COVID 19 – A CONTAGIOUS REALITY LET US BE PREPARED

A compendium prepared by

CBCI Health office & Amala Institute of Medical Sciences, Thrissur









Trained man power who can work from home is a crucial factor in this scenario.



THREE LEVELS OF LEADERSHIP

Level-1: Two or three catholic youth leaders from each diocese under the leadership of regional youth director.

Level-2: 2 or 3 youth leaders from each Deanery/Forane under the leadership of diocesan youth director.

Level-3: 10 youth leaders from each parish under the leadership of parish priest.



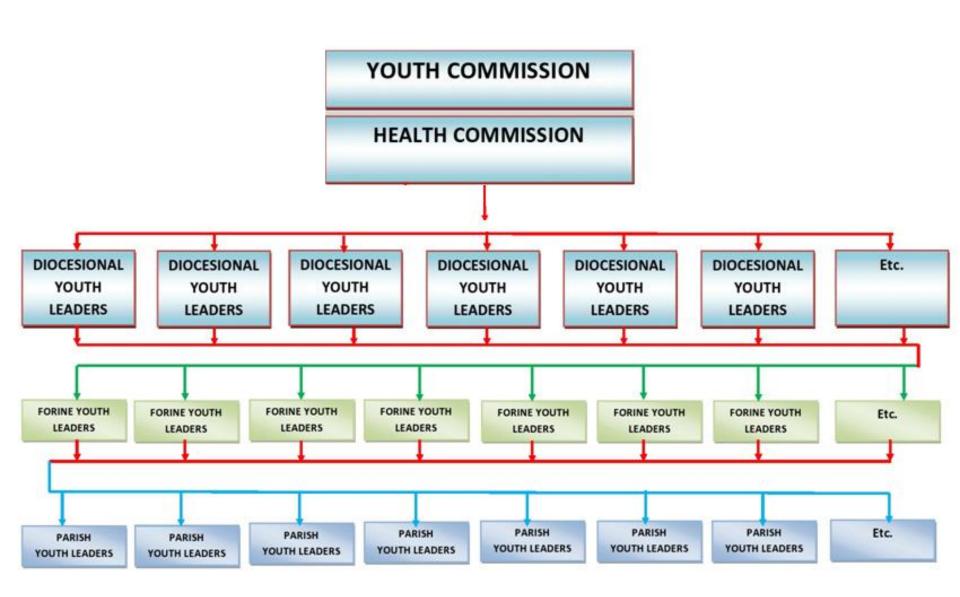
PLAN OF IMPLEMENTATION

The trained level-3 leaders will adopt 50 families each, irrespective of religion, caste or creed.

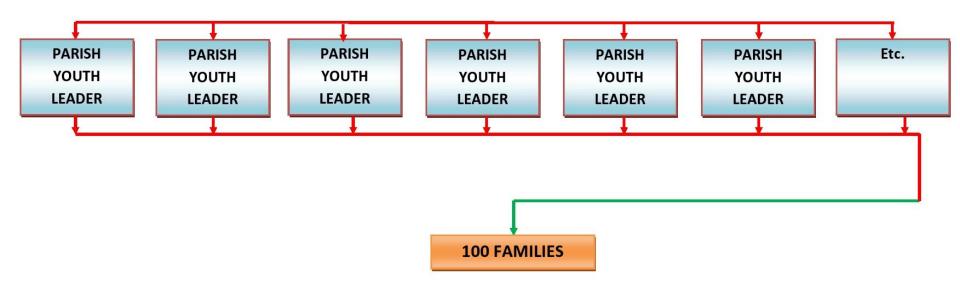
The leaders can help the affected or the needy people, without themselves going out of their house.

They can connect the needy to the nearby hospital, ambulance service, community kitchen, Pharmacy, doctors, spiritual help etc.













































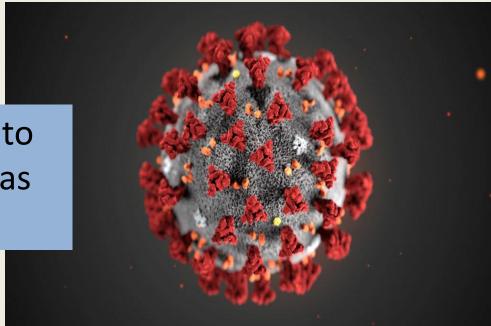


Corona infection Yesterday, Today, Tomorrow?



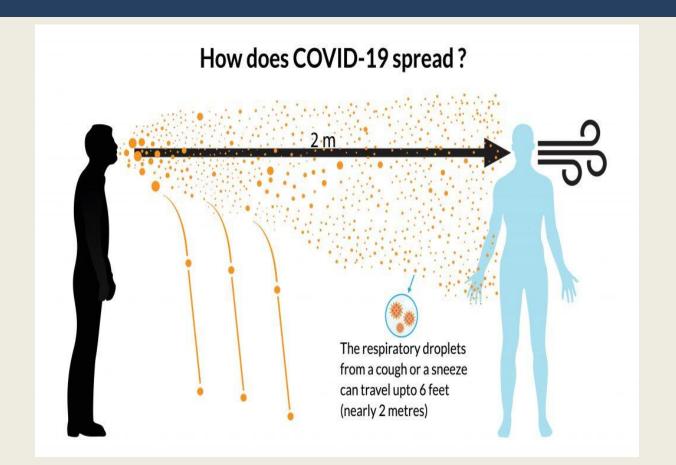
What is corona infection

Caused by a **virus** belonging to corona family and is named as COVID 19



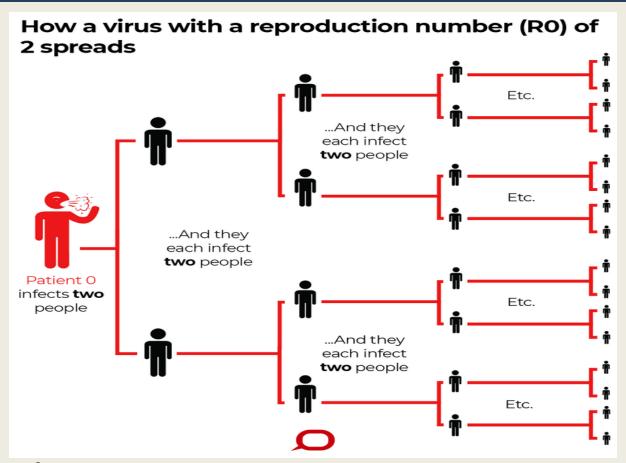


How does it spread





Why COVID 19 poses so much danger to the world?



- Highly infectious...
- Elderly and those suffering from other diseases can lose their lives...



How to tackle this?

Prevention is the only way



Personal level

Community level











PREVENTION IS KEY.

Prevent the spread of Coronavirus (COVID-19)



WASH YOUR HANDS OFTEN

with soap & water for at least 20 seconds or use an alcohol-based hand sanitizer.



AVOID TOUCHING your eyes, nose, & mouth with unwashed hands.

AVOID CLOSE CONTACT with people who are sick.



STAY HOME if you are sick.

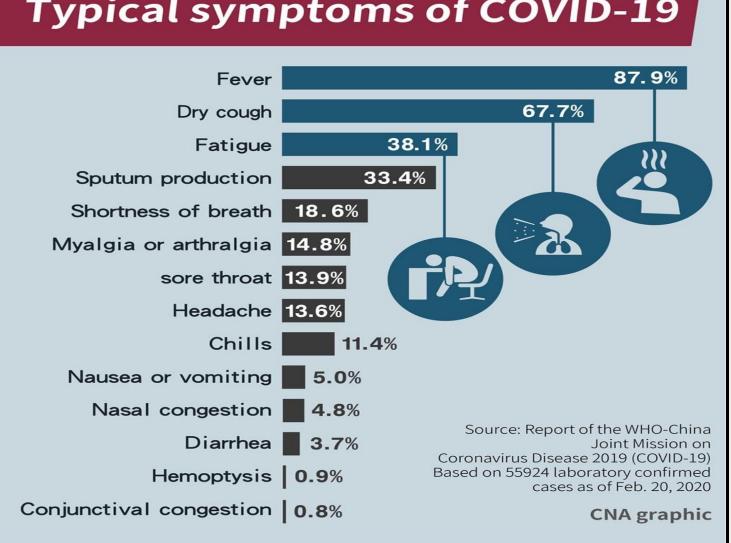
CLEAN & DISINFECT frequently touched objects & surfaces.



COVER YOUR MOUTH & NOSE with a tissue or your sleeve (not your hands) when coughing or sneezing.









Covid-19 preparedness

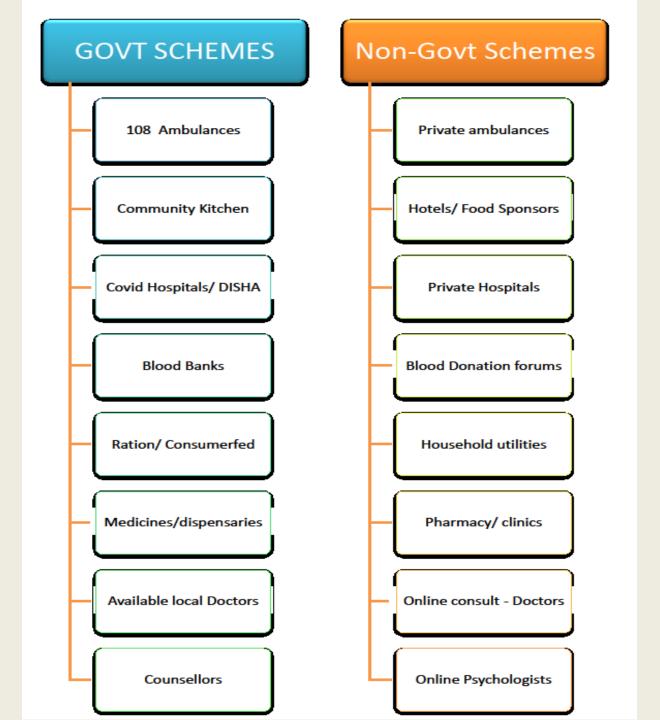


Once community spread happens!!

- Hospitals could be full
- Hospitals could have less staff – 'sickness'

Only ~20% would need hospitalization of which ~6% ICU admission

- 80% of the covid+ve cases could be asked to be managed at home
- Spread is expected to get geometric. Depends on the R0 (Rnaught)
- ~3-5% mortality among infected!!







Food



Procure

- Community kitchen
- Own facility
- Community eg; food packets / house

Delivery

- Government distribution
- Own vehicle
- Collection arranged by local leader

Distribution

- Self takeaway from vehicle (only driver)
- By local leader
- Should avoid chaos!!



Precautions while making food

- Food NOT a recognized route of transmission
- Face masks wash re-usable ones daily
- Hand hygiene often wash with soap & water for 20s (most imp.)
- Social distancing (>6 feet) while making food → designate jobs
- Don't use hands to fill utensils spoons / gloves
- Different utensils / cutlery for cooked & uncooked food
- Make sure that 'touch points' are cleaned regularly
- Wash food with water & mild soap (if possible)
- Wash scrub brush often with soap & water
- Heating at >72 °C for 2 mins or >63 °C for 4 min
- Vegetarian for universality



Protection Gear

(What Amala has done?)

Mask / Visor / PPE



Masks (Home made)

Medical masks:

- Polypropylene spunbound non-woven 2 outer layers & meltblown non-woven in the middle
- Polypropylene ~25 GSM

Cloth masks:

- the lesser light passes, the better
- 2 layer tightly woven (good quality) 100% cotton (cloth from pillow cases, good quality cotton shirts or T-shirts)
- flannel could be added as the middle layer (3 layered mask)
- Testing the quality?!
- Improvisations?!





Visor (Home made)











PPE apron (Home made)

Polypropylene 70+ GSM



Thankyou