(a) SOLIDARITY PROPOSED CODE OF GOOD PRACTICE: MEASURES TO ENSURE HEALTHY DECENT WORK DURING AND AFTER THE COVID-19 LOCK DOWN AND PANDEMIC

(b)

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1. INTRODUCTION

1.1 The world will never be the same after the outbreak of the Corona COVID-19 virus. Several countries had to implement lock-down measures to control and limit the number of infections and casualties. The Republic of South Africa is no exception and a 21-day lock-down period was implemented. It is possible that the lockdown period be extended for a further period.

1.2 It’s critical to focus on the fight against COVID-19. The stark reality is that the consequences of COVID-19 are not limited to the threat to human life and health. The disease in itself, and the steps to eliminate and mitigate its effect, pose a serious threat
to the South African economy, the economical sustainability of businesses and job security. The protection of lives is the highest priority, but simultaneously, it would benefit no one if the economy of our country collapses in the process. Lockdown measures are only sustainable if the economic impact thereof on a country is kept under control.

1.3 It is essential to understand that the health of the people of South Africa is non-negotiable and should be prioritised. However, it is not beneficial to the country, the economy and the people of South Africa if the physical threat is overcome, without simultaneously curtailing the economic threats and enabling the economy to function and to survive the COVID-19 storm. Physical wellbeing is not the only ingredient for whole healthy people – this also requires a healthy economy through healthy work. Health and economy should not be seen as enemies of each other, but should be working in tandem with one another. It is of the utmost importance that all healthy persons should work and remain healthy at work.

1.4 We are concerned about the consequences of loss of income due to the state of lockdown in South Africa, which may cause hunger and suffering to the people of South Africa and may lead to riotous conduct. It is therefore important to enable people to start earning again as soon as possible without compromising on the health of our people.

1.5 For these reasons, Solidarity obtained and considered the guidelines and leading practices contained in the acknowledgements below.
2. LEGAL STATUS OF THE CODE OF PRACTICE

Until incorporated into legislation, this code of good practice (“COP”) is not a legal document, but contains leading practices and practical recommendations for consideration during the process described below:

2.1 The investigation by government and other stakeholders of the viability of a turnaround plan for businesses during and after the periods of lockdown to: limit work losses and social decline; enable the state to acquire tax income; improve the sustainability of businesses, and to enable workers to earn an income and maintain their dependants; and

2.2 The implementation of decisions to enable businesses to carry on and to enable workers to continue with their work, without compromising the workers’ health.

3. THE OBJECTIVES OF THIS CODE OF PRACTICE

3.1 The objectives of this COP are to provide guidance regarding leading practices and practical recommendations for consideration during the process of:

3.1.1 The investigation by government and other stakeholders of the viability of a turnaround plan for businesses during and after the periods of lockdown to: limit work losses and social decline; enable the state to acquire tax income; improve the sustainability of businesses, and to enable workers to earn an income and maintain their dependants, while staying healthy; and
3.1.2 The implementation of decisions to enable businesses to carry on and to enable workers to continue with their work, without compromising the people’s health.

3.2 This COP could also assist employers to respond to the health-threatening incidence of COVID-19 at the workplace and to determine which steps they should consider and apply to ensure protection of the health and safety of employees.

4. HEALTH AND SAFETY REQUIREMENTS AND GUIDELINES

4.1 Without delving into legislation, all owners, employers and persons in control of premises has a general duty to:

4.1.1 Ensure the health and safety of all employees and other persons at the workplace;

4.1.2 Ensure that no persons other than employees are negatively affected by the activities at the workplace;

4.1.3 Conduct assessments to determine the hazards and risks for health and safety at the workplaces considering work procedures and processes;

4.1.4 After the assessment above, to determine what measures are necessary to eliminate the threats. If the identified threats cannot be eliminated, determine
the necessary measures to the threats and protect the employees and other persons; and

4.1.5 Implement such measures and monitor the effectiveness thereof.

4.2 These practices are generic and could be applied in mines and other industries. However, it is crucial that all employers conduct thorough risk assessments at all workplaces and adapt these practices to fit the specific conditions at each respective workplace.

4.3 Decision making must be risk based. Instead of closing all businesses and implementing sweeping prohibitions, assessments could start with determining whether a business or a person can continue with their economic activity without posing a health risk to others. This might include persons who could safely labour alongside others, or people in geographic locations that do not have local transmission of COVID-19.

4.4 Whether a business could be allowed to proceed with its business activities should be wholly dependent on the outcome of risk assessments at each workplace. Employers should prove that they assessed all risks and hazards concerning COVID-19 risk at their workplaces and took all reasonably practicable steps to prevent the spread of the virus to any persons at their workplace. Where no significant risk of infection exists at workplaces or with regard to work, such businesses should be allowed to conduct their business activities, subject to health and safety legislation, the requirements and guidelines contained herein below.

4.5 **Risk management in the workplace:**
4.5.1 The management of risks at the workplace is crucial for the health and safety of workers, including the fight against biological agents such as COVID-19. A healthy and safe workplace is only possible, where all risks are continuously monitored and eliminated or controlled.

4.5.2 Newly developed risks may develop at workplaces which were closed for a period of time, even as short as three weeks. New research results on the Corona virus and its impact regularly come to the front and it is important to consider all new information from a risk management viewpoint.

4.5.3 Appropriate risk analyses must be done at all workplaces especially those that have not operated due to the lock down, before any work is resumed. Measures necessary to eliminate or control those risks must be identified and implemented.

4.5.4 After work has recommenced, a daily analysis on COVID-19 at the workplace must be done and a written record of these risk analyses must be kept. The analysis should consist of, at least, the following:

a. The identification of all possible hazards and risks;

b. An analysis of the nature of the risks;

c. Steps to be taken to eliminate or control these risks.

4.6 Phasing in and “normalising” of production and work:
4.6.1 South Africa is currently in a state of national lockdown which prevents workplaces, except those delivering essential services to function. The return to normal pre-lockdown working hours after three weeks of lockdown, poses risks for the health of workers, as it could expedite the transmission of the virus.

4.6.2 Lifting of restrictions on work should be implemented on a phased basis, such as: for the first two weeks, return to half of the normal working days. Thereafter it is increased to two-thirds of normal working days for the following two weeks and only thereafter, full normal working days may be implemented.

4.6.3 It must, however, be realised that as long as there is a risk of highly contagious viruses at workplaces, work and production will never be able to return to the old “normal” that applied before COVID-19. Due to the continued threat of infection, measures such as maintaining a high level of hygiene, social distancing and reducing the number of people at the workplace should be the new “normal”.

4.7 **Restriction on the number of people at the workplace:**

4.7.1 Employers could eliminate or reduce the risk of transmission by limiting the number of people at a workplace.

4.7.2 This could be done in various ways, such as rotation using a shift roster.
4.8 Mass screening of workers at large workplaces:

4.8.1 Large workplaces, such as factories, steelworks and motor vehicle factories, pose a greater risk for workers to be infected at the workplace.

4.8.2 The workforce should be screened weekly on the premises in order to manage the risk and to protect continuous production. Should screening results indicate a possible infection, the employee should immediately be referred for medical testing at an appropriate healthcare facility.

4.9 Safety equipment and protective clothing:

4.9.1 The wearing of appropriate protective clothing in the workplace should be compulsory for the duration of the threat of COVID-19.

4.9.2 The wearing of appropriate masks, safety goggles / glasses and gloves where contact with colleagues and clients cannot be prevented must be compulsory, especially since certain people who have been infected with the virus could be asymptomatic. These safety items must be provided by the employer at the employer's cost.

4.9.3 Steps must be taken to increase production of the necessary safety equipment and gear to meet the need at a reasonable cost.
4.9.4 Government should consider regulations to give companies a rebate on tax for 2020 and to subsidise purchases for personal protective equipment and gear to restrict COVID-19 at the workplace.

4.9.5 Personal protective equipment and gear should be fit for purpose by addressing the risks identified in the risk assessment and should comply to minimum standards pertaining to quality and quantity.

4.10 Occupational health and safety guidelines:

4.10.1 The impact of the pandemic on decent employment must be addressed. Decent work includes the provision of a healthy and safe workplace and the measure to which employers support employees. Occupational health and safety guidelines must be mandatory.

4.10.2 Employees must enjoy a safe and healthy work environment. Measures to ensure a healthy and safe work environment in combatting COVID-19 are included in guidelines addressing occupational health and safety, hygiene, adapting work circumstances and raising awareness such as the Regulations for Hazardous Biological Agents, 2001 issued in terms of the Occupational Health and Safety Act (Act No. 85 of 1993) as amended.

4.10.3 Furthermore, COVID-19 specific measures should be put in place and derived from the outcome of the risks assessment such as reviewing and amending work procedures and processed to limit contact between employees take place.
4.10.4 Employers should develop and implement an action plan to provide for incidence of direct exposure to, or a positive case of, COVID-19. This action plan should include reporting, notice, monitoring, reorganisation of work and decontamination.

4.10.5 In case of the high incidence of positive COVID-19 cases, employers should prepare an isolation room at the workplace to assess and provide care for any employee who exhibits symptoms of contagion.

4.10.6 Good record keeping is at all times required to ensure contact tracing is possible should an employee or visitor becomes COVID-19 positive.

4.11 **Hygiene:**

4.11.1 Employers should ensure:

a. The availability of handwashing facilities. These facilities should be made available near all areas where it could possibly be necessary, including restrooms, kitchens, entrances to buildings, cafeterias and consultation rooms.

b. Posters indicating best handwashing practices should be put up and be visible at all entrances and handwashing facilities.
c. The availability of hand sanitiser (containing at least 60% alcohol) and promote the use thereof where there are no handwashing facilities.

d. The availability of facial masks and gloves for use by employees who experience symptoms.

e. The availability of dustbins, with closed covers, to ensure that facial masks and gloves can be safely disposed of.

f. That cleaners are trained and equipped with the necessary protective gear to deal with the waste of COVID-19 positive people.

g. All cleaning staff are trained in cleaning techniques and are supplied with utility gloves and adequate cleaning materials, to protect both themselves and colleagues from contamination.

h. That clean shops, facilities and workplaces are maintained.

4.11.2. During the pandemic, vulnerable employees such as people suffering from chronic illnesses, pregnant and breastfeeding women, over 60 etc, should not be allowed to work unless it can be done from home.
4.11.3. Any workplace with a childcare facility should take the same measures as set out above.

4.11.4. Policies should be developed by employers that makes it compulsory for all employees to report all incidences via means of telecommunication of any employee diagnosed with COVID-19 or showing signs of COVID-19 or flu-like symptoms, not to report to work in person and self-isolate. This should also be true if a member of the employees’ household.

4.11.5. Any workplace with a childcare facility should take the same measures as set out above.

4.11.6. Policies should be developed by employers that makes it compulsory for all employees to report all incidences via means of telecommunication of any employee diagnosed with COVID-19 or showing signs of COVID-19 or flu-like symptoms, not to report to work in person and self-isolate should. This should also be true if a member of the employees’ household.

4.12 Guidelines for the implementation of adapted work practices:

Work and work practices should be adapted to reduce contamination between employees. The following guidelines ought to be followed:

4.12.1 A risk assessment should be done to determine whether flexible working arrangements can be implemented whilst ensuring business continuity.
4.12.2 Employees must be consulted concerning the adaption of procedures and processes.

4.12.3 Flexible working arrangements include that employees work from home, telework (where work is done via telephone and internet with no physical element) and reduced workload.

4.12.4 Employers can consider adapting hours of work and implementing staggered working hours to reduce the possible contamination between employees.

4.12.5 See below examples of flexible work arrangements:

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4.13 Raising awareness:
Employers should:

4.13.1 Refer to the prescriptions entailed in the Hazardous Biological Agents Regulation at Regulation 4 that deals with information and training.

4.13.2 Distribute pamphlets containing information to employees containing good practice guidelines for hygiene and protection against contamination.

4.13.3 Only publish and distribute credible information that has been verified.

4.13.4 Support pregnant employees to take preventative measures and to report any possible symptoms to the employer.

4.13.5 Advise breastfeeding mothers with COVID-19 symptoms that they should wear a face mask and gloves when breastfeeding, and that they should wash their hands before and after making physical contact with the child. These mothers should be encouraged to seek medical assistance as soon as possible.

4.13.6 Ensure that, where food is prepared and provided, best hygiene practices are followed.

4.13.7 Provide employees with information as to whom should be contacted in the event of direct exposure of if they experience symptoms.
4.13.8 Provide employees with access to other helplines in cases of domestic abuse, mental wellbeing and physio-socio assistance.

4.13.9 Provide information to employees to assist them to deal with, and work under, pressure and stress.

4.13.10 Provide information to employees to help them sustain a healthy lifestyle.

4.14 Response to a possible case of COVID-19 in the workplace - Guidelines in case of an employee experiencing symptoms:

4.14.1 Policies should be developed by employers that makes it compulsory for all employees to report all incidences via means of telecommunication of any employee diagnosed with COVID-19 or showing signs of COVID-19 or flu-like symptoms, and not to report to work in person and self-isolate. This should also be true if a member of the employees’ household has been diagnosed with COVID-19 or is suspected of having COVID-19.

4.14.2 An employee showing symptoms of COVID-19 should be isolated at the workplace as soon as possible, unless the employee can remove him-or herself safely from the workplace.

4.14.3 The isolation area should have good ventilation, be easy to clean and without carpeting.
4.14.4 The local health services should be contacted (via the necessary reporting hotline) and asked to assess and transfer the employee as appropriate or directed.

4.14.5 If personal protective equipment (PPE) is not available at the workplace, the health services should be notified of this.

4.14.6 The employee should be provided with a face mask or cloth to cover their mouth and nose.

4.14.7 The employee should be advised to dispose any tissues in a covered bin, and to maintain good hand and personal hygiene.

4.14.8 As few people as possible should make contact or deal with the employee and if PPE is not available a distance of at least 1 meter should be maintained from the employee.

4.14.9 After the employee has been removed the isolation area should be thoroughly cleaned. Any toilet and washing facilities the employee used, should also be cleaned.

4.14.10 The cleaner should wear PPE and use bleach or household detergents for cleaning.

4.14.11 Good record keeping is at all times required to ensure contact tracing is possible should an employee or visitor becomes COVID-19 positive.

4.14.12 The above employees should be aware of any possible symptoms.
4.15 **General guidelines:**

4.15.1 Employees who have travelled to areas with high incidence of positive COVID-19 cases should take precautions including self-isolation and good hygiene practises.

4.15.2 No employee or visitor who has acute symptoms of fever, sneezing, coughing, vomiting or diarrhoea may enter the workplace.

4.15.3 Employees with persistent fever, respiratory or gastro-intestinal symptoms should be encouraged to seek a medical opinion before presenting at work.

4.15.4 Where employees work with members of the public, the employer should encourage the employees to take corrective action if they believe that their health, and a healthy workplace, is in danger. Appropriate responses may include asking the individual to leave the workplace or escalating the matter to a more senior employee. If an employee believes that an individual poses a serious threat to their health the employee should not feel compelled to continue working with that individual.

4.15.5 Where possible employers should assist employees with safe transport to and from work.

4.15.6 In the case of a recovered case of COVID-19 returning to the workplace:
a. It is advisable that each recovered patient supplies a medical note from their treating doctor, confirming that they are fit to work.

b. These employees may need psychological support or further medical assistance to monitor their progress. Employers should consider additional sick leave for such appointments.

c. The workforce itself should be educated and encouraged to understand that returning workers pose no health threat and should be treated with support and sympathy.

5. SUGGESTIONS AND STEPS FOR A HEALTHY WORKPLACE

5.1 Critical Controls:

The following have been identified as critical controls in minimizing exposure to the COVID-19 virus:

5.1.1 Social distancing and workplace de-densification:
Monitoring activities:

a. Ensuring a gap of at least 1 meter between individuals at all times at the workplace.
b. Physical contact between employees is NOT permitted under any circumstances.

5.1.2 Medical screening (see detail below):
Workplace monitoring activities include:

a. Clinical questionnaire;

b. Temperature screening and COVID-19 testing (as appropriate) prior to entry to a site.

c. Where rapid tests are not available, the clinical questionnaire and temperature screening will be sufficient.

d. The employee will be required to check his temperature every 3 hours and report any temperature >37.5°C.

5.1.3 Quarantine / Isolation:
Monitoring Activities

a. All employees suspected of COVID-19 infection must be quarantined at home or in designated quarantine facilities for 14 days.
b. All confirmed cases must immediately be reported to the HR Department or line manager.

5.1.4 Personal and workplace hygiene:

Monitoring activities

a. Senior leadership to ensure the availability of adequate handwashing facilities, soap and running water.

b. Door handles to be sanitised twice a day.

c. Availability of sanitizers for workplace hygiene in high risk areas (e.g. stairs, open plan offices, common work surfaces and machinery, etc.).

d. Common use areas, equipment and machinery must be sanitized at the end of every working day using a minimum 60% alcohol-based sanitiser.

e. Other areas where infections may occur must be sanitized after every session or after every meeting with a client or visitor.

f. Employees must be provided with sanitizer bottles and must take personal responsibility for sanitizing their workspaces and hands, including computers, etc.
g. Biometric access control must be deactivated except in safety critical areas where sanitizers must be available for use before and after the fingerprint reading.

5.1.5 **COVID-19 case management:**
Monitoring activities:

a. Clinical identification, isolation and follow up of suspected cases by HR department and/or health personnel to ensure correct clinical management and limitation of spread of the disease.

5.1.6 **Contact tracing:**
Monitoring activities:

a. It is the organisations responsibility to trace contacts at the workplace.

b. Successful tracing of all contacts of diagnosed or suspected cases within the organisation.

5.1.7 **Availability of PPE:**
Monitoring activities:
a. Employees that are suspected or confirmed to have COVID-19 infection must wear FFP2 masks.

b. Health care workers performing screening on employees must wear N-95 masks.

5.2 **Procedure**:

5.2.1 **Employee transport to and from work**:

a. Employees using their own cars may only carry 1 passenger, seated at the left rear seat.

b. Company buses carrying passengers must be cleaned and sanitised prior to employees boarding and after passengers disembark.

c. All drivers with passengers as well as all passengers on buses and motor cars must wear face masks.

d. The driver of the vehicle must maintain the rules on social distancing, sanitising and be screened on a daily basis.

5.2.2 **Employee screening at the workplace**:
Employees arriving for work will undergo the following medical screening:

a. **Questionnaire:** on a weekly basis, employees must complete a questionnaire soliciting information on clinical symptoms, travel history and known contact with COVID-19 confirmed person.

b. **Temperature screening.**

   i. Employees will be issued with personal thermometers for self-assessment. These should be used daily prior to coming to work and at least 3-hourly whilst at work.

   ii. Additionally, thermal scanners will be installed at workplace main entrances.

   iii. Handheld thermal scanners will be made available at designated areas (e.g. testing points).

   iv. Any employee with a temperature > 37.5°C will not be allowed entry into the workplace. He/ she will be taken for further medical assessment at designated company identified facilities.

c. **COVID-19 rapid test screening:**

   i. All employees will undergo weekly rapid COVID-19 screening prior to entry into the workplace.
ii. Only those employees with a negative screening test will be allowed access.

iii. Those employees with a positive test will be taken to the designated company site facilities for confirmatory laboratory testing according to the national Department of Health protocols.

iv. No employee may refuse rapid COVID-19 screening and confirmatory testing.

d. Only employees, about whom there are no concerns from the above assessments, will be allowed to enter the workplace. It is important to ensure continued hygienic practices and social distancing are practiced at the workplace.

5.2.3 **Procedure at designated company medical facilities:**

The following groups of employees must be referred to designated company medical facilities wearing FFP-2 masks:

a. Employees showing or reporting any symptoms and those with a temperature > 37.5°C;
i. These employees will be assessed against clinical criteria for COVID-19 infection.

ii. Those not fitting the criteria will be referred to their own health care practitioners for further assessment & treatment.

iii. Those employees fitting the criteria for COVID-19 infection will undergo the necessary confirmatory testing (serology, throat & nasopharyngeal swabs, etc.).

b. Employees in contact with COVID-19 positive people or from high risk areas;

i. These employees will undergo rapid COVID-19 testing.

ii. All positive tests will be followed by confirmatory laboratory testing.

iii. Should rapid tests not be available, these employees will be required to self-isolate for 14 days.

5.2.4 Social distancing, personal hygiene and PPE within the workplace:

a. Each company to continue to promote personal hygiene through frequent hand washing, not touching the face, cough etiquette and social distancing.
b. Hand sanitizers must be issued to all employees and made available at high risk areas (e.g. stairs, work surfaces, etc.).

c. Personal hand sanitisers must be used where running water may not be available and to regularly disinfect the personal workspace.

d. Common areas and equipment (e.g. kitchens, photocopy machine, etc.) must be sanitized midday and at the end of every working day.

e. Social distancing must be practiced in all waiting areas.

f. The following employees must wear respiratory masks:

i. Employees suspected or confirmed to be infected; a COVID-19: FFP-2 mask;

ii. Security personnel conducting breathalyser screening; a N-95 mask (alternatively FFP-2).

5.2.5 Vulnerable and high-risk employees:

a. Disengagement of employees at workplace
i. **Work-from-home arrangements** should be made for these categories of vulnerable employees:

1. **Social**
   - Elderly older than 60.
   - Employees part of extended families co-habiting (intergenerational living with the elderly)

2. **Clinical**
   - Pre-existing chronic medical conditions
   - Cardiovascular disease
   - Hypertension
   - Diabetes
   - Chronic respiratory disease
   - Cancer
   - Immune suppression (e.g. HIV/AIDS, transplants)
   - Lung pathology
   - Clotting problems
   - Pregnancy (Pregnant females will not be allowed into the workplace during the pandemic. Those who are able to work from home will be required to do so).

3. **Environmental**
   - People in group residential settings such as aged care facilities
   - Communal living
ii. Consider deploying employees in shifts, while extending operational hours to maintain production output.

iii. Clear division of employees on different shifts, by implementing human movement management measures and stepping up cleaning of common areas during shift changeover.

iv. Shorten meetings while limiting the number of attendees and encourage employees to use tele-conferences and videoconferencing where possible.

v. Workplace activities involving close and prolonged contact between employees that are not critical for business operations should be deferred.

5.2.6 Return to work surveillance program:

a. Workplace surveillance is required for all individuals who have been on 21 days lockdown or travelled within the last 14 days.

b. Individuals are required to commence surveillance for 14 days after the date of return.

c. Surveillance consists of:

i. Daily taking of temperature, ideally before presenting for work. If the result is above 37.3°C, wait 5 minutes and then retake your
temperature. If it remains above 37.3°C this is considered an abnormal result.

ii. Monitoring for covid-19 symptoms.

iii. If there are any abnormalities, please advise your supervisor and do not attend work.

iv. Contact your local public health authority OR HMM EMS/Clinic.

5.2.7 Management of a suspected case:

a. Isolation in the Workplace

i. If an employee is already at work and begin to feel unwell in the workplace with symptoms of COVID-19, he/she must stop work and immediately notify his/her line manager or the HR Department.

ii. If life-threatening symptoms are present, the line manager or HR Department must call the identified medical institution and inform them of the suspected COVID-19 case. If the individual has life threatening symptoms (clinical observations outside of acceptable parameters, and/or showing signs of respiratory distress) call ER24 – 084 124, or the identified medical emergency service.

iii. Suspected cases who do not have life-threatening symptoms must be placed in a designated isolation room and must immediately put on a mask whilst logistical arrangements are made.
iv. When contacting the identified medical facility ensure to have the following information confirmed:

(1) The employee’s details;

(2) The exact location;

(3) Onset of and description of symptoms;

(4) Travel details;

(5) Any other relevant clinical information.

v. If the employee is clinically stable with mild-moderate symptoms, then:

(1) Arrange transport to recommended health care provider as advised by your local public health authority.

(2) After the employee has left the work premises, break physical contact with the employee and maintain contact with the individual via telephone.

(3) If there is a delay in transportation of greater than 1 hour, ensure the individual has adequate supplies of water and food, and temporary toileting facilities.
(4) If a significant delay is anticipated, transport the individual to their home and perform welfare checks via telephone.

(5) Educate the employee to seek further medical attention if their symptoms worsen and or if they have any further concerns.

(6) Do phone follow-ups to confirm the management plan.

(7) Maintain communication with line management.

5.3 **Boosting immunity:**

5.3.1 Many deaths occur where people have low immunity. Low Vitamin D leads to poor immunity of persons of an advanced age or with underlying medical conditions. All employers of entities which perform essential services and of entities that may be allowed to resume their activities, should boost their employees’ immunity by means of providing the appropriate vitamin supplements.

5.4 **Condition for reopening of businesses:**

5.4.1 In all cases of businesses that may possibly reopen, the condition of maintaining strict hygienic standards and social distancing should, subject to compliance with all the statutory health and safety requirements, still apply. Aspects such as the use of only key personnel or reduced staff (“skeleton staff”) who maintain their distance, personnel rotation, and working shifts may contribute to reduce the risk of infections.
5.5 Practical examples of small businesses that could be allowed to reopen business, in spite of lockdown regulations:

5.5.1 One-man businesses and businesses with few employees should be allowed to continue with their business, with strict adherence to all hygienic measures and prescripts.

5.5.1 One-man businesses and businesses which deliver personal services, such as beauticians, hairdressers, manicurists and other beauty therapists should be allowed to continue with their business, either in their salons or by home visits to their clients. Similar to for example physio therapists or chiro-practitioners, these professionals must, under normal conditions, also maintain high standards of hygiene on a daily basis. There are, for example, aged people who cannot care for themselves and this service is, to some extent, an important service to the community. The access of persons to salons could be restricted, similarly to what doctors currently do.

5.5.2 Used vehicle merchants could also be exempted from the lockdown measures as a large part of their marketing and sales could be done electronically. Provided that the institutions who provide roadworthy certificates could also be allowed to function, they would only have to deliver the vehicles to the buyers en by following the necessary hygienic standards, this would be possible.

5.5.3 Considering the increased need for IT assistance due to more businesses which work from home, cell phone shops, computer shops and similar
businesses should be allowed to reopen their shops. Normally, they do not have a lot of workers and hygienic standards could easily be maintained. Peoples’ computers and cell phone often break down, businesses need ink for printing and especially students in order to print the study material sent to them electronically. Goods could be ordered online or telephonically, and the buyers could just pick it up quickly in the shop. This would drastically reduce people’s exposure time, which would also reduce the contamination of the products in the shop.

5.5.4 Stationary shops should be allowed to open, as there is a great need for stationary for businesses which operate from home as well as from parents who teach and occupy their children at home.

5.5.5 Various needlework and tailoring businesses could be reopened to manufacture hygienic masks for medical and enforcement personnel and the public.

5.5.6 Small businesses, such as garden services and handy-man businesses, where only one or a few people are involved, could be allowed to work. To some extent it would keep the micro-economy going.

5.5.7 Low risk workers should be allowed to work, as long as all hygienic standards are maintained.

5.5.8 Consider allowing all shops, including hardware shops, to open for restricted hours. Artisans and members of the public need access to these shops for essential maintenance and replacing necessary tools and utensils. There are
various options in this regard, including only opening the shops for half a day
and restricting the number of persons accessing the shops at one time.

5.5.9 The construction industry is a valuable contributor to the economy and a major
provider of work. It is important to reactivate this industry as soon as possible.
It could, for example, be considered to allow the housing of construction
workers on building sites, similar to road repair camps. Food could be delivered
or prepared there and building material could be delivered there. The workers
would be restricted to the building site and the work can continue and the
builder can earn money.

5.5.10 The delivery of online purchases should be allowed for indispensable items
such as stationary, computer items, etc.

5.5.11 Winter is on its way. Clothing shops should be allowed to open, albeit for only
a few hours per day, as people, especially children who grow rapidly, need new
clothes.

5.5.12 To restrict the risk of infection, but allow shops to operate, it could be
considered to reserve shopping hours for different people, such as from 08:00
to 09:00 for pensioners, and then from 13:00 to 15:00 and from 17:00 to 18:30
for other members of the public.

5.5.13 Workers at nurseries and garden centres need to keep the plants alive during
the lockdown period. They should be allowed to reopen, subject to maintaining
all hygienic standards. An added value is the therapeutic value that it has on
the wellness of visitors. It is easy to maintain hygienic standards, as access to
these businesses is easily controllable and these businesses are mostly in the
open air. Workers at these businesses could work on a rotational / shift basis and be issued with the necessary PPE.

5.5.14 Workplaces that are secluded and dependent on tourists, such as game farms, should not hold a high risk for infection. If personnel and guests maintain strict hygienic standards, and persons are regularly scanned or tested, this industry should be allowed to proceed with its business.

5.5.15 Places of tourism, such as hotels, etc. could be utilised as hospitals or places of containment and this could keep the hospitality industry from collapse.

6. REGULATORY CONSIDERATIONS

Items in [bold square brackets] are recommended to be deleted and items in underlined bold are recommended to be inserted.


In order to allow employers and business owners to be able to conduct their business and persons to attend their places of work, the following amendments are recommended:

6.1.1 That regulation 11B(1)(a)(i), (iii) and (iv) be amended as follow:
11B (1) (a) For the period of the lockdown-
(i) every person is confined to his or her place of residence, unless strictly for the purpose of performing an essential service, performing his or her work, obtaining essential an (sic) good or service, collecting a social grant, or seeking emergency, life-saving or, chronic medical attention.

(iii) movement between provinces is prohibited, except for purposes of work as provided for in subregulation 11B(1)(b);

(iv) movement between the metropolitan and district areas, is prohibited, except for purposes of work as provided for in subregulation (9);

6.1.2 That regulation 11B(1)(b) be amended as follow:

(b) All businesses and other entities shall [cease operations] be allowed to operate during the lockdown, [save for any business or entity involved in the manufacturing, supply, or provision of an essential good or service] provided that businesses, of which it could not be proven to an enforcement officer, on request of the enforcement officer, by any person involved in control of the business, that all the necessary measures have been taken to eliminate or control the risk of COVID-19 infection and that and that all directions in respect of hygienic conditions and the exposure of persons to COVID-19 are adhered to.

6.1.3 That regulation 11B(1)(e) be amended as follow:

(e) Any place not involved in the provision of an essential good or service, except for businesses referred to in subregulation (b) above, must remain closed to all persons for the duration of the lockdown.
6.1.4 That regulation 11B(3) be amended as follow:

(3) Persons performing essential services as determined in subregulation (2), and persons performing work as determined in subregulation 11B(1)(b), must be duly designated in writing by the head of an institution, on a form that corresponds substantially with Form 1 in Annexure C.

6.1.5 That regulation 11B(5) be amended as follow:

(5) All persons performing essential services, obtaining essential goods or seeking medical attention and persons performing work as determined in subregulation 11B(1)(b), may be subjected to screening for COVID-19 by an enforcement officer.

6.1.6 That ANNEXURE C FORM 1, PERMIT TO PERFORM ESSENTIAL SERVICE, Regulation 11B(3) be amended to include persons performing work as determined in subregulation 11B(1)(b).

6.2 The Income Tax Act, Act No. 58 of 1962, As Amended:

Government should consider regulations to give companies a rebate on tax for 2020 where protective equipment is purchased to restrict the Corona virus at the workplace.

6.3 Mandatory codes of good practice:
6.3.1 It could be considered to make this, and / or other codes of good practice mandatory for all employers by means of incorporating it into regulations.

7. **ACKNOWLEDGEMENTS AND SOURCES**

7.1 Good practices as applied by the following mining houses: Anglo American, AngloGold Ashanti, Harmony and South32 and inputs received from other businesses.


7.5 ILO working paper: Practical and Administrative Responses to an Infectious Disease in the Workplace (Maart 2004).

7.6 The Occupational Health and Safety Act, Act No. 85 of 1993, as amended.
