भारतीय आयुर्विज्ञान अनुसंधान परिषद
स्वास्थ्य अनुसंधान विभाग, स्वास्थ्य एवं परिवार
कल्याण मंत्रालय, भारत सरकार

Indian Council of Medical Research
Department of Health Research, Ministry of Health
and Family Welfare, Government of India

18/1/2021-Admn-II

Dated: 19.5.2021.

To

The Directors/Directors-in-Charge of
permanent Institutes/Centres of ICMR.

Sir/Madam,

Please find enclosed the following letter/Order/email/OM which has been received from different ministries for information and necessary action:

S. No	Reference No. & date	Name of the Ministry	Subject
1	No. 40-3/2020-DM-I(A)dated 27.4.2021	Ministry of Home Affairs, New Delhi	Clarification on use of liquid oxygen for manufacturing of oxygen cylinders
2	No. 40-6/2020-DM-I(A)dated 25.4.2021	Ministry of Home Affairs, New Delhi	Order regarding use of liquid oxygen for medical purposes only.
3	Email dated 30.4.2021	Ministry of Home Affairs, New Delhi	MHA Order No.40-3/2020-DM-I(A) dated 29.4.2021 to follow containment framework as conveyed by MOHFW letter dt. 25.4.2021
4	T-21016/244/ 2020-eHealth dated 10.5.2021.	Ministry of Health & Family Welfare, eHealth Section, New Delhi	Installation of SSL certificates on all Government websites and web applications.

Yours faithfully,

(Jagdish Rajesh)
Asstt. Director General (Admn.)

Encl: As above

Copy to:-

1. PS to DG/Sr. DDG (A)/Sr. FA
2. All Divisional Heads
3. DDG
4. ADG
5. Dr. L.K.Sharma, Scientist 'E' – soft copy of the same has been mailed at your email ID(sharma.lk@icmr.gov.in) for website upload.

Secretary (DHR) Office
2169894
28-4-21

No .40-3/2020-DM-I(A)
Government of India
Ministry of Home Affairs

North Block, New Delhi-110001
Dated: 27th April, 2021

To

Chief Secretaries/Administrators of
All States/Union Territories
(As per list attached)

Subject: Clarification on use of liquid oxygen for manufacturing of oxygen cylinders

Sir/Madam,

Please refer to this Ministry's Order of even number dated 25.04.2021 and 26.04.2021, relating to use of liquid oxygen for medical purposes.

2. Clarifications have been sought, as to whether use of liquid oxygen is allowed for manufacturing of oxygen cylinders and Pressure Swing Adsorption (PSA) Medical Oxygen Generation Plants, which are primarily used for supplying and generating medical oxygen respectively. It is clarified that since the use of liquid oxygen cylinders is meant for medical purposes, it is covered under the aforesaid MHA Orders dated 25.04.2021 and 26.04.2021. Therefore, use of liquid oxygen may continue to be allowed for manufacturing of oxygen cylinders and PSA plants.

3. It is requested that the above clarification may please be disseminated to the field agencies, so as to ensure unhindered manufacturing of liquid oxygen cylinders and PSA plants for medical purposes.

Yours faithfully,

(Sanjeev Kumar Jindal)
Joint Secretary to the Government of India
Tel: 011-23092722

Copy for information to:

1) Secretaries of Ministries/Departments of Government of India
2) All Members of National Executive Committee
3) Member Secretary, National Disaster Management Authority

D G ICMR OFFICE
Diary No. 600287
Date 29/4/21

Email **Secretary DHR**

From : Prof. Balram Bhargava <balram.bhargava@gov.in> Wed, Apr 28, 2021 07:08 AM

Subject : Fwd: [Secy-goi] Fwd: Clarification on use of liquid oxygen for manufacturing of oxygen cylinders for broadcasting to secretaries of Ministries/Department of Government of India

1 attachment

To : balrambhargava@yahoo.com, Anu Nagar <anu.nagar1@gov.in>, Dr G S G Ayyangar <drgsg.ayyangar@nic.in>

Cc : Secretary DHR <dg@icmr.org.in>

JS(AN) | ADG(K)

ADG

----- Forwarded Message -----
From: Shyam <sm.manohar@nic.in>
To: secy-goi@lsmgr.nic.in
Cc: M P Suganthi <mpsugandhi@nic.in>, N Sabya Choudhury <sabya@nic.in>
Sent: Tue, 27 Apr 2021 18:51:19 +0530 (IST)
Subject: [Secy-goi] Fwd: Clarification on use of liquid oxygen for manufacturing of oxygen cylinders for broadcasting to secretaries of Ministries/Department of Government of India

Sir

Please forward the attachment to all the secretaries of GoI from NERC DM DIVISION

Regards
Shyam
Scientist
North Block
MHA
23094745

Begin forwarded message:

> From: "NERC (DM Divsion) MHA" <dresponse-nerc@gov.in>
> Date: 27 April 2021 at 6:47:17 PM IST
> To: Shyam M Manohar <sm.manohar@nic.in>
> Cc: Mohammad Zaheen <mohdzaheen@nic.in>
> Subject: Clarification on use of liquid oxygen for manufacturing of oxygen cylinders for broadcasting to secretaries of Ministries/Department of Government of India
>
>
> Sir,
>
> Kindly find attached Clarification on use of liquid oxygen for manufacturing of oxygen cylinders for broadcasting to

Get Outlook for Android

secretaries of Ministries/Department of Government of India.
>
>
> Regards,
>
> National Emergency Response Center (NERC),
> Disaster Management Division,
> Ministry of Home Affairs
> Government of India
> New Delhi-110001
> Tele-011-23438252/53
> Fax-011-23438254
>
>
>

MHA clarification on use of liquid oxygen.pdf
365 KB

No. 40-3/2020-DM-I(A)
Government of India
Ministry of Home Affairs

North Block, New Delhi-110001
Dated: 27th April, 2021

To

Chief Secretaries/Administrators of
All States/Union Territories
(As per list attached)

Subject: Clarification on use of liquid oxygen for manufacturing of oxygen cylinders

Sir/Madam,

Please refer to this Ministry's Order of even number dated 25.04.2021 and 26.04.2021, relating to use of liquid oxygen for medical purposes.

2. Clarifications have been sought, as to whether use of liquid oxygen is allowed for manufacturing of oxygen cylinders and Pressure Swing Adsorption (PSA) Medical Oxygen Generation Plants, which are primarily used for supplying and generating medical oxygen respectively. It is clarified that since the use of liquid oxygen cylinders is meant for medical purposes, it is covered under the aforesaid MHA Orders dated 25.04.2021 and 26.04.2021. Therefore, use of liquid oxygen may continue to be allowed for manufacturing of oxygen cylinders and PSA plants.

3. It is requested that the above clarification may please be disseminated to the field agencies, so as to ensure unhindered manufacturing of liquid oxygen cylinders and PSA plants for medical purposes.

Yours faithfully,

(Sanjeev Kumar Jindal)
Joint Secretary to the Government of India
Tel: 011-23092722

Copy for information to:

1) Secretaries of Ministries/Departments of Government of India
2) All Members of National Executive Committee
3) Member Secretary, National Disaster Management Authority

40-6/2020-DM-I(A)
Government of India
Ministry of Home Affairs

North Block, New Delhi
Dated 25th April, 2021

ORDER

Whereas, an Order no. 40-3/2020-DM-I(A) dated 22.04.2021 have been issued by undersigned, in capacity of Chairperson, National Executive Committee (NEC) under the Disaster Management Act, 2005 (hereinafter referred to as DM Act) for taking various measures to ensure the uninterrupted supply of Medical Oxygen across the country;

And whereas, it has been considered necessary to restrict industrial usage of oxygen for ensuring availability of adequate and uninterrupted supply of medical oxygen across the country for management of COVID-19 patients and necessary order in this regard was issued on 22.04.2021 to restrict the use of industrial oxygen;

And whereas, the Central Government has reviewed the oxygen supply situation and has decided that with immediate effect, use of liquid oxygen, including the existing stock, will be allowed for medical purposes only, and that all manufacturing units may be allowed to maximise their production of liquid oxygen, and make it available to the Government, for use for medical purposes only;

Now, therefore, in exercise of powers conferred under section 10(2)(l) and section 65 of the DM Act, the undersigned, hereby directs the State/ Union Territory Governments and State/ Union Territory Authorities to ensure that use of liquid oxygen is not allowed for any non-medical purpose and that all manufacturing units may maximise their production of liquid oxygen, and make it available to the Government for use for medical purposes only, with immediate effect and until further orders. Further, all stocks of liquid oxygen, should also be made available to the Government for use for medical purposes. No exception is allowed to any industry with regard to use of liquid oxygen.

25/04/2021

Union Home Secretary

and, Chairman, National Executive Committee (NEC)

To,

1. Secretaries of Ministries/ Department of Government of India
2. Chief Secretaries/ Administrators of States/ Union Territories

(As per list attached)

Copy to:

i. All Members of the National Executive Committee (NEC)

ii. Member Secretary, National Disaster Management Authority

No. 40-3/2020-DM-I(A)

Government of India
Ministry of Home Affairs

North Block, New Delhi-110001
Dated 26th April, 2021

ORDER

In continuation of Ministry of Home Affair's (MHA) Order of even no. dated 25th April 2021, relating to use of liquid oxygen for medical purposes, and in exercise of the powers conferred under section 10(2)(l) and section 65 of the Disaster Management Act 2005, the undersigned hereby exclude the following industries/ sectors from the applicability of the said Order, for strict implementation by Ministries/ Departments of Government of India, State/Union Territory Governments and State/ Union Territory Authorities:

1. **Ampules & vials;**
2. **Pharmaceutical; and**
3. **Defence forces.**

26/04/2021

Union Home Secretary

and, Chairman, National Executive Committee (NEC)

To

1. Secretaries of Ministries/ Department of Government of India
2. Chief Secretaries/ Administrators of States/ Union Territories

(As per list attached)

Copy to:

i. All Members of the National Executive Committee (NEC)
ii. Member Secretary, National Disaster Management Authority

Email

Secretary DHR

From : Prof. Balram Bhargava <balram.bhargava@gov.in>

Fri, Apr 30, 2021 09:28 AM

1 attachment

Subject : Fwd: [Secy-goi] Fwd: MHA Order No. 40-3/2020-DM-I(A) dated 29.04.2021 to all secretaries of Ministries/Department of Government of India

To : balrambhargava@yahoo.com, geetan <geetan@nic.in>, Anu Nagar <anu.nagar1@gov.in>, Dr G S G Ayyangar <drgsg.ayyangar@nic.in>

Cc : Secretary DHR <dg@icmr.org.in>

D.G. ICMR OFFICE
Diary No. 600403
Date 30/4/21

JS(Ad) | SO(A)

30/4/2021

----- Forwarded Message -----
From: Shyam <sm.manohar@nic.in>
To: secy-goi@lsmgr.nic.in
Cc: M P Suganthi <mpsugandhi@nic.in>
Sent: Thu, 29 Apr 2021 21:55:59 +0530 (IST)
Subject: [Secy-goi] Fwd: MHA Order No. 40-3/2020-DM-I(A) dated 29.04.2021 to all secretaries of Ministries/Department of Government of India

Please circulate
06/05
Admn II

Sir

Please forward the attachment to all secretaries of GoI
Sender is NERC DM DIVISION

Regards
Shyam
Scientist
North Block
MHA
23094745

Begin forwarded message:

> From: "NERC (DM Divsion) MHA" <dresponse-nerc@gov.in>
> Date: 29 April 2021 at 8:46:41 PM IST
> To: Shyam M Manohar <sm.manohar@nic.in>
> Cc: Mohammad Zaheen <mohdzaheen@nic.in>
> Subject: MHA Order No. 40-3/2020-DM-I(A) dated 29.04.2021 for broadcasting to secretaries of Ministries/Department of Government of India
>
>
> Sir,
>
> Kindly find attached MHA Order No. 40-3/2020-DM-I(A) dated 29.04.2021 for broadcasting to secretaries of Ministries/Department of Government of India.
>
>
> Regards,
>

Ms Shalu

> National Emergency Response Center (NERC),
> Disaster Management Division,
> Ministry of Home Affairs
> Government of India
> New Delhi-110001
> Tele-011-23438252/53
> Fax-011-23438254
>
>
>
>

MHA Order dt 29.04.2021 to follow containment framework as conveyed by MoHFW letter dt 25.04.2021.pdf
6 MB

No. 40-3/2020-DM-I(A)
Government of India
Ministry of Home Affairs

North Block, New Delhi-110001
Dated 29th April, 2021

ORDER

Whereas, an Order of even number dated 23.03.2021 was issued for effective control of COVID-19 in the country, for a period upto 30.04.2021;

And whereas, considering the unprecedented surge in COVID-19 cases across the country, Ministry of Health & Family Welfare (MoHFW) vide DO No. Z.28015/85/2021-DM Cell dated 25th April 2021, has issued an advisory to all States and Union Territories (UTs), for implementing intensive, local and focused containment framework, in specific districts/ cities/ areas, identified based on a prescribed criterion;

Whereas, in exercise of the powers under section 6(2)(i) of the Disaster Management Act, 2005, National Disaster Management Authority (NDMA) has directed the undersigned to issue an order, for ensuring compliance on the focused containment measures, as mentioned in the aforesaid MoHFW letter dated 25.04.2021, for containment of COVID-19 in the country;

Now, therefore, in exercise of the powers, conferred under Section 10(2)(l) of the Disaster Management Act 2005, the undersigned, hereby directs the State/ Union Territory Governments and State/ Union Territory Authorities to consider the containment measures for COVID-19, as conveyed vide aforesaid MoHFW advisory dated 25.04.2021, as per **Annexure-I**, for immediate implementation in their State/ UT, based on the assessment of the situation, until 31.05.2021. States/ UTs, will take the necessary containment measures, under the relevant provisions of the Disaster Management Act 2005. It is further directed that:

(i) The National Directives for COVID-19 Management, as specified in **Annexure-II**, shall continue to be strictly followed throughout the country.

(ii) All the District Magistrates shall strictly enforce the containment measures taken by States/ UTs and the National Directives.

(iii) Any person violating these measures will be liable to be proceeded against as per the provisions of Section 51 to 60 of the Disaster Management Act, 2005, besides legal action under Section188 of the IPC, and other legal provisions as applicable.

29/04/2021

Union Home Secretary

and, Chairman, National Executive Committee (NEC)

To:

1. The Secretaries of Ministries/ Departments of Government of India
2. The Chief Secretaries/Administrators of States/Union Territories (As per list attached)

Copy to:

i. All Members of the National Executive Committee
ii. Member Secretary, National Disaster Management Authority

ANNEXURE-I

Containment framework, as mentioned in Ministry of Health & Family Welfare (MoHFW), DO no. Z.28015/85/2021-DM Cell dated 25th April 2021

Annexure – A

Implementation Framework for community containment/large containment areas

Understanding the virus transmission dynamics:

The virus transmits through the human host. It is imperative to understand that in order to contain the transmission of the virus, the strategies involve not just containing the virus but also the human host.

Broadly, the **strategies** are:

1. **Individual actions** such as wearing of masks, maintaining a distance of 6 feet from others, sanitizing one's hands frequently and not attending any mass gathering; and

2. **Public Health measures** to contain the virus by:

   - **quarantining** and testing individuals suspected to be positive including contacts of SARS-CoV-2 positive persons, SARI cases, persons with flu like symptoms etc. and ensuring that they are not mobile and thus able to spread the infection
   - **isolating** all those who are positive, tracing their contacts, quarantining and testing them.
   - where there are clusters of cases, simply quarantining individuals or families will not help. In that case, **containment zones** with clear boundaries and stringent controls will be required to ensure that the infection does not spread outside. This is in line with the containment strategy followed worldwide and also already enumerated in SOPs of the Ministry of Health. This would mean a large geographical area like a city or district or well defined parts thereof, where cases are high and spiraling up, gets contained physically, However, regulated movement of public transport would be permitted.

3. **Evidence Based Decision:** The decision on where and when to go for large Containment Zone (CZ) has to be evidence based and done at the State/UT level after proper analysis of the situation, such as; the population affected, the geographical spread, the hospital infrastructure, manpower, the ease of enforcing boundaries etc.

4. However, in order to facilitate objective, transparent, and epidemiologically sound decision making, the following broad-based framework is provided to aid States UTs in selection of districts/areas:

S. No.	Parameter	Thresholds
1	**Test positivity**	Test positivity of **10%** or more in the last one week
OR		
2	**Bed occupancy**	Bed occupancy of **more than 60%** on either **oxygen supported or ICU beds**

.....contd/-

5. The areas requiring **Intensive action and local containment connotes** specific and well defined geographical units such as cities/town/part of the towns/district headquarters/semi-urban localities/municipal wards/*panchayat areas* etc.

6. The areas so identified for intensive action and local containment will primarily focus on **the following strategic areas of intervention**:

A. **Containment**

i. Focus will be on **containment** as a **major approach to** flatten the current curve of the epidemic.

ii. **Night curfew:** Movement of individuals shall be strictly prohibited during night hours, except for essential activities. Local administration shall decide the duration of the night curfew hours and issue orders, in the entire area of their jurisdiction, under appropriate provisions of law, such as under Section 144 of CrPC, and ensure strict compliance.

iii. The spread of the infection has to be controlled through **restricting the intermingling amongst people,** the only known host for the COVID-19 virus.

iv. Social/ political / sports / entertainment / academic / cultural / religious / festival-related and other **gathering and congregations shall be prohibited.**

v. **Marriages (attended by up to 50 persons) and funerals/ last rites (attended by up to 20 persons) may be allowed.**

vi. All shopping complexes, cinema halls, restaurants & bars, sports complexes, gym, spas, swimming pool and religious places should remain closed.

vii. **Essential services and activities** such as **healthcare services, police, fire, banks, electricity, water and sanitation, regulated movement of public transport** including all **incidental services and activities** needed for a smooth functioning of these activities **shall continue**. Such services shall continue in both **public and private sector.**

viii. **Public transport** (railways, metros, buses, cabs) **to operate at a maximum capacity of 50%.**

ix. There shall be **no restrictions on inter-state and intra-state movement including transportation of essential goods.**

x. All **offices,** both government and private, to function with **a maximum staff strength of 50%.**

xi. **All industrial and scientific establishments,** both government and private may be **allowed** subject to **the workforce following physical distancing norms.** They shall also be tested through RAT (in case of individuals identified with flu like symptoms) from time to time.

xii. The SOPs already issued by MoHFW, including training manuals for surveillance teams and supervisors are available on the website & must be followed.

xiii. **However, these are indicative activities, and States/ UTs should make a careful analysis of the local situation, areas to be covered, and probability of transmission and then take a decision.**

.....contd/-

xiv. The restrictions as above shall continue for a **period of 14 days.**

xv. **Before declaring a containment area, make a public announcement, outlining the rationale for the same and the kind of restrictions that will be in place (a leaflet in local language may be distributed highlighting the gravity of the situation and restrictions to be followed)**

xvi. **Community volunteers, civil society organizations, ex- servicemen, and members of the local NYK/NSS centers etc.** should be involved for sustainable management of containment activities, translating the aforementioned leaflets and for encouraging people in the community for sustained behavior change as well as vaccination.

B. Testing and Surveillance

Districts will continue with the strategy of **'Test-Track-Treat-Vaccinate' and implementation of Covid Appropriate Behavior across the district** as the ongoing strategy for the management of COVID-19.

i. Ensure **adequate testing and door to door case search** in the area through adequate number of teams formed for such purpose.

ii. Plan for **testing of all clinically resembling** cases of Influenza like illness (ILI) & SARI through **RAT**. All symptomatic individuals turning out to be negative for SARS-CoV-2 infection with RAT need to be **retested through RT PCR.**

iii. Ensuring **compliance of COVID Appropriate Behaviour** aggressively both through creation of awareness through involvement of the community based organizations and through stringent regulatory framework.

C. Clinical Management

i. Analysis to be undertaken with respect to **requirement of health infrastructure** so as to **manage the present and projected cases (next one month)** and necessary action initiated to ensure sufficient oxygen-supported beds, ICU beds, ventilators, ambulances including creation of makeshift hospitals, as needed. Sufficient quarantine facilities shall also be re-activated.

ii. Leverage **government, private health facilities** including hospital facilities available with **central ministries, railway coaches, temporary field hospitals etc.**

iii. Ensure that people satisfying protocol for home isolation only are allowed under **home isolation**. Create a **mechanism for their regular monitoring** through Call Centres along with **regular visit of surveillance teams** to such houses.

iv. Provision of a **customized kit** for all patients under home isolation, **including detailed dos and don'ts** to be followed by them.

v. Specific **monitoring** shall be done for **high risk cases** and their timely shifting to the health facility. Similarly, **elderly and co-morbid contacts** of positive cases shall be **shifted to quarantine centres** and monitored.

.....contd/-

vi. Appoint **senior district officials as In-charge** for all Covid dedicated hospitals and create a **mechanism for seamless shifting** of patients (**including home isolation** cases) as per their symptom to the relevant facilities.

vii. Ensure availability of **sufficient ambulances** for such purpose.

viii. Coordinate **availability of oxygen, other related logistics, drugs** etc. in collaboration with state officials and ensure their rational use.

ix. **Oxygen therapy** for the admitted cases shall follow the **guidelines issued by Ministry of Health** on the **rational use** of oxygen

x. Use of **investigative drugs** (Remdesivir / Tocilizumab etc.) shall also **strictly follow the clinical management protocol/advisories issued by Ministry of Health**.

xi. **Facility wise cases and deaths** shall be analyzed on **daily basis** by the **Incident Commander/District Collector/Municipal Commissioner. Death-audit** shall be undertaken for **all deaths** in the hospitals and in the community to provide supportive supervision to field staff/hospitals.

D. Vaccination

100% vaccination for the **eligible age-groups** shall be undertaken duly **creating additional vaccination centres and optimal capacity utilization of existing Centres.**

E. Community Engagement

i. Ensure **adequate advance information to community**, also highlighting the need for stringent containment actions so as to win their involvement and support.

ii. Provide enough time for people movement for essential requirements etc. before announcing the large scale containment

iii. Take necessary actions to **avoid misinformation & panic** in the community.

iv. **Involve local level NGOs/CBOs/CSOs, Opinion Makers and subject experts** to create a positive environment and for sustained dialogue with the community.

v. **Create wide publicity** on **early warning signals** and self-reporting so as to identify cases early and to prevent avoidable deaths among home isolation patients.

vi. Give **wide publicity on the mechanism** whereby people can get themselves tested, details of available health facilities, requisitioning an ambulance etc (community based organizations should be encouraged to create WhatsApp groups for quick dissemination of information so that the individuals in need of prevention and/or care services do not suffer delay).

vii. Ensure that **details of hospital beds and their vacancy status is made available on-line and also released to media on a daily basis**.

viii. Details on **availability of oxygen, drugs, vaccine and vaccination centres**; including the guidelines related with use of Remdesivir/Tocilizumab etc. be also widely publicized so as to create confidence in the community.

.....contd/-

ix. Community should be oriented about the feasibility of managing mild COVID-19 cases at home with appropriate monitoring of vital parameters such as temperature and oxygen saturation with the help of pulse oxymeter.

x. **Need for COVID Appropriate Behaviour** including **regulatory framework for enforcement** should be **widely publicized.**

xi. **Build confidence** in community duly highlighting the nature of disease, the fact **that early identification** helps in early recovery and more than 98% people recover to **remove fear as well as stigma** related with Covid-19. Involvement of civil society organizations to hold such orientations go a long way in this regard.

Annexure II

NATIONAL DIRECTIVES FOR COVID-19 MANAGEMENT

1. **Face coverings:** Wearing of face cover is compulsory in public places; in workplaces; and during transport.

2. **Social distancing:** Individuals must maintain a minimum distance of 6 feet (*2 gaz ki doori*) in public places.

   Shops will ensure physical distancing among customers.

3. **Spitting in public places** will be punishable with fine, as may be prescribed by the State/ UT local authority in accordance with its laws, rules or regulations.

Additional directives for Work Places

4. **Work from home (WfH):** As far as possible the practice of WfH should be followed.

5. **Staggering of work/ business hours** will be followed in offices, work places, shops, markets and industrial & commercial establishments.

6. **Screening & hygiene:** Provision for thermal scanning, hand wash or sanitizer will be made at all entry points and of hand wash or sanitizer at exit points and common areas.

7. **Frequent sanitization** of entire workplace, common facilities and all points which come into human contact e.g. door handles etc., will be ensured, including between shifts.

8. **Social distancing:** All persons in charge of work places will ensure adequate distance between workers and other staff.

***

File No.T-21016/244/2020-eHealth FTS. No. 2175898

T-21016/244/2020-eHealth
Government of India
Ministry of Health and Family Welfare
eHealth section
******

Nirman Bhawan, New Delhi
Dated 10th May 2021

Office Memorandum

Subject: Installation of SSL certificates on all Government websites and Web applications.

Please find enclosed herewith the communication received from MeitY apprising cyber attackers are always trying to compromise the websites and web applications by exploiting the vulnerabilities in the websites. Sniffing the website and phishing are the common techniques used by attackers to steal the credentials of users.

2. MeitY has informed that the website having proper Secure Socket Layer (SSL) certificates installed enables the users to verify the certificate before entering the username, password etc. SSL certificate protects server- client communication through encryption, hence, protects credentials from getting stolen by sniffing. MeitY has noticed that many government websites are running without SST Certificates installed on them.

3. All the division heads are requested to ensure that websites / web applications hosted by MoHFW have proper SSL Certificates installed in them. Necessary directions may also be issued to all the attached / Subordinate offices to comply with the directions issued by MeitY.

Signature valid
Digitally signed by
AMIT KUMAR-DD
Date: 2021.05.10
15:23:06 IST

JS(GN)/JS(AN)/Fr. DDG(Adm)/Head(ISRM)

(Amit Kumar)
Deputy Director (eHealth),
MoHFW
01123061510

Encl. As above.

To

1. Secretary(DHR)
2. DGHS
3. All JSs /EA / DDG(Stats), MoHFW
4. DDG, NIC, MoHFW
5. DDG (In Charge), CHI, NIHFW
6. Additional Director(CHI), NIHFW

Please circulate
12/05/2021

Adm II

32137

2174564/2021/E-HEALTH

डॉ. राजेंद्र कुमार, आई. ए. एस.
पीएच.डी. (एमआईटी, यू.एस.ए.)
अपर सचिव
Dr. Rajendra Kumar, I.A.S.
Ph.D. (MIT, U.S.A.)
Additional Secretary

सत्यमेव जयते

भारत सरकार
Government of India
इलेक्ट्रॉनिकी और सूचना प्रौद्योगिकी मंत्रालय
Ministry of Electronics & Information Technology
इलेक्ट्रॉनिक्स निकेतन / Electronics Niketan
6, सी जी ओ कॉम्प्लेक्स / 6, C G O Complex
नई दिल्ली-110003 / New Delhi-110003
दूरभाष / Tel. : +91-11-24363075
फैक्स / Fax. : +91-11-24364729
ई-मेल /E-mail: as@meity.gov.in
वेबसाइट / Web.: www.meity.gov.in

D.O. No. AA-110274/2020-CL&ES

Dated 08/04/2021

Subject: SSL certificates on Government websites-reg.

Dear Sir/Madam,

It has been observed that attackers are always trying to compromise the websites and web applications by exploiting the vulnerabilities in the websites. Sniffing the traffic and Phishing attack is a common technique used by attackers to steal the credentials of users. The websites having proper Secure Socket Layer (SSL) certificates installed enable the users to verify the certificate before entering the username, password, etc. The core function of SSL certificates is to protect server-client communication though encryption, hence, it protects the credentials from getting stolen by sniffing.

2. Many government websites are running without SSL certificates installed on them. SSL certificates for websites should be properly installed and renewed on time. The SSL certificates not only increase the security of the website but also increase the trust of the citizens in the government websites as it enables them to verify the SSL certificate from the pad lock in the address bar of the browser.

It is therefore requested to ensure that websites/ web applications hosted by your Ministry/Department have proper SSL certificate installed. For any further query, you may kindly contact Ms. Ratnaboli Ghorai Dinda, Deputy Director General, NIC at ratnaboli@gov.in.

With best regards,

Yours sincerely,

(Rajendra Kumar)

To:

Secretaries of Central/ State Government Ministries/ Departments

Digital India
Power To Empower

स्वच्छ भारत
एक कदम स्वच्छता की ओर

ELECTRONICS INDIA
Billion Needs Million Chips