

Door to Door visits for Awareness and Follow up.

[Note: Awareness is IEC the first visit; Follow up consists of the following visits, checking to see if a) there are any new patients/suspects; b) patients/suspects are isolating/quarantining themselves]

SOP for Awareness:

1. ***The champion should wear a mask and ensure physical distancing in the session.***
2. The champion should use the booklet/posters to conduct the session in the basti.
3. Introduce yourself (who you are, why you are here, and what you expect the listeners to do).
4. Provide the session plan in advance and tell them how long it will take (15 minutes max).
5. Tell them they can ask questions at the end.
6. Content (as per booklet):
 - a. General Information about COVID-19
 - i. What is COVID-19
 - ii. How does it spread?
 - iii. How should you protect yourself from it?
 - b. What are the symptoms you should look out for?
 - i. Mild and early symptoms
 - ii. Watch out for people who are at high risk: those above 50, and those with existing illnesses (BP, diabetes, heart or lung or kidney diseases, cancer, etc.).
 - iii. When does someone need immediate hospitalization?
 - c. If you have a family member who has tested positive for COVID-19 what should you do? (Refer to booklet.)
 - i. General
 - ii. Bathrooms and washbasins
 - iii. Food
 - iv. How should an attendant take care of herself?
 - v. How to wear, wash, and dispose of masks.
7. Do not boycott patients or families with COVID-19 (ethical, practical -- point to the value of COVID recovered persons to the community).
8. Show them the Emergency Numbers.
9. Tell them about the Dry Ration kit and Hygiene kit that they will be given.
10. Get mobile cell phone numbers. Dial right there and check that it is connecting.
11. Hand one booklet over to each family.

SOP for Follow up (follow up sessions)

1. ***When making a physical visit, the champion should wear a mask and ensure physical distancing in the session.***
2. Ensure that each family which has a suspect/ confirmed case of COVID-19 is followed up.
3. Ensure that the testing is done.
4. Ensure all cases are under home isolation. During physical visit, examine the isolation and see if anything needs to be improved (as per training). Ask for help on mobile from any advisor who is available for this.
5. If the home isolation is not good enough, strongly suggest that suspects/patients should go to isolation centres.
6. Repeat the SOP for Awareness with the specific families. The champion should use the booklet/posters to conduct this repeat session..
7. Follow up twice daily and record with Mobile data app (see Appendix A)
8. Ask the community about families who are afraid or are not willing to share information. Go to those houses and talk to the family.
9. Ask about the Dry Ration kit and Hygiene kit.

Appendix A

The basic patient registration information i.e., name, gender, age, address, Aadhaar Number, Mobile number, age, comorbidities will be in a master table indexed by patient ID number.

All further interaction will be recorded in a detail visit table as per patient ID number as given in the [linked Google Sheet](#).

The case history of any patient at any time will be a report for the given ID, consisting of the patient registration information followed by the list of detail visit records.