国务院应对新型冠状病毒感染肺炎疫情联防联控机制关于做好新冠肺炎疫情常态化防控工作的指导意 见

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国务院应对新型冠状病毒感染肺炎疫情联防联控机制关于做好新冠肺炎疫情常态化防控工作的指导意见 (国发明电〔2020〕14号)

各省、自治区、直辖市人民政府, 国务院各部委、各直属机构:

在以习近平同志为核心的党中央坚强领导下,经过全国上下艰苦努力,我国新冠肺炎疫情防控向好态势进一步巩固,防控工作已从应急状态转为常态化。按照党中央关于抓紧抓实抓细常态化疫情防控工作的决策部署,为全面落实"外防输入、内防反弹"的总体防控策略,坚持及时发现、快速处置、精准管控、有效救治,有力保障人民群众生命安全和身体健康,有力保障经济社会秩序全面恢复,经中央应对新型冠状病毒感染肺炎疫情工作领导小组同意,现提出以下意见。

一、坚持预防为主

- 1.科学佩戴口罩。在人员密集的封闭场所、与他人小于1米距离接触时佩戴口罩。医疗机构工作人员,在密闭公共场所工作的营业员、保安员、保洁员、司乘人员、客运场站服务人员、警察等人员以及就医人员等要佩戴口罩。
- 2.减少人员聚集。注意保持1米以上的社交距离。减少非必要的聚集性活动,减少参加聚集性活动的人员。尽量不前往人员聚集场所尤其是密闭式场所。
- 3.加强通风消毒。室内经常开窗通风,保持空气流通。公共场所、场站码头、公共交通工具要落实日常清洁、消毒等卫生措施。
 - 4.提高健康素养。养成"一米线"、勤洗手、戴口罩、公筷制等卫生习惯和生活方式。咳嗽、打喷嚏时注意遮挡。
 - 二、落实"四早"措施
- 5.及时发现。落实公共场所体温检测措施,加强预检分诊和发热门诊排查,做到对确诊病例、疑似病例、无症状感染者的"早发现",并按要求"早报告",不得瞒报、漏报、迟报。
- 6.快速处置。24小时内完成流行病学调查,充分发挥大数据等优势,尽快彻底查明可能的感染源,做好对密切接触者的判定和追踪管理。落实"早隔离"措施,及时对确诊病例、疑似病例进行隔离治疗,对无症状感染者、密切接触者实行14天集中隔离医学观察。对可能的污染场所全面终末消毒。
- 7.精准管控。依法依规、科学划定防控区域范围至最小单元(如楼栋、病区、居民小区、自然村组等),果断采取限制人员聚集性活动、封锁等措施,切断传播途径,尽最大可能降低感染风险。及时公布防控区域相关信息。
- 8.有效救治。指定定点收治医院,落实"早治疗"措施,加强中西医结合治疗。及时有效全面收治轻症患者,减少向重症转化。坚持"四集中",对重症患者实施多学科救治,最大限度提高治愈率、降低病亡率。患者治愈出院后,继续集中或居家隔离医学观察14天。

三、突出重点环节

- 9.重点场所防控。按照相关技术指南,在落实防控措施前提下,全面开放商场、超市、宾馆、餐馆等生活场所;采取预约、限流等方式,开放公园、旅游景点、运动场所,图书馆、博物馆、美术馆等室内场馆,以及影剧院、游艺厅等密闭式娱乐休闲场所,可举办各类必要的会议、会展活动等。
- 10.重点机构防控。做好养老机构、福利院、监所、精神卫生医疗机构等风险防范,落实人员进出管理、人员防护、健康监测、消毒等防控措施。养老机构内设医务室、护理站等医疗服务机构的,不得超出医疗许可服务范围对外服务。医疗机构举办养老机构或与养老机构毗邻的,应按照医疗机构分区管理要求开展交叉感染评估,评估有风险的应采取必要的控制措施。
- 11.重点人群防控。指导老年人、儿童、孕产妇、残疾人、严重慢性病患者等重点人群做好个人防护,并开展心理疏导和 关爱帮扶等工作。
- 12.医疗机构防控。加强院内感染防控,推广分时段预约诊疗,严格落实医疗机构分区管理要求,及时排查风险并采取处置措施,严格探视和陪护管理,避免交叉感染。严格预检分诊和发热门诊工作流程,强化防控措施。落实医务人员防护措施,加强对医务人员的健康管理和监测。
 - 13.校园防控。实行教职员工和学生健康情况"日报告"、"零报告"制度。做好健康提示、健康管理和教室通风、消毒等工

作, 落实入学入托晨(午)检、因病缺课(勤)病因追查和登记等防控措施。

14.社区防控。加强基层社区网格化管理,发挥社区志愿者作用。做好健康教育、环境卫生治理、出租房屋和集体宿舍管理、外来人员管理等工作。出现疫情的社区要加强密切接触者排查和隔离管理、终末消毒等工作,必要时采取限制人员聚集性活动、封闭式管理等措施。

四、强化支撑保障

15.扩大检测范围。各地可根据疫情防控工作需要和检测能力,进行科学评估,对密切接触者、境外入境人员、发热门诊患者、新住院患者及陪护人员、医疗机构工作人员、口岸检疫和边防检查人员、监所工作人员、社会福利养老机构工作人员等重点人群"应检尽检"。对其他人群实施"愿检尽检"。人群相对密集、流动性较大地区和边境口岸等重点地区县区级及以上疾控机构、二级及以上医院要着力加强核酸检测能力建设;鼓励有资质的社会检测机构提供检测服务,扩大商业化应用。"应检尽检"所需费用由各地政府承担,"愿检尽检"所需费用由企事业单位或个人承担;检测收费标准由各地物价部门确定并公示。各地要及时公布检测机构名单。

16.发挥大数据作用。依托全国一体化政务服务平台,全面推动各地落实"健康码"互通互认"一码通行",及时将核酸和血清 抗体检测结果、重点人员等信息共享到"健康码"数据库,推进人员安全有序流动。做好全国一体化政务服务平台"防疫健康信息 码"入境人员版的推广应用,加强入境人员闭环管理。

17.强化科研与国际合作。推进疫苗、药物科技攻关和病毒变异、免疫策略等研究。加快检测试剂和设备研发,提高灵敏度、特异性、简便性,进一步提升检测能力、缩短检测时间。加强与世界卫生组织等国际组织、有关国家的信息共享、技术交流和防控合作。

五、加强组织领导

18.落实党委和政府责任。各地党委和政府要落实属地责任,加强组织领导,坚持依法防控、科学防控、联防联控,加大 经费投入,加强医疗物资动态储备,提升防控和应急处置能力,严格落实常态化防控各项措施要求。国务院各有关部门要落实 主管责任,继续加强联防联控、统筹调度,强化对各地常态化防控工作的指导和支持。

19.落实企事业单位责任。各企事业单位要落实主体责任,严格执行疫情防控规定,健全防控工作责任制和管理制度,制定完善应急预案。

20.动态调整风险等级和应急响应级别。各地要按照分区分级标准,依据本地疫情形势,动态调整风险等级和应急响应级别。要因地制宜、因时制宜,不断完善疫情防控应急预案和各项配套工作方案,一旦发生疫情,及时采取应急处置措施,实施精准防控。

境外疫情输入防控在落实常态化防控工作的同时、按照中央关于做好防控境外疫情输入工作的指导意见实施。

国务院应对新型冠状病毒感染肺炎疫情联防联控机制

2020年5月7日

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The State Council 's Guiding Opinions on the Joint Prevention and Control Mechanism of Ne w Coronavirus Infection Pneumonia Outbreaks

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Guiding Opinions of the State Council on the New Coronavirus Infection Pneumonia Joint Prevention and Control Mechanis m on Doing a Good Job in the Normalization of the Prevention and Control of New Coronary Pneumonia Epidemic Situation

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(国发明电〔2020〕 No. 14)

The people 's governments of provinces, autonomous regions and municipalities directly under

the Central Government, ministries and commissions of the State Council, and directly affiliated institutions: Under the s trong leadership of the Party Central Committee with Comrade Xi Jinping at the core, after hard work across the country, the prevention and control of the new coronary pneumonia epidemic in China has been further consolidated Has changed from emergency to normal. In accordance with the Party Central Committee's decision to deploy the prevention and control work of the normal epidemic situation, in order to fully implement the overall prevention and control strategy of "external defense i nput, internal defense rebound", adhere to timely detection, rapid disposal, precise control and effective treatment, Effectivel y guarantee the safety and health of the people and the overall recovery of the economic and social order. With the approval of the Central Leading Group for the New Coronavirus Infection Pneumonia Outbreak, the following opinions are now proposed.

- 1. Adhere to prevention
- 1. Wear masks scientifically. Wear a mask when you are in a closed, crowded place and you are in contact with others I ess than 1 meter away. Staff of medical institutions, salesmen, security guards, cleaning staff, crew members, passenger sta tion service personnel, police officers, and medical personnel working in closed public places must wear masks.
- 2. Reduce personnel gathering. Pay attention to maintaining a social distance of more than 1 meter. Reduce non-essent ial gathering activities and reduce the number of people participating in gathering activities. Try not to go to places where pe ople gather, especially closed places.
- 3. Strengthen ventilation and disinfection. Frequently open windows in the room to maintain air circulation. Public place s, terminals, and public transportation must implement daily cleaning, disinfection and other sanitary measures.
- 4. Improve health literacy. Cultivate hygienic habits and lifestyles such as "one-meter noodles", washing hands frequently, wearing masks, and making chopsticks. Cover when coughing or sneezing.
 - 2. Implementing the "four early" measures
- 5. Found in time. Implement measures for detecting body temperature in public places, strengthen pre-examination and triage, and check out hot cases, so as to "early detect" confirmed cases, suspected cases, and asymptomatic infections, an d "early report" as required. Late report.
- 6. Quick disposal. Complete the epidemiological survey within 24 hours, give full play to the advantages of big data, and thoroughly identify the possible source of infection as soon as possible, and make the judgment and follow-up management of close contacts. Implement "early isolation" measures, timely isolation and treatment of confirmed cases and suspected ca ses, and implement 14-day centralized isolation medical observation for asymptomatic infected persons and close contacts. Disinfect all possible contaminated sites.
- 7. Precise control. According to laws and regulations, scientifically define the prevention and control area to the smallest unit (such as buildings, wards, residential quarters, natural village groups, etc.), decisively take measures to limit the concen tration of personnel activities, blockades, etc., cut off the transmission channel, and reduce it to the maximum Risk of infection. Timely release relevant information on prevention and control areas.
- 8. Effective treatment. Designate designated admission hospitals, implement "early treatment" measures, and strengthe n integrated Chinese and Western medicine treatment. Timely and comprehensive treatment of patients with mild disease, r

educe the conversion to severe. Adhere to the "four focus", implement multidisciplinary treatment for critically ill patients, ma ximize the cure rate and reduce the mortality rate. After the patient was cured and discharged from the hospital, he continue d to concentrate or stay at home for medical observation for 14 days.

- 3. Highlight key links
- 9. Prevention and control of key places. In accordance with the relevant technical guidelines, under the premise of implementing prevention and control measures, fully open shopping malls, supermarkets, hotels, restaurants and other living places; take appointments, limit current and other methods to open parks, tourist attractions, sports venues, libraries, museum s, art galleries Such as indoor venues, as well as closed theaters, entertainment halls and other closed entertainment place s, can hold all kinds of necessary conferences, exhibitions, etc.
- 10. Prevention and control of key institutions. Do a good job in risk prevention for pension institutions, welfare institution s, prisons, mental health and medical institutions, and implement prevention and control measures for personnel access ma nagement, personnel protection, health monitoring, and disinfection. Where a medical service institution, a nursing station a nd other medical service institutions are set up in an old-age institution, they shall not provide external services beyond the s cope of medical license services. Medical institutions hosting pension institutions or adjacent to pension institutions shall car ry out cross-infection assessments in accordance with the requirements of zoning management of medical institutions. Thos e who are at risk should take necessary control measures.
- 11. Prevention and control of key groups. Guide the elderly, children, pregnant women, disabled people, severe chronic patients and other key groups to do personal protection, and carry out psychological counseling and care and assistance.
- 12. Prevention and control of medical institutions. Strengthen nosocomial infection prevention and control, promote time -division appointments and treatments, strictly implement the requirements of zoning management in medical institutions, pr omptly check risks and take disposal measures, strictly visit and accompany management to avoid cross infection. Strictly pr e-check the work flow of triage and hot diagnosis, strengthen prevention and control measures. Implement protective measures for medical personnel and strengthen the health management and monitoring of medical personnel.
- 13. Campus prevention and control. Implement the "daily report" and "zero report" systems for the health status of teac hing staff and students. Do a good job of health reminders, health management, classroom ventilation, disinfection, etc., and implement preventive and control measures such as morning (noon) inspection of admission and enrollment, absence of classes due to illness (work attendance), cause tracking and registration.
- 14. Community prevention and control. Strengthen the grid management of grassroots communities, and play the role of community volunteers. Do a good job in health education, environmental sanitation management, rental housing and collective dormitory management, management of foreigners, etc. Communities with outbreaks should strengthen the close contact investigation and isolation management, terminal disinfection and other work, and if necessary, take measures to restrict personnel gathering activities and closed management.

Fourth, strengthen the support guarantee

- 15. Expand the detection range. All localities can conduct scientific assessments based on the needs of epidemic preve ntion and control work and detection capabilities. The key populations, such as staff members and staff of social welfare pen sion institutions, "should be inspected thoroughly". Carry out "willing to check and check all other people". County-level and above disease control institutions and second-level and above hospitals in key areas such as relatively densely populated a nd highly mobile areas and border ports should focus on strengthening nucleic acid testing capabilities; encourage qualified social testing institutions to provide testing services and expand business化应用。Application. The expenses required for t he "exhaustive inspection" shall be borne by the local governments, and the expenses for the "willing inspection and inspection" shall be borne by the enterprises and institutions; All localities should promptly announce the list of testing institutions.
- 16. Play the role of big data. Relying on the national integrated government service platform, comprehensively promote the implementation of "health code" mutual recognition and "one code pass" in various places, and timely share the results of nucleic acid and serum antibody test results and key personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to promote the safety of personnel in the "health code" database to personnel in the

onnel Order flow. Do a good job in the promotion and application of the inbound personnel version of the national integrated government affairs service platform "epidemic prevention health information code", and strengthen the closed-loop manage ment of inbound personnel.

- 17. Strengthen scientific research and international cooperation. Advance research in vaccines, pharmaceutical technol ogy research, virus mutation, and immunization strategies. Accelerate the research and development of detection reagents and equipment, improve sensitivity, specificity and simplicity, further improve the detection ability and shorten the detection ti me. Strengthen information sharing, technical exchange, and prevention and control cooperation with international organizations such as the World Health Organization and relevant countries.
 - V. Strengthen organizational leadership
- 18. Implement the responsibilities of the party committee and government. Local party committees and governments m ust implement territorial responsibilities, strengthen organizational leadership, adhere to legal prevention and control, scientific prevention and control, and joint prevention and control, increase investment in funds, strengthen the dynamic reserve of medical materials, improve prevention and control and emergency response capabilities, and strictly implement normalized prevention Control various measures. Relevant departments of the State Council should implement their responsibilities, continue to strengthen joint defense and joint control, coordinate scheduling, and strengthen guidance and support for the normalized prevention and control work in various regions.
- 19. Implement the responsibilities of enterprises and institutions. All enterprises and institutions should implement the m ain responsibility, strictly implement the epidemic prevention and control regulations, improve the prevention and control responsibility system and management system, and formulate and improve emergency plans.
- 20. Dynamically adjust the risk level and emergency response level. All localities should dynamically adjust the risk leve I and emergency response level in accordance with the local grading standards and the local epidemic situation. It is necess ary to adapt to local conditions and the time, and constantly improve the emergency plan for epidemic prevention and contro I and various supporting work plans. In the event of an epidemic, emergency measures shall be taken in time to implement p recise prevention and control.

The prevention and control of importation of overseas epidemic situation shall be implemented in accordance with the guidance of the central government on the prevention and control of importation of overseas epidemic situation while implementing the normalization prevention and control work.

Joint prevention and control mechanism of the State Council in response to a new coronavirus infection pneumonia outbrea

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May 7, 2020

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