
DPPA, DPO AND DOS INTERIM GUIDELINES

ON

COVID-19 PREVENTION, MONITORING AND VERIFICATION FOR UNIFORMED PERSONNEL

Contents:	A. Purpose
	B. Scope
	C. Rationale
	D. Procedures
	E. Roles and Responsibilities
	F. Terms and Definitions
	G. Monitoring and Compliance
	H. Contact

A. PURPOSE

1. These Interim Guidelines, (hereafter Guidelines) establish procedures and mechanisms for COVID-19 outbreak prevention, monitoring, and verification for uniformed personnel.
-

B. SCOPE

2. These Guidelines seek to provide effective guidance and a framework for the management and coordination on COVID-19 outbreak prevention, monitoring and verification.
3. The Guidelines intend to serve as a tool to assist and steer Headquarters and field missions on COVID-19 outbreak prevention, and monitoring and verification of measures put in place to reduce the spread of COVID-19.
4. Due to experience of significant COVID-19 outbreaks within military and UN Police contingents which form the largest and the most visible UN presence in a mission, these Guidelines focus on Department of Political and Peacebuilding Affairs (DPPA), Department of Peace Operations (DPO) and Department of Operational Support (DOS) field missions with military and/or UN Police contingents (i.e. military formed units and/or Formed Police Units and/or UN Police contingents and/or individually deployed military and/or UN Police personnel). It is mandatory that missions with large uniformed footprints establish a **Mission Monitoring and Verification Team (Mission MVT)** in accordance with these Guidelines for prevention and mitigation of issues related to COVID-19.
5. These Guidelines may also be adapted for use by other DPPA, DPO, and DOS field-based presences without contingents or individually deployed military and police personnel.
6. Due to the wide variance of mission capacities, composition and internal procedures, these Guidelines are not prescriptive in nature. The Guidelines broadly define the COVID-19 prevention, monitoring, and verification approach and provide/recommend specific roles and

responsibilities. How specific responsibilities are fulfilled is on the concerned leadership of the missions to decide based on informed processes.

C. RATIONALE

7. Preventing spread of disease in peacekeeping, country-specific missions, regional offices, support offices and service centers requires a system that, in a proactive manner, identifies the vulnerabilities, locations, patterns, associated with uniformed United Nations personnel, prescribes preventive measures, and facilitates a monitoring and verification system to ensure credible implementation and reporting on prevention and control of COVID-19 within the mission. It also serves to identify and disseminate lessons learned and best practices.
 8. In view of the congregate living and working arrangements of contingents, their close contacts with vulnerable communities and ongoing and planned rotation of uniformed personnel, a monitoring tool and verification methodology is necessary to assure the safety of both United Nations personnel and the public. These Guidelines provide easily adoptable instructions, monitoring format and data capturing instructions for missions and the United Nations headquarters.
 9. The Guidelines, Monitoring and Verification Framework on COVID-19 describe the process that supports rapid and effective disease prevention and monitoring as well as verification of implementation of issued COVID-19 Guidelines.
-

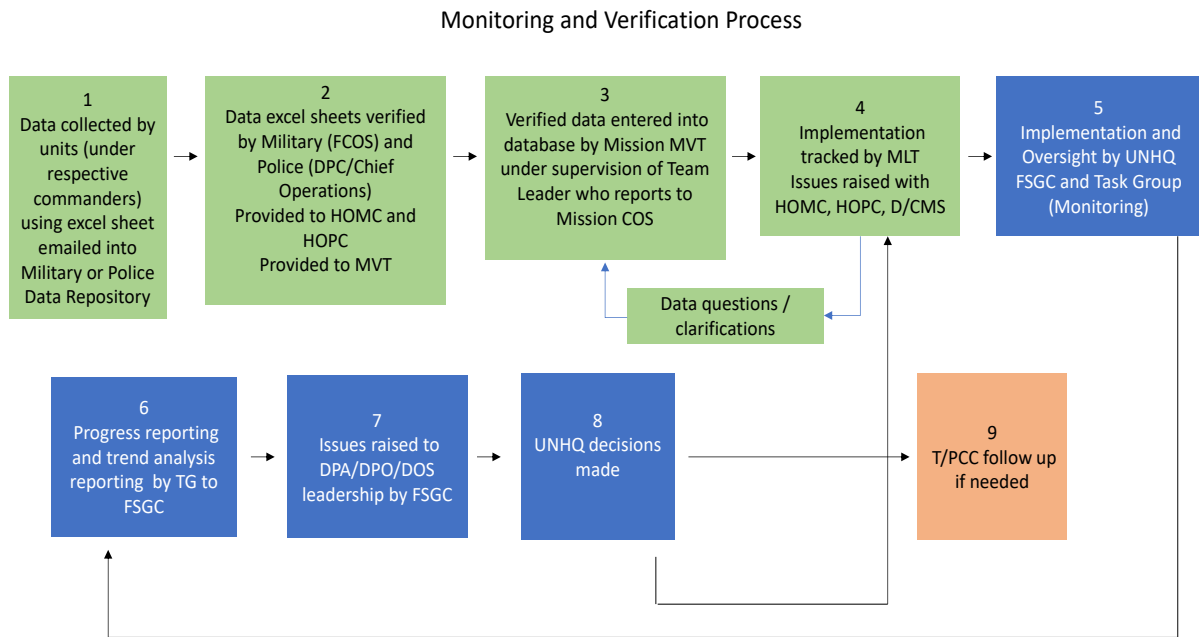
D. PROCEDURES

10. At Headquarters, the Field Support Group for COVID-19 (FSGC) in Headquarters, through the Task Group (Monitoring) provides overall guidance on COVID-19 prevention, monitoring and verification efforts to field missions which have uniformed personnel.
11. **Prevention**
All mission personnel have a role in the prevention of COVID-19. Annex 1 contains a checklist of recommended actions developed by the Division of Healthcare Management, Occupational Safety and Health (DHMOSH) in DOS to prevent the spread of COVID-19 with detailed actions for Force / Sector / Contingent / Unit Commanders / Police Commissioners, sub-commanders and individually deployed personnel.
12. **Monitoring and Verification**
All missions should establish a Monitoring and Verification Team at Mission Headquarters under the supervision of the Mission Chief of Staff comprising of military, police and mission support staff to ensure the completeness, accuracy, and credibility of implementation and reporting on prevention and control of COVID-19.
13. For the collation, handling, and storage of feedback data, missions should establish a Data Collection and Repository Cell (DCR Cell) within the Military and Police Headquarters. The DCR Cell should submit collated data for verification and signature to the Battalion Commanders/Base Commanders/FPU Commanders before being countersigned by the FCOS/Deputy Police Commissioners/Police CoOps and onwards submission to the Mission MVT.

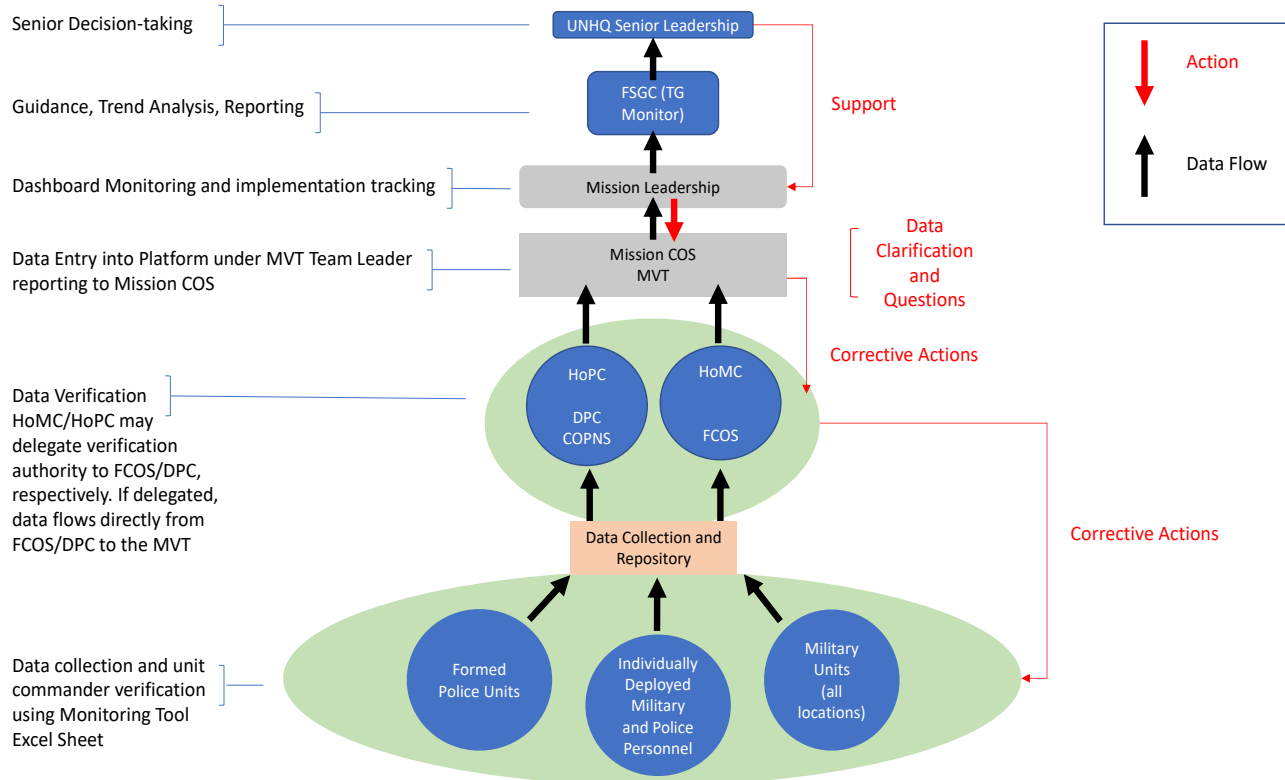
14. The sequential and ongoing steps of the Monitoring and Verification Process are:

- 1) Heads of Military Component (HoMC) and Heads of Police Component (HoPC) should disseminate the checklist of recommended actions (annex I) to military and police units.
- 2) Military and Police units collect verification data using a standard Excel sheet.
- 3) Military unit commanders and Formed Police Unit commanders verify the feedback and transmit the verified data to the DCR Cell at the Military and Police Headquarters.
- 4) The DCR Cell aggregates and collates the data and presents it to the Military Component COS and the Deputy Police Commissioner/Chief of Operations for verification and signature.
- 5) Countersigned data is provided to the HoMC and HoPC, as determined by the HoMC and HoPC. The DCR Cells send the countersigned data to the Mission MVT.
- 6) The Mission MVT, under the leadership of the Mission COS, analyses the received feedback, determines issues, coordinates to address issues, raises any persisting challenges to the Mission Leadership Team (MLT). The Mission MVT will maintain the Mission Data dashboard. The Mission COS ensures received data is verified by the military and police components.
- 7) Mission MVT interacts with the UN Headquarters Task Group (Monitoring) on a fortnightly basis to raise problems requiring UN Headquarters intervention.
- 8) The UN Headquarters Task Group (Monitoring)/nominated group (*after the term of the Task Group expires*) maintains the consolidated field missions' data dashboard for the Field Support Group and Secretariat leadership. The Information Management Unit in the Office of the Director for Coordination of Shared Services (ODCSS) provides necessary technical and implementation support to missions and the Task Group (Monitoring) on data handling and dashboards, as required.
- 9) The Task Group (Monitoring) elevates any received problems to the Field Support Group for resolution. The Task Group (Monitoring) also enables shared learning and best practices amongst missions and coordinates/supports their dissemination.
- 10) United Nations Headquarters takes decisions as needed. As required, United Nations Headquarters interacts with TCC/PCCs.

15. The Monitoring and Verification process within the framework is depicted in the diagram below. Actions within missions are indicated in green, at the UNHQ in blue and for the TCC/PSSs in red.



16. The combination of the framework and process in terms of data flow and action is shown below.



17. **Periodicity and Timelines.**

- a. Missions initiate implementation of the Guidelines on Prevention, Monitoring, and Verification Framework on receipt of these Guidelines.
- b. The first feedback of the Monitoring Tool will be initiated 10 days after the receipt of these Guidelines and thereafter be initiated on a weekly basis.
- c. The Mission MVT will update the Data Dashboard on a weekly basis in consultation with the Task Group (Monitoring).
- d. Mission MVT will interact formally with the Task Group (Monitoring) on a fortnightly basis. Informal engagement may be carried out as required.

18. **Data Management.**

- a. The responsibility for the management of data related to the Monitoring and Verification Framework at United Nations Headquarters rests with the Task Group (Monitoring).
- b. The responsibility for the management of data related to the Monitoring and Verification Framework in the Mission rests with the Mission MVTs under the Mission COS on behalf of the HoM.
- c. Military unit and UN Formed Police Unit commanders are responsible for the accurate entry of data.

E. ROLES AND RESPONSIBILITIES

19. **Head of Mission.**

Overall responsible for the executive direction of their mission including the promulgation and implementation of the Monitoring and Verification Framework.

20. **Mission Chief of Staff.**

On behalf of the Head of Mission, responsible to ensure that the Mission MVT is established, provides executive direction, and oversight to the Mission MVT.

21. **Head of Military Component (HoMC).**

- a. Provides executive directions based on these Guidelines to troops under command to implement Guidelines on prevention of COVID-19.
- b. In coordination with the Mission COS, ensures adequate resources for establishment and functioning of the Mission MVT.
- c. Supports, through the military chain-of-command the Mission MVT responsibility to implement the Guidelines and reporting that covers all military contingents.
- d. Ensures compliance by the military of the Monitoring and Verification Framework.

22. **Head of Police Component (HoPC).**

- a. Provides executive directions based on these Guidelines to police personnel under command, to implement Guidelines on prevention of COVID-19.
- b. In coordination with the Mission COS ensure adequate resources for establishment and functioning of the Mission MVT.

- c. Supports, through the police chain-of-command the Mission MVT responsibility to implement Guidelines and reporting that covers all police personnel.
- d. Ensures compliance by the police of the Monitoring and Verification Framework.

23. Director/Chief of Mission Support.

Ensures adequate resources for establishment and functioning of the Mission MVT.

24. Mission Monitoring and Verification Team.

- a. Coordinates and supports the promulgation and implementation of the Guidelines, Monitoring and Verification Framework.
- b. Receives and analyses data for problem issues and provide/seek decisions on implementation from Mission Leadership Team.
- c. Maintains the data and dashboard of the Monitoring Tool for the Mission.
- d. Engages with the UN Headquarters Task Group (Monitoring) on a fortnightly basis to raise problems requiring UN Headquarters intervention.

26. Data Collection Repository Cell.

- a. Receives excel sheets/data from unit commanders and collates the data for respective component (military and police).
- b. Provides the collated data set to the HoMC/HoPC as required and FCOS/Deputy Police Commissioner/CoOps for verification and signatures.
- c. Provide the verified and signed data of respective components to the Mission MVT.
- d. Maintain and update the data for respective components as per defined periodicity.

27. Field Support Group for COVID-19.

Overall responsible for the executive direction of the Monitoring and Verification Framework.

28. Task Group (Monitoring).

- a. Under the direction of the Field Support Group for COVID-19, assist field missions to establish the Monitoring and Verification Framework.
- b. Overall responsible for the day-to-day Headquarters oversight of the Monitoring and Verification Framework.
- c. Receive and analyse consolidated data from Mission MVT.
- d. Maintain the consolidated field mission's data dashboard for the Field Support Group and Secretariat leadership.
- e. Raises problems/challenges to FSG and implements instructions of the FSG.
- f. Advise the FSG on issues related to verification and inform senior DPA/DPO/DOS decision-takers when required by the FSG.
- g. Recommend updates to the Guidelines for Prevention, Monitoring, and Verification Framework when required.
- h. Maintain a technical line of communication to Mission Chiefs of Staff and Mission MVT.
- i. Coordinate with the DPPA/DPO Information Management Unit for technical advice and support for management of data and data

- j. Disseminate best practices and lessons learnt to all field missions in coordination with the DPET and PMD.

29. Information Management Unit/DPPA-DPO.

Provides technical advice and support for management of data and data dashboards related to the Monitoring Tool.

F. TERMS AND DEFINITIONS

30. Monitoring Tool.

A standardized format (form) as attached as Annexure II, developed by the Task Group (Monitoring) to record information/feedback of locations/bases on implementation of Guidelines.

31. Monitoring and Verification Framework.

The sum of the structures, mechanisms, guidelines, and monitoring tools established at the UN HQ and the missions that supports the rapid and effective prevention of COVID-19 as well as its monitoring and verification.

G. MONITORING AND COMPLIANCE

32. Two levels of monitoring and compliance apply to these Guidelines. At Headquarters, the Task Group (Monitoring) under the FSGC provides executive monitoring of the Guidelines, Monitoring and Verification Framework. In the field, the Mission MVT Team under the aegis of the Mission COS, HoMC, HoPC and Director/Chief of Mission support provide day-to-day governance of the framework.
-

H. CONTACT

33. The contact office for these Guidelines is the Task Group (Monitoring) until dissolved and, thereafter as nominated.
-

Annexure I

COVID-19 Prevention: Checklist for Commanders and Individuals

(Applicable as marked)

Force / Sector / Contingent / Unit Commanders / Police Commissioner

- Ensure understanding of importance and compliance adherence within the contingent to stated COVID-19 guidelines for outbreak prevention and case management.
- Ensure instructions on hand hygiene, masks, physical distancing, cleaning, and disinfection and limiting social gatherings are clearly distributed.
- Conduct regular health promotion sessions to remind personnel on hand hygiene, use of cloth or medical masks (depending upon whether Healthcare Workers or not), physical distancing and importance of immediate self-isolation and reporting when sick, being conducted in locally appropriate languages and using various methods (e.g. flyers, loudspeaker announcements, posters).
- Establish audits and compliance check teams to monitor adherence to regulations on COVID-19.
- Ensure UN medical personnel know the signs and symptoms of COVID-19 as well as disease severity and immediate actions to be taken thereon.
- Ensure understanding of the difference in terminology of “isolation” (for cases only) and “quarantine” (for contacts only).
- Conduct Tabletop exercises/simulation drills on a fortnightly basis within all contingents to increase preparedness to handle suspect cases.
- Conduct demonstration sessions to show all personnel on how to put on and off a cloth mask properly conducted, and how to clean masks are conducted.
- Ensure audits being conducted to ensure that uniformed personnel have adequate commodities for COVID-19 prevention (soap and water, alcohol-based hand rubs, masks, thermometers, etc.).
- Ensure information on health awareness and prevention messages have been interpreted/translated into the local language of the contingents and being displayed adequately.
- Quarantine areas have been prepared and marked as per guidelines. (Ensure supplies available in quarantine area to record symptoms and fever (e.g. pen, symptom diary, thermometer) and they have means to contact someone if they develop COVID symptoms. Bed distance must be at least 1-2 metres, and there must be dedicated ablutions, and dedicated meal areas for those quarantined.)
- People requiring to be quarantined are identified and placed in quarantine areas.

- Isolation areas have been prepared and marked as per guidelines. (Ensure clear separation from others with signage and tape to keep others away. Isolated personnel should have dedicated ablutions, meal areas and bed distance 1-2 metres apart.)
- People with COVID-like symptoms or who has tested positive by PCR test for coronavirus should be given a medical (also known as a procedure or surgical) mask and placed into isolation.
- Instructions for the Rotation of Police or Troops:
 - Quarantine facility for incoming police or troops prepared and marked. (Ensure supplies available in quarantine area to record symptoms and fever (e.g. pen, symptom diary, thermometer) and they have means to contact someone if they develop COVID symptoms. Bed distance must be at least 1-2 metres, and there must be dedicated ablutions, and dedicated meal areas for those quarantined.)
 - SOP on quarantine procedures of incoming rotations prepared and disseminated.
 - COVID-19 testing being complied with as per host-State Guidelines.
 - Temperature screening and triage area for incoming rotations prepared and made ready.
 - SOP on COVID-19 precautions for de-inducting troops prepared and disseminated.
 - Outgoing rotation COVID-19 testing carried out as per Host-State and home country guidelines.
- SOP and de-induction procedure for police or troops of outgoing rotation testing positive prepared and disseminated.

Base / Sub-Unit Commanders

- All beds in regular living quarters, including isolation and quarantine have been placed at least 1-2 metres apart from each other.
- “Head to toe” sleeping arrangements are being implemented
- Adequate ventilation of 60l/s should be ensured by opening of windows to increase airflow.
- Mealtime staggering has been planned and disseminated platoon/section wise.
- Physical distancing of 1-2 metres has been carried out between tables and chairs in the dining area. (Preferable for meals to be served rather than self-serve buffet style.)
- Personnel have been made aware on how to implement the cleaning and disinfecting of common spaces (ablutions/toilet, kitchen, dining hall) and frequently touched surfaces.
- Personnel conducting twice daily symptoms and temperature screening of themselves for early detection of illness.
- All uniformed personnel wearing their cloth masks always.

- Adequate commodities for COVID-19 prevention (liquid soap and water, hand sanitizers, masks, thermometers, etc.) are available.
- Sufficient hand hygiene stations have been positioned throughout the camp area, especially in ablutions, outside/within dining areas, and inside/near quarantine and isolation areas.
- Requirement of items for hand hygiene stations (water, liquid soap, alcohol-based hand rub) being indented and received regularly.
- All personnel involved Interaction with the local community are practicing physical distancing of 1-2 metres and use appropriate PPE.
- People requiring to be quarantined are identified and placed in quarantine areas.
- People with COVID-like symptoms or who has tested positive by PCR test for coronavirus should be given a surgical mask and sent into an “isolation” facility/area.

Individually Deployed (UNMOs/IPOs/Staff Officers)

- UNMO/IPO know the signs and symptoms of COVID-19 and immediate actions to be taken thereon.
- Beds in living quarters have been placed at least 1-2 meters apart from each other.
- “Head to toe” sleeping arrangements are being implemented
- Twice daily symptoms and temperature screening of themselves being conducted for early detection of illness.
- All uniformed personnel wearing their cloth masks always.
- Adequate commodities for COVID-19 prevention (liquid soap and water, ABHR, masks, thermometers, etc.) are available.
- Sufficient hand hygiene stations are available throughout the living area, especially in ablutions, outside/within dining areas.
- Personnel involved in Interaction with the local community are practicing physical distancing of 1-2 metres and use appropriate PPE.
- UN staff members who need to speak to a counsellor due to stress or other psychosocial needs are encouraged to reach out to their local counsellor(s).

Annexure II

COVID-19 Prevention: Monitoring Tool

Location Name:

Contingent Name:

Nationality:

Force / Sector / Base / Unit Commanders / Police Commissioner

<u>S.No</u>	<u>Instructions</u>	<u>Responsibility</u>	<u>Timeline</u>	<u>Yes/No</u>
1.	Ensure understanding of importance and compliance adherence within the contingent to stated COVID-19 guidelines for outbreak prevention and case management.	Force Commander/Base/Unit Commanders, PC/FPU Commanders		
2.	Ensure instructions on hand hygiene, masks, physical distancing, cleaning, and disinfection and limiting social gatherings are clearly distributed.	Force Commander/Base/Unit Commanders, PC/FPU Commanders		
3.	Regular health promotion sessions to remind personnel on hand hygiene, use of cloth or medical masks (depending upon whether HCW or not), physical distancing and importance of immediate self-isolation and reporting when sick, being conducted in local language and using various methods (e.g. flyers, loudspeaker announcements, posters). Ensure communication to stop stigma related to COVID-19 and make it safe for ill individuals to report their illness	Force Commander/Base/Unit Commanders, PC/FPU Commanders		
4.	Audits and compliance check teams and outbreak investigation teams established to monitor adherence to regulations on COVID-19.	Force Commander/Base/Unit Commanders, PC/FPU Commanders		
5.	UN medical personnel know the signs and symptoms of COVID-19 as well as disease severity and immediate actions to be taken thereon. Ensure understanding of the difference in terminology of "isolation" (for cases only) and "quarantine" (for contacts only)	Force Commander/Base/Unit Commanders, PC/FPU Commanders		
6.	Tabletop exercises/simulation drills conducted on a fortnightly basis within all contingents to increase preparedness to handle suspect cases.	Force Commander/Base/Unit Commanders,		

		PC/FPU Commanders		
7.	Demonstration sessions to show all personnel on how to put on and off a cloth mask properly conducted, and how to clean masks are conducted.	Force Commander/Base/Unit Commanders, PC/FPU Commanders		
8.	Audits being conducted to ensure that uniformed personnel have adequate commodities for COVID-19 prevention (soap and water, alcohol-based hand rubs, masks, thermometers, etc.).	Force Commander/Base/Unit Commanders, PC/FPU Commanders		
9.	Information on health awareness and prevention messages have been interpreted/translated into the local language of the contingents and being displayed adequately.	Force Commander/Base/Unit Commanders, PC/FPU Commanders		
10.	Quarantine areas have been prepared and marked as per guidelines. <i>(Ensure supplies available in quarantine area to record symptoms and fever (e.g. pen, symptom diary, thermometer) and they have means to contact someone if they develop COVID symptoms. Bed distance must be at least 1-2 meters, and there must be dedicated ablutions, and dedicated meal areas for those quarantined.)</i>	Unit/Base Commanders, COVID FPs/FPU coordinators/FPU Commanders		
11.	People requiring to be quarantined are identified and placed in quarantine areas.	Unit/Base Commanders, COVID FPs/FPU coordinators/FPU Commanders		
12.	Isolation areas have been prepared and marked as per guidelines. <i>(Ensure clear separation from others with signage and tape to keep others away. Isolated personnel should have dedicated ablutions, meal areas and bed distance 1-2 meters apart.). Ensure COVID check forms are completed</i>	Unit/Base Commanders, COVID FPs/FPU coordinators/FPU Commanders		
13.	People with COVID-like symptoms or who has tested positive by PCR test for coronavirus should be given a medical (also known as a procedure or surgical) mask and placed into isolation. <i>Ensure COVID check forms are completed</i>	Unit/Base Commanders, COVID FPs/FPU coordinators/FPU Commanders		
Instructions for Rotation Troops				
14.	Quarantine facility for incoming troops prepared and marked. <i>(Ensure supplies available in quarantine area to record symptoms and fever (e.g. pen, symptom diary, thermometer) and</i>	Force Commander, and Contingent/Unit Commanders. PC/ COVID FPs/FPU		

	<i>they have means to contact someone if they develop COVID symptoms. Bed distance must be at least 1-2 meters, and there must be dedicated ablutions, and dedicated meal areas for those quarantined.)</i>	coordinators/FPU Commanders		
15.	SOP on quarantine procedures of incoming rotations prepared and disseminated.	Force Commander, and Contingent/Unit Commanders. PC/ COVID FPs/FPU coordinators/FPU Commanders		
16.	COVID-19 testing being complied with as per Host State Guidelines.	Contingent/Unit Commanders. PC/ COVID FPs/FPU coordinators/FPU Commanders		
17.	Temperature screening and triage area for incoming rotations prepared and made ready.	Contingent/Unit Commanders. PC/ COVID FPs/FPU coordinators/FPU Commanders		
18.	SOP on COVID-19 precautions for de-inducting troops prepared and disseminated.	Force Commander, and Contingent/Unit Commanders. PC/ COVID FPs/FPU coordinators/FPU Commanders		
19.	Outgoing rotation COVID-19 testing carried out as per Host State and home country guidelines.	Contingent/Unit Commanders. PC/ COVID FPs/FPU coordinators/FPU Commanders		
20.	SOP and de-induction procedure for troops of outgoing rotation testing positive prepared and disseminated.	Force Commander, and Contingent/Unit Commanders. PC/ COVID FPs/FPU coordinators/FPU Commanders		

Base/Sub-unit Commanders

21.	All beds in regular living quarters, including isolation and quarantine have been placed at least 1-2 meters apart from each other.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
-----	---	---	--	--

22.	“Head to toe” sleeping arrangements are being implemented	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
23.	Adequate ventilation of 60l/s should be ensured by opening of windows to increase airflow.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
24.	Mealtime staggering has been planned and disseminated platoon/section wise.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
25.	Physical distancing of 1-2 meters has been carried out between tables and chairs in the dining area. <i>(Preferable for meals to be served rather than self-serve buffet style.)</i>	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
26.	Personnel have been made aware on how to implement the cleaning and disinfecting of common spaces (ablutions/toilet, kitchen, dining hall) and frequently touched surfaces.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
27.	Personnel conducting twice daily symptoms and temperature screening of themselves for early detection of illness.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
28.	All uniformed personnel wearing their medical/surgical/approved masks cloth masks always.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU		

		coordinators/FPU Commanders		
29.	Adequate commodities for COVID-19 prevention (liquid soap and water, hand sanitizers, masks, thermometers, etc.) are available.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
30.	Sufficient hand hygiene stations have been positioned throughout the camp area, especially in ablutions, outside/within dining areas, and inside/near quarantine and isolation areas.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
31.	Requirement of items for hand hygiene stations (water, liquid soap, alcohol-based hand rub) being indented and received regularly.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
32.	All personnel involved Interaction with the local community are practicing physical distancing of 1-2 meters and use appropriate PPE.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
33.	People requiring to be quarantined are identified and placed in quarantine areas.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		
34.	People with COVID-like symptoms or who has tested positive by PCR test for coronavirus should be given a surgical mask and sent into an "isolation" facility/area.	Base Commander, sub-unit commander & platoon commander. COVID FPs/FPU coordinators/FPU Commanders		

Individually Deployed Personnel (UNMOs/IPOs/Staff Officers)

35.	UNMO/IPO know the signs and symptoms of COVID-19 and immediate actions to be taken thereon.	UNMO/IPO		
36.	Beds in living quarters have been placed at least 1-2 meters apart from each other.	UNMO/IPO		
37.	“Head to toe” sleeping arrangements are being implemented	UNMO/IPO		
38.	Twice daily symptoms and temperature screening of themselves being conducted for early detection of illness.	UNMO/IPO		
39.	All uniformed personnel wearing their cloth masks always.	UNMO/IPO		
40.	Adequate commodities for COVID-19 prevention (liquid soap and water, ABHR, masks, thermometers, etc.) are available.	UNMO/IPO		
41.	Sufficient hand hygiene stations are available throughout the living area, especially in ablutions, outside/within dining areas.	UNMO/IPO		
42.	Personnel involved in Interaction with the local community are practicing physical distancing of 1-2 meters and use appropriate PPE.	UNMO/IPO		