

**Standard Operating Procedure (SOP) for Managing COVID-19 in the workplace**

**Date: 27 May 2022**

**Amended: 23 June 2022**

**Introduction:**

On the 4th April 2022, the National State of Disaster regulations were lifted. As Occupational Health, we will continue to rely on the Code of Practice of 15 February 2022 and the National Health Act, 2003 – which is still up for comments until July 2022. The Occupational Health and Safety Act, 1993 (Act No. 85 of 1993)(OHSA), with its regulations and incorporated standards, requires the employer to provide and maintain as far as is reasonably practicable a working environment that is safe and without risks to the health of workers and to take such steps as may be reasonably practicable to limit or mitigate the hazard or potential hazard. In the updated National Health Act, COVID-19 will be managed as a notifiable Communicable Disease within the workplace

**Code of Practice 15 February 2022**

**Workplace safety protocols:**

1. **Risk Assessment for Nelson Mandela University[[1]](#footnote-1)**

The Universities Risk Assessment has been updated in April 2022 and is with Safety, Health and Environment department. Risk assessment to be amended by Health and Safety

1. **Vaccination**

COVID-19 vaccination is still recommended as an important measure in lowering the risk of spreading COVID-19, as well as preventing severe illness and even death

1. **Wearing of mask**

As per the repealed health regulations dated 22 June 2022, the wearing of a mask both indoors and outdoors, is no longer required.  The voluntary wearing of masks is encouraged where appropriate (people who have flu symptoms, have underlying conditions, elderly).  A reminder that COVID-19 has not gone away and that we have the individual responsibility of being mindful to others including the vulnerable.

1. **Screening**

No screening will be done upon entry to the University campuses. Screening will only be done at our onsite Occupational Health and Wellness centre and/or Student Health facilities when are attending to patients. All other staff members are required to use the online screening tool which only contain one question: “**Do you have Covid-19 symptoms”.**

1. **Hand sanitising**

Provide for hand sanitisers at all entrances to promote hand hygiene

1. **Ventilation**

The workplace must be kept well ventilated either through mechanical (air-conditioning or fans) or natural ventilation means by opening of windows and doors.

1. **Testing for COVID-19**

The Occupational Health and Wellness staff has undergone training to do COVID-19 testing onsite. The COVID-19 testing is currently done at North Campus COVID-19 Centre. However, this service will later expand to all Nelson Mandela University campuses

It is recommended that all Covid -19 symptomatic employees must have themselves tested as to exclude COVID-19 at the workplace.

The Occupational Health and Wellness staff has access to the National Health Laboratory Service; therefore, the results can be generated immediately.

1. **Gatherings**

There will be no restrictions on gatherings (University facilities)

1. **Limitation on travel**

Persons entering the country do not need any proof on vaccination and/or a negative COVID-19 test [[2]](#footnote-2)

**Managing COVID-19 Positive cases:**

As per the Code of Practice of15 February 2022, all employees have an obligation to report the COVID-19 positive status to their respective employer.

It is of paramount importance for all employees to adhere to the following guidelines:

* **Employees and students who test positive with no symptoms do not have to isolate.**
* **Employees and students that test positive with symptoms, the isolation period has been reduced from 10 to 7 days**
* **Contacts do not have to isolate unless they develop symptoms.**
* **Occupational Health and Wellness will continue to follow up on positive COVID-19 cases**
* **Should employees require emotional support, a referral to Wellness @Work can be arranged.**

If there is evidence that an employee contracted COVID-19 in the course of employment, a claim must be lodged for compensation in terms of the Compensation for Occupational Injuries and Diseases Act, 130 of 1993, in accordance with Notice No. 629 published on 22 October 2019. The Safety, Health and Environmental department will then conduct an investigation to determine workplace acquired COVID-19. The Employee will be required to submit a copy of their Identity Document to Occupational Health. All COVID-19 positive cases must report to Occupational Health and Wellness for a Return to Work Assessment following their isolation period.

**Mental Health Awareness**

**Mental Health Impact of COVID-19 on South African Society: How to Build Back Better**

All lives in South Africa has been affected by the COVID-19 pandemic. Even though government has focused on infection prevention, patient care and mitigation of the pandemic, a major focus should now be on Mental Health and wellbeing.

Mental Health is usually ignored and often disregarded in pandemics resulting in the ramifications to be more lasting than the overall physiological impact of the infection on the average person. Many people have experienced psychological distress in various forms and severities, e.g., loss of loved ones, unemployment, limited access to healthcare facilities. Vulnerable groups include those with pre-existing mental or physical illness, healthcare workers (hcw), etc.

**The Ministerial Advisory Committee (MAC) on COVID-19 Recommendations**

To address mental health impact of COVID-19 and focus on building back better in preparation for future pandemics and other healthcare crisis

The MAC recommendations require both short-term mitigating actions and medium-term mental health system strengthening

Our current health system nationally is insufficient to service or withstand the pressures of the pandemic. Urgent need for investment in system strengthening to provide resilience to recover from post COPVIS-19 pandemic and prevent and respond to future challenges.

**MAC recommends the following:**

* To up scale the mental healthcare system
* Fast track and adopt investment for mental health (as commissioned by National Department of Health)
* Expressly represent and action mental health at MAC (COVID-19) in alignment with infection prevention and treatment strategies.
* Appointment of MAC acco0rding to Section 71 of Mental Healthcare Act No 17 of 2002.
* Emphasis to be on community-orientated mental health services that strengthen resilience and self-care; decentralise treatment and care; which will enable us to build back better in resilience to future pandemics.
* Mental Health policies for both acute and prolonged public health emergencies should be accompanied by detailed implementation guidance with reference to integrating mental health into general services.
* Rigorous research into COVID-19 long-term effects: on mental health and long COVID-19 (2-3years) in priority groups (healthcare worker, mental health patients, those living in poverty, children, adolescents). Research should drive evidence-based prevention and care strategies.

Recommendations for

1. **General Public**

* Psychological First Aid: implementation of non-professional interventions
* Training community members in identification of mental health signs and symptoms
* Task shifting model
* Cost-effective
* Tele-mental healthcare (taking into account and adopting culture, ethics and quality)
* National toll-free mental health helpline and counselling service
* Sustainable and cost effective
* Acceptable and feasible
* Offered in multiple languages
* Currently have South African Depression and Anxiety Group (SADAG) utility.

1. **Specific Populations**
   1. **Economically Disadvantaged Persons**

* Priority group
* To receive increased and improved quality mental health services.
  1. **Persons with pre-existing mental illness**
* Priority group
* Address barriers to care
* Address significant mental health treatment gap
* Investing in mental health policies and infrastructure
  1. **Children, Adolescents, Youth**
* Early childhood development centres and schools.
* Psychoeducational interventions
* Equipping children with skills to manage emotions and behaviours during crisis periods
* Research required on potential long-term mental health impacts of COVID-19 pandemic on:
* young people,
* risks to their education and employment
* stress associated with the pandemic, e.g., suicide, orphanhood
  1. **Healthcare Workers**
* Research on the long-term:
* sustainability of interventions and psychological support
* outcomes such as resilience and mental health of individuals
* Functioning of organisations
* Impact on patient care
* Stress management and psychological first aid:
* Debriefing sessions
* Done by Employee Health and Wellness Services
* Low cost
* Free online counselling and psychotherapy services offered by Healthcare Workers Care Network (HWCN)
* Training in Mental Health care for all:
* Primary Healthcare Practitioners
* Community Healthcare Workers
* Professional Nurses
  1. **Students**
* Develop pro-active health and wellbeing programs
* Develop and implement peer-to-peer interventions across all educational institutions
* Life skills to be included in curriculum:
* Adopting healthy lifestyles
* Building coping skills that promote mental health and wellbeing
* Debriefing sessions
* Coping strategies

1. Please note that the headings in green are the changes reflected on the amended regulations [↑](#footnote-ref-1)
2. Please note that the headings highlighted in green are the changes reflected on the amended regulations [↑](#footnote-ref-2)