

Standard Operating Procedures for NFI Distributions

The objective of this guidance is to provide ES/NFI partners with measures to minimize exposure of staffs and beneficiaries against contracting covid-19 during distribution of NFIs or any other shelter activity. This guidance should be applied adapted or interpreted in line with:

- Existing government regulations and guidance on covid-19 from relevant line ministries such as Ministry of Public Health (MoPH) etc.
- WHO/UNICEF guidance on Infection Prevention and Control (IPC)
- Interim recommendations for adjusting food distribution standard operating procedures in the context of the covid-19 outbreak

The Global Shelter Cluster also has a dedicated page with resources from other agencies and field response plans for reference -<https://www.sheltercluster.org/response/covid-19-and-shelter>

Consideration for NFIs distributions

Protection: It is important to ensure equal access to impartial assistance according to need and without discrimination. This includes identifying beneficiaries who may be reluctant to come forward for assistance because they are marginalized or fear marginalization due to the virus and preserving sensitive information on affected persons or communities. Sensitization messages should be shared with beneficiaries ahead of distributions in line with national guidelines, including advice for at-risk groups (elderly and persons with pre-existing health conditions) as well as confirmed / suspected cases not to come to the distribution site. Alternative arrangements for distribution of assistance to those groups should be put in place (e.g. alternative collectors). Existing mechanisms to support beneficiaries who are unable to transport their kits (e.g. community volunteers / porters) should continue, ensuring that general guidelines for reducing risk of transmission are observed (social distancing, hygiene etc.)

Community engagement: Community engagement and clear communications and feedback mechanism will be crucial to reduce transmission, contain the spread of the disease and reduce fear, misinformation, confusion, and tension. Existing community mechanisms as well as distribution activities should be leveraged to disseminate sensitization messages at community level. Messages should be disseminated in simple / local language, taking into consideration cultural context, as well as special needs of marginalized communities, with the involvement of relevant stakeholders conducting risk communication activities (i.e. health / hygiene promotion). Adjustments should be made in alignment with guidance shared by the government and relevant health authorities (e.g. Ministry of Health, WHO, Health Cluster etc.).

Measures for partner staff: Field work staff should be equipped with:

1. Masks (few per person)
2. Gloves
3. Hand sanitizer (enough to use at least 2 times in each visit)
4. Soap (may be useful in areas with water)
5. Non-medical PPE (disposable) used by the staffs in the distribution process should be properly disposed being treated as potential biohazard. Re-useable PPEs-such as gloves/masks can be cleaned by soap and water, then decontaminated by 0.5% chlorine solution. Hand hygiene must be performed after PPE (non –medical) is removed.

Pre distribution protocol

1. Establish a reception point, (identity) verification point, collection point and exit points to channel traffic and allow for personal space of at least 1-2 meter between each beneficiary.
2. Set up hand washing area with adequate supply of hand wash solution (0.05% chlorine solution or soapy water – see instructions below). All efforts should be made to minimize manual contact during the handwashing process (e.g. no touch / pedal tap, paper towels, hands-free covered bins for collection of waste). Provisions should be made to ensure regular and safe removal of waste material from the handwashing area. The hand washing stations should also be outfitted with adequate signage which includes how to wash hands.
3. Allocate areas for health screening/ body temperature checks by health officials.
4. Allocate adequate areas for the elderly, pregnant and lactating women, people with disabilities and individuals with pre-existing/chronic underlying conditions after health screening / body temperature checks to prioritize distribution and minimize exposure. Beneficiaries who are pregnant and elderly should be prioritized.
5. Establish sheltered / covered area for beneficiaries that do not receive clearance at the health screening / body temperature check point. The allocated area should be spacious enough to allow beneficiaries to sit/stand at least 2 meters apart from each other.
6. Define means of verification prior to distribution.
7. Define mode of announcing beneficiary's distribution entitlement.



8. Define means through which beneficiaries can raise and receive response to their complaints (CRM) (AWAAZ toll free number can be included in the package in appropriate language and/with explanation prior/during distribution alternatively or in addition to AWAAZ toll free number partners can include its own organization CRM with appropriate explanation to the beneficiaries how the mechanism works).
9. Clearly and in advance communicate the day, date, time, and distribution location.
10. For house to house-identify and establish location of the shelter/house.
11. Pre-package and pre-position kits for distribution.
12. To ease burden of beneficiaries travelling a large distance, partners are encouraged to set up distribution site (s)/location(s) closer to the targeted beneficiaries, where practical set up multiple distribution sites/locations thereby saving time and distance.
13. Ensure appropriate PPE (non-medical) for staffs involved in the distribution plan are in place and staffs are trained on their proper use. Appropriate PPE (non-medical) focuses on employing primary barriers to COVID-19 transmission – covering mouth (sneezes and coughs), good hand washing practices, and cleaning/disinfecting high risk surfaces (0.2-0.5% chlorine solution).
14. Communicate with staff, local authorities, community leaders (CDCs, elders, etc.) the distribution plan and rationale of the distribution modality in advance to allow for understanding and better planning.
15. Set up target beneficiaries into small manageable groups (10-15 persons/group-maintaining social distance) assigning each group different distribution schedule time. Encourage each group to arrive/present themselves within designated time frame, encourage those arriving too early to come at designated time.
16. In view of the considerations recommended to be in place during the distribution of NFI kits for covid-19 response, the distribution process can be time consuming, and it is therefore recommended in view of this and minimizing distribution contact, partners to distribute all items in one cycle.

Distribution Protocol

1. A mobile handwashing station with (soap and water), two infra-red thermometers, IEC materials for sensitization on covid-19, alcohol rub sanitizers, tissue paper, waste disposal bin with a bin liner, 2-3 plastic chairs and 0.05% chlorine solution. The distribution should be scheduled in such a way that does not create crowdedness in distribution points and staff can control the process and distribution.
2. Cordoned distribution areas off (with a rope or tape) a 2-meter radius around the desk at the collection point if possible.
3. The site should be arranged in such way that all people come and go through one entrance/exit, so that they wash their hands, and their temperatures are taken. When taking temperatures, the control staff should ensure that he/she keeps 1.5 - 2 meter from the beneficiaries.
4. Instruct beneficiaries to maintain 1.5-2meter distance from each other throughout the distribution process. Partner staff should explain to the beneficiaries the reasons for these precautions.
5. The site should have enough IEC materials sensitizing the beneficiaries on COVID-19. Partner staff should spend the first 10-15 minutes briefing the beneficiaries on the necessary measures to take to prevent the infection of covid-19 (the IEC materials can be referenced during this session).
6. Emphasize frequent hand washing, frequency and timing of hand washing should be reinforced – including when returning home (at least 20 seconds rubbing, many bubbles).
7. Any beneficiary whose temperature is 38C and above should be isolated by asking them to sit down on the plastic chair set aside from the distribution process. The control staff will coordinate with distribution team to prioritize the distribution for the individual, who will then be advised to see a doctor immediately.
8. The chairs that have been used by a sick beneficiary should be disinfected using soap and water or 0.5% chlorine solution, following the disinfection procedures.
9. The distribution team should call the beneficiaries to the distribution table one by one and make sure he or she maintains 1-2 meter from the distribution table.
10. Means of verification: It is a practice during regular program activity to obtain proof of receipt of the NFI kit by the targeted beneficiary as a means of accountability to the donors. During this period of covid-19, the principal is to limit if not eliminate transmission through contact. Suggested options for accountability include but not limited to:
 - With consent-taking photo of beneficiary receiving the kit (taking note of rights and privacy of the beneficiary).
 - Beneficiaries must sanitize or wash their hands with soap or 0.05% chlorine solution before picking up the pen to sign or putting their thumbs on the ink pad. The person at the desk should also consider sanitizing/disinfecting (0.2-0.5% chlorine solution) the pens after each use. Single use dry paper towel or kitchen roll paper towel to be used for drying hands after washing with subsequent collection and disposal of used hand paper towel.
 - Supporting photographs/photos during distribution (with consent, rights, and privacy of beneficiaries) and summary acknowledgement report from the beneficiary group leader/CDC/Committees, chairperson with key information such as telephone number, identification details (Tazkira) etc.
 - To avoid cross contamination during signing, there should be second handwashing station with soap, water and tissue paper or alcohol rub sanitizer and the beneficiaries should wash their hands before signing.



- The distribution team should constantly wash their hands with soap and water or alcohol rub sanitizer which should be placed on their tables.
- When exiting the distribution venue or hall, the beneficiary should wash their hands again.

For distribution in halls, in addition to above, ensure that the distribution center is spacious enough, well ventilated and there is enough natural lighting. Make sure that the space has good air flow, such as by an air conditioner or an opened window, weather permitting

- The hall should be cleaned a day before the distribution, including the table surfaces and chairs disinfected before the beneficiaries enter the distribution hall.
- The seats should be arranged in such a way that when that the participants are seated; they maintain a body to body distance of at least 1-2meter.
- The distribution hall should have a waste disposal bin when, where all waste generated is disposed.
- At the entrance of the distribution venue, there should be a handwashing station with soap and water.
- In all situations, the beneficiaries should be encouraged to regularly wash their hands with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing. If soap and water are not available, use hand sanitizer that contains at least 60% alcohol. Beneficiaries should be reminded to avoid touching their eyes, nose, and mouth with unwashed hands.

For shelter materials, maintain sufficient distance (1.5m) with beneficiary during distribution; preferably drop the packaged kit at the entrance or near the shelter.

Post Distribution Protocol

1. Non-medical PPE (disposable) used by the staffs in the distribution process should be properly disposed, being treated as potential biohazard. Re-useable PPEs-such as gloves/masks can be cleaned by soap and water, then decontaminated by 0.5% chlorine solution. Hand hygiene must be performed after it is PPE is removed.
2. Strongly encourage hand washing upon collection and handling of the kit by the beneficiary.
3. Post distribution disinfection using 0.2% chlorine solution-plastic sheet/tarpaulin/tables/chairs etc.
4. Regular temperature checks (for multiple distribution cycles).
5. In the event of suspected exposure, notify management and have covid-19 test carried out followed by 14 days self-quarantine.



Annex 1: Checklist for distribution of NFI assistance in relation to the covid-19 situation

To minimize the potential risk of spreading Covid-19 during the in-kind and cash distribution for the affected populations, measures below should be adapted in addition to what was described in the above protocol section.

During assessment and data collection:

- As per SOP, register the head of household, however, in case the head of household is showing symptoms of Covid-19, register the alternative to receive the assistance on behalf.
- Ensure to have contact list related to Covid-19 in respective provinces for beneficiaries in case they wish to inquire.
- Print the IEC materials in Dari and/or Pashto for dissemination.

Before the distribution:

- Make available handwashing station and/or hand sanitizer to staff, financial service provider and beneficiaries at the distribution site. Also ensure to have access to masks for partner staff and financial service provider where needed.
- Take measures to reduce crowding in and out distribution site. This could be achieved by reducing the number of beneficiaries for certain time and date.
- Ensure adequate space is available to keep at least 1-meter distance between beneficiaries and between beneficiaries and partner / financial service provider staff. Where possible, demarcate the distribution site with ropes, tapes or with other means so that it is easy for beneficiaries to follow.
- Use the distribution to disseminate preventive guidance and to raise awareness of beneficiaries.

During the distribution:

- In addition to the general briefing of the distribution, ensure to share the messages on preventing covid-19 with IEC materials.
- Guide the beneficiaries to wash their hands, use the hand sanitizer and to follow the demarcation to line up at least 1 meter apart in between.
- Frequently disinfect all surfaces such as desks, tablets and PCs or any other items that are exposed to staff, financial service providers and beneficiaries.