA			
8. Line Department staff			
9. Anganwadi teachers			
10. Ambulance drivers			

5. MATERIAL MANAGEMENT UNIT

This is to be done at the institutional level using all possible resources under the control of the Superintendent, but if greater needs arise in some situation, the state will ensure mechanism for supporting these institutions. The needs and activities are to be compiled in the district and

coordinated with state team. The state team will compile the daily activities and challenges and present the same at control room meetings. The details should include:

Date:

Institution

Items	Opening Stock	Distribution	Balance

Responsibilities of MMU:

To provide list of items required at the hospital

To monitor inventory position institution wise

To ensure supply chain management of health care and other required items

6. INFRASTRUCTURE (ISOLATION WARD AND FACILITIES) MANAGEMENT UNIT

The unit is to identify isolation places in each district for at least 50 patients.

They shall ensure that all required items in isolation ward are available.

Each district is to set up a dedicated team.

There will be trainings held for the dedicated team and other health functionaries.

The unit is to ensure that strict protocol of infection control is to be followed in all districts.

The unit is to compile the referral of contacts from field/ call centres to isolation facilities in the district.

The unit will also verify and compile the needs of additional isolation places in case of rise of numbers.

The data should be filled in the following format at the district level and compiled at the state level

-	
Date	•
Daic	

Institution:

	Describe and give data
Whether isolation ward has been identified and	
all required things are set up	
Whether the specific teams have been identified	
and trained	
No. of Doctors	
No. of Paramedical staff	
No. of attendants	
Whether stand by team has been identified and	
trained	
No. of Doctors	
No. of Paramedical staff	
No. of attendants	

Duty roster prepared	
Whether all inventory is ensured	
No. of beds	
No. of patients admitted and their details	
Infection control measures that have been taken	
and their details	
Bio medical waste disposal mechanism from the	
isolation ward	
Institution requirements details	

7. MEDIA SURVEILLANCE, IEC AND MEDIA MANAGEMENT UNIT

The unit will do surveillance of print, visual and social media with the support of State and District team.

The unit will collect information regarding demand and supply logistics, human resources etc... which have been circulated in the media and address the needs by bridging the gaps after validating the information.

The unit will do surveillance of all media being circulated pertaining to corona virus disease.

The unit will validate the information collected from the media for negative outcomes and execute timely control and preventive measures.

The unit will reply queries from the general public regarding health related events through phone numbers circulated at the state level.

There will also be timely compilation of media surveillance data at the district level.

The reporting format for cyber space monitoring is as follows:

Description	Details
Whether any misinformation has been noticed	
If misinformation has been noticed, give details	
in brief	
Whether misinformation has been reported and	
whether case has been booked	
Cases booked on date	
Total number of cases booked till date	

The unit is to prepare IEC materials which relate to preventive activities. This is to be done at the field level in order to decrease anxiety of the general public and to disseminate factual information regarding corona virus disease.

The same materials shall be disseminated to TV channels, AIR, social media etc..

Health department website is to be updated in a timely manner with regards to IEC materials.

The media will get a daily press briefing and arrangements will be made for press conferences as per direction.

The unit is to act as the media spokesperson for DHS.

Review format:

Press note	
Press brief	
Social media content dissemination	

8. DOCUMENTATION UNIT

The unit is to document all meetings related to corona virus disease at Minister, Commissioner & Secretary and DHS level.

The unit is to ensure proper communication of all decisions to Districts and Public health institutions for implementation of decisions made in the meetings.

The unit is to ensure proper communication to Control Room regarding meetings, guidelines, SOPs etc..

The unit is to compile daily activity reports by various teams.

9. PRIVATE HOSPITAL SURVEILLANCE UNIT

The unit shall compile data regarding the general public visiting private hospitals in all districts and also suspect and identify any missed out contacts(of suspected cases).

There should be good rapport ensured with private hospitals and associations.

Reporting format:

	Cumulative
Number of persons visited private hospitals	
Suspected cases/ contacts identified from 15 th	
January, 2020	

10. EXPERT STUDY COORDINATION UNIT

The unit is to work with NHM and arrange and facilitate the visits of expert agencies provided they are coming into the state with:

- Approval from the head of the institution
- Letter to Commissioner& Secretary Health and Family Welfare for the sanction of the same
 Logistical support is to be provided

The unit should be ready to give inputs regarding the present scenario and work with the state and district teams

The unit shall brief the Commissioner & Secretary, Health and Family Welfare regarding the feasibility, pros and cons of approval in each case after studying their backgrounds.

Details

11. INTER DEPARTMENTAL AND COORDINATION UNIT

The unit shall be in regular connection with all line departments like Animal Husbandry, Tourism, Police etc..

12. COMMUNITY LEVEL VOLUNTEER COORDINATION UNIT

The unit will monitor all field level activity.

Grassroots level support will be given including food kit management when more people are in quarantine. This can be done with the help of senior consultants of ASHA programme and NHM should review these activities and gaps at the daily control room meetings.

The unit is to collect information of contacts and addresses.

The unit will also prepare food kits to the contacts in Home Quarantine.

Reporting format:

Description	Details
Number of contacts under Home Quarantine	
Number of kits prepared and provided to homes where contact is in Quarantine	
Kits stock	
Kits distribution	
Kits balance	

13. PSYCHOLOGICAL SUPPORT UNIT

The unit shall arrange district/ field teams for managing post- traumatic stress related events and stress during quarantine. The activities shall be compiled and presented at the daily control room meeting.

14. DATA MANAGEMENT

The unit will utilize all Google tools to compile all the said above formats and assist in the presentation at the daily control room meetings.

The technical support of MIS manager of NHM shall be utilized for the same.

The unit shall make district specific sheets with auto consolidated compilation.

The sheets shall be dynamic and access shall be given to all state team leaders, SMD and Commissioner& Secretary

The unit shall support the districts teams for timely update of sheets in specified formats

15. FINANCE AND BUDGETING UNIT

The unit is to forsee and discuss various areas of fund requirement in order to pool resources when the need arise. Decisions regarding funds are to be made in a timely manner for smooth functioning of processes in the district and state.

(M.N.Nampui,IAS)
Secretary to the Government of Meghalaya,
Health & Family Welfare Department.

Memo. No.Health.83/2020/Pt./1-A, Copy to :-

Dated Shillong, the 21st March, 2020.

- 1. The Secretary to the Governor of Meghalaya, Shillong for kind information of Governor
- 2. The Private Secretary to Chief Minister, Meghalaya, Shillong for kind information of Chief Minister.
- 3. The Private Secretary to Deputy Chief Minister, Meghalaya, Shillong for kind information of Deputy Chief Minister.
- 4. The Private Secretary to Health Minister, Meghalaya, Shillong for kind information of Minister.
- 5. Private Secretaries to all Ministers, Meghalaya, Shillong for kind of Minister.
- 6. Private Secretary to Chief Secretary for kind information of the Chief Secretary.
- 7. The Additional Chief Secretaries/ Principal Secretaries/ Commissioners & Secretaries/ Secretaries of all the Department, Government of Meghalaya.
- 8. Director of Health Services (MI)/(MCH &FW)/(Research), Meghalaya, Shillong.
- 9. Director of Information & Public Relation for wide circulation in the Print/Electronic media

of the State.

- 10. The Director, Printing & Stationery, Shillong for publication in the Meghalaya Gazette.
- 11. The Director General of Police, Meghalaya, Shillong
- 12. All Deputy Commissioners for necessary action.

East Khasi Hills, Shillong/ West Khasi Hills, Nongstoin/Ri Bhoi District, Nongpoh / West Jaintia Hills District, Jowai / West Garo Hills District, Tura / East Garo Hills District, Williamnagar / South Garo Hills District, Baghmara/North Garo Hills, Resubelpara/South West Garo Hills, Ampati/East Jaintia Hills, Khliehriat/ South West Khasi Hills, Mawkyrwat. 13.All District Medical & Health Officers for necessary action.

East Khasi Hills, Shillong/ West Khasi Hills, Nongstoin/Ri Bhoi District, Nongpoh / West Jaintia Hills District, Jowai / West Garo Hills District, Tura / East Garo Hills District, Williamnagar / South Garo Hills District, Baghmara/North Garo Hills, Resubelpara/South West Garo Hills, Ampati/East Jaintia Hills, Khliehriat/ South West Khasi Hills, Mawkyrwat. 14. Joint Director of Health Services (MCH & FW) I/c IDSP, Meghalaya, Shillong.

15.All Administrative Department/Heads of Department.

By Orders etc.

Joint Secretary to the Government of Meghalaya, Health & Family Welfare Department

		Human Resources Managemer		Daniel de la constant
I.No	Name	Designation	Phone No	Remarks
-	A N Nampuli, IAS	Mission Director (NHM)	9436107676	
-	or Aman War	Director (MI)	9436114043	
	Or L M Pdah	Director (MCH&FW) cum Jt MD NHM	9436305792	
-	Or N Wanswett	Director (Research)	8014193035	
		Joint Director (MI)	9863066787	
-	Dr H Lyndem	Joint Director (MI)	9863063464	
	Dr Y Phira	Joint Director (MCH&FW)	9862229662	
	Dr L Challam	Assistant Director (MCH&FW)	9402132602	
8	Dr P Manners	Sr Medical & Health Officer (MCH&FW)	9436334953	
	Dr P Nongrum	Deputy Director (MI)	9863095551	
10	Dr C D Lyngdoh	State Leprocy Officer	8794001491	
11	Dr B Decruse		9863022985	
12	Dr N E Kharsohnoh	Sr Medical & Health Officer (MI)	9089327840	
13	Dr B Marak	Deputy Director (MI)	9856040001	
14	Dr P Lamare	Zonal Leprosy Officer		
		Surveillance Unit	Phone No	Remarks
SI.No	Name	Designation	9436709245	Technical Adviser
1	Dr Neelanjan Roy	WHO Meghalaya		Over All Team Leader
2	Ha I Dahi Chyrmang	State Epidemiologist	7085251352	cum Hospital Leader
		State Micribiologist	9774171069	Lab Team Leader
3	Dalamphang Kharkongor	State Epidemiologist, NPCDCS	9108768478	Field Team Leader
4	Tenneychell Khongiangjan	State Data Manager	9862715956	Surveillance Data Team Leader
5	Wandap Kupar Kharrngi	State DEO	8258020240	Member
6	Anderson Passah		9856071661	Member
7	Dr Warmingstone Dann	Veterinary Consultant	9402582815/9836078540	Assistant to Field and Hospital Leade
8	Chanbormiki Sutnga	State Programme Co-Ordinator NPCDCS	8014929261	Member
9	Shaphrang Sawkmie	HMIS Consultant	9863068989	Member
10	Joel Suchiang	Internal Auditor	9089028126	Member
11	Kamlihok Hynniewta	Administrative Assistant Programme Executive, MHIS	9615657781	Member
	Dupphidalin Lyngdoh Rngaid	THE PROPERTY OF THE PROPERTY O		

Account Executive-NHM

IEC/Enrollment Manager, MHIS

David Sylemlieh

Brandon Rymbai

Member

9436961809

		Logistic Material Management U	Init	
	Name	Designation	Phone No	Remarks
I.No		State Entomologist	9774092850	Team Leader
	Pyrishainam Mylliemngap	NVBDCP Logistic	8575018106	Member
	David Syngkon	Statistical Assistant	7005573718	Member
3	Donbor Singh Sohlang		7005306949	Member
4	Jubil Wanniang	Training Assistant	9774711258	Member
5	Kitbok Warshong	Zonal Entomologist NBVDCP	7085622981	Member
6	Famous Marbaniang	Demographer	9862194918	Member
7	Teidor Warjri	Insect Collector NBVDCP	8787451865	Member
8	B B Nonghuloo	LDA MCH&FW	8731848358	Member
9	H R Shangdiar	Typist, MCH&FW	9863318704	Member
10	W Chyrmang	Typist, MCH&FW	30033	Member
11	P K Syiemlieh	Peon MCH&FW	7308278010	Member
	Laurence Susngi	LDA MI	/3062/0010	
12	Laurence Susing.			
		Media Surveillance Unit		Remarks
	Name	Designation	Phone No	Team Leader
SI.No		District Health Education Officer, MI	9436771000/8014538245	Member
1	Smti. Cathy B. Kynta	IEC/BCC Consultant, NHM	8575026305	Member
2	Ms. Netta L. Syiem	IEC/BCC Consultant, NVBDCP	9863097760	
3	Mr. Isaiah Kharmawphlang	Assistant Director (IEC) MACS	7005166835	Member
4	Mr. W. Alexander Kharkongor	Assistant Director (SP&M)	9863097423	Member
5	Smti. Christene E. Marbaniang	Assistant Director (Doc & Pub)	8794726267	Member
6	Mr. Ajoy Lanong	PCSM, RNTCP	9856489741	Member
7	Mr. Jovial Diengdoh		7085251352	Member
8	Mr. Ha I Chyrmang	Microbiologist, IDSP	8709412524	Member
	D- Magna Chayan	Programme Officer USAID	0704200617	Member
9	Dr. Meena Chavan	DEO, NHM	8794309617	

.

No	Name	Designation	Phone No	Remarks
.No	Damien Diengdoh	Monitoring and Evaluation, NHM	9856080851	Team Leader (Monitoring & Evaluation)
		SPM (NHM)	8415902646	Team Member (Ducumentation Unit)
2	bamonlang Nongbri		7005662189	Member
3	Bryan Don	Procurement Officer	9856822516	Member
4	Adelyne Khongwir	HR Manager	8575091285	Member
5	Larry Kharbamon	Monitoring and Evaluation, NVBDCP	9774548985	Member
6	Steffi Laloo	Quality Assurance Consultant	7641043887	Member
7	Joshua Sohkhlet	Office Assistant	9774459835	Member
8	Heavenly Malngiang	DEO QA		Member
	Walter Pyngrope	DEO Cum Programme Assistant	8014933946	Member
		DEO NVBDCP	9612528472	Member
	Rila Swet	Statistical Assistant NVBDCP	9615317124	
11	Madonna Khongthorem	Stenographer	6033169733	Member
12	M kharkongor	Stenographer	8794735168	Member
13	L Syiemlieh	Steriog, and		
		Sample Tracing Unit		
			Phone No	Remarks
SI.No	Name	Designation	9774171069	Team Member
1	Dalamphang Kharkongor	State Micribiologist	9856806907	Member
2	Risbun Marbaniang	Technical Officer NVHCP	9108768478	Member
3	Tenneychell Khongiangjan	State Epidemiologist, NPCDCS		
		A 11-16		
		Call Centre Management Unit	Phone No	Remarks
SI.No	Name	Designation	9774010108	Team Leader
31.140	Dipankar Choudhury	State Head GVK EMRI	9436981818	Member
1	Kmenbhalang Khongwir	Referral Transport Co-Ordinator		Member
2		Operators	108	Member
3	Eva Sawian	Operators	108	Member
4	Junita Syiemlieh	Operators	108	
5	Isbert Tham			
		Psychological Support Unit		Remarks
		Designation	Phone No	Team Leader
SI.N		Deputy Director (MCH&FW)	9436104749	Member
1	Dr D Blah	RKSK Programme Officer	8787801130	Member
2	Flourish Lyngdoh	AH Counsellor	9774494492	Member
1 -	Smt. Christy P Najiar		9863039238	Member

		Community Level Volunteer Coordination	on Unit	
No.	Name	Designation	Phone No	Remarks
1 A	nnie Suchlang	State ASHA & CP Manager NHM	9863313791	Team Leader
2 R	lenold Nongkynrih	SPM-NUHM	9485182980	Member
3	Amy Kharlukhi	Secreterial Assistant-NHM	7005426320	Member
4	Dakaru Passah	State Programme Executive-NHM	7005100783	Member
5	Nathanial Dkhar	Finance Consultant	6009599797	Member
6	Remy Kharbteng	PMMVY Coordinator	9615577907	Member
7	Nida Ymbon	Child Health Consultant-NHM	9366617332	Member
8	Minisha Hek	Food Safety Unit-DHS (MI)	8787836793	Member
9	Suzie Diengdoh	Food Safety Unit DHS (MI)	7628861359	Member
	Shri F. Hynniewta	Artist MCH&W	8132899074	Member
		Training and Capacity Building Uni	it	Remarks
SI. No.	Name	Designation	Phone No	Team Leader
1	Dr S Kharkongor	Training Co-ordinator	9612161702	Member
2	Lanula Thangkhiew	Consultant-Training IDSP	8787778594	Member
3	Joy Pathaw	Programme Co-ordinator NMHP	8732026998	Member
<u> </u>	Meena Chavan	Programme Officer-Jhpeigo	8709412524	

		Expert Study Co-Ordination Unit		
No.	Name	Designation	Phone No	Remarks
	ondor Shylla	Epidemiologist-Co-Ordinator, IIPH	9774567798	Team Leader
	queky Mawrie	Project Officer, IIPH	7005742900	Member
	iv Sarkar	Assistant Professor, IIPH	9894084944	Member
3 1110)	TV SULKU.			
		Finance Unit		
-1 -1 -	Name	Designation	Phone No	Remarks
SI. No.		State Finance Manager-NHM	8837340779	Team Leader
	alcolm Kharshiing	Finance Accountant-NHM	9774285689	Member
	chem Rynjah	Finance Consultant-NVBDCP	9862040744	Member
3 A	ris Jerimiah Nongkynrih	Accountant- TB	7308222598	Member
	a O Law	Accountant-AYUSH	8837423592	Member
5 R	langehbok Dohtdong	Finance Associate-NHM	9862889067	Member
6 [Donlang Lyngkhoi	Accountant-NHM	9774285689	Member
7	Skhem Rynjah	Accountant-NHM Accountant-NHM	7085957184	Member
8	Albert Dkhar	Accountant-Blindness	7005445475	Member
9	Sabrina Wahlang	Finance Consultant-NPCDCS	9485391741	Member
10	Aita Malniang	Finance Consultant-IDSP	8794367182	Member
11	Sibalis Marwein	Finance Consultation		
		IT Unit		Remarks
		Designation	Phone No	Team Leader
SI. No.	Name	State MCTS Coordinator	9436105419	Member
1	Mac G.L Nongpiur	SDM-HMIS	9863117423	Member
2	H. Syiemlieh	System Analyst	9774566132	Tricinos.
3	Albert Marwein			