

DO. No. V.11025/102/2021-MEP
18th January, 2022

वी. हेकाली झिमोमी, भा.प्र.से.
संयुक्त सचिव

V. Hekali Zhimomi, IAS
Joint Secretary

Dear Sir/Madam,

Please refer to the DO letter Ministry dated 10.08.2021 (copy enclosed) in regard to re-emphasise that all the States/ UTs may put in priority action to ensure strengthening of skill building facilities including skill laboratories of medical colleges for timely training of the healthcare workers.

2. A list of clinically oriented lessons and the recommended basic training infrastructure requirements for hands on training in healthcare facilities and skill labs/ simulation centres, were appended in the stated letter as Annex III and II respectively. All States and UTs are strongly recommended to ensure strengthening of the skill laboratories at medical colleges/ simulation centres and healthcare facilities specifically DCH, to enable timely hands-on training of the health workers aligned to requisite job desired of them.

3. A subsequent advisory by the National Medical Commission dated 19.08.2021 (copy enclosed) was also sent in this regard to all the medical colleges to enable the skill trainings. Optimal utilisation of the available resources may be ensured through technical support/ guidance of medical colleges and their skill labs or other institutes in the States as most suitable.

4. In view of the exponential increase in number of COVID cases and as also highlighted in DO letter of this Ministry dated 07.01.2021 (copy enclosed), it is strongly recommended that the States/ UTs may ensure that every healthcare worker deployed for COVID care takes online lessons via iGOT Diksha platform and subsequently obtain onsite skill training through their hands on training centres, as per their role in COVID care and management, as best determined by the States and UTs. More than 115 courses are already available on iGOT (<https://diksha.gov.in/igot/>) and more are being processed in expedited manner.

5. While weekly reports on online training (State wise) is being reviewed by this Ministry, it is strongly recommended that States and UTs must ensure hands on training of all the health workers and leave no stone unturned for an effective response to mitigate the COVID surge.

Yours sincerely


(V. Hekali Zhimomi)

Enclosed: As above

To

Additional Chief Secretary/ Principal Secretary/ Secretary (Health & Family Welfare)/ Director (Medical Education), All States/ UTs.

Copy to:-

The Secretary, NMC (with a request to circulate the same to Deans of all medical colleges, All States/ UTs)



राजेश भूषण, आईएएस
सचिव

RAJESH BHUSHAN, IAS
SECRETARY



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

D.O. No V.11025/102/2021-MEP
10 August 2021

Dear Chief Secretary,

The importance of training of human resources engaged in COVID-19 management cannot be over emphasized. The States/UTs have taken a number of steps in this regard over the last year and a half. In order to guide and assist the States further, the Central Government had constituted an Empowered Group-3 (EG-3) with a mandate to look at augmenting of human resources and capacity building. For efficient management of COVID cases in any future surge scenario, the EG-3 has recommended adequate training and skilling of human resources deployed at all levels of care i.e. Community level, COVID Care Centers (CCC), Dedicated COVID Health Centers (DCHC) and Dedicated COVID Hospitals (DCH) across the country.

2. A detailed Skill and Course matrix (**117 lessons incorporated into 21 broad modules**) indicating basic necessary courses which need to be taken by professionals/ healthcare workers before being deployed for COVID care duty has been developed and is being enclosed (**Annexure-I**). These trainings (as enlisted at Annexure-II) shall be disseminated through the iGOT Diksha online platform. To make the training content more reachable and widely acceptable, the States/UTs are requested to undertake expedited translation of developed material into local languages and share the translated material for uploading on iGOT platform. The States may also host these training courses on other online platforms or Learning Management Systems for wider dissemination.

3. Further, to ensure blended learning and practical exposure, the States are advised to set up a basic skill lab/ simulation centers, preferably at each DCH or the nearby Medical College, for hands-on training and certification of all healthcare workers in requisite jobs required of them. Broad recommendations for basic training infrastructure requirements that may be made available by the States in this regard is enclosed at **Annexure-II**. The list of lessons to be taken up for onsite training is enclosed at **Annexure-III**.

4. To facilitate the States/UTs, weekly interactive sessions led by National Experts may be held from 3rd week of August, 2021 onwards. A theme-wise calendar is also being created (*Adult COVID content, Paediatrics, Neonatology, Obstetrics, Nursing, AYUSH, Allied and Healthcare professionals and Dental, and Community and Front-Line Workers*) and will be shared with the States/UTs through the Ministry and AIIMS (Delhi) websites. States may adopt and disseminate this calendar widely for maximum participation of health workers and front-line staff in trainings.

5. The States/UTs may ensure that the health care workers with clinical roles access the online training content through the identified training portals and subsequently also obtain onsite skill trainings through their respective centre, as best determined by the States/UTs.

....contd/-

6. The above training support is in addition to the efforts being carried out by the States/UTs. The States/UTs are advised to continue the training efforts at their end and also expand the same using the matrices and courses offered centrally. The States/UTs may endeavour that all healthcare workers deployed for COVID management may undertake necessary training.

7. I am sure; your State/UT will take immediate action on the above suggested measures. The following National Experts who are also members of EG-3 may be contacted to take this initiative forward in the State/UT.

- i. Dr. Ashok Deorari, Professor & HoD, Pediatrics, AIIMS, Delhi (Mobile No. - 09818131391; E-mail - ashokdeorari_56@hotmail.com)
- ii. Ms. Kavita Narayan, Technical Adviser, HRH Cell, MoHFW (Mobile No. - 09650002244; E-mail - narayan.kavita@nic.in)

Warm Regards.

Yours sincerely



(Rajesh Bhushan)

Encl: As stated above

Chief Secretary/Administrator of all States / UTs

Copy to : Additional Chief Secretary / Principal Secretary / Secretary (Health)
All States / UTs

Annex I : COVID Profession and Level Matrix

[illegible]

Annex I : COVID Profession and Level Matrix

[illegible]

[illegible]

Annex I : COVID Profession and Level Matrix

Modules	Skills/ Sub-modules	Online module training	Face to face training	Specialist Doctors		MBBS Doctors		MBBS interns (for all facilities)/ Final year students (only at CCC)		Dental Doctors		Ayush Doctors (supervised at all levels/ AYUSH PG students (only at CCC) including CHOs)		Nurses		Allied and Healthcare Professionals- PT/ OT/ RT/ PA*		Skilled Workers - General Duty Assistants/ Ambulance Drivers/ Sanitation Workers		Administrators (including MS)/PH Specialist/ PHN/ Health Information/ Hospital Administrators / Media personnel		Lab professionals/ Pharmacist/ Psychologist	Frontline Health Workers**	Volunteers**	Families and General citizen		
				DCH	DCHC	CCC	DCH	DCHC	CCC	DCH	DCHC	CCC	DCH	DCHC	CCC	DCH	DCHC	CCC	DCH	DCHC	CCC	Community	Facility/ Community	Community	Community	Community	Community
Paediatric Life Support	Pediatric BLS	✓	Yes	+	+	-	+	+	+	+	+	-	+	+	+	+	+	+	-	-	-	-	-	-	-	-	
	Pediatric ALS	✓	Yes	+	+	-	+	-	-	-	-	-	-	-	+	-	-	-	-	-	-	-	-	-	-	-	
Care of Pregnant women with COVID 19 (in FLW only applicable for ANMs)	Optimising Antenatal Care in Covid Pandemic : Covid Negative women	✓	NA	+	+	-	+	+	+	-	-	-	-	-	+	+	-	-	-	-	-	-	-	-	-	-	
	Optimising Antenatal Care in Covid Pandemic : Covid Positive women	✓	NA	+	+	-	+	+	+	-	-	-	-	+	+	+	-	-	-	-	-	-	-	-	-	-	
	Labour and Delivery in women with suspected or confirmed Covid infection	✓	Yes	+	+	-	+	+	+	-	-	-	-	+	+	+	-	-	-	-	-	-	-	-	-	-	
	Postnatal Care during Covid Pandemic	✓	NA	+	+	-	+	+	+	-	-	-	-	+	+	+	-	-	-	-	-	-	+	-	-	-	
	Family Planning Services in Covid Pandemic	✓	NA	+	+	-	+	+	+	-	-	-	-	+	+	+	-	-	-	-	-	-	+	-	-	-	
	Abortion services in Covid Pandemic	✓	Yes	+	+	-	+	+	+	+	-	-	-	+	+	+	-	-	-	-	-	-	-	-	-	-	
	Management of Mild Covid Infection in Pregnancy	✓	NA	+	+	-	+	+	+	-	-	-	-	+	+	+	-	-	-	-	-	-	+	-	-	-	
	Management of Moderate and Severe disease in pregnancy	✓	NA	+	+	-	+	+	+	-	-	-	-	+	+	+	-	-	-	-	-	-	-	-	-	-	
	CPR in pregnant women	✓	Yes	+	+	-	+	+	+	+	-	-	-	+	+	+	-	-	-	-	-	-	-	-	-	-	
	Positioning and awake proning in pregnant women	✓	Yes	+	+	-	+	+	+	+	-	-	-	+	+	+	-	-	-	-	-	-	-	-	-	-	
	Fetal concerns in management of Covid infection in pregnancy	✓	NA	+	+	-	+	+	+	+	-	-	-	+	+	+	-	-	-	-	-	-	-	-	-	-	
	Common COVID complications (intrapartum and post-partum)	✓	NA	+	+	-	+	+	+	+	-	-	-	+	+	+	-	-	-	-	-	-	-	-	-	-	
Post discharge care	Post discharge care	✓	NA	+	+	-	+	+	+	-	-	-	+	+	+	+	+	+	-	-	-	-	-	-	-	+	
	Discharge teaching and follow-up	✓	NA	-	-	-	+	+	+	-	-	-	+	+	+	+	+	+	-	-	-	-	-	-	-	-	
Physiotherapy and rehabilitation	Chest Physiotherapy and airway clearance techniques in COVID patients	✓	Yes	-	-	-	-	-	-	-	-	-	-	-	-	+	+	+	-	-	-	-	-	-	-	-	
	Mobilization techniques and rehabilitation of COVID patients	✓	Yes	-	-	-	-	-	-	-	-	-	-	-	-	+	+	+	-	-	-	-	-	-	-	-	
Supportive clinical care during COVID	Aspects of Dental care and COVID-19	✓	No	-	-	-	-	-	-	+	+	-	-	-	-	+	-	-	-	-	-	-	-	-	+	-	
	Pulmonary rehabilitation/ respiratory care in COVID-19.	✓	No	-	-	-	+	+	+	-	-	-	+	+	+	+	+	+	-	-	-	-	-	-	-	-	
	Diagnostic Radiology considerations and COVID-19	✓	No	-	-	-	+	+	+	-	-	-	-	-	-	+	-	-	-	-	-	-	-	-	-	-	
Biomedical waste management COVID 19 specimen collection and testing	ADL skills and energy conservation strategies	✓	No	-	-	-	+	+	+	-	+	+	+	+	+	+	+	+	-	-	-	-	-	-	-	-	
	Biomedical waste management	✓	NA	+	+	-	+	+	+	+	+	-	+	+	+	+	+	+	+	+	-	+	+	+	+	-	
	Taking Nasal Swabs	✓	Yes	+	+	-	+	+	+	-	-	-	+	+	+	+	-	-	-	-	+	+	-	-	-	-	
	Rapid Antigen Tests	✓	No	+	+	-	+	+	+	-	-	-	+	+	+	+	+	+	+	+	-	+	+	+	+	-	
	Sample collection for Covid in a child	✓	Yes	+	+	-	+	+	+	-	-	-	+	+	+	+	+	+	+	+	-	+	+	+	+	-	
	COVID 19 Lab testing and analysis (Lab professionals and ANMs only)	✓	Yes	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	+	+	-	-	-	

Annex I : COVID Profession and Level Matrix

[illegible]

* Physiotherapist and Occupational Therapist (PT)/ Operation Theatre Technologist (OT)/ Respiratory Technologist (RT)/ Physician Assistant (PA)

Frontline Health Workers include • Community health workers such as ASHA, ASHA Facilitators, ANM, AWW, Multipurpose Health Worker [NOTE: Medical Officer, Community Health Officers and Nurses at community level are considered under MBBS/AYUSH doctors and Nurses respectively at CCC level]

*** **Volunteers include:** (1) All Youth Volunteers including NCC cadets, NYKS and NSS, (2) All other volunteers- Panchayat Secretary, Gram Rozgar Sewaks, DDU-GKY and DAY NULM trained workers (3) Essential service and support staff- Police and security personnel, Post office workers, RWA, drivers and

other delivery staff (4) NGOs (5) Trained Community Volunteers/ representatives of VHSNCs/Mahila Arogya Samitis, Jan Arogya Samitis, Panchayati Raj Institution and Urban Local Bodies)

Basic training infrastructure requirements for district hospital/ Dedicated COVID Centre^{i, ii, iii}

The training room shall fulfill the requirements of training for activities to be undertaken at the facility. Minimum recommended requirements are as under:

- A minimum of one separate skill demonstration room with two beds, such that the skills could be demonstrated and practiced individually or in groups
- The room should also be used for assessment of inductees
- The room may be equipped with a facility for video recording and review,
- A review or debriefing area,
- Adequate storage space for mannequins and/or other equipment may be provided in a safe area, within this space itself, if possible
- Basic equipment may include CPR and mannequins, injections, IV lines, catheters, intubation equipment etc.
- Where possible, existing equipment or resources may be utilised to reduce set up and maintenance cost

Broad recommendations for facility wise service oriented basic equipment and Trainer requirements are as under:

I. Dedicated COVID Hospitals (DCH)-

1. Ventilator machine, preferably of the make and model as one being used in the facility
2. Oxygen cylinders and Concentrators with all accessories and attachments
3. Supply mechanism of medical oxygen around the facility, pipes, regulators, control rooms; visit to PSA plant if there's one in the facility
4. Patient care accessories including injections, IV lines, intubation tubes, catheters, IV line, Catheters, Pulse oximeter, Infusion pump, Portable ECG machine, BP machine, Portable ultrasound machine, point of care testing equipment etc.
5. Bed-side nursing assistance and care provisions like bed pan, bed linen, pillows, patient gowns
6. Laboratory sample collection and transportation apparatus
7. Breathing Simulators
8. CPR and Advanced mannequins
9. PPE coveralls

Potential trainers can be retired Doctors and specialists (any including Physicians, Intensivists, Anesthesiologists with extensive experience) or available Doctors with extensive experience, Critical Care Nurse Practitioners, Respiratory Therapists and Physiotherapist, with adequate and extensive experience in handling critical equipment.

II. Dedicated COVID Health Centers (DCHC)-

1. Oxygen cylinders and Concentrators with all accessories and attachments
2. Patient care accessories including injections, IV lines, intubation tubes, catheters, IV line, Catheters, Pulse oximeter, BP machine, point of care testing equipment etc.
3. Bed-side nursing assistance and care provisions like bed pan, bed linen, pillows, patient gowns
4. Laboratory sample collection and transportation apparatus
5. CPR and Advanced mannequins
6. PPE coveralls
7. Contact details of Ambulances linked with the facility, DCH linked with the facility
8. User manuals on Biomedical Waste Management, Transfer Procedures.

At DCHC level Trainers could include experienced Medical Officers, senior Staff Nurses, Respiratory Therapists and Physiotherapist.

III. COVID Care Centers (CCC)-

1. Oxygen cylinders and Concentrators with all accessories and attachments, Oximeter and BP machines
2. PPE coveralls
3. Checklists for periodic follow-up and evaluation of patients' status
4. Awareness generation material on Biomedical Waste Management, Transfer Procedures, Importance of hygiene, sanitation and COVID Appropriate Behaviour during the pandemic
5. Contact details of Ambulances linked with the facility, DCHC/ DCH linked with the facility

At CCC level care practical training could engage Medical Officers (MO) specifically for point 1 and 3 rest can be done by experienced AYUSH practitioners, senior Staff Nurses, Emergency Medical Technicians, Counselors and Local Administrators for coordination and reporting like responsibilities.

ⁱ[https://www.nmc.org.in/wp-](https://www.nmc.org.in/wp-content/uploads/2019/08/Guidelines_Development_Skills_Labs_MedicalColleges.pdf)

[content/uploads/2019/08/Guidelines_Development_Skills_Labs_MedicalColleges.pdf](https://www.nmc.org.in/wp-content/uploads/2019/08/Guidelines_Development_Skills_Labs_MedicalColleges.pdf)

ⁱⁱhttp://nhm.gov.in/images/pdf/programmes/maternal-health/guidelines/SKILLS_LAB_TRAINING_MANUAL_FACILITATOR.pdf

ⁱⁱⁱhttps://nrhm.gujarat.gov.in/images/pdf/skills_lab_operational_guidelines.pdf

Annexure - III

List of Clinical Topics/lessons requiring Skill Assessment/On-site Evaluation*

Sr No	Topics/Lessons
1.	Triage and casualty management
2.	Oxygen therapy- Oxygen sources, Oxygen delivery by mask/cannula, Oxygen monitoring and minimizing wastage
3.	Use of BiPAP and HFNO
4.	Invasive ventilation
5.	Advanced Clinical Management of COVID-19 of SARI, ARDS and Septic Shock
6.	Managing fluid and electrolyte balance of COVID patients
7.	COVID Drug Therapy
8.	History Taking, physical examination and monitoring vitals- BP/ Saturation/ EKG/ End tidal CO ₂ / Transducers / Venous access/ RT, Foley's, ABG sampling/ ET Suctioning / Early warning score/ Patient record
9.	Basic CPR
10.	Advance CPR
11.	Positioning and Awake proning
12.	ICU care and ventilated patients- --Lung protective ventilation, --positioning, --prevention of bed sore, --care of endotracheal tube or tracheostomy
13.	Ambulation of COVID patients- intra hospital transfers
14.	Use of point of care tests and equipment: --IV/ Catheterization --Pulse Oximeter --Infusion pump --Intubation - red flags for intubation and support --ECG --Ultrasound in critically ill patients
15.	Personal care and bed side assistance
16.	Covid testing in neonates
17.	Resuscitation and delivery room care of neonates born to Covid mothers (Early skin to skin care, Early initiation of breastfeeding, Delayed cord clamping)
18.	KMC for LBW infants born to Covid mothers
19.	Management of COVID illness in neonates: Oxygen therapy
20.	Management of COVID illness in neonates : Respiratory assistance
21.	Management of MIS-C
22.	Referral and pre-referral stabilization and transport
23.	Paediatric Respiratory therapy: Oxygen therapy- different methods, incl NRBM; Use of MDI with spacer
24.	HHHFNC (paediatric)
25.	Mechanical ventilation: non-invasive and invasive(paediatric)
26.	Intravenous fluid therapy(paediatric)
27.	Medications in children: guidance about dosing, dilutions, etc.

Sr No	Topics/Lessons
28.	Managing shock in children
29.	Use of Pulse Oximetry in children
30.	Pediatric BLS
31.	Pediatric ALS
32.	Labour and Delivery in women with suspected or confirmed Covid infection
33.	Abortion services in Covid Pandemic
34.	CPR in pregnant women
35.	Positioning and awake proning in pregnant women
36.	Chest Physiotherapy and airway clearance techniques in COVID patients
37.	Mobilization techniques and rehabilitation of COVID patients
38.	Taking Nasal Swabs
39.	Sample collection for CoVID in a child
40.	COVID 19 Lab testing and analysis (Lab professionals and ANMs only)
41.	Community surveillance, screening and contact tracing
42.	Using Point of Care Rapid Diagnostic Kits

**subject to modifications based on update on thematic topics.*

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राष्ट्रीय आयुर्विज्ञान आयोग NATIONAL MEDICAL COMMISSION

File No. NMC/Secy. 2021/20/ 018923

Dated: 19-08-2021

To

The ACS/Principal Secretaries/Secretaries in Charge of Medical Education (All States/UTs)
The Director of Medical Education (All States UTs)
The Dean/Principal/Director, All Medical Colleges Institutions (All States UTs)

Subject: Advisory for strengthening infrastructure for COVID trainings and nomination of competent trainers- reg.

Dear Madam/ Sir,

As you may be aware, an Empowered Group-3 (EG-3) has been constituted on 'Augmenting Human Resources and Capacity Building' for decisively and effectively addressing the evolving challenges from Covid-19. EG-3 had further formed a sub-Group on Training and Capacity Building' with the mandate to identify training needs, develop modules and suggest robust training network to carry out trainings of Health Care Professionals.

2. EG-3, considering the recommendations of sub-Group, has been envisioned that a robust training framework need to be established across the country to enable trainings on COVID-19 related topics, to mitigate any further surge of COVID. More than 120 lessons (topics) across 22 modules have been identified. Several of these are clinical in nature and may need onsite trainings (list enclosed- Annex I).

3. All the health professionals including Doctors, Nurses and other clinical staff must undergo training and certification on these clinical topics, to ensure patient safety at all times. The skill training and verification is envisaged at the level of COVID hospitals and similar facilities including medical colleges, by utilizing the existing resources. Thus, it is recommended that the skill laboratories of the medical colleges may be utilized and list of equipment as per (Annex II) may be made available from the existing resources. While the equipment list is stratified based on the level of services to be provided in the facilities, medical colleges are expected to provide trainings for all the lessons listed in Annex I and ensure availability of the equipment accordingly.

4. It is requested to all the states/ UTs/ Medical Colleges to nominate the relevant master trainers for the said training to be conducted at the State/ UT level. All the ACS/Principal Secretaries /Secretaries (Medical Education) of the states/ UTs are requested to coordinate for conducting these trainings and building up the requisite infrastructure as described earlier before 31/08/2021. ToT for such clinical courses (training lessons) will be conducted by AIIMS faculty and the schedule will be shared shortly with all concerned State /UTs. It will also be available at NMC's website which can be accessed at <https://www.nmc.org.in/>

Yours sincerely,

(Dr. Sandhya Bhullar)

Secretary, National Medical Commission

Encl.: as above

Annex I

List of Clinical Topics/lessons requiring Skill Assessment/On-site Evaluation*

Sr No	Topics/Lessons
1.	Triage and casualty management
2.	Oxygen therapy- Oxygen sources, Oxygen delivery by mask/cannula, Oxygen monitoring and minimizing wastage
3.	Use of BiPAP and HFNO
4.	Invasive ventilation
5.	Advanced Clinical Management of COVID-19 of SARI, ARDS and Septic Shock
6.	Managing fluid and electrolyte balance of COVID patients
7.	COVID Drug Therapy
8.	History Taking, physical examination and monitoring vitals- BP/ Saturation/ EKG/ End tidal CO2/ Transducers / Venous access/ RT, Foley's, ABG sampling/ ET Suctioning / Early warning score/ Patient record
9.	Basic CPR
10.	Advance CPR
11.	Positioning and Awake proning
12.	ICU care and ventilated patients- --Lung protective ventilation, --positioning, --prevention of bed sore, --care of endotracheal tube or tracheostomy
13.	Ambulation of COVID patients- intra hospital transfers
14.	Use of point of care tests and equipment: --IV/ Catheterization --Pulse Oximeter --Infusion pump --Intubation - red flags for intubation and support --ECG --Ultrasound in critically ill patients
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16.	Covid testing in neonates
17.	Resuscitation and delivery room care of neonates born to Covid mothers (Early skin to skin care, Early initiation of breastfeeding, Delayed cord clamping)
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19.	Management of COVID illness in neonates: Oxygen therapy
20.	Management of COVID illness in neonates : Respiratory assistance
21.	Management of MIS-C
22.	Referral and pre-referral stabilization and transport

Sr No	Topics/Lessons
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39.	Sample collection for CoVID in a child
40.	COVID 19 Lab testing and analysis (Lab professionals and ANMs only)
41.	Community surveillance, screening and contact tracing
42.	Using Point of Care Rapid Diagnostic Kits

**subject to modifications based on update on thematic topics.*

Annex II

Basic training infrastructure requirements for district hospital/ Dedicated COVID Center^{1,2,3}

The training room shall fulfill the requirements of training for activities to be undertaken at the facility. Minimum recommended requirements are as under:

- A minimum of one separate skill demonstration room with two beds, such that the skills could be demonstrated and practiced individually or in groups
- The room should also be used for assessment of inductees
- The room may be equipped with a facility for video recording and review,
- A review or debriefing area,
- Adequate storage space for mannequins and/or other equipment may be provided in a safe area, within this space itself, if possible
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- Where possible, existing equipment or resources may be utilised to reduce set up and maintenance cost

Broad recommendations for facility wise service oriented basic equipment and Trainer requirements are as under:

I. Dedicated COVID Hospitals (DCH)-

1. Ventilator machine, preferably of the make and model as one being used in the facility
2. Oxygen cylinders and Concentrators with all accessories and attachments
3. Supply mechanism of medical oxygen around the facility, pipes, regulators, control rooms; visit to PSA plant if there's one in the facility
4. Patient care accessories including injections, IV lines, intubation tubes, catheters, IV line, Catheters, Pulse oximeter, Infusion pump, Portable ECG machine, BP machine, Portable ultrasound machine, point of care testing equipment etc.
5. Bed-side nursing assistance and care provisions like bed pan, bed linen, pillows, patient gowns
6. Laboratory sample collection and transportation apparatus
7. Breathing Simulators

¹ NMC. Guidelines for development of skills lab at medical colleges. Retrieved from https://www.nmc.org.in/wp-content/uploads/2019/08/Guidelines_Development_Skills_Labs_MedicalColleges.pdf

² National Health Mission. Daksh Skills Lab for RMNCH+A services Training Manual for Facilitators (2015). Retrieved from http://nhm.gov.in/images/pdf/programmes/maternal-health/guidelines/SKILLS_LAB_TRAINING_MANUAL_FACILITATOR.pdf

³ MoHFW (2013) Skill lab operational guidelines- strengthening competency-based training of healthcare providers for RMNCH+A services. Retrieved from https://nrhm.gujarat.gov.in/images/pdf/skills_lab_operational_guidelines.pdf

8. CPR and Advanced mannequins
9. PPE coveralls

Potential trainers can be retired Doctors and specialists (any including Physicians, Intensivists, Anesthesiologists with extensive experience) or available Doctors with extensive experience, Critical Care Nurse Practitioners, Respiratory Therapists and Physiotherapist, with adequate and extensive experience in handling critical equipment.

II. Dedicated COVID Health Centers (DCHC)-

1. Oxygen cylinders and Concentrators with all accessories and attachments
2. Patient care accessories including injections, IV lines, intubation tubes, catheters, IV line, Catheters, Pulse oximeter, BP machine, point of care testing equipment etc.
3. Bed-side nursing assistance and care provisions like bed pan, bed linen, pillows, patient gowns
4. Laboratory sample collection and transportation apparatus
5. CPR and Advanced mannequins
6. PPE coveralls
7. Contact details of Ambulances linked with the facility, DCH linked with the facility
8. User manuals on Biomedical Waste Management, Transfer Procedures.

At DCHC level Trainers could include experienced Medical Officers, senior Staff Nurses, Respiratory Therapists and Physiotherapist.

III. COVID Care Centers (CCC)-

1. Oxygen cylinders and Concentrators with all accessories and attachments, Oximeter and BP machines
2. PPE coveralls
3. Checklists for periodic follow-up and evaluation of patients' status
4. Awareness generation material on Biomedical Waste Management, Transfer Procedures, Importance of hygiene, sanitation and COVID Appropriate Behaviour during the pandemic
5. Contact details of Ambulances linked with the facility, DCHC/ DCH linked with the facility

At CCC level care practical training could engage Medical Officers (MO) specifically for point 1 and 3 rest can be done by experienced AYUSH practitioners, senior Staff Nurses, Emergency Medical Technicians, Counselors and Local Administrators for coordination and reporting like responsibilities.



भारत सरकार
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Government of India
Ministry of Health & Family Welfare
Nirman Bhavan, New Delhi - 110011

वी. हेकाली झिमोमी, भा.प्र.से.
संयुक्त सचिव

V. Hekali Zhimomi, IAS
Joint Secretary

DO. No. V.11025/102/2021-MEP

Dated: January 7, 2022

Dear Sir/Madam,

Please refer to my DO letter of even number dated 03.12.2021 (copy enclosed) regarding training of healthcare workers (HCWs) deployed for management of COVID-19 across the country. The MoHFW, time and again, has been requesting State Governments/UTs to ensure that all healthcare workers get the latest and evidence based knowledge for efficient outcomes. Appropriate training of HCWs at each healthcare facility has gained more significance in the wake of sudden surge in Covid cases and outbreak of new Corona variant across the globe.

2. As you are aware this Ministry has worked with close to 150 medical specialists and professional experts to develop more than 130 lessons on COVID Care for Adult patients, Newborn cases, Pediatric cases, Obstetric cases, as well as for Nursing care, AYUSH, Allied and healthcare and Dental care including modules on role of front line workers. These courses are being developed keeping in mind skills to be attained by all categories of healthcare workers in every healthcare facility, including volunteers. As on date, 102 courses specific to Covid care and management have been uploaded on iGOT platform. However, the response from the States has not been very encouraging as would be seen from the state-wise break up of registrations (enclosed). Till date, about 57,000 registrations only have been recorded on the portal for self-learning on these important topics.

3. All States/UTs are therefore again requested to ensure that every healthcare worker deployed for COVID care undertakes the online training and hands-on practice, so that they are updated with standards and validated content in preparation for any future surge during the pandemic. The States/ UTs must also engage in skill building of the healthcare workforce through technical support/ guidance of medical colleges and other institutes to roll out hands-on skill training for all the healthcare staff.

With regards,

Yours sincerely

(V. Hekali Zhimomi)

Additional Chief Secretary /Principal Secretary/Secretary (Health) of all States/UTs



भारत सरकार

स्वास्थ्य एवं परिवार कल्याण मंत्रालय

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वी. हेकाली झिमोमी, भा.प्र.से.
संयुक्त सचिव

V. Hekali Zhimomi, IAS

Joint Secretary

DO No. V.11025/102/2021-MEP

3rd December, 2021

Dear Sir/Madam,

To start with, I would like to congratulate you for all the efforts made towards containment of the COVID-19 pandemic over the past few months. However, to stress upon the need for continued pursuit for sustained measures, knowing that new strains like the recent Omicron variant are being reported intermittently across the world, it is pertinent that strict vigilance be employed for preventing any outbreak in the future.

2. As an initiative towards the same, the Empowered Group-3 Subgroup-II has been working intensively through **more than a dozen meetings** and follow-ups in the last six months to update/ develop training content for all healthcare workers pertaining to effective management of COVID-19. More than **130 lessons are being developed** and uploaded on iGOT Diksha platform for self-paced online learning by all healthcare workers on various thematic areas including Newborn Care, Pediatric Care, Adult COVID management, Obstetric Care, Nursing, AYUSH, Allied and Healthcare and Dental perspectives in COVID management and for Frontline Workers as part of this process. Till date, **96 courses have already been uploaded** and more are in the process of being made available.

3. An advisory (DO No. V.11025/102/2021- MEP dated 10.08.2021) was earlier sent to all States and UTs in this regard. **It is strongly recommended that every healthcare worker deployed for COVID care be made to undertake these online training and hands-on practices**, so that all professionals may be updated with standard and validated contents to prepare for any future surge.

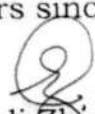
4. The **iGOT Diksha platform** can be directly accessed on the web through the following link <https://diksha.gov.in/igot/>. A **step by step guide to log in on to the iGOT Diksha platform is enclosed herein** for ease of understanding and reference by all professionals. In addition, a dashboard to help measure and manage training numbers by State/ District/ type of healthcare worker etc. is also being revived by the DoPT.

5. Additionally, it is also **advisable that the States/ UTs also engage in skill building of the healthcare workforce through technical support/ guidance to medical colleges/institutes** to roll out hands-on skill training for all healthcare staff.

7. With coordinated efforts, we can build and strengthen capacities to face any future surge. I look forward to continued support and leadership from all States.

With regards,

Yours sincerely,


(V. Hekali Zhimomi)

Addl. Chief Secretary/Principal Secretary Health of All States/UTs

2438978/2021/AHS



राजेश भूषण, आईएएस
सचिव

RAJESH BHUSHAN, IAS

SECRETARY

भारत सरकार
स्वास्थ्य एवं परिवार कल्याण विभाग
स्वास्थ्य एवं परिवार कल्याण मंत्रालय
Government of India

Department of Health and Family Welfare
Ministry of Health and Family Welfare

D.O. No V.11025/102/2021-MEP
10 August 2021

Dear Chief Secretary,

The importance of training of human resources engaged in COVID-19 management cannot be over emphasized. The States/UTs have taken a number of steps in this regard over the last year and a half. In order to guide and assist the States further, the Central Government had constituted an Empowered Group-3 (EG-3) with a mandate to look at augmenting of human resources and capacity building. For efficient management of COVID cases in any future surge scenario, the EG-3 has recommended adequate training and skilling of human resources deployed at all levels of care i.e. Community level, COVID Care Centers (CCC), Dedicated COVID Health Centers (DCHC) and Dedicated COVID Hospitals (DCH) across the country.

2. A detailed Skill and Course matrix (117 lessons incorporated into 21 broad modules) indicating basic necessary courses which need to be taken by professionals/ healthcare workers before being deployed for COVID care duty has been developed and is being enclosed (**Annexure-I**). These trainings (as enlisted at Annexure-II) shall be disseminated through the iGOT Diksha online platform. To make the training content more reachable and widely acceptable, the States/UTs are requested to undertake expedited translation of developed material into local languages and share the translated material for uploading on iGOT platform. The States may also host these training courses on other online platforms or Learning Management Systems for wider dissemination.

3. Further, to ensure blended learning and practical exposure, the States are advised to set up a basic skill lab/ simulation centers, preferably at each DCH or the nearby Medical College, for hands-on training and certification of all healthcare workers in requisite jobs required of them. Broad recommendations for basic training infrastructure requirements that may be made available by the States in this regard is enclosed at **Annexure-II**. The list of lessons to be taken up for onsite training is enclosed at **Annexure-III**.

4. To facilitate the States/UTs, weekly interactive sessions led by National Experts may be held from 3rd week of August, 2021 onwards. A theme-wise calendar is also being created (*Adult COVID content, Paediatrics, Neonatology, Obstetrics, Nursing, AYUSH, Allied and Healthcare professionals and Dental, and Community and Front-Line Workers*) and will be shared with the States/UTs through the Ministry and AIIMS (Delhi) websites. States may adopt and disseminate this calendar widely for maximum participation of health workers and front-line staff in trainings.

5. The States/UTs may ensure that the health care workers with clinical roles access the online training content through the identified training portals and subsequently also obtain onsite skill trainings through their respective centre, as best determined by the States/UTs.

....contd/-

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6. The above training support is in addition to the efforts being carried out by the States/UTs. The States/UTs are advised to continue the training efforts at their end and also expand the same using the matrices and courses offered centrally. The States/UTs may endeavour that all healthcare workers deployed for COVID management may undertake necessary training.

7. I am sure; your State/UT will take immediate action on the above suggested measures. The following National Experts who are also members of EG-3 may be contacted to take this initiative forward in the State/UT.

- i. Dr. Ashok Deorari, Professor & HoD, Pediatrics, AIIMS, Delhi (Mobile No. - 09818131391; E-mail - ashokdeorari_56@hotmail.com)
- ii. Ms. Kavita Narayan, Technical Adviser, HRH Cell, MoHFW (Mobile No. - 09650002244; E-mail - narayan.kavita@nic.in)

Warm Regards.

Yours sincerely



(Rajesh Bhushan)

Encl: As stated above

Chief Secretary/Administrator of all States / UTs

Copy to : Additional Chief Secretary / Principal Secretary / Secretary (Health)
All States / UTs