



CENTRAL INVESTIGATION & SECURITY SERVICES LTD

(Always sharing your concerns since past 35 years)

CISS Manual Of Revised Security Protocols Due Covid-19

***(Includes Hygiene & Sanitation Practices – New Protocols – New Equipment –
Use of PPOE – Disposal - Training & Redeployment
– New Recruitment Procedures & Stress Management)***

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(V2.0)

Executive Summary

Based on the Union Govt's Exit plan and Sector specific guidelines, most companies are likely to start at 20 – 30% capacity utilization with about 15 -20% manpower (early April 2020)

While the Companies/Manufacturing Units/ Establishments draw out plans on Social Distancing & other precautions as per the new normal, CISS has formulated its own strategy for the safety of its direct employees and would synchronise it with Client revised HSE Policy

(HSE = Health Safety & Environment)

Universally Accepted Definition Of Human Body Temperature

According to the US National Library of Medicine, the average normal body temperature is generally accepted as 98.6°F (37°C). But some studies have shown that the 'normal' body temperature can have a wide range — from 97°F (36.1°C) to 99°F (37.2°C).

A temperature over 100.4°F (38°C) is most often presumed to be fever caused by an infection or illness. The human body temperature also normally changes throughout the day.

Recommended Way of Using Human Body Temperature Scanner

The correct way to use these thermal scanners is to place the individual at a distance of 1-3 cm from the scanning device. If the person being scanned is beyond this distance, the air temperature is also factored in by the device in its reading.

This gives a false sense of comfort to the assessors and the people being scanned.

Hydroxychloroquine (HCQ)

HCQ is a prescription medicine and sale is totally prohibited without valid prescription. *To read more go to page 11.*

On using disinfectants as spray over human body

Spraying of individuals or groups is NOT recommended under any circumstances. Spraying an individual or group with chemical disinfectants is physically and psychologically harmful. *To read more go to page 12.*

Social Distancing as defined by Min of Health & Family Welfare, GoI

To read more go to page 13.

Central Govt Helpline Numbers for corona-virus: - **+91-11-23978046**

Toll Free Number 1075

(State wise helpline number *tabulated at page 10* of this manual)

**CISS recommended topics for revised security based on new HSE imperatives
(HSE = Health Safety & Environment)**

- 1. Revised End to End Protocols / Schedules for Hygiene & Sanitation from the time a worker leaves his home – what not to touch –arrival protocol – Revised Hygiene protocols at work - Revised movement & dress protocols within redefined work area – Canteen - Exit Work Place – Transportation – Material Entry & Exit (includes Salvage) – Raw material entry -**
- 2. Use of PPOE & disposal of OTU protective gear (OTU = One time use)**
- 3. From Access control – to Controlled access (Sanitised /Disinfected entry- Inducting New Equipment – Revised Material Entry Exit Protocols**
- 4. E Surveillance (Includes using CCTV – RFID – Tags – Card Readers – Sensors etc)**
- 5. Potential risk assessment and profiling of employees based on existing health history medication and daily temperature scanning to identify high risk employees**
- 6. Redefining Factory Zones for quarantining based on above**
- 7. First Aid practices for Carona Care, Introducing new containment policy**
- 8. Revised emergency practices for evacuating Carona Positive cases**
- 9. Counselling and stress mitigating initiatives**
- 10. Hygiene and sanitation rounds be intensified with reporting system**
- 11. Security Reports Communications & Content: Work from home**
- 12. Retrain & Redeploy**
- 13. Manpower Management (Motivation & Morale) boosting of the Guards**
- 14. Min of Health & Family Welfare advisories Page 10-11-12-13**

CISS Revised V2.0 Manual of Security Protocols Hygiene Schedules – Training – HRM

- 1.0 Revised End to End Protocols / Schedules for Hygiene & Sanitation**
 - 1.1 Use of Masks and Gloves by all personnel**
 - 1.2 Social distancing in Company buses & private travel - No mass Transportation**
 - 1.3 Define what not to touch. Introduce 'No touch' signage as done in aircraft cabins**
 - 1.4 Vehicle driver's cabin sterilisation with focus on areas frequently touched.**
 - 1.5 Vehicle passenger seat disinfection after every use.**
 - 1.6 Vehicle passenger cabin air disinfection & other air filters.**
 - 1.7 Disinfecting vehicle air-conditioning filters. Vacuum Cleaning.**
 - 1.8 Office cabins air disinfection and high power vacuum cleaning.**
 - 1.9 Office air sanitisation with health min. recommended antiseptic spraying.**
 - 1.01 Disinfecting air conditioner ducts and filters with antiseptic spray twice a day.**
 - 1.02 Similar protocol for all Material Handling Equipment Be it forklifters – Johnson bars – Lifting tackles – Rollers – Hydraulic load lifters -**
- 2.0 Personal Protection Occupational Equipment (PPOE)**
 - 2.1 Defining what PPE to wear in which area as would be redefined See 6.0**
 - 2.2 PPOE for high vulnerable security personnel on frisking duties – high foot fall areas – Factory Canteens - Tea counters – First Aid Centre -**
 - 2.3 PPOE for facility management assistants Security guards**
 - 2.4 Always hold minimum inescapable quantities of PPE's like Masks, Hand Gloves, Head Gear, Shoe Covers, Goggles etc. based on internal mathematical models**

3.0 Revised protocols for No Contact frisking: Guards/Lady Guards are most vulnerable when deployed on frisking duties. Introduce new protocols till new equipment is introduced by clients. as applicable to your client. Eg. Males be asked to roll down socks to show nothing is hidden at ankle level - all pockets to be turned inside out - - Remove head gear and show inner surface – tuck out his shirt etc. Roll up sleeves of full sleeved shirts

3.1 Sanitised access protocol as per GoI/ Labour Min / Health min Direct No..... dated See Helpline Nos on Page 10

3.1.1 Passage through disinfectant /sanitising tunnels only as per advisories of Min of Health & Family Welfare GoI Director General Of Health Services. As on 19th April 2020 spraying disinfectant on humans is not permitted

3.1.2 Thermal Scanners. Recording temperatures at entry and exit to identify high risk persons

3.1.3 Metal Detectors / Modified Metal Detectors / Doorframe metal detectors

3.1.4 Raw material entry protocols disinfection and isolation for 36 Hours

4.0 Surveillance Cameras & Video Analytics

4.1 Risk from unhygienic behaviours increases especially at shop floors and other sensitive work spaces as identified by Client.

4.2 Locker Room use to be closely monitored till India is declared Covid free

4.3 Assembly by employees likely to be deeply affected by implementation of change

5.0 Potential risk profiling Individuals – Social disruptions & Manpower Sourcing Details

5.1 Medical history + address of our manpower i.e. both existing & new recruits.

5.2 Maintenance of Personal Data, in terms address, NOK contact details, blood group

5.3 Daily temperature recording and profiling identifying high risk individuals

5.4 Monitoring employees found positive or high risk or sections to be laid off

6.0 Redefining Factory Zones for quarantining

6.1 Defining manpower in Red Yellow & Green quarantine based on 5.0 above

6.2 Creating temporary random testing areas to create potential risk assessment

- 7.0 First Aid practices for Carona Care, Introducing new containment policy**
 - 7.1 Get all deployed tested for identifying asymptomatic cases as per Company policy**
 - 7.2 Demarcate temporary local containment zones for security guards living hostel**
 - 7.3 Immediately contact local health authorities to shift positive cases to Hospital**
 - 7.4 Ensure essential supplies for such demarcate areas build it into the contract**
- 8.0 Revised emergency practices for evacuating Carona Positive cases**
 - 8.1 Evacuation of a confirmed case be done by fully trained guards in case health workers are not available. Need to train all guards.**
 - 8.1.1 Guards earmarked for such emergency evacuation must be in full gear PPE.**
 - 8.1.2 Vehicle used for such evacuation should be fully sanitized as per Health Ministry's orders. Consult govt Hospital superintends for advise**
 - 8.1.3 Post evacuation of a confirmed case, guards involved would be required on a quarantine. Latest medical bulletins will have to be compiled**
- 9.0 Counselling and stress mitigating initiatives**
 - 9.1 Explain Risks & Consequences to all security staff post recruitment. Awareness increase to be undertaken without creating panic or fear in minds of new recruits. Undertake regular education session. Do constructive use of Social Media.**
 - 9.2 Stress levels in migrant workers will be high; constant dialogue and monitoring for any significant behaviour change**
 - 9.3 Provide data cards for key personnel as per local consideration**
 - 9.4 SO/Supervisors/Field Officers be tutored to motivate migrant workers highlighting measures of safety & well being and how to assure their families at their native towns/villages. What not to say**
 - 9.5 State Govts & Min of Health & Family Welfare, have 24 hour helplines. [See page 10.](#)**
 - 9.6 Advise guards & staff not to self medicate. HCQ is a scheduled drug. [See page 11.](#)**
 - 9.7 Please sensitise guards not to spread disinfectants spray on humans. [See page 12.](#)**
- 10.0 Introducing / intensifying hygiene and sanitation with structured reporting system**
 - 10.1 Make guards practice personal Hygiene, Washing clothes & Sanitization**
 - 10.2 Defaulters/Offenders to be counselled of violation of Disaster Management Act**
 - 10.3 Draw up Company escalation matrix for reporting Covid emergencies at all posts**
 - 10.4 Conduct live demos of simulated emergencies as part of Roll Call briefing**

11.0 Security Reports Communications & Content: Work from home

11.1 Keep data of Client cell phone numbers and email addresses of all departments.

11.1.1 Update email signature to include your cell phone number and photo.

11.2 Ensure access and understanding of collaboration tools (including instant messaging and conference bridges).

11.3 Pro-actively engage with the Client through mails & virtual meetings

11.3.1 Update meeting invites with the remote collaboration tool.

11.3.2 Test technology before meetings to ensure functionality.

11.3.3 Check out home internet connection; find an alternative in the case it is defective (i.e., hotspot, approved public space with secure Wi-Fi).

11.3.4 Order hardware to support remote work, if necessary.

11.3.5 Develop, online audio-visual e training content, that can be disseminated through mobile phones to the guards on ground.

11.3.6 Acknowledge emails when received promptly, indicate a tentative resolution time, and follow up accordingly.

11.3.7 Be extra proactive, clear and detailed in email communication.

11.3.8 Recognize when an email will not be productive (e.g. complex issues, multi department sensitive topics) and then organise a phone call or arrange con call meetings.

11.3.9 In case we don't have a solution, direct people to relevant team members with their contact details

12.0 Retrain & Redeploy

12.1 Aim to bring about a behavioural change to deal with the new normal, amongst your guards. Make it part of the training curriculum.

12.2 Guards Training Curriculum (Includes points for estate management) : -

12.2.1 Audio Visual Clip of about 4-5 minutes to include: -

- (i) No touch/contact frisking as detailed above**
- (ii) Correct wearing/usage of PPE**
- (iii) Disposal/washing/sanitization of PPE post use**
- (iv) Plastic re-useable PPE washable after use be issued**
- (v) Hand Washing Sanitising Techniques**
- (vi) Refraining from touching face/eyes**
- (vii) Enforce Social distancing at the time of mustering in & out**
 - a. In workers canteens**
 - b. At Shop Floor**
 - c. During Material Handling operations**

- d. At Ware Houses when large numbers of labour is used
- e. Factory Buses – Private vehicles of employees & visitors
- f. Material Trucks, Drivers & cleaners
- g. Contract Workers, House Keeping etc

- (viii) No shaking hands
- (ix) Social distancing at living-in quarters with regular sanitizations
- (x) Isolation/Quarantine zones in residential premises of factory
- (xi) Wearing of masks at all times immediately on leaving homes
- (xii) All items Groceries, Milk, Vegetables to be sanitized while doing home delivery
- (xiii) Minimise use of Cash (high contact articles)
- (xiv) Use of CC/DC, Paytm, Google Pay, UPI to be encouraged

12.3 New recruits to be screened thoroughly

12.3.1 Introduce following changes to the recruitment processes.

12.3.1.1 Include medical + travel history to /from govt defined Hot Spot areas

12.4 Field Officers need to be specially trained on the above aspects and Clients familiarized through a common mail.

12.5 Security Guards will largely be used by Companies to enforce & monitor Social Distancing within the work place. Cater for additional manpower.

12.5.1 Specially amongst the socially disadvantaged who are educationally challenged in category like contract labour, daily wagers, truck drivers, cleaners, loaders, etc.

12.5.2 Also, Security Guards will be used to demonstrate the SD norms to the environment in the work place.

12.5.3 Tasks related to new Hygiene, Sanitation, Disinfection norms, under the new post Covid regime, may be given to the Security Personnel, as they are deployed 24*7.

12.6 Undertake train the trainers programme. Special points to be covered are :-

12.6.1 Restrict movement of guards post duty & monitor the same .

12.6.2 Arrange door step delivery of essentials at guard hostels.

12.6.3 Implement zero tolerance ban on chewing of Gutka, Pan Masala

12.6.4 Train Field staff on standard text messaging, whatsapp, e mails

12.6.5 Identify key support / frontline Staff . Issue Laptops & phone data

12.7 Create data banks of Contacts & Mail ID's in respect various verticals of each client

13.0 Manpower Management (Motivation & Morale)

13.1 Plan leave for all migrant guards & staff on relaxation of the lockdown, cater for replacements in advance.

13.2 Clients may be forced to resort to reduction in duties. Prepare SGs for 12 hour shifts.

13.2.1 Raise a reserve pool from laid off manpower for contingencies.

13.2.2 Create a mutually beneficial trade-off between laid off workers & companies seeking additional manpower

13.2.3 Enhance sourcing local manpower which may become available due large-scale un-employment.

13.2.4 Employ qualified people if available, and retrain for higher skill demands sought by clients requiring to implement new protocols

13.2.5 Create new upskilling programmes as per job definitions given by client

14.0 Govt Advisories

14.1 If you or any one you see have symptoms like cough, fever or difficulty in breathing avoid any kind of exposure and immediately call the helpline numbers as applicable to your State. Stay Calm . Do not Panic . Page 10

14.2 Information on use of medication Hydroxychloroquine (HCQ). Page 11.

14.3 Advisory against spraying disinfectants on humans for Covid Mgt. Page 12.

14.4 Social distancing as defined by Min of Health & Family Welfare. Page 13

*If you or any one you see have symptoms like cough, fever or difficulty in breathing,
avoid any kind of exposure and immediately call the helpline numbers*

Central Govt Helpline Numbers for corona-virus: - +91-11-23978046

Helpline Numbers of States & Union Territories (UTs)

S. No	Name of the State	Helpline Nos.
1	Andhra Pradesh	0866-2410978
2	Arunachal Pradesh	9436055743
3	Assam	6913347770
4	Bihar	104
5	Chhattisgarh	104
6	Goa	104
7	Gujarat	104
8	Haryana	8558893911
9	Himachal Pradesh	104
10	Jharkhand	104
11	Karnataka	104
12	Kerala	0471-2552056
13	Madhya Pradesh	104
14	Maharashtra	020-26127394
15	Manipur	3852411668
16	Meghalaya	108
17	Mizoram	102
18	Nagaland	7005539653
19	Odisha	9439994859
20	Punjab	104
21	Rajasthan	0141-2225624
22	Sikkim	104
23	Tamil Nadu	044-29510500
24	Telangana	104
25	Tripura	0381-2315879
26	Uttarakhand	104
27	Uttar Pradesh	18001805145
28	West Bengal	1800313444222, 03323412600,
S. No	Name of Union Territory (UT)	Helpline Nos.
1	Andaman and Nicobar Islands	03192-232102
2	Chandigarh	9779558282
3	Dadra and Nagar Haveli and Daman & Diu	104
4	Delhi	011-22307145
5	Jammu & Kashmir	01912520982, 0194-2440283
6	Ladakh	01982256462
7	Lakshadweep	104
8	Puducherry	104

Information on use of necessary medicines for Covid -19

Hydroxychloroquine (HCQ)

Ministry of Health & Family Welfare Directorate General of Health Services (EMR Division)
issued this clarification on 18 Apr 20220

1. Hydroxychloroquine (HCQ) is a prescription medicine and its sale is totally prohibited without a valid prescription by a doctor.

2. **It is harmful to consume HCQ without prescription as it may have adverse effects on your health**

3. Adequate quantities of HCQ have already been procured for the following categories:

1st Category: Patients who have been clinically advised

2nd Category: Health workers at risk due to their direct contact with COVID-19 patients

3rd Category: Household contacts of confirmed COVID-19 cases

(HCQ is only for the above mentioned categories and not for general public)

Advisory against spraying of disinfectant on people for COVID-19 Mgt

Ministry of Health & Family Welfare Directorate General of Health Services (EMR Division)

issued this clarification on 18 Apr 20220

Ministry of Health & Family Welfare has received many queries regarding the efficacy (if any) **of use disinfectants such as Sodium hypochlorite spray used over the individuals to disinfect them.** The strategy seems to have gained a lot of media attention and is also being reportedly used at local levels in certain districts/local bodies.

Purpose of the document : To examine the merit of using disinfectants as spray over human body to disinfect them from COVID-19 and to provide appropriate advisory

Disinfectants are chemicals that destroy disease causing pathogens or other harmful microorganisms. It refers to substances applied on inanimate objects owing to their strong chemical properties.

Chemical disinfectants are recommended for cleaning and disinfection only of frequently touched areas/surfaces by those who are suspected or confirmed to have COVID-19.

Precautionary measures are to be adopted while using disinfectants for cleaning – like wearing gloves during disinfection.

In view of the above, the following advisory is issued:

- Spraying of individuals or groups is **NOT RECOMMENDED** under any circumstances. Spraying an individual or group with chemical disinfectants is physically and psychologically harmful.
- Even if a person is potentially exposed with the COVID-19 virus, spraying the external part of the body does not kill the virus that has entered your body. Also there is no scientific evidence to suggest that they are effective even in disinfecting the outer clothing/body in an effective manner.
- Spraying of chlorine on individuals can lead to irritation of eyes and skin and potentially gastrointestinal effects such as nausea and vomiting. Inhalation of sodium hypochlorite can lead to irritation of mucous membranes to the nose, throat, respiratory tract and may also cause bronchospasm.
- Additionally use of such measures may in fact lead to a false sense of disinfection & safety and actually hamper public observance to hand washing and social distancing measures.

Social Distancing as defined by Min of Health & Family Welfare, GoI

Observe social distancing at all times

1. **Keep at least 1 metre distance in market places, medical stores, hospitals, etc.**
2. **Have patience and keep calm while shopping for essential goods/medical supplies**
3. **Avoid frequent trips to the market to buy groceries/medical supplies**
4. **Avoid shaking hands and hugging as a matter of greeting**
5. **Avoid non-essential social gatherings at home**
6. **Don't allow visitors at home or visit someone else's home**

If you have symptoms like cough, fever or difficulty in breathing, avoid any kind of exposure and immediately call the helpline numbers