# STANDARD OPERATING PROCEDURE

**UNIVERSITY OF THE WITSWATERSRAND PROTECTION SERVICES**

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1. BACKGROUND

This document follows the Human Resources Plan to manage staffing and working arrangements for workplace safety and operational continuity during national disasters or prolonged periods of disruptions, in this case, Covid-19 pandemic.

1.2 The Procedure is developed as part of the University's response to develop and implement screening protocols for University employees and students. These include the following:

1.2.1 Symptoms screening (Screening Tool)
1.2.2 Management of positive outcomes
1.2.3 Health status declarations
1.2.4 Referral system

1.3 In order to ensure strict compliance with health and safety measures, all persons requiring admission to the University will adhere to and comply with the official screening process.

2. SCOPE

This procedure applies to all persons requiring admission to the University, be they:

2.1 Staff,
2.2 Students, and
2.3 Contractors and Official Deliveries - Departments are to ensure that the service providers certify that they have complied with the screening process of persons who are to perform work at the University (Minimum standards of the University Screening Tool)

NB. The procedure does not include personal deliveries. All staff / students receiving personal deliveries will have to do so at the closest access point.

3. REGULATORY FRAMEWORK

This Standard Operating Procedure is governed by the Human Resources Plan of the University to Manage the Covid-19 virus in the workplace.

4. PROCEDURE TO GAIN ADMISSION TO THE UNIVERSITY IN TERMS OF COVID-19 REGULATIONS

All staff members, students and official contractors must:

4.1 Adhere to the instruction as set out in the Covid-19 Screening and Testing Process.
4.2 Complete the Screening Tool before leaving home or at the University entrance if it this was not done.
4.3 Wear masks.
4.4 Comply with the instruction on the Screening Tool form in order to determine your health status before deciding to enter the University premises.

4.5 Submit the Screening Tool form into the drop-off box available at the access gate. For confidentiality purposes, the concealed box with forms will be handed over to Campus Health and Wellness Center on a daily basis.

4.6 **Students and staff residing on Campus must also comply with the instructions as set out in the Covid-19 Screening and Testing Process and the Screening Tool. The Screening Tool form must be placed in a drop-off box at Campus Protection Services or departmental drop off points which must be handed to Campus Health and Wellness Center on the daily basis.**

5. **IMPLEMENTATION DATE**

This Standard Operating Procedure is approved for implementation as from 18 May 2020.

PROCEDURE FORMALLY APPROVED BY:

[Signature]

DATE: 15.05.2020
SCREENING TOOL FOR COVID-19

1. Name: ___________________ Staff/ Student _______________________

2. Cellphone Number: ______________________

3. If appointed as Essential Staff then please indicate for which University entity: ______________________

Please conduct a daily self-screening assessment as per the criteria mentioned in the below table:

<table>
<thead>
<tr>
<th>No.</th>
<th>CONDITION / SYMPTOM</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>SYMPTOM CHECK</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Are you suffering from fever / high temperature or temperature fluctuations?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Do you have a dry cough?</td>
<td></td>
<td></td>
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<tr>
<td>3</td>
<td>Do you have a sore throat?</td>
<td></td>
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<tr>
<td>4</td>
<td>Do you have redness of eyes?</td>
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<td></td>
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<tr>
<td>5</td>
<td>Do you experience shortness of breath / difficulty in breathing?</td>
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<td></td>
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<tr>
<td>6</td>
<td>Have you got unusual body aches / muscle pain?</td>
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<td></td>
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<tr>
<td>7</td>
<td>Do you experience a loss of smell / taste?</td>
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<tr>
<td>8</td>
<td>Are you nausea and/or do you experience unusual vomiting?</td>
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<tr>
<td>9</td>
<td>Have you got diarrhoea?</td>
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<tr>
<td>10</td>
<td>Do you suffer from fatigue / physical weakness / tiredness?</td>
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<tr>
<td>B</td>
<td>CONTACT / EXPOSURE RISK</td>
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</tr>
<tr>
<td>1</td>
<td>Have you been exposed to someone diagnosed with Covid19?</td>
<td></td>
<td></td>
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<tr>
<td>2</td>
<td>Have you been in quarantine / self-isolation for the past 14 days?</td>
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<tr>
<td>C</td>
<td>OTHER RISK FACTORS</td>
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<tr>
<td>1</td>
<td>Do you suffer from any pre-existing medical condition / chronic illness that may</td>
<td></td>
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<tr>
<td></td>
<td>have compromised your immune system, i.e. respiratory disease, diabetes, heart</td>
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<td></td>
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<tr>
<td></td>
<td>disease, or any other chronic illness that could compromise one’s immune system?</td>
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<td></td>
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<tr>
<td>2</td>
<td>Are you 65 years of age or older?</td>
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Note 1: Conduct daily self-screening before leaving home / residence and before coming onto Campus.

Note 2: If any symptoms mentioned in questions A1 to A10 are experienced then don’t attempt to enter the University. Consult your Healthcare Worker to determine whether testing / self-quarantine will be necessary. If cleared by your Healthcare Worker then you may enter the University. If you reside on Campus then remain in your room and seek advice telephonically from relevant CHRL staff.

Note 3: If tested positive for Covid-19 isolate for 14 days. Follow your Healthcare Worker’s advice.

Note 4: If you are not able to come to Campus then urgently notify your Supervisor/ relevant Manager.

Note 5: If you answered “YES” to any of the questions in B1, B2, C1 and C2 (but have none of the symptoms mentioned in A1 to A10, this does not mean that you will not be permitted entry onto Campus but a decision may be necessary as to whether this requires further intervention.

Note 6: If “YES” is answered for the questions in A1 to A10 then this does not mean that you definitely have Covid19. This tool is used merely as a pro-active precautionary indicator to establish whether further tests should be carried out to make a definite diagnosis.

Note 7: If you reside on Campus then please follow the CHRL protocols on notification / quarantining.

I hereby attest that the information provided above is a true reflection of my screening results.

Signature: ___________________ Date: ___________________

Department of Health Covid19 24-Hour Hotline Number: 0800 029 999 and WhatsApp number: 0600 12 3456
COVID-19 SCREENING AND TESTING PROCESS

1. Screening is done on a daily basis.
   - Staff/students carry out daily self-screening using questionnaire.
   - Standard screening questionnaire tool made available.

2. If screening results imply COVID-19 symptoms are present, the individual is instructed to:
   - Do not go to work/school.
   - Contact Healthcare Worker for advice on what to do.
   - Follow local public health guidance.

3. If the individual is not on campus, they are instructed to:
   - Self-quarantine for 14 days.
   - Contact Healthcare Worker for advice on what to do.
   - If symptoms worsen, seek medical attention.

4. If the individual is on campus, they are instructed to:
   - Self-quarantine for 14 days.
   - Contact Healthcare Worker for advice on what to do.
   - If symptoms worsen, seek medical attention.

5. If the individual is isolated, they are instructed to:
   - Continue self-quarantine for 14 days.
   - Contact Healthcare Worker for advice on what to do.
   - If symptoms worsen, seek medical attention.

6. If the individual is not isolated, they are instructed to:
   - Continue self-quarantine for 14 days.
   - Contact Healthcare Worker for advice on what to do.
   - If symptoms worsen, seek medical attention.

7. Additional screening information:
   - Questions C1 to A10 check for COVID-19 symptoms, Questions B1 to B2 check for contact & exposure risk, Questions C3/C12 check for pre-existing medical conditions, chronic diseases / age risk / immunocompromised community tests.

8. If the individual answers YES to questions B1 to B2 / C1 and C2, they are instructed to:
   - Do not go to work/school.
   - Contact Healthcare Worker for advice on what to do.
   - Follow local public health guidance.

9. The completed screening questionnaires are assessed and kept on file, as required.

Additional notes:
- Managers for the area in which the infection occurred must:
  - Report that the area should be disinfected.
  - Refer persons who may have been exposed to the infected person to their Healthcare Worker (and take any other measure to prevent possible transmission).
  - If the infected person is a staff member, then place the employee on paid sick leave in terms of section 22 of the BCCA or if the employee's sick leave entitlement under the section is exhausted, make an application for an extension.
  - If there is evidence that the employee contracted COVID-19 as a result of occupational exposure, lodge a claim for compensation in terms of the COID Act.
  - Ensure that all contact persons are not disinfection resisted against if they tested positive.

- Conduct an investigation & review the risk assessment to ensure necessary controls/PPE requirements are in place.
ADDENDUM - RESPONSIBILITY OF CAMPUS PROTECTION SERVICES

INSTRUCTIONS RELATED TO COMPLIANCE WITH ADMISSION TO THE UNIVERSITY

1.1 i. All Campus Protection Services Officials will comply with the instructions set out in paragraph 4.1.4 above by receiving the Screening Tool form. The completed forms must be handed in at the access point when reporting for duty.
   ii. Officials residing on Campus will hand in the Screening Tool at the Control Room when reporting on duty.

1.2 Campus Protection Services will be responsible for ensuring compliance with the admission requirements during Covid-19. These responsibilities include the following:

1.2.1 Entry to the University should only be granted basis of compliance with the following:
   i. Producing valid permit.
      In this regard the permit must be physically checked for period of validity and the permit holder be verified by producing a valid identity document / driver’s license.
   ii. Wearing a mask,
   iii. Handing in the prescribed completed Screening Tool form.

1.2.2 The following persons should not be allowed admission to the University:
   i. Persons who do not have a permit,
   ii. Persons who are not wearing masks,
   iii. Persons who have not completed the Screening Tool form.
      Such persons must be handed a Screening Tool form to complete. In this regard the necessary safety measures must be adhered to by sanitizing the workspace and equipment where the form is completed before and after the completion of the form. Ensure hand hygiene is practiced all times.
   iv. If the person refuses, he/she must be refused entry to the University.

1.2.3 The Campus Manager must ensure that the Screening Tool forms are collected from all collection points for handing over to Campus Health and Wellness Center on a daily basis. The operating hours for Campus Health is from 8:30 to 12 pm.

2. PROTECTIVE PERSONAL EQUIPMENT DURING SCREENING

All Camps Protection Services Officials must ensure compliance with regards to the following health and safety measures:

2.1 Wearing of masks at all times,
2.2 Maintaining social distancing when interacting with persons intending to enter the University,
2.3 Ensure hand hygiene: Wash/sanitize hands as often as possible.

Signature
Date 15 05 2020