
<table>
<thead>
<tr>
<th>Reference Number</th>
<th>UCT / COV / 001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implementation Date</td>
<td>16 June 2020</td>
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### COVID-19 Return to UCT Policy Framework
Contents
COVID-19 Return to UCT Policy Framework ................................................................. 1
Preamble ........................................................................................................................ 4
Application ..................................................................................................................... 5
Definition of concepts ................................................................................................. 5
Purpose of the Document ............................................................................................. 6
‘Return to Work’ Government Lockdown Levels ......................................................... 7
UCT Risk Adjusted Phases for Return to University Activities .................................... 8
  UCT Risk Adjusted Phased opening of campus ....................................................... 8
  UCT Risk-Adjusted approach for individual staff ................................................... 9
  UCT risk adjusted approach for individual students .............................................. 11
‘Return to UCT’ Timeline .......................................................................................... 12
Return to UCT Research ............................................................................................ 13
UCTs compliance with COVID-19 Legal Requirements .............................................. 13
  Health and safety and hygiene measures ............................................................... 13
    Hand hygiene ........................................................................................................ 13
    • Sanitizers ............................................................................................................ 13
    • Soap and water .................................................................................................. 13
  Personal protective equipment ................................................................................ 14
    • Cloth masks (as per the required standards) .................................................... 14
    • Health System staff requiring specialised Personal Protective Equipment (PPE) 14
  Physical Distancing Practices ................................................................................ 14
  Infrastructure and equipment .................................................................................. 14
    Engineering controls ............................................................................................. 14
    Vehicle safety and hygiene .................................................................................... 15
  Screening of persons: staff, students and visitors .................................................... 15
  Declaration of Compromised Immune system ........................................................ 16
Reporting of Covid-19 Positive Test .......................................................................... 16
  Staff ......................................................................................................................... 16
  Students ................................................................................................................... 16
Specific Considerations in the drafting of a Faculty/Departmental Implementation Plan: 16
  Communication Strategy: minimum requirements are ........................................... 16
  Preparedness for return to UCT: minimum requirements in each category below are: 17
• Student Preparedness for Return........................................................................................................... 17
• Preparedness for Return to Research .................................................................................................... 17
• Staff Preparedness for Return to UCT ................................................................................................. 17

Further Considerations for managing Covid-19 infection through prevention and containment, and Covid-19 cases (Matters listed below require further discussion, and guidelines on these are likely to be published in due course) ........................................................................................................................................................................... 17

Mental Health of Staff and Students........................................................................................................ 18

Infrastructure and services.......................................................................................................................... 18

Student Housing ...................................................................................................................................... 18

Measures for staff and students using university-provided transport....................................................... 18

Cleaning Services ..................................................................................................................................... 19

Contractors & Vendors .............................................................................................................................. 19
Preamble

Global experience shows that success in containing the COVID-19 pandemic can only be achieved with a coordinated, integrated approach, utilizing all the relevant resources in the national interest.

The UCT approach to the return of staff and students during the pandemic takes into account the following considerations:

- The longevity of the pandemic, which is expected to last well into the latter part of 2021, possibly 2022.
- The significant impact of the morbidity and the mortality associated with COVID19, which will also impact on UCT staff and students and their families. As the SARS Corona Virus 2 is now widespread in community and other settings, we must be prepared for the likelihood of additional staff and students contracting the virus.
- The diverse university activities and requirements, the numerous physical locations, and the large number of staff and student groupings, all with different degrees of risk.

The management of the return of UCT staff and students will adopt a co-co-ordinated, risk-adjusted approach, with staff and student safety as the core consideration, given that a number of UCT staff and students have contracted the virus just prior to and during the lock-down period, and we have, sadly, lost a staff member to COVID19. Importantly, support measures to staff and students will be put in place and in particular, the active discouragement and management of any form of stigmatisation is crucial. UCT has large numbers of staff and students distributed across many campuses and residences, and their return will be done in phased manner. This can only be achieved through collaborative planning and execution, taking into account governmental directives, requirements and guidelines.

The return to campus will be guided by Government Alert levels, the prescripts of the Department of Higher Education and Training (DoHET), the ‘hot spot’ regulations, and contextual considerations in the Western Cape province. UCT is committed to implementing the best possible and reasonably practicable strategies that include mitigating the spread and impact of the virus and implementing localised containment strategies if cluster outbreaks occur.

The vast majority of academic campus activity will only be resumed when it is deemed appropriate, and this will be guided by the peak of the pandemic in the Western Cape and when we reach Alert levels that will allow lifting of restrictions of physical distancing, and leisure and social activities. Some students will return to Campus earlier as required and approved by the DHET, such as those with home circumstances and connectivity issues that are not conducive to learning online. These students will return under strict controls and will remain in a lockdown situation commensurate with the Government Alert Levels whilst in UCT residences.

Cycles of locking and unlocking may become necessary as the pandemic takes its course.

This document outlines the planned approach for the return to work and studies for the University of Cape Town (UCT) staff and students.
Application

This Policy framework and its requirements apply to all Faculties and Departments, staff and students. It applies to all UCT operations and therefore to all persons who work, study and deliver services, including all vendors and contractors who enter UCT premises for purposes of delivering goods and services.

Definition of concepts

Several concepts have been introduced in relation to the spread and management of the COVID19 pandemic, and while public health experts are not always in agreement, it is necessary to provide the meanings of the terms as used and applied in this document.

Case- A case refers to a person who has contracted the SARS Corona Virus 2 infection, meaning the virus that causes Corona Virus Disease first noted in 2019, called COVID 19 virus. Such a person may be asymptomatic, mildly, or seriously ill

Contact- A contact refers to someone who has had close contact with a ‘case’. A close contact is defined as someone who has been in touch with a case, for example in a household, a workplace, or at close quarters in public transport, or a public gathering such as a funeral. Such contact generally has to be someone closer than 1,5 meters, and for 15 or more minutes, or who has hugged, shook hands, or kissed a person infected with the virus

Containment strategies aim to minimise the risk of transmission from individuals who have contracted the virus to those without the virus, in order to stop the outbreak. This may include actions to detect individuals who contracted the virus (‘cases’) early on and trace such an individual’s contacts, or the confinement of affected persons (quarantine). Individuals with COVID 19 must be isolated from any contacts with others for the specified duration. Containment in the workplace refers to the ability to ‘contain’ those who have contracted the virus within a defined space or area, and thus prevent the further spread of the virus. In a very large workplace and setting such as a university, containment is possible in defined areas where a person who has contracted the virus appears. For example, even in a university residence the infection could be contained in that the individual could be isolated, and an affected individual, who is not infected nor ill can be in quarantine for the prescribed 14-day period. For coronavirus disease 2019 (COVID-19), countries like South Korea— an example of a country that executed successful containment—had a coordinated governmental response, testing on a massive scale, and prompt contact tracing and quarantine.

COVID 19- This is the disease, first observed in 2019, caused by a virus called the SARS Coronavirus 2

Mitigation- Mitigation, which is also used synonymously with prevention, in the case of an epidemic/ or pandemic, refers to the efforts to slow the spread of the disease, and to reduce the peak in health care demand. This may include policy actions such as social distancing, including a full society ‘lock-down’, and improved personal and environmental hygiene (e.g. hand washing). Mitigation relies on nonpharmaceutical interventions such as hand hygiene, travel restrictions, school closures, and physical distancing.

Pandemic- A pandemic refers to a disease outbreak that occurs across a wide geographic area such as an entire country or in the case of COVID 19, the entire globe.

Prevention- This refers to the measures taken to minimise the risk of getting infected with the virus causing COVID19 and includes measures such as handwashing, physical distancing, minimising travelling, and such like.

SARS Coronavirus 2 - this is the virus that causes COVID19
Purpose of the Document

This document serves as UCT’s Policy Framework for returning staff and students to University campuses in a co-ordinated, planned, and ‘phased-in’ manner. The document also serves as a Risk Adjusted and Containment guide for line managers at UCT, for the prevention of the spread and the management of the impact of COVID-19, in collaboration with relevant authorities.

The head/manager of each faculty, department and/or unit must use this guide to prepare a specific Risk Adjusted plan that will, as far as is reasonably possible and practicable, ensure that their staff and students are phased back to campus without putting them or others at undue risk.

Approach to managing the pandemic at UCT

The ‘Return to UCT’ Policy Framework and Implementation plan hinges on the following four key aspects:

- **Putting prevention first**
- **A phased-in return to campus and the academic year**
- **A centrally planned and co-ordinated implementation strategy**
- **Relying mainly on UCT’s internal capacity**

Putting prevention first

Prevention measures will be the mainstay of ‘campus preparedness’, to maximise the safety of staff and students and visitors to UCT. This will be done by actively organising and implementing the preparedness to respond to COVID-19 pandemic safety requirements and facilitate the ‘return to UCT’.

Given the expected duration of the pandemic and with experts predicting that it will continue well into 2021, ‘working at home’ and ‘online learning’ will remain the preferred approach, where it is feasible and reasonably practicable, at least until lockdown level 2.

A phased-in return to campus and the academic year.

This will be facilitated through an initial combination of online and remote learning, leading into a phased-in return to contact teaching, when it becomes feasible to do so. The decision to return to contact teaching will be based on scientific advice and will follow the prescripts of a Risk Adjusted matrix, as per the government and the Occupational Health and Safety (OHS) Act regulations in place.

The full return to face-to-face campus activities will be influenced by the timing of the peak of the Corona viral infections, coupled with the subsequent decline in the number of COVID-19 positive cases to an acceptably low level. The resumption of face-to-face teaching and learning, on-site research and university operations is further dependent on the strategic decisions and critical criteria developed at national and institutional level. The adjusted academic calendar will also be taken into account.

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1 Containment in this context means that specific areas where a case may occur, is swiftly managed to prevent spread beyond that localized unit/workplace in the university, which includes self-isolation of positive cases, identification of contacts and self-quarantining, following up cases and contacts to support their well-being, and testing of contacts as appropriate.

2 Governmental authorities include but is not limited to the National and Provincial Departments of Health, the NICD, the City of Cape Town, the National Department of Higher Education, Science and Technology, and the National Department of Trade and Industry.
A phased-in return to research will be facilitated through identifying and prioritising areas and activities where research cannot continue without access to campus facilities. The benefit and impact of the research will be an additional factor in determining its priority to resume physical access. The Return to Research Task Team (RRTT), chaired by the Deputy Vice Chancellor (DVC) for Research and Internationalisation, will develop a set of criteria against which the benefit and impact of research must be measured. The decisions on which research activities to resume and how to resume these will be based on scientific advice and the prescripts of a Risk Adjusted matrix, as per the government and the OHS Act regulations in place, including maintaining low density and physical distancing.

A centrally planned and co-ordinated implementation strategy

The central structures will work collaboratively with faculties, departments and units across the university, as the success of the preparedness, prevention, and mitigation is highly dependent on leadership and teamwork at multiple levels of the university system.

Relying mainly on UCT’s internal capacity

UCT’s internal capacity, that is the expertise, experience and capabilities of staff and students, will be harnessed to put all the facets of the plan in place.

‘Return to Work’ Government Lockdown Levels

The following Status Alerts Framework has been published by the Government based on the rate of infection spread, health services readiness, and economic recovery risk model.

COVID-19 Status Alerts as per Government Risk Protocols

While considering the national Status Alerts Framework, the following three criteria will be used as a guide to determine when and how to allow the gradual resumption of activities at UCT:

1. Risk of transmission of and ability to contain and control the spread of COVID-19 infection on UCT campuses and residences (including the ease of implementing prevention, mitigation and containment measures).
2. The expected impact on the university of a continued lockdown in terms of learning and research.
3. The financial and social sustainability impact on the university.
UCT Risk Adjusted Phases for Return to University Activities

UCT Risk Adjusted Phased opening of campus

UCT plans to phase in the return to campus using a Risk Adjusted return to work and learning model as in Table 1. This takes into consideration National Prescripts of the different lockdown levels, Western Cape provincial conditions, the associated context of UCT, and what is feasible and practicable at each lockdown level.

<table>
<thead>
<tr>
<th>National Levels</th>
<th>UCT Risk Adjusted Phased opening of campus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 5 (High Virus Spread, and/or low readiness)</td>
<td>Campuses Closed (except for essential services)</td>
</tr>
<tr>
<td>Level 4 Moderate to High spread with low to moderate readiness</td>
<td>Essential Maintenance and emergency repairs only</td>
</tr>
<tr>
<td></td>
<td>A selection of research staff, post-doctoral fellows and post-graduate students, whose research and postgraduate work is dependent on access to facilities on campus, may be allowed to return under strict controls.</td>
</tr>
<tr>
<td></td>
<td>Students with limited ability to do online learning at home may be allowed to return to residences in order to have the resources to do online learning. This would be under strict controls (+- 1600 allowed for; with physical distancing practices)</td>
</tr>
<tr>
<td>Level 3 Moderate virus spread with moderate readiness</td>
<td>UCT Phase 1 High Risk</td>
</tr>
<tr>
<td></td>
<td>Buildings with good ventilation, large areas and where controlled physical distancing practices can easily be put in place</td>
</tr>
<tr>
<td></td>
<td>Work from home should be encouraged to support this</td>
</tr>
<tr>
<td></td>
<td>Staff that are at low health risk as defined in the staff Return to UCT risk assessment document</td>
</tr>
<tr>
<td></td>
<td>Students that are at low health risk as defined in the student Return to UCT risk assessment document (33% Cap on Students Returning)</td>
</tr>
<tr>
<td></td>
<td>Residences where controlled physical distancing can be put in place (i.e. individual rooms with appropriate and separate amenities)</td>
</tr>
<tr>
<td>Level 2 Moderate virus spread with high readiness</td>
<td>UCT Phase 2 Moderate Risk</td>
</tr>
<tr>
<td></td>
<td>Buildings where controlled physical distancing can be put in place</td>
</tr>
<tr>
<td></td>
<td>Work from home should be encouraged to support this</td>
</tr>
<tr>
<td></td>
<td>Staff that are at low health risk as defined in the staff Return to UCT risk assessment document</td>
</tr>
<tr>
<td></td>
<td>Students that are at low Health risk as defined in the student Return to UCT risk assessment document (66% Cap on Students Returning)</td>
</tr>
<tr>
<td></td>
<td>Residences where physical distancing can be put in place (i.e. individual rooms with separate amenities)</td>
</tr>
<tr>
<td>Level 1 Low Virus Spread with high Health system readiness</td>
<td>UCT Phase 3 Low Risk</td>
</tr>
<tr>
<td></td>
<td>Departments where high density cannot be avoided, and limited physical distancing can be put in place</td>
</tr>
<tr>
<td></td>
<td>All Staff</td>
</tr>
<tr>
<td></td>
<td>All Students</td>
</tr>
<tr>
<td></td>
<td>Residences where students share rooms and communal ablutions</td>
</tr>
</tbody>
</table>
As indicated earlier in the document, work from home practices and off-site online learning are encouraged, and universal precautions remain in place until, at least, the end of Level 2.

When plans are drafted, Faculties and Departments must take into consideration the Unlocking and Locking of National Levels and how plans will be managed between levels.

**UCT Risk-Adjusted approach for individual staff**

The management of staff based on their risk assessment will be implemented by operational managers, heads of units, departments, and divisions throughout all levels of the system. This requires that managers must be fully conversant with these guidelines and how they will apply to staff, and make sure that all staff are aware of the risk-adjusted approach and the implications thereof. Table 2 outlines this approach for individual staff, according to three cumulative sets of criteria:

- The location where the current job can be performed during the University phased-in return period;
- The job risk classification, as determined by the nature of the job; and
- The individual’s health risks that render them susceptible to developing complications should they contract the virus.

The assessment of an individual’s risk across these three sets of criteria must then be used as a guide for taking a risk-adjusted approach to returning an individual staff member to work. Table 2 contains the Risk Assessment matrix for staff

<table>
<thead>
<tr>
<th>Working Definitions.</th>
<th>Job risk classification:</th>
<th>Employee Health Risk Category:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Job can be effectively performed:</strong></td>
<td>Low Risk</td>
<td>High risk</td>
</tr>
<tr>
<td>Away, Partially off site, Only on site</td>
<td>Medium Risk</td>
<td>Moderate Risk</td>
</tr>
<tr>
<td><strong>Job can be efficiently done online.</strong></td>
<td></td>
<td>Low Risk</td>
</tr>
<tr>
<td><strong>AWAY</strong></td>
<td><strong>MEDIUM RISK</strong></td>
<td><strong>HIGH RISK</strong></td>
</tr>
<tr>
<td>Employees that require frequent and/or close contact with (i.e. within 1.5 meters of) people who may have SARS-CoV-2 infection, but who are not known or suspected COVID-19 patients e.g. asymptomatic people.</td>
<td>Please note: This is an interim guide that may be updated as the outbreak in South Africa intensifies, to guide additional workforce preserving strategies (National Dept of Health: Version 4, 25 May 2020)</td>
<td></td>
</tr>
<tr>
<td>These are people who have contact with the general public – many students, visitors, staff from other areas</td>
<td>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.</td>
<td></td>
</tr>
</tbody>
</table>
COVID-19 ‘National Lock Down’ Return to UCT  
Policy Framework - Risk Adjusted Guide

– e.g. visitor centres, reception desks, library staff.

The major risk 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:
   • chronic lung disease: moderate to severe asthma, chronic obstructive pulmonary disease (COPD), bronchiectasis, idiopathic pulmonary fibrosis, active TB and post-tuberculous lung disease (PTLD)
   • diabetes (poorly controlled) or with late complications
   • moderate/severe hypertension (poorly controlled) or with target organ damage
   • serious heart conditions: heart failure, coronary artery disease, cardiomyopathies, pulmonary hypertension; congenital heart disease
   • chronic kidney disease being treated with dialysis
   • chronic liver disease including cirrhosis
3. Severe obesity (body mass index [BMI] of 40 or higher)
4. Immunocompromised as a result of cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, prolonged use of corticosteroids and other immune weakening medications
5. >28 weeks pregnant (and especially with any of comorbidities listed above)
6. Post-delivery for 6 weeks, and breastfeeding women

<table>
<thead>
<tr>
<th>Partially on site</th>
<th>LOW RISK</th>
<th>MODERATE RISK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 50% of the job tasks can be done at work.</td>
<td>Employees that do not require contact with people known to be or suspected of being infected with SARS-CoV-2, nor frequent close contact with (i.e. within 2 meters of) the general public.</td>
<td>People who have chronic disease such as high blood pressure, minor heart problems, asthma, or chronic bronchitis, diabetes, but are well controlled. People over 60, but under 65, are automatically deemed high risk. However, if they are well and fit and feel that they need to return to work, they should discuss their risk status with their doctors.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Only on site</th>
<th>HIGH RISK (For info only - not used in macro)</th>
<th>LOW RISK</th>
</tr>
</thead>
<tbody>
<tr>
<td>More than 50% of job tasks need to take place at work; would be inefficient to work at home due to frequent commuting.</td>
<td>People working with infected Covid-19 patients.</td>
<td>None of the conditions above. If any doubt, please contact occupational health.</td>
</tr>
</tbody>
</table>
UCT risk adjusted approach for individual students

Student wellness services (SWS) will be responsible for co-ordinating risk assessment of students in collaboration with the relevant custodians of student welfare, throughout all campus sites.

The individual student’s health risks that render them susceptible to developing complications, should they contract the virus, will be considered.

The Return To UCT for individual students must be phased in guided by the Risk Adjusted matrix in Table 3:

Table 3: The Return To UCT for individual students Risk Adjusted matrix:

<table>
<thead>
<tr>
<th>Location where students can study</th>
<th>Student Health Risk Category:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Away, Partially off site, Only on site</td>
<td>High risk, Low Risk</td>
</tr>
</tbody>
</table>

**AWAY**  **HIGH RISK**

All study activities can be efficiently done online.

Please note: This is an interim guide that may be updated as the outbreak in South Africa intensifies, to guide additional workforce preserving strategies (National Dept of Health: Version 4, 25 May 2020)

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 risk 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:
   • chronic lung disease: moderate to severe asthma, chronic obstructive pulmonary disease (COPD), bronchiectasis, idiopathic pulmonary fibrosis, active TB and post-tuberculous lung disease (PTLD)
   • diabetes (poorly controlled) or with late complications
   • moderate/severe hypertension (poorly controlled) or with target organ damage
   • serious heart conditions: heart failure, coronary artery disease, cardiomyopathies, pulmonary hypertension; congenital heart disease
   • chronic kidney disease being treated with dialysis
   • chronic liver disease including cirrhosis
3. Severe obesity (body mass index [BMI] of 40 or higher)
4. Immunocompromised as a result of cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly...
PARTIALLY ON SITE

Important practical work can only be done using university facilities. These practicals cannot be replaced by digital technology. Lectures and tutorials can be continued to be done online.

MODERATE RISK

People who have chronic disease such as high blood pressure, minor heart problems, asthma, or chronic bronchitis, diabetes, but are well controlled.

People over 60, but under 65, are automatically deemed high risk. However, if they are well and fit and their teaching programmes have face-to-face components that have been allowed to return to campus, they should discuss their risk status with their doctors.

ONLY ON SITE

The majority of studying needs to be done on campus where (massed) face-to-face interaction and practical activities make up most of the student’s day.

LOW RISK

None of the conditions above. If any doubt, please contact student wellness services.

‘Return to UCT’ Timeline

A model will be developed in consultation with the COVID-19 Co-ordinating Committee (CCC) outlining the phased return to UCT activities.

Implementation plans will be drafted according to the national and/or provincial and/or district risk-adjusted strategy for the higher education sector and will also take into consideration those students who return before the lifting of the lockdown.

The implementation plan will be reviewed periodically and will consider activities such as those listed Table 4.

### TABLE 4: Examples of activities to be considered in the implementation plan

**EARLIER RETURN OF CERTAIN GROUPS OF STUDENTS:** Postgraduate students, final year students and those involved in key research activities, identified based on impact of lockdown on UCT activities (limited numbers with strict selection criteria)

- Students return to residences under strict controls and lockdown conditions
- Self-Cleaning & physical distancing practices
- All necessary precautions to be put in place
- Limited technical support and maintenance staff return to campus
- Limited research staff return to labs and studios with stringent precautions, physical distancing and low-density occupation
- Limited technical research support staff return, but self-cleaning in place

**CHANGES TO LOCKDOWN LEVELS (AND ASSOCIATED CAMPUS PREPAREDNESS)**

- Properties and Services require four weeks to prepare buildings and services for return to UCT
- CPS prepare for controlled access to campuses and buildings
- Cleaning of buildings and gardens resumes
- Online Learning continues
Return to UCT Research

The re-starting of particular research activities on campuses will be approved by the ‘Return to Research’ and the ‘Return to Residence’ Task Teams. This will be done according to specified criteria, taking into account the potential for prevention of infection, published regulations, the risk-adjusted operational plan and the impact of the research on UCT’s research enterprise.

Within the overall limits as prescribed in the government alert levels and related regulations, UCT has some leeway in setting institution-specific levels for the possible cyclical locking and unlocking.

UCTs compliance with COVID-19 Legal Requirements

In terms of the COVID-19 Occupational Health and Safety Regulations, the following measures must be in place before staff and students return to campus and residences.

Health and safety and hygiene measures

Hand hygiene

- Sanitizers
  - UCT must ensure that all staff and students reporting to campus have access to sufficient quantities of hand sanitizer at the entrance to the area where the staff/students will perform their specific duties/studies.

- Soap and water
  - UCT must ensure that staff/students are provided with adequate facilities to wash their hands.
  - Staff/students must ensure that they wash their hands regularly.
Personal protective equipment

- **Cloth masks (as per the required standards)**
  - UCT must provide (free of charge) all staff members and students reporting to campus with three cloth masks. Where appropriate, staff and students may wear their own cloth masks if these meet the required standards.
  - Staff/students must always wear their cloth masks when in public within the learning and workplaces, and while commuting to and from campus.
  - Staff/students must rotate their masks at the end of every day and must wash, dry and iron the cloth mask themselves after each day of use.

- **Health System staff requiring specialised Personal Protective Equipment (PPE)**
  - Additional PPE (e.g. N95 masks and visors) must be provided by UCT as required by the directions and regulations issued by the Department of Health.

Physical Distancing Practices

- Measures must be implemented to enable physical distancing, which includes clear marking and appropriate organisation of workspaces. Workspaces must be arranged to allow a minimum of 2 metres between staff members/students (and where applicable, members of the public).

- UCT staff/students must not gather in communal areas, such as toilets, canteen, and smoking areas.

- Staff meetings in boardrooms are prohibited, except where a minimum of 2 metres between staff members can be and is maintained. Good ventilation must also be established in these venues.

- Where reasonably possible, the flow of movement of staff, students and public in one direction through departments/buildings should be implemented (i.e. separate entrance and exit, arrows directing movement).

- Where it is not reasonably possible to rearrange a workspace to allow for 2 metres between staff and students, the following should be implemented, where possible:
  - barriers between individual workstations;
  - staff/students must be provided with face shields or visors; or
  - staff/students must be relocated to another site that complies with physical distancing requirements.

- The use of lifts must be limited to one person (with disabilities or other comorbidities which impair their ability to use the stairs) at a time.

Infrastructure and equipment

Engineering controls

- **Ventilation: Users of a venue must:**
  - keep the workplace well ventilated by natural or mechanical means to reduce the SARS-CoV-2 viral load;
where reasonably practicable, have an effective local extraction ventilation system with high-efficiency particulate air HEPA filters, which is regularly cleaned and maintained, the vents of which do not feedback through open windows; and

- ensure that filters are cleaned and replaced in accordance with the manufacturer’s instructions by a competent person.

- Physical barriers as preventive measures must be put into place, for example:
  - Screens must be erected where dealing with face to face interactions i.e. reception areas
  - Workstations must be adapted to increase physical distancing

**Vehicle safety and hygiene**

All staff members or students driving employer vehicles must:

- ensure that all interior surface areas of the vehicle are cleaned and sanitised at the commencement of their shift and/or before driving the said vehicle;
- after driving the vehicle, ensure that the steering wheel, indicators, radio controls and interior surface areas of the vehicle are cleaned and sanitised;
- ensure that their hands are sanitised in accordance with the regulations;
- ensure that, when transporting and/or driving with passengers:
  - no more than 50% of vehicle capacity for passenger is permitted in the vehicle;
  - all persons entering the vehicle have sanitised their hands in accordance with the regulations; and
  - cloth face masks are worn by all occupants for the duration of the trip;
- ensure that any passenger displaying COVID-19 symptoms must not be allowed to enter the vehicle, unless precautionary measures have been taken and authorised by the compliance officer; and
- ensure that any passenger declaring COVID-19 symptoms must not be allowed to enter the vehicle.

**Screening of persons: staff, students and visitors**

- UCT must screen all persons entering campus. Screening will be done as defined in the national regulations and guidelines published and that may be updated periodically
- DHET requires that all those arriving on campus must fill in and present the results of a pre-screen electronic questionnaire, available at [healthcheck.higherhealth.ac.za](http://healthcheck.higherhealth.ac.za). Proof of the pre-screen must be provided when arriving at reception.
- Note that temperature reading is only required in the following instances:
  - high risk occupation work, learning and research activities as per the UCT Risk adjusted matrix;
  - persons who present with symptoms of COVID-19 after completing the questionnaires (PUI); or
  - persons in quarantine.
- Where feasible and appropriate, screening stations may be located at campus entrances.
- Screening of people entering campuses must only be conducted by appropriately trained staff or student volunteers.
- A record of each person’s responses to the relevant questions and disclosures must be maintained (see Annexure C – Screening Questionnaire).
- Staff and students who develop symptoms on campus must immediately report their symptoms to their manager or student co-ordinator respectively and make arrangements to report to the relevant UCT health services.
Declaration of Compromised Immune system

All staff members and students must complete a ‘Declaration of Compromised Health Issues’ before returning to campus to resume work, studies and research (The accompanying process flow documents contain the detail on issues of confidentiality, responsible persons, lines of communication, etc).

Reporting of Covid-19 Positive Test

Staff

- Staff must by law report their Covid-19 positive status to the University.
- Staff must report their positive status via their Line Manager, who in turn must report the positive test to the Occupational Health Department.
- UCT must establish a Staff Central Register to be maintained by the Staff Occupational Health Unit.
- Staff must provide a copy of the positive Covid-19 laboratory results/notification or a medical certificate indicating a positive Covid-19 test to the Occupational Health Department, as well as to their Line Manager.

Students

- Students must by law report their Covid-19 positive status to the University.
- Students must report their positive status via their Dean, who in turn must report the positive test to Student Wellness Services.
- UCT must establish and maintain a Student Central Register which will be managed by Student Wellness Services.
- Students must provide a copy of the positive Covid-19 laboratory results/notification or a medical certificate indicating a positive Covid-19 test to the Student Wellness Services.

Specific Considerations in the drafting of a Faculty/Departmental Implementation Plan:

Communication Strategy: minimum requirements are

- Standard/Basic ‘Return to UCT’ information for all staff, students and visitors.
- Regular updates to the UCT community on information in respect of the pandemic and epidemic, mental health advice, etc. e.g. Student Wellness Services to ensure good information is available to all students. ICAS to provide the same for staff.
- ‘Rapid’ and/or emergency communication in the event of rumours, false information, dangerous and misleading public opinions, etc.
- Rapid and/or emergency communication in the event of an actual outbreak
  - Standard Operating Policy and Procedure must be readily accessible to all who need to respond, including the health and security protocol.
• Awareness and mandatory signage must be posted regarding the use of masks, sanitiser as well as physical distancing practices.
• COVID-19 awareness posters, including the signs and symptoms as well as how to react if a person is tested positive.

Preparedness for return to UCT: minimum requirements in each category below are:

• Student Preparedness for Return
  o Residence hygiene (cleaning of all surfaces regularly)
  o Physical distancing practices
  o Post lockdown COVID-19 information for further preventive measures
  o Orientation on return to campus on all prevention measures
  o Orientation to new teaching and learning measures and altered operational aspects
  o Social Events may only continue if the necessary physical distancing and other safety measures are possible

• Preparedness for Return to Research
  o Lab and studio hygiene
  o Physical distancing
  o Post lockdown COVID-19 information for further preventive measures
  o Orientation on return to campus on all prevention measures
  o Orientation of new measures as regards research and altered operational aspects
  o Altered operational practices in the lab or studio to minimise risk
  o Documented approach to field work, where possible to resume

• Staff Preparedness for Return to UCT
  o Building Hygiene
  o Physical Distancing
  o Post lockdown COVID-19 information for further preventive measures
  o Orientation to return to work on all prevention measures and altered operational aspects
  o Meetings must only take place with sufficient observance of the necessity for social distancing
  o Reduce movement and points of contact on campus
  o Travel bans if required
  o Conferences

Further Considerations for managing Covid-19 infection through prevention and containment, and Covid-19 cases (Matters listed below require further discussion, and guidelines on these are likely to be published in due course)

• Containment
  o Promote continuous prevention of human-to-human transmission, including transmission within families and healthcare settings;
Continue to promote physical distancing for a determined period until the Global Pandemic has subsided; and

international and national regulations on travel restrictions

**Isolation and Quarantine:** Even if lockdown is lifted, there may still be virus carriers and UCT needs to be prepared for the following:

- Suspected Cases – quarantine, close contact tracing, etc.; and
- Confirmed cases – and isolation facilities

**Mental Health of Staff and Students**

In order to ensure and support the mental stresses of staff and students, the following measures must all be put in place:

- Provide all staff and students with information about the pandemic and its associated impact
- Active discouragement of any form of stigmatisation of anyone who has contracted the virus or who has known family members who have contracted the virus. Support, care and concern must be shown to all staff and students who may contract the virus or may be affected in various ways by COVID19
- Develop plans to support students, academic and support staff, and clinic staff, who may feel overwhelmed by COVID-19 and associated events on campus.
- Ensure continuity of established mental health and substance abuse services, such as offering remote counselling.
- Encourage students and staff to seek help if they are feeling overwhelmed with emotions such as sadness, depression, anxiety, or feel like wanting to harm themselves or others. They should also be encouraged, if they are drinking alcohol or using substances, to deal with anxiety and uncertainty around COVID-19.
- Disseminate the campus helpline for mental health counselling as well as national helplines, such as the South African Depression and Anxiety Group 24-hour helpline 0800 456 789 and the suicide line 0800 567 567.

**Infrastructure and services**

**Student Housing**

- Measures must be in place to promote physical distancing in as far as is feasible and practicable
- Guidance must be in place on how to limit human-to-human interaction

**Measures for staff and students using university-provided transport**

- Shuttle services must have preventive measures in place
- PPE must be supplied to staff involved in the transport operations
Cleaning Services

- Continuous routine cleaning of all frequently touched surfaces, such as workstations, countertops, desks and doorknobs. Use the cleaning agents that are usually used in these areas.
- No additional disinfection beyond routine cleaning is recommended at this time.
- Where possible, provide disposable wipes so that commonly used surfaces (e.g. doorknobs, keyboards, remote controls, desks) can be wiped down by employees and students before each use.
- Jammie Shuttle Services must adopt the necessary cleaning practices.

Contractors & Vendors

- Start-up of vendor and contractors.
  - Each Vendor and contractor must supply a COVID-19 preventive method statement and risk assessment before commencing work.
  - Requirements must be communicated to them.
- Notification of infections to and from contractors must be in place.
- Awareness of further lockdown if pandemic does not subside or infection levels increase must be communicated.