

Health Care Centre

STANDARD OPERATING PLAN: COVID-19 OCCUPATIONAL HEALTH AND SAFETY

Title	SOP: Covid-19 OHS		
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1 Acknowledgement

This standard operating plan is based on guidance published by the World Health Organisation, National Department of Health, National Institute for Communicable Diseases, Department of Employment and Labour and Department of Higher Education and Training. The SOP addresses and includes the requirements as stipulated in the Department of Employment and Labour Code of Practice; Managing Exposure to SARS-COV-2 in the Workplace, dated 15 February 2022 (Government Notice No. R. 1876) and the Hazardous Biological Agents Regulations, dated 16 March 2022 (Government Notice No. R. 1887).

2 Abbreviations and/or definitions

Abbreviation/definition	Description
BCEA	Basic Conditions of Employment Act, 75 of 1997.
Virus (COVID-19)	means the SARS-CoV-2 virus
Vaccination certificate	means a certificate issued by the EVDS or a COVID-19 Vaccination Record Card issued by the NDOH or any other digital certificate issued outside the Republic and recognised by the NDOH
Vaccinated	means fully vaccinated with vaccines and includes an additional dose or booster and “vaccination” has the same meaning
COVID-19 Vaccines (Vaccines)	means the COVID-19 vaccines and boosters that have been scientifically evaluated and recommended by the WHO and registered or authorised by SAHPRA to be effective in preventing severe disease and death;
COP	Code of Practice; Managing Exposure to SARS-COV-2 in the Workplace, dated 15 February 2022 (Government Notice No. R. 1876).
Disaster Management Act	Disaster Management Act, 57 of 2002.
DHET	Department of Higher Education and Training.
DoH	Department of Health.
DoEL	Department of Employment and Labour
ECDC	European Centre for Disease Prevention and Control.
HBA Regulations	Hazardous Biological Agents Regulations, dated 16 March 2022
HCW	Health Care Workers.
HVAC	Heating, ventilation and air conditioning
Incubation period	Time from exposure to contracting the disease.
Isolation	A period during which someone who is suspected or confirmed to have COVID-19 is separated from healthy people. The period stops if they test negative or, if they test positive, they remain in isolation until they are well. Isolation can be involuntary if demanded by the State.
Monitoring	The planning and carrying out of a measurement programme and the recording of the result thereof.

OHS	Occupational Health and Safety.
OHSA	Occupational Health and Safety Act, 85 of 1993.
NICD	National Institute of Communicable Diseases.
NWU	North-West University.
PPE	Personal Protective Equipment.
PCR	Polymerase Chain Reaction, a test to diagnose COVID-19.
Physical distancing (also referred to as social distancing)	Measures taken to restrict the possible spread of infectious diseases and include increasing physical distance between individuals.
SARS-CoV-2	A respiratory virus first identified in Wuhan China in December 2019 and responsible for a global pandemic.
Screening	A process to identify individuals who may have an infection from SARS-CoV-2; usually ascertained by a symptom questionnaire.
SARS-CoV-2 Rapid Antigen Test	The SARS-CoV-2 Rapid Antigen Test is a rapid chromatographic immunoassay for the qualitative detection of specific antigens of SARS-CoV-2 present in the human nasopharynx. (This test is an aid in detecting antigen from the SARS-CoV-2 virus in individuals suspected of COVID-19 and has a turnaround of +- 15 minutes)
Service Providers and visitors	Include service providers and their employees, contractors (including any sub-contractor) and their employees, consultants and their employees, visitors, invitees or any person using the facilities or entering the premises of the NWU for either learning, living, work or participation in NWU activities
SLA	Service Level Agreement.
SOP	Standard Operating Procedure.
Social Distancing	To remain out of crowds and maintain 1 meters from one another.
Medial Surveillance	Planned programme or medical examinations(which in include clinical examinations, biological monitoring or medical tests) of employees by an Occupational health practitioner.
Virus	SARS-CoV-2 virus.
Vulnerable Employee	"Vulnerable employee" means any employee, as contemplated in the Department of Health Guidelines - (a) with known or disclosed health issues or comorbidities or any other condition that may place the employee at a higher risk of complications or death than other employee if infected with SARS-CoV-2 virus; or (b) above the age of 60 years who is at a higher risk of severe COVID-19 disease or death if infected;
WHO	World Health Organisation.

3 Purpose of the SOP

To provide standard requirements and protocol to as far as reasonably practicable mitigate (reduce) and control the COVID-19 hazard and transmission of COVID-19 at the NWU. To manage the health and safety of employees when at work and outline the occupational health and safety requirements to address, prevent and mitigate the spread of COVID-19 at the NWU. To indicate the requirements with regards to vaccination for service providers and visitors at the NWU.

4 The responsibilities of the NWU as employer

4.1 Preventing and mitigating the transmission of COVID-19 at the University

The NWU will take reasonable steps to ensure the health and safety of the employees, service providers and visitors as described in the Occupational Health and Safety Act and Regulations, number 85 of 1993, Department of Employment and Labour COVID-19 COP and the implementation of NWU COVID-19 SOP's and risk assessments to protect employees, service providers and visitors from the risk of exposure to COVID-19. The NWU has conducted numerous risk assessments throughout the COVID-19 pandemic. As per DoEL directive dated 25 May 2021 the NWU compiled an integrated risk assessment for all occupational positions at the NWU and a COVID-19 visitors/service provider risk assessment. The NWU COVID-19 risk assessment is reviewed regularly, especially in the case where legislation changes or new information on the Coronavirus becomes available.

The outcome of the reviewed NWU integrated risk assessment indicates that the pure risk of COVID-19 unduly exposes the NWU and its staff. The risks of COVID-19 are reduced and mitigated by numerous controls including vaccination against COVID-19. The outcome of the NWU integrated risk assessment for staff requires the following:

- All controls as listed to be adhered to and complied with by all staff, visitors and service providers.
- Staff are strongly encouraged to vaccinate to reduce the consequence of severe illness.
- The following occupational categories at the NWU require full vaccination:
 - NWU Health Care Staff (Occ. doctor, nurses and support staff).
- The following occupational categories at the NWU require full vaccination or assessment by the NWU Occupational Health Practitioner (OHP) to assess COVID-19 health risk posed to the employee. The OHP where necessary will recommend any additional controls and/or medical surveillance requirements to mitigate the risk to protect the employee as far as reasonably practicable:
 - All occupational categories: Employees with comorbidities and over 60 years of age: Individual health assessment by NWU Health Dept to assess COVID-19 risk posed to employee (OHP to recommend additional controls required) after assessment.
- Employees with contra-indications to the COVID-19 vaccine:
 - Must submit medical certificate to NWU Health Care Centre (OHP).
 - Undergo health assessment by NWU Health Dept and possible medical evaluation.
- The following is required from service providers:
 - Service provider employees with comorbidities and over 60 years of age: Individual health assessment by the Occupational Health Practitioner to assess the COVID-19 risk posed to employee (OHP to recommend additional controls required) after assessment.

4.2 Protecting NWU employees

- NWU COVID-19 risk assessments, this SOP, and other occupational health and safety requirements will be communicated to all employees.
- Managers, risk facilitators, and OHS representatives will conduct and participate in workplace walk-through inspections to identify potential areas of increased risk and priority action as part of operational occupational health and safety duties (Note: Not a formal risk assessment process as defined in the HBA Regulations but workplace inspection to identify and monitor hazards as part of operational OHS).
- OHS committees will discuss concerns related to occupational health and safety which will include COVID-19 and propose changes to the workplace that may affect the health or safety of employees.
- Implement a medical surveillance program based on the result of the individual health risk questionnaire.

4.3 The responsibilities of NWU employees.

- Self-Screen at home before coming to work. If you do not feel well, stay at home, and contact your manager.
- Adhere and comply with South African legislation in terms of COVID-19 and the NWU COVID-19 risk assessments, SOP's directives, controls and protocols concerning COVID-19.
- Familiarise yourself and stay abreast with the NWU COVID-19 SOPs and risk assessments.
- Report any unsafe or unhealthy situation immediately to your manager or OHS representative in terms of occupational health and safety.
- Set an example for others and not unduly expose the NWU, fellow employees and students through sub-standard actions and behaviour.
- Employees are encouraged to vaccinate with the COVID-19 vaccine to assist the NWU to reduce the risk of infection and spread of COVID-19.
- Complete and submit of the online personal COVID-19 health risk questionnaire individual risk profiling to the NWU Campus Health Care Centres.
- Declare to the NWU their COVID-19 vaccination status via the NWU DIY Services.

4.4 The responsibilities of Visitors at the NWU

- If you have any COVID-19 symptoms, do not access the NWU premises.
- Wear specialised PPE as required per specific area requirements.
- Adhere to OHS requirements as instructed by NWU host.

4.5 The responsibilities of Service Providers at the NWU

- If you have any COVID-19 symptoms, do not access the NWU premises.
- Wear specialised PPE as required per specific area requirements.
- Comply with all applicable OHS NWU OHS specifications and NWU service provider risk assessments.
- Implement and manage their OHS system or OHS plan as approved by the NWU OHS Department

5 Controlling exposures

5.1 Risk-based approach

The NWU will implement procedures to minimise and control the risk of exposure to COVID-19 as follows:

- Conduct a COVID-19 baseline risk assessment and risk assessments to protect and ensure employees health and safety as far as reasonably practicable.
- Issue the risk assessment and SOP to NWU Staff via the NWU website.
- Mandatory online COVID-19 courses for all employees.
- Communicate all applicable COVID-19 information to employees.
- Train managers and employees on the general contents of the HBA Regulations including COVID-19 related workplace matters. Occupational Safety will roll-out safety training via the NWU communication platform.
- Undertake regular inspections and monitoring of the workplace. The Occupational Safety department will roll out an inspection and monitoring program.
- Encourage all personnel to vaccinate for COVID-19 to reduce the risk of infection and consequence of COVID-19.
- Monitor internal and external COVID-19 trends, changes nationally and internationally related to COVID-19; and where any changes or trends can possibly affect the NWU community's health, review the NWU COVID-19 risk assessments and SOP. Remedy any unsafe or harmful conditions as far as reasonably practicable.

5.2 Implementing exposure controls

The NWU is committed to implementing control measures in the workplace to prevent exposure to COVID-19. When selecting control or a combination of controls, the NWU risk assessment teams will start at the top of the hierarchy of controls.

The most effective controls will be implemented as far as reasonably practical. Controls will be implemented by all managers and employees and will be monitored continuously to ensure that the best level of protection to employees is provided.

5.3 Hierarchy of controls

The hierarchy of control is a pyramid of steps that are considered in sequence when assessing the possible ways to control a specific risk. Each step in the pyramid should be considered and preference must be given to control measures higher up the hierarchal structure than those at the bottom of the structure. The most effective risk control(s) will also come from assigning and implementing a number of various controls from different levels.

- Elimination: Involves removing the risk of exposure entirely from the workplace. This could involve postponing, re-organising, or planning work in such a way that employees are not exposed to any significant risk.
- Reduce: Mitigating risk by reducing the consequence and probability. Can include vaccination and engineering controls such as increased ventilation in spaces.
- Isolating the person from the hazard through physical or mechanical means. Physical changes in the workplace.
- Administrative controls: Altering work practices to minimise exposure, such as minimising the numbers of employees at work, staggering work shifts, procedures and training. Behaviour - Educate and train employees on optimal behaviour to ensure a health and safety work environment.
- Personal protective equipment (PPE): PPE is equipment worn to minimise exposure.

6 NWU COVID-19 Workplace protocol

Step 1: Departments and Faculties to take the following actions:

- NWU staff to report any COVID-19 related sub-standard condition or acts to their manager/director and OHS representatives.
- Appointed OHS representatives to include COVID-19 provisions in their monthly workplace inspection.
- Departmental and Faculty OHS committees to discuss risk assessments, this SOP and specific COVID-19 risks and make recommendations on improving the workplace through the NWU OHS committee structures.
- Implement NWU risk assessment controls and SOP's with assistance and support from the Departmental Facilities section with regard to sanitisers, sanitising stations, cleaning of workplace areas, ventilation assessments including maintenance and improvement thereof.

Step 2: Implement/manage and monitor – standard workplace protocol:

A. Staff

- Staff to declare to the NWU their COVID-19 vaccination status via the NWU DIY Services and to upload a copy of their South African COVID-19 Vaccine Certificate System onto the NWU DIY Services.

B. General hygiene practices and sanitisers

- Employees must wash their hands often with soap and water for at least 30 seconds, especially after going to the bathroom, before eating, and after blowing their nose, coughing or sneezing. Tissues should be disposed of in a bin with a lid. Employees must regularly and thoroughly clean their hands with an alcohol-based hand sanitiser or wash them with soap and water (especially pre and post meetings/touching surfaces/handling equipment, money, parcels, etc.).
- Each Faculty/Department to determine their additional requirements for hand sanitisers and associated equipment (dispenser/spray bottles/etc.1) and purchase the equipment through approved/listed service providers. Especially where there is an interaction between employees/students/members of the public/visitors. This excludes mounted dispensers, foot or automatic dispensers. The installation, supply and maintenance will form part of that specific department's or faculty's responsibilities. Only access points and common areas are supplied and serviced by NWU Facilities Maintenance Services.

C. Ventilation in the workplace

- The Facilities Departments: Engineering Compliance and Space Management conducted a ventilation assessment in 2020/2021 for all lecture spaces, venues and laboratories. Improvements, upgrade's and maintenance was done to various ventilation systems. Additional upgrades and improvements will be done in 2022/2023. A Ventilation inspection, maintenance and compliance program is managed by Engineering Compliance and will be available on the NWU OHS COVID-19 website.
- Ventilation queries and request for assessment, inspection, maintenance and repair can be logged via the NWU Integrated Work Management System (<http://services.nwu.ac.za/facilities-department/requests-maintenance-and-facility-services>). Note request can include ventilation assessment in areas for example basements and shared spaces.

General requirements:

- HVAC/central air-conditioning systems: Engineering Compliance to clean all filters and run all systems for 24 hours per building and thereafter to conduct cleaning through maintenance service.
- Central HVAC systems: Engineering Compliance must ensure where required and practicable that high-efficiency filters are installed. Cleaning and frequency of filter cleaning should be increased to reduce recirculating air. open outdoor air dampers to 100% to increase ventilation rates/increase outdoor ventilation.
- Employees must open windows and doors to ensure fresh air can enter spaces and improve cross-ventilation.

D. Emotional support

- Encourage employees to seek help if they are feeling overwhelmed with emotions such as sadness, depression and anxiety.
- NWU Wellness 24hour contact number 0800 213 149.
- Hotline for the COVID-19 as per the Department of Health website: 0800 029 999.

E. Cleaning of the workplace – NWU Facilities cleaning protocol and cleaning

- Day-to-day cleaning is done as per normal operational conditions and as per NWU COVID-19 cleaning and sanitizing protocol for facilities (published on the NWU OHS COVID-19 website).

F. Roles and responsibilities of Faculties and Departments

- Inform employees on the NWU COVID-19 risk assessment and this SOP.
- Ensure that measures listed in the NWU risk assessments and this SOP are implemented / made available / enforced and compliance monitored.
- Encourage employees to clean their hands frequently, using soap and water for at least 30 seconds or with an alcohol-based hand sanitiser that contains at least 70% alcohol.

G. Completion and submission of an online personal (individual) COVID-19 health risk questionnaire

Covid-19 poses a greater risk to employees with weakened immune systems and long-term health conditions.

Process:

- Step 1 : An online health risk questionnaire will be sent to all NWU staff for completion. Staff to submit to NWU Campus Health Care Centres (CHCC) via online form.
- Step 2: CHCC will assess information submitted and determine based on specific age and health risks specific employees who must be medically assessed by the NWU Occupational health practitioner (OHP) (All medical information will be confidential and kept as prescribed by the OHS Act).
- Step 3: OHP will advise employees who are medically assessed on additional controls required and medical surveillance requirements (frequency of health assessments).

Identifying of a employees over the age of 60 and employees with comorbidities

Based on information and clinical expertise available, older adults and people of any age who have impaired function of certain organs (heart, lung, kidneys) or depressed immune system are at higher risk for serious complications and severe illness from COVID-19.

The major categories include:

1. 60 years and older.
2. One or more of the underlying commonly encountered chronic medical conditions (of any age) particularly if not well controlled:
 - medically confirmed active cancer
 - medically confirmed blood clotting conditions
 - diabetes (poorly controlled) or with late complications
 - moderate/severe hypertension (poorly controlled) or with target organ damage
3. Severe obesity (body mass index [BMI] of 30 or higher)
4. Confirmed pregnancy.

NWU protocol in managing high-risk employees

- Employees with comorbidities and over 60 years of age require full vaccination or assessment by the NWU Occupational Health Practitioner (OHP); to assess COVID-19 health risk posed to the employee. The OHP where necessary will recommend any additional controls and/or medical surveillance requirements to mitigate the risk to protect the employee as far as reasonably practicable.
- NWU OHP will assess and update comorbidity categories as per medical results, science and National Health Department requirements.
- Medical surveillance programme will be compiled by NWU OHP based on and after:
 - NWU staff has completed and submitted the online personal COVID-19 health risk questionnaire.
 - NWU employees with comorbidities or contra-indications to the COVID-19 vaccination or as identified per health risk questionnaire has reported to the NWU CHCC for a medical assessment.

Protecting employees over the age of 60 and employees with comorbidities in the workplace

- Individual circumstances of the employee in relation to their work environment and activities will be assessed by the OHP and would include:
 - Ensuring that potential exposure to the SARS-CoV-2 virus by this employee in their current job is eliminated or reduced such that the risk for infection is substantially minimised.
- If potential exposure cannot be eliminated or reduced, the NWU, in consultation with the relevant employee will as far as reasonably possibly accommodate the employee at the workplace.

7 COVID-19 Workplace management - Clinical management of suspected or confirmed COVID-19 disease.

7.1 Suspected COVID-19 cases

- A suspected COVID-19 case includes any person presenting with an acute (7 days) respiratory tract infection or other clinical illness comparable with COVID-19, or an asymptomatic person who is a close contact to a confirmed case.
- All symptomatic suspected cases should be identified as soon as possible (ideally prior to entering the facility). Such cases should immediately be given a surgical mask and be isolated. Good hand hygiene and cough etiquette should be taught, and appropriate samples obtained.
- Suspected COVID-19 cases who are medically well, or have mild disease, may be managed at home while awaiting test results if they are able to safely self-isolate (asymptomatic contacts should not be routinely testing).

A suspected COVID-19 case includes any person presenting with an acute (7 days) respiratory tract infection or other clinical illness compatible with COVID-19, or an asymptomatic person who is a close contact to a confirmed case. In the context of COVID-19, the key respiratory syndrome consists of ANY of:

- Cough
- Sore throat
- Shortness of breath
- Anosmia or dysgeusia
 - ... with or without other symptoms (which may include fever, weakness, myalgia, or diarrhoea).

7.2 Testing

- When a NWU employee, service provider, student or visitor present 2 or more of listed symptoms – they will be assessed by the NWU CHCC and possibly referred for a COVID-19 test.
- Positive PCR lab tests or Rapid antigen tests will be regarded as being positive.

7.3 Confirmed COVID-19 cases

- Patients with mild symptoms may be considered for management at home, provided they are able to safely self-isolate
- Patients seeking healthcare services for potential COVID-19 should preferably phone ahead of time to their doctor and Health Care Clinic.

7.4 Protocol for a suspected COVID-19 person

- Issue the person a medical surgical mask.
- Direct them to a separate area, preferably an isolation area if available. Where an individual isolation room is not available, a 2-meter distance should be kept between suspected COVID-19 cases and other persons (2 meter due to suspected COVID-19 positive person).
- Instruct them to cover their nose and mouth during coughing or sneezing with a tissue or a flexed elbow. They should perform hand hygiene after contact with respiratory secretions (wash hands or use alcohol-based hand sanitiser).
- Protection of all persons by continuing of appropriate COVID-19 protocols (personal hygiene, facemask, social distancing).
- Refer the employee who may be at risk for screening/testing and take any other appropriate measure to prevent possible transmission as instructed by the NWU Occupational Health Care Centre or doctor.
- NWU Occupational Health to assess the risk of transmission and take further action as per point 10.7 & 10.8 below.

- Note: The suspected positive person, or positive person or close contact must complete the online form “First Report of COVID-19 Positive Test or Contact” <http://services.nwu.ac.za/report-covid-19-cases>.
- Close contacts do not have to quarantine unless presenting with symptoms or test positive or in the case of an outbreak (with 3 or more confirmed positive cases in the same operational/working area).

7.5 Referral sites for testing

- Medical Aid persons will be tested at private hospital (own cost)
- Government or non-medical aid persons:
 - Potchefstroom Campus: Potchefstroom clinic, Bioki Thlapi clinic (Ikageng), Promosa clinic (Promosa), Steve Tshwete (Ikageng).
 - Vanderbiljpark Campus: COVID-19 test unit at the Government Hospital (Sebokeng Hospital).
 - Mahikeng Campus: Patients will be referred to the COVID-19 test unit at the Government Hospital (Mahikeng Provincial Hospital).

7.6 Protocol of notifying in case of a positive COVID-19 person and to perform an investigation

- Contact your campus Health Care Centre (Potchefstroom (018) 299 4345, Vanderbiljpark (016) 910 3163, Mahikeng (018) 289 2260). After hours contact Protection Service: Mahikeng Camus: 018 389 2167, Potchefstroom Campus 018 299 2211, Vanderbiljpark Campus 016 910 3339.
- Complete the online COVID-19 report form: <http://services.nwu.ac.za/report-covid-19-cases>
- The campus specific Health Care Centre in conjunction with Campus Facilities Maintenance Manager and Campus Protection Services must inspect the area and instruct on actions to be taken. In the case where student accommodation is involved the specific campus Residence and Catering Manager must also be contacted to conduct the inspection in conjunction with the specific campus Health Care Centre. If the building has a centralized ventilation system, Engineering Compliance, will evaluate which areas should be closed off and identify filters to be decontaminated. The Campus Facilities Maintenance Manager is responsible for notifying Engineering Compliance.

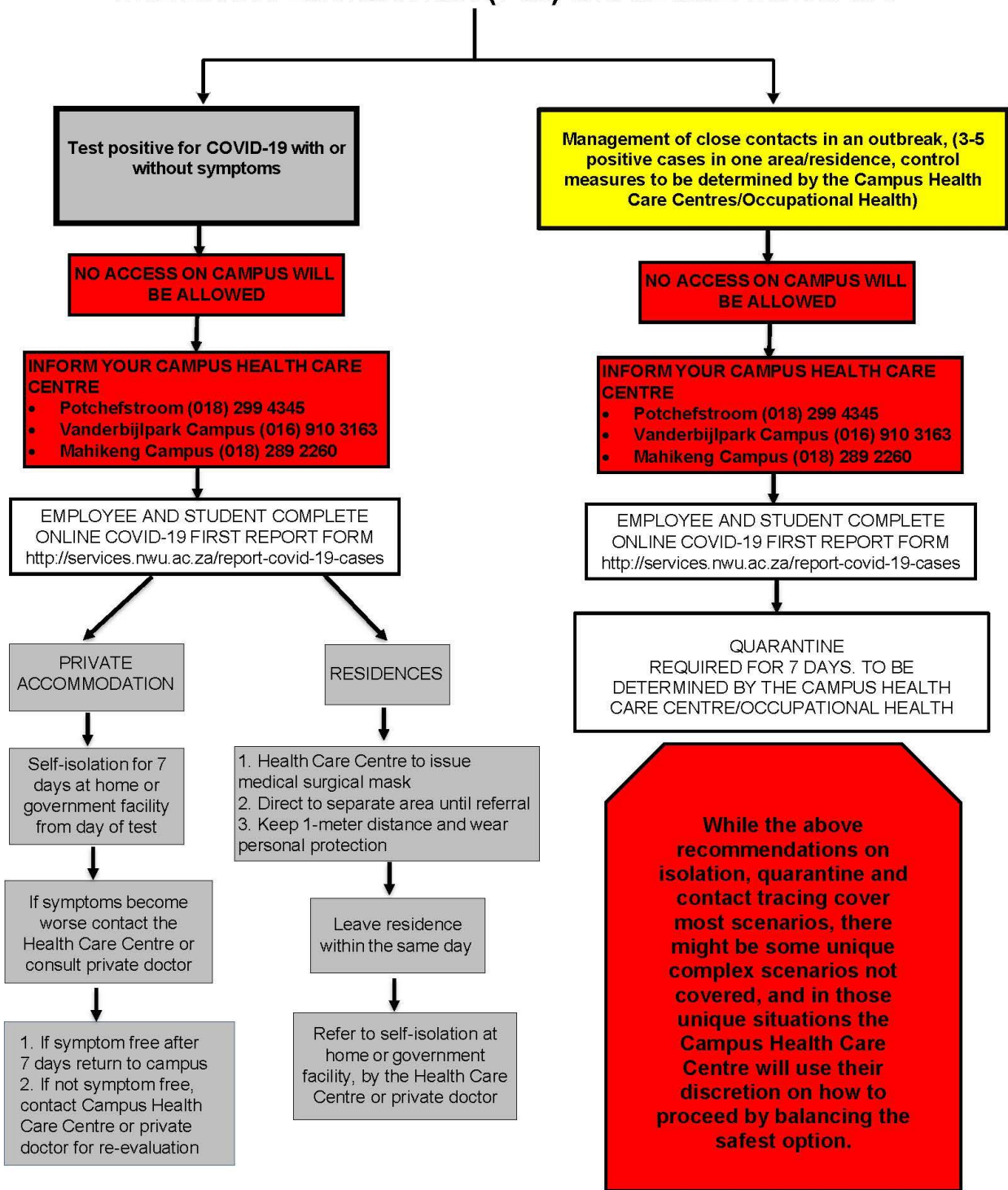
7.7 Exposure Monitoring

- The NWU Health Care Centre will daily log a record all positive COVID-19 cases reported at the NWU Health Care Centres and report through the NWU COVID-19 online reporting system.
- The NWU Health Centre will compile and distribute weekly COVID-19 statistics to management for action and monitoring.
- The NWU Health Care will assess and report any trends in occurrence of positive cases due to certain workplace conditions, frequencies of occurrence or occupational categories. Any trends that could increase the risk of COVID-19 exposure to employees will be immediately brought to NWU management (COVID-19 Response team) attention for action.

7.8 Employees on returning to work after isolation

If an employee has been diagnosed with COVID-19 and isolated or a person under investigation and quarantined, in accordance with the Department of Health Guidelines and the NWU OHS SOP, the NWU may only allow a worker to return to work on the following conditions as per algorithms on page 9. The NWU Health Care Centre will communicate with staff as per algorithm and indicate to the staff member when a green token status is assigned after isolation.

PROTOCOL FOR A POSITIVE COVID-19 PERSON, PERSON UNDER INVESTIGATION (PUI) OR CLOSE CONTACT*



***Close contact:** Face to face contact <1m, duration of contact > 15m, not wearing appropriate personal protection (e.g. face mask); living in the same household.
 ***COVID-19 related symptoms:** Dry cough, fever, sore throat, shortness of breath, loss of taste and smell, redness of eyes, tiredness, body aches, headaches, skin rash, nasal congestion, diarrhea