

# SCENARIO 1: WORKER PRESENTS / COMPLAINS OF SYMPTOMS BEFORE OR AT WORK

## STEP 1:

Do not permit the worker who complains of, discloses, or displays typical COVID-19 symptoms to enter the workplace or report for work.  
Typical COVID-19 symptoms are (using the NICD and CDC definition), fever, suddenly onset of a dry cough, sore throat, shortness of breath (or difficulty in breathing) or loss of smell or taste.

### STEP 1:

If the worker is already at work when he/she presents with symptoms, immediately isolate the worker and provide her/him with a surgical mask.

Arrange for the worker to be transported (in a manner that does not place other workers or members of the public at risk) either to be self-isolated at home, or to be referred for a medical examination or testing, depending on the severity of the symptoms.

### STEP 2:

Instruct the worker to self-isolate for 14 days and continue with the daily self-assessment using the HealthDocs or equivalent application.

If the worker has not yet been tested for the virus, he/she should undergo testing if the symptoms are severe or persist.

### STEP 3:

Assess the risk of transmission and disinfect the relevant area/s that the worker has come into contact with, including the worker's workstation (and determine the need to temporarily close the affected work area/s for decontamination purposes).

### STEP 4:

Compile a list, with the input of the worker, of all other workers, clients, suppliers and other third parties with whom the worker has come into contact and who may potentially be at risk of transmission. Ensure that individuals who may be at risk do daily self-assessment monitoring of their symptoms on the HealthDocs or equivalent application.

The screenshot shows the 'HEALTH DOCS' logo at the top. Below it is a form titled 'CORONA (COVID-19) - Options' with a 'Daily symptoms log' section. The form includes a note: 'If you are not exhibiting any of the below symptoms please leave blank and save to record no symptoms.' The fields are: Temperature (no meds), Respiratory rate, Pulse rate, Fever, Chills, Cough, Sore throat, and Shortness of breath. Each field has a corresponding input control (checkbox or radio button).

### STEP 5:

Determine the need to TEMPORARILY CLOSE THE AFFECTED AREA FOR DECONTAMINATION (using an incident-based risk assessment with due regard to the Dept. of Health Guidelines) if it is an employee or where there could be a risk if the person who has tested positive visited the area for a period exceeding 15 minutes.

Advise players to sanitize equipment such as golf carts and bags.

For MILD cases, self-isolation is recommended for a minimum of 14 days after symptom onset.

For SEVERE cases, after clinical stability (e.g. after oxygen support is stopped) self-isolation is recommended for a minimum of 14 days.

Where the worker is an employee, this time off must be treated as paid sick leave. Where an employee's sick leave entitlement is exhausted, such absence may be unpaid, but the employee may make application for illness benefits from the Unemployment Insurance Fund.

**REFERENCE DOCUMENT:**  
R 639 of 2020 under Government Gazette 43400 of 4 June 2020 Consolidated COVID-19 Direction on Health and Safety in the Workplace. Clause 27, Page 11

Guidance note for workplaces in the event of identification of a COVID-19 positive employee (V5: 14 May 2020)

### STEP 1:

Notify the National Department of Health/ National Institute for Communicable Diseases (NICD), using the hotline number: 0800 029 999.  
NOTE: Some provinces have regional reporting requirements (eg. Western Cape)

### STEP 2:

If the worker who has tested positive has come into contact with other workers/ visitors at the workplace, assess those individuals' exposure to ascertain whether the exposure carries a high or low risk of transmission and instruct them as follows:

## SCENARIO 2: STAFF MEMBER / EMPLOYEE TESTING POSITIVE FOR COVID-19

**HIGH RISK EXPOSURE:** if exposed worker/ visitor in close contact within 1 metre of a COVID-19 confirmed case for more than 15 minutes without PPE (i.e. no face cover/ eye cover) or with failure of PPE and/ or direct contact with respiratory secretions of confirmed COVID-19 case. In such case, the worker must self-quarantine for 14 days and perform daily symptom self-checks. The same advice to be provided to other individuals (visitors), identified through the HealthDocs or similar data base, who's exposure is identified as a High Risk Exposure.

**LOW RISK EXPOSURE:** if exposed worker/visitor was more than 1 metre away from a COVID-19 confirmed case for less than 15 minutes OR within 1 metre but wearing PPE (face cover/ eye cover). Also considered low risk if COVID-19 case was wearing a surgical mask (i.e. there was source control). In such case, the worker may continue to work using a cloth mask and complying with standard precautions and symptoms must be monitored for 14 days from first contact. Visitors identified through the HealthDocs or similar data base be advised to continue monitoring using the HealthDocs self-assessment application.

### STEP 3:

Determine the need to TEMPORARILY CLOSE THE AFFECTED AREA FOR DECONTAMINATION (using an incident-based risk assessment with due regard to the Dept. of Health Guidelines) if it is an employee or where there could be a risk if the person who has tested positive visited the area for a period exceeding 15 minutes.

Advise players to sanitize equipment such as golf carts and bags thoroughly

### STEP 4:

Investigate the cause of infection/ mode of exposure, including any potential control failures (such as disinfection measures, personal protective equipment (PPE), physical distancing measures, education/ training, symptom screening measures, etc.) and review the risk assessment to ensure that the necessary controls and PPE requirements are in place and any identified gaps are addressed.

### STEP 5:

Where the employee contracted the virus as a result of occupational exposure, lodge a claim under the Compensation for Occupational Injuries and Diseases Act. The Compensation Fund is currently finalising a Directive to replace the notice published on 'Occupationally Acquired COVID-19'. Look out for further information on this once the Directive is published.

### STEP 6:

Compliance Officer to communicate details of the incident, incident investigation and remedial measures with appropriate communication lines that exist within management, and consider and implement improved control measures in consultation with such bodies.

### STEP 7:

Only allow the worker to return to work after completing the 14-day self-isolation period and, if the worker suffered from moderate or severe illness, undergoing a medical evaluation confirming fitness to return to work.

### STEP 8:

Require the worker to comply strictly with all personal hygiene, social distancing and cough etiquette measures, to wear a surgical mask for 21 days from date of diagnosis and continue to closely monitor the worker's symptoms upon return to work.

**REFERENCE DOCUMENT:** R 639 of 2020 under Government Gazette 43400 of 4 June 2020 Consolidated COVID-19 Direction on Health and Safety in the Workplace. Clause 20.11, Page 9

# SCENARIO 3: A VISITOR/PLAYER REPORTING THAT THEY VISITED THE CLUB WHILST ILL AND SUBSEQUENTLY TESTING POSITIVE OR WITHIN 48 HOURS PRIOR TO A POSITIVE TEST OR SYMPTOM ONSET

## STEP 1:

There is no obligation on the club to report to the National Department of Health/NICD

## STEP 2:

Commence with tracking and tracing process by identifying individuals who came into contact with this visitor/player. Assess the exposure to ascertain whether the exposure carries a High or Low risk of transmission and follow the guidelines for self-quarantine or symptom tracking as set out in SCENARIO 2 above.

**HIGH RISK EXPOSURE:** if exposed worker/player/visitor in close contact within 1 metre of a COVID-19 confirmed case for more than 15 minutes without PPE (i.e. no face cover/ eye cover) or with failure of PPE and/ or direct contact with respiratory secretions of confirmed COVID-19 case. In such case, the worker/player/visitor must self-quarantine for 14 days and perform daily symptom self-checks. The same advice to be provided to other individuals (visitors), identified through the HealthDocs or similar data base, who's exposure is identified as a High Risk Exposure.

**LOW RISK EXPOSURE:** if exposed worker/player/visitor was more than 1 metre away from a COVID-19 confirmed case for less than 15 minutes OR within 1 metre but wearing PPE (face cover/ eye cover). Also considered low risk if COVID-19 case was wearing a surgical mask (i.e. there was source control). In such case, the worker may continue to work using a cloth mask and complying with standard precautions and symptoms must be monitored for 14 days from first contact. Visitors identified through the HealthDocs or similar data base be advised to continue monitoring using the HealthDocs self-assessment application.

## STEP 3:

Determine the need to TEMPORARILY CLOSE THE AFFECTED AREA FOR DECONTAMINATION (using an incident-based risk assessment with due regard to the Dept. of Health Guidelines) if it is an employee or where there could be a risk if the person who has tested positive visited the area for a period exceeding 15 minutes.

Advise players to sanitize equipment such as golf carts and bags thoroughly

**NOTE 1:** Although the presentation of symptoms can take up to 14 days, in most cases it takes from 2 to 7 days for symptoms to appear. The symptoms are all listed on the HealthDocs application and even the less frequent symptoms associated with the disease such as myalgia (muscle/body pain), nausea and weakness/tiredness, etc should be taken seriously. If you do not use the HealthDocs Application for your club staff and members currently, it is strongly advised that Clubs should consider this because it will be very advantageous if the staff/members monitor themselves using the App or an appropriate equivalent.

**NOTE 2:** Clubs should ascertain from their players/visitors whether they regard the transmission risk to be High or Low and based on this make a decision whether the Club would allow them to play and how soon. If the risk assessment is that the transmission risk was low, the Club could allow them to play but stress that they have to be very diligent in observing the Risk Mitigation guidelines of physical distancing (safe when outdoors is >5 m) and sanitizing protocols. Players/visitors have to continue with their daily self-assessment using the HealthDocs application or an appropriate equivalent as outlined in SCENARIO 2 above.

## REFERENCE

**DOCUMENT:** R 639 of 2020 under Government Gazette 43400 of 4 June 2020 Consolidated COVID-19 Direction on Health and Safety in the Workplace. Clause 20.11.4, Page 10 and Clause 42 and 43.4, page 14

## **ACTION TO BE TAKEN AT THE CLUB IF STAFF/EMPLOYEE TESTED POSITIVE FOR COVID-19**

### **STEP 1:**

Determine the need to temporarily close the affected area for decontamination (using an incident-based risk assessment with due regard to the Dept. of Health Guidelines) if it is an employee or where there could be a risk if the person who has tested positive visited the area for a period exceeding 15 minutes.

### **STEP 2:**

Advise players to sanitize equipment such as golf carts and bags thoroughly.

**ATTACHMENT:** Guidance note for workplaces in the event of identification of a COVID-19 positive employee (V5: 14 May 2020)

## **WORKPLACE DECONTAMINATION DECISIONS: SCENARIO 1: STEP 5 AND SCENARIO 2 & 3: STEP 3**

Determine the need to **TEMPORARILY CLOSE THE AFFECTED AREA FOR DECONTAMINATION.**

Using an incident-based risk assessment with due regard to the Dept. of Health Guidelines) if it is an employee or where there could be a risk if the person who has tested positive visited the area for a period exceeding 15 minutes.

Advise players to sanitize equipment such as golf carts and bags thoroughly