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Ministry of Health

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திகதி ) 16.11.2020  
Date )

All Provincial Health Secretaries  
All Provincial Directors of Health Services  
All Regional Directors of Health Services

**Quarantine process to be followed by all immediate contacts of a COVID-19 patient and any person entering into the country through ports of entry during the COVID-19 pandemic situation**

Due to the prevailing COVID-19 situation in the country, based on the WHO declaration of pandemic status, it is mandatory to respond to the outbreak effectively to prevent the transmission under the quarantine law in the country for communicable disease control and prevention as illustrated in the “Quarantine and Prevention of disease Ordinance No 3 of 1897”.

Quarantining of closely exposed persons or persons with possible high-risk exposure to a COVID-19 case/s within the country or on returning to the country from abroad, are considered as a measure to be implemented to prevent the ‘in country transmission’ and importation of COVID-19 into the country.

**The following procedure will be implemented:**

- Immediate close contacts will be tested for case detection.
- Considering the possible maximum incubation of the virus (SARS CoV-2) within the human body, 14 days period is considered for “home quarantine” for persons with such risk of exposure.
- Repeat case detection testing will be carried out for COVID-19 exposed persons (immediate close contacts) on completion of 14 days-home quarantine period.
- Those who are entering in to the country will be subjected to “on arrival case identification testing procedure” and cohort quarantine at identified centers/hotels for 14 days. A repeat case detection test will be carried out on completion of 14 days of institutional quarantine, and if found negative, need to undergo a further 14 days period of home quarantine.
- Based on specific situations, further extension of 14 days quarantine period (home or institutional cohort quarantine) will be decided after an Epidemiological assessment (e.g.:



exposure to a confirmed COVID-19 case during quarantine, detected by the repeat test on completion of 14 days)

- Decision for further extension of quarantine period as required will be taken for the betterment of the population/ specific community in specific geographic areas after epidemiological assessment.

### **Home Quarantine Process in the country for COVID-19 risk exposed persons**

“Home quarantining” refers to keeping visibly healthy, possible high-risk COVID-19 close contacts separately at non-health care settings. Therefore, it is essential to adhere to the following practices for a period of 14 days from the time of risk exposure, at their own residencies or at special identified residential centers.

#### **Instances where home quarantine is applied:**

- a) Exposure to a COVID 19 confirmed patient
- b) After completion of 14-day quarantine period at a government/ private cohort quarantine center
- c) After the discharge from a hospital/ observation treatment center, a confirmed COVID-19 patient (symptomatic or asymptomatic) or a patient stayed in a COVID-19 suspected ward/ isolation ward/ Unit

In addition to instances above mentioned, there may be situations to consider for quarantining depending on the population category, specific geographic locations and specific instances where possible exposures could be an event, while exact exposure status could not be ascertained.

The Epidemiology Unit together with the MOH team and the district/provincial team will decide on such instances.

- All immediate close contacts of a COVID-19 patient (first line contacts) should be quarantined immediately.
- Such persons will be home quarantined.
- If the home quarantine is after exposure to a COVID-19 confirmed patient, all other households also should remain at home during quarantine period.
- If home quarantine is not feasible due to any reason, such persons will be institutional quarantined.

#### **Instances considered for institutional quarantine:**

- If a person who is vulnerable to the severe forms of COVID-19 illness is living in the same household and prevention of cross infection cannot be ruled out during home quarantine. For example, elderly, immunocompromised people etc. are living in the same household and the exposed person has to share common facilities such as the bedroom/ living room/ bathroom etc.
- People living in boarding places and hostels / barracks and billets / lodges etc.
- Socially and geographically identified special categories.
- Expatriates / crew members / sea marshals etc, on arrival to the country.

#### **Procedure to be followed by the public health staff during home quarantine period:**

- Implement strict home quarantine process as applicable to the instance
- Duration for quarantine is considered as 14 days:



- If the exact date of the exposure is known: consider quarantine period as 14 days from the date of last exposure
- If the exact date of exposure is unknown (as in asymptomatic situation or in possible multiple exposure situation), quarantine for 14 days from the date of index COVID-19 case detected.
- If separation of contacts from the index case is delayed due to any reason, duration of quarantine will be for 14 days from the date of the separation started.
- Provide contact details of the area PHI, PHM and MOH to the quarantining person/s, and advise to contact them whenever necessary.
- If symptomatic, suggestive of COVID-19, admit at the earliest to a nearest hospital with isolation facilities while taking adequate precautions.
- Plan for case detection testing at the end of the quarantine period. The testing date can be planned from 11<sup>th</sup> to 14<sup>th</sup> day, with the maximum effort to release from quarantine period on completion of 14 days
  - If COVID-19 confirmed case is identified among quarantined people, careful risk assessment has to be done by the MOH. Decision to extend the quarantine period for other members of the household will be taken under the guidance of Regional Epidemiologist, Consultant Community Physician/s and the Consultant Epidemiologist of the Epidemiology Unit.

### **Monitoring and supervision**

- To ensure that quarantining individuals are strictly adhering to quarantine practices, the Village Committee members that consists of the Grama Niladhari, Economic Development Officer, Agriculture Research and Production Assistant, Samurdhi Development Officer and the Public Health Midwife should frequently visit the quarantined homes on a regular basis.
- In addition, the Public Health Inspector (PHI) of the area in collaboration with the assigned police officers and army officers should visit quarantined homes at different times of the day on a daily basis as per the Circular No 21/2020 and dated 01. 11. 2020 issued by the Secretary, State Ministry of Internal Security, Home Affairs and Disaster Management.
- During these visits should inquire about any symptoms suggestive of COVID-19. In addition, should inquire about the general health and wellbeing of the household members.
- The Medical Officer of Health of the area should do the overall supervision of this monitoring process.

### **Following measures are expected to be followed by the person/s under home quarantine:**

- If possible, it is advisable to allocate a separate room with adequate ventilation, while other household members staying in another room.
- If possible, bathroom to be used only by the quarantining person while other household members preferably using a separate bathroom.
- Cleaning of taps, doorknobs and utensils with soap and water after use by the quarantining person and also before the use by other household members.
  - It is preferable if the quarantined person use the bathroom after other household members and clean it with soap water /disinfectants after use.
- Maintain at least one-meter distance from other household members.
- Should wear a face mask in case of meeting health/ quarantine monitoring persons/ family members.

### **General measures and advices to be followed:**

- Visitors are not allowed to the quarantining residence.




- Frequent hand washing with soap and water for at least 20 seconds each time or sanitize with an alcohol-based hand sanitizer in instances where hand-washing facilities/instances with soap and water are inadequate/ unavailable.
- Avoid touching eyes, nose and mouth with unwashed hands.
- Home quarantined person can monitor his/her body temperature using a thermometer twice a day if facilities are available.
- **If the quarantined person or other member of the household develop fever, cough, difficulty in breathing, sore throat, body aches and pains, anosmia, loss of taste including any signs of flu-like symptoms - inform MOH/ PHI/ PHM of the area immediately.**
- Maintain proper cough etiquette. Cover the mouth and nose with a tissue paper or flexed elbow during the sneeze/ cough. Used tissue papers shall be disposed in to a separate closed bin.
- Allocate separate dishes, drinking glasses, cups, eating utensils, towels, bedding, and other items for the quarantined person/s
  - Utensils should not be shared with other household persons
  - Used utensils, bed linen and clothes should be washed with soap and water.
  - Stay away from elderly persons at home and those with comorbid conditions like hypertension, cardiovascular disease, renal disease, etc. Wherever, possible, elderly persons and those with comorbidities at the residence shall be advised to stay separately (example: in another separate room).
  - Take adequate rest.
  - Stay well hydrated and eat a balanced nutritious diet.
  - All garbage/ discarded items by the quarantined person should be disposed by burning.

#### **Cleaning:**

- Clean and disinfect frequently touched surfaces in your room (e.g. phones, remote controls, table-tops, doorknobs, keyboards, tablets, bedside tables, etc.,) with a disinfectant/ detergent (eg: Lysol or sodium hypochlorite solution, soap water). These solutions are available in the market to purchase.
- Clean and disinfect bathroom, fixtures and toilet surfaces at least once daily. Regular household soap or detergent shall be used first for cleaning.

Quarantining of the staff and their family members of diplomatic missions and UN organizations will be according to the Circular Letter No DQ/06/2020 and dated 09. 07. 2020.

If you need any clarifications in this regard, please contact the Epidemiology Unit of the Ministry of Health (Tel: 0112695112, 0112681548, 0114740490; Fax: 0112696583; email: [chepid@sltnet.lk](mailto:chepid@sltnet.lk), [chiefepid@health.gov.lk](mailto:chiefepid@health.gov.lk)).

  
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- Copy: I Secretary  
 II Additional Secretary (Public Health Services)/(Medical Services)  
 III Director General of Health Services  
 IV All Deputy Director Generals  
 V Chief Epidemiologist  
 VI All Regional Epidemiologists



# ANNEX

## HOME QUARANTINE PROCESS

