



DETAILED COVID-19 POLICY	
APPROVED	
REVIEWED	
VERSION	

This policy is based on the published regulations and information available as the date of approval / review and remains subject to change as government guidelines and regulations are gazetted and published from time to time.

These guidelines have been compiled in consultation with additional various reputable local and international sources, namely the World Health Organisation, American Academy of Pediatrics, South African National Institute for Communicable Disease, various South African government departments and legislation and the Centres for Disease Control and Prevention (USA).

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1 **PURPOSE OF THIS COVID-19 POLICY**

The novel coronavirus SARS-CoV-2 (Covid-19) has been declared a Public Health Emergency of International Concern by the World Health Organisation and has led to President Ramaphosa to declare a national state of disaster in South Africa. The purpose of this Covid-19 Policy is to prepare for a plan of action to address the serious safety and health risks caused by the highly contagious nature of Covid-19 in a school environment and comply with Broadacres Academy's general duties as contemplated in its HSE Policy and as set out in the applicable regulations and directives published in respect of such national state of disaster. As such this policy forms part of Broadacres Academy's overall HSE policy and will be available for inspection.

2 **OBJECTIVES**

Learner care and education in the context of Covid-19 brings with it many risks that need to be considered. The objectives of this Covid-19 Policy are to ensure minimum disruption to teaching and learning whilst protecting employees, parents, learners, and visitors of Broadacres Academy by:

- 2.1 ensuring ongoing identification, addressing, monitoring and evaluation of risks and responses through appropriate structures, systems and processes;
- 2.2 informing, educating, and training our staff, learners, parents and other relevant community members on Covid-19;
- 2.3 implementing precautionary measures to minimise the risk of persons contracting Covid-19 at the school and spreading Covid-19 in the community;
- 2.4 ensuring an appropriate response to a positive case being identified in the school; and supporting the mental health and wellbeing of our teachers, learners, and parents.

3 SPECIFIC LEGISLATION AND GUIDELINES

This Covid-19 Policy has been drafted with specific reference to:

- 3.1 South African legislation such as the Occupational Health and Occupational Health and Safety Regulations (the General Regulations and Regulations for Hazardous Biological Agents);
- 3.2 various regulations and directives issued by the South African government in terms of the Disaster Management Act, 2002 (**DMA**) in response to the Covid-19 national state of disaster;
- 3.3 various guidelines published by the South African Department of Employment, Education and Labour, and the National Institute for Communicable Diseases (**NICD**), the directive by Minister of Employment and Labour dated 28 April 2020 on health and safety in the workplace; and
- 3.4 various international guidelines published by the Centers for Disease Control and Prevention, the World Health Organisation and UNICEF.

It is recorded that Broadacres Academy qualifies as a medium business for purposes of the regulations issued in terms of the DMA and this Covid-19 Policy constitute a workplace plan for purposes of the relevant regulations.

4 COVID-19 ACTION PLAN

- 4.1 **Ensuring ongoing identification, addressing, monitoring and evaluation of risks and responses through appropriate structures, systems and processes:**
 - 4.1.1 Covid-19 Committee: Broadacres Academy has established a sub-committee of its Board, the Covid-19 Committee, to formulate and monitor the implementation of Broadacres Academy's response to Covid-19.
 - 4.1.2 Covid-19 Compliance Officer: Broadacres Academy has appointed Julie Scholz as its Covid-19 Compliance Officer, to oversee the implementation of this Covid-19 Policy and adherence to the standards of hygiene and health protocols relating to Covid-19 at the school premises.

4.1.3 Risk assessments: Broadacres Academy shall compile assessments to facilitate the identification, assessment and on-going monitoring of the material risks caused by Covid-19, and to determine any appropriate control measures to implement. This will include an assessment of the level of risk (high, medium or low):

- of exposure to Covid-19 at the school based on the transmission of Covid-19 and use of school premises; and
- posed by Covid-19 to each staff member, learner and their immediate household members based on their vulnerability (age, pre-and existing medical conditions) and possible exposure to Covid-19 etc.

See Annexure List for Risk Assessment Template.

4.2 **Informing, educating and training our staff, learners, parents and other relevant community members on Covid-19:**

4.2.1 Broadacres Academy shall:

4.2.1.1 ensure that staff, learners and parents have up to date information on Covid-19 and how to prevent the spread of Covid-19;

➤ Preschool:

- Focus on good health behaviors, such as covering coughs and sneezes with the elbow and washing hands frequently.
- Sing a song while washing hands to practice the recommended 20 second duration.
- Children can “practice” washing their hands with hand sanitiser.
- Develop a way to track hand washing and reward for frequent/timely hand washing.
- Use puppets or dolls to demonstrate symptoms (sneezing, coughing, fever) and what to do if they feel sick (i.e. their head hurts, their stomach hurts, they feel hot or extra tired) and how to comfort someone who is sick (cultivating empathy and safe caring behaviour).
- Have learners sit further apart from one another, have them practice

stretching their arms out or ‘flap their wings’, they should keep enough space to not touch their friends.

➤ Primary school:

- Make sure to listen to learner’s concerns and answer their questions in an age-appropriate manner; don’t overwhelm them with too much information. Encourage them to express and communicate their feelings. Discuss the different reactions they may experience and explain that these are normal reactions to an abnormal situation.
- Emphasise that learners can do a lot to keep themselves and others safe.
- Introduce the concept of social distancing (standing further away from friends, avoiding large crowds, not touching people if you don’t need to, etc.).
- Focus on good health behaviours, such as covering coughs and sneezes with the elbow and washing hands.
- Help learners understand the basic concepts of disease prevention and control. Use exercises that demonstrate how germs can spread. For example, by putting colored water in a spray bottle and spraying over a piece of white paper. Observe how far the droplets travel.
- Demonstrate why it is important to wash hands for 20 seconds with soap and water.
- Put a small amount of glitter in students’ hands and have them wash them with just water, notice how much glitter remains, then have them wash for 20 seconds with soap and water.
- Have students analyse texts to identify high risk behaviours and suggest modifying behaviours. For example, a teacher comes to school with a cold. He sneezes and covers it with his hand. He shakes hands with a colleague. He wipes his hands after with a handkerchief then goes to class to teach. What did the teacher do that was risky? What should he have done instead?

➤ High school:

- Make sure to listen to students’ concerns and answer their questions.
- Emphasise that students can do a lot to keep themselves and others safe.

- Introduce the concept of social distancing.
- Focus on good health behaviours, such as covering coughs and sneezes with the elbow and washing hands.
- Remind students that they can model healthy behaviours for their families.
- Encourage students to prevent and address stigma.
- Discuss the different reactions they may experience and explain these are normal reactions to an abnormal situation. Encourage them to express and communicate their feelings.
- Build students' agency and have them promote facts about public health.
- Have students make their own Public Service Announcements through school announcements and posters.
- Incorporate relevant health education into other subjects.
- Science can cover the study of viruses, disease transmission and the importance of vaccinations.
- Social studies can focus on the history of pandemics and evolution of policies on public health and safety.
- Media literacy lessons can empower students to be critical thinkers and makers, effective communicators and active citizens.

4.2.1.2 provide staff, learners and parents with details of risk assessments, this Covid-19 Policy and preventative measures; and

4.2.1.3 actively promote preventative measures and notification of exposure to Covid-19.

4.2.2 **Staff Training:**

Staff need to be trained in the regarding:

- Covid-19 Information (What it is, symptoms, risks, treatment)
- Covid-19 Protection and Prevention:
 - Hand Washing & Sanitising
 - Social Distancing
 - Personal Protective Equipment (PPE) Usage
 - Safe and Proper Room Cleaning and Sanitisation

- Safe Entry/Exit to Areas and Symptom Screening

4.3 **Implement precautionary measures to minimise the risk of persons contracting Covid-19 at the school and spreading Covid-19 in the community:**

4.3.1 **General Preventative Measures:**

Broadacres Academy's Covid-19 action plan consists of the following key actions to implement workplace controls:

4.3.1.1 **Engineering controls** - these controls will not rely solely on individual behaviour and will be implemented having regard to cost-effectiveness. Controls that may be considered are:

- increasing ventilation rates in the classrooms, offices and any indoor communal areas;
- communal areas to be closed to the extent possible;
- cloth masks to be worn by staff, learners and visitors over the age of 2 years old;
- installing sanitisation stations making it easy to implement hand washing guidelines;
- limiting of items that learners bring from home – no toys and unnecessary items allowed; and
- limiting the number of learners and/or staff members in a specific area of floor space with reference to the square metres of such floor space.

4.3.1.2 **Administrative controls** - these controls will require action by each staff member and/or learner:

- more flexibility on absenteeism when feeling sick;
- minimising contact;
- providing up-to date education and training on risk factors and protective behaviours;
- training on how to use/wear protective clothing and equipment; and
- safe work practices including hand washing etc.

4.3.1.3 **Personal protective equipment (PPE)** - even though engineering and administrative controls are considered more effective in minimising exposure to contract Covid-19, additional protection can be afforded by using/wearing protective equipment such as face shields and cloth masks. Broadacres Academy will follow the recommendation of the NICD on which types of protective equipment to use and will base the use on the risk of being infected with Covid-19.

4.3.2 **Specific Preventative Measures:**

Staff and learners returning to Broadacres Academy are at risk of contracting Covid-19, and consequently being a carrier of Covid-19 and infecting others. Broadacres Academy will be implementing the following measures at the school to minimise the risk of infection:

4.3.2.1 **Cleaning:**

4.3.2.1.1 Definitions to note:

- Wash - To remove dirt and debris by scrubbing and washing with a detergent solution and rinsing with water. The friction of cleaning removes most germs and exposes any remaining germs to the effects of a sanitiser or disinfectant used later.
- Sanitise - To reduce germs on inanimate surfaces to levels considered safe by public health codes or regulations.
- Disinfect - To destroy or inactivate most germs on any inanimate object, but not bacterial spores.

4.3.2.1.2 Safe usage of chemicals:

- Wear disposable gloves to clean and disinfect surfaces and areas using chemicals.
- Immediately after using chemicals for disinfecting, with or without the use of gloves, hands must be washed.
- All chemicals used for cleaning, disinfecting and sanitising must be used responsibly.

- Keep hard surface sanitiser sprays, chlorine bleach and alcohol concentrations and solutions out of the reach of children and locked away.
- Hand sanitisers should be used responsibly and under supervision in the school environment.
- Ensure no ingestion or contact with eyes.
- Ensure good ventilation of the area when using chemicals.
- Cleaning, sanitising and disinfection products should not be used near learners to prevent inhalation of toxic fumes.
- Never mix two or more chemicals together.
- Always check the labels of chemicals for warnings and expiry dates. Never use products that have expired as they will be ineffective.
- When mixing solutions of bleach and water, mix on the day of usage.

4.3.2.1.3 Frequency of cleaning:

- Used areas, all work surfaces and equipment should be disinfected before work begins or after work ends and regularly during the day.
- Bathroom facilities should be disinfected throughout the day.
- High-contact areas including railings, door handles, light switches, window handles, toys, equipment, tables, taps, toilet flush-handles, etc., need to be disinfected throughout the day.
- Refuse bins should be emptied daily. Disinfect contact-areas.

4.3.2.1.4 How to clean, sanitise and disinfect:

- Always clean surfaces with soap and water to remove dust, dirt, food, spills and grime. Allow to dry.
- After cleaning, use sanitisers or disinfectants to kill bacteria.
- Follow the instructions on the label to ensure safe and effective use of the product.
- Use sodium hypochlorite (bleach) diluted in water for disinfecting surfaces:
 - 1/3 cup bleach per 3 litres of water | 20ml bleach per 1 litre of water | 100 ml bleach per 5 litres of water;
 - Leave the bleach on the surface for one minute for maximum

effectiveness before wiping;

- Never mix household bleach with ammonia or any other cleanser.
- For disinfecting toys, equipment and smaller items use at least a 70% alcohol solution.

4.3.2.1.5 Hard (non-porous) surfaces:

- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, use a bleach-water solution.

4.3.2.1.6 Soft (porous) surfaces:

- For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:
 - If the items can be laundered, launder items in accordance with the manufacturer's instructions using the warmest appropriate water setting for the items and then dry items completely.
 - Otherwise, use products that are EPA-approved for use against the virus that are suitable for porous surfaces.

4.3.2.1.7 Electronics:

- For electronics such as tablets, touch screens, keyboards, remote controls, remove visible contamination if present.
- Consider use of wipeable covers for electronics.
- If no manufacturer guidance is available, use alcohol-based wipes or sprays containing at least 70% alcohol to disinfect touch screens. Dry surfaces thoroughly to avoid pooling of liquids.

4.3.2.1.8 Linens, clothing, and other items that go in the laundry:

- Do not shake dirty laundry to avoid spreading virus through the air.
- Wash items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill

person can be washed with other people's items.

- Ensure that baskets or bags that transport items for laundering are disinfected.¹

4.3.2.1.9 Waste management

- Ensure the proper PPE is worn when dealing with waste management.
- Treat all refuse bins and contents as possibly contaminated.
- Collect all the bags with possible contaminated waste from classrooms and offices. Tie the bin liners and place in a big refuse bag. Tie the refuse bag again and dispose safely.
- Clean and disinfect refuse bins daily.

4.3.2.2 **Safe handwashing and sanitization:**

4.3.2.2.1 Hand cleansing must be done with:

- Clean water and soap; or
- Alcohol-based hand sanitiser; (minimum of 70% alcohol).
- If you are not near a handwashing station and soap, use a hand sanitiser to clean your hands.
- Do not use a sanitiser after using the toilet and if your hands are visibly soiled - wash hands with soap and water.
- Sanitisers should have alcohol content of at least 70% for maximum protection. No more than 70% is required.
- Use a hand sanitiser only on dry hands.
- If using gloves, sanitise hands before and after use (of the gloves).

¹ Read more: https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprepare%2Fdisinfecting-building-facility.html

Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#clean>

Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

- Do not use a sanitiser on gloves.
- Do not sanitise and use water at the same time – it is harsh for your skin.
- Learners must be supervised when handwashing to ensure they wash for the appropriate amount of time and properly. Assist younger learners and infants to wash their hands adequately.

4.3.2.2.2 Learners must be supervised when using hand sanitisers to prevent ingestion.

4.3.2.2.3 Hand cleansing must be done regularly throughout the day and at the following times:

- Arrival to the school
- After breaks
- Before and after preparing food or drinks
- Before and after eating or handling food
- Before, after and in between the feeding of individual learners
- Before and after administering medication or medical ointment
- Before and after diapering
- After using the toilet or helping a child use the bathroom
- After coming in contact with bodily fluid
- After handling animals or cleaning up animal waste
- After playing outdoors or in sand
- After handling waste
- After blowing one's nose, coughing, or sneezing
- Before and after caring for another person who needs assistance.

4.3.2.2.4 In an urgent, emergency situation, where possible, wash hands first and wear relevant PPE.

4.3.2.2.5 When treating a wound, always ensure the use of disposable gloves.

4.3.2.2.6 If the situation calls for urgent action before using the steps above, be sure to, afterward, thoroughly cleanse hands and other possibly infected areas. In close contact situations, it is advised that clothing be changed,

taking care to remove the clothing without touching the face and storing it into a plastic packet until such time as the clothing can be properly washed. Remove of any used PPE carefully, dispose of immediately after use and wash hands as prescribed.

4.3.2.2.7 Take precaution to not touch your face, regularly wash hands, avoid touching high-contact areas and keeping a social distance from others. If you know you have been in contact with a positive Covid-19 case, self-quarantine, monitor symptoms and seek medical attention if necessary. Be sure to inform the principal.

4.3.2.2.8 Hand sanitisers must be placed in each classroom, at entrances/exits, staffrooms and bathrooms.

4.3.2.2.9 Hand cleansing stations must be age appropriate and accessible.

4.3.2.2.10 Hand cleansing must be rigorous and last at least 20 seconds.

4.3.2.2.11 For learners it is encouraged that they sing a hand-washing song for the duration of the cleansing to ensure a decent length of time.

4.3.2.2.12 When drying hands, make use of a single-use, disposable towel.

4.3.2.2.13 Place posters near handwashing facilities describing the appropriate steps.²

4.3.2.3 **Social distancing:**

- No large gatherings of people should take place (assemblies, sports events, etc.). Events, festivals, social events should be postponed or cancelled.
- High-traffic times of day, including drop-off and pick-up, should be staggered.
- Shared areas including playgrounds, fields and staffroom usage times

² Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#clean>

should be staggered, as well as shared learning activities. Multiple classes may not make use of communal areas simultaneously.

- Throughout the school environment, demarcate safe social spaces that are 1.5 meters apart.
- Classes should include the same learners and staff each day, in the same location – avoid staff interacting with multiple classes and learners are to remain with the same classroom with the same peers.
- Train staff and teach learners to keep personal space bubbles and avoid touching one another and their faces.
- For learners who nap at school, they should sleep 1.5 metres apart and in a ‘head to toe’ format.
- Where possible, learners and staff should work/learn from home and/or make use of virtual learning and teaching resources. Staff who have school-going children should work from home while schools are closed and should return once learners are phased in.³

4.3.2.4 **Classroom measures:**

- All material and fabric items to be removed from classes, e.g. rugs, plush toys etc. and stored (alternatively, fabric and material items must be washed daily after every use).
- It is advised that all toys are removed from the classroom and only a selection is available daily (rotate them in after disinfecting). This helps control what needs to be disinfected on a daily basis.
- Avoid using toys that are difficult to sanitise.
- Each classroom is to have a bucket to contain toys that have been compromised and need to be disinfected before they are safe to use.
- All areas to have a no touch refuse bin that is emptied and cleaned

³ Read more: https://www.who.int/docs/default-source/coronaviruse/key-messages-and-actions-for-covid-19-prevention-and-control-in-schools-march-2020.pdf?sfvrsn=baf81d52_4

Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#social>

regularly.

- No toys or equipment may be shared between classes.
- When possible, do not share / allow sharing of toys, stationery, equipment. Having a dedicated individual supply is advisable.
- Implement physical safe social distancing guidelines in the classroom. I.e. demarcate seated, standing and learner desk areas that are 1.5 meters apart. As far as is possible a safe social distance of 1.5 metres is to be kept.
- Hand sanitisers (that will be dispensed safely by the educator) are to be made available in each classroom.
- All classrooms are to have tissues readily available.
- Upon entry/exit, each person using the classroom should wash / sanitise their hands as prescribed.
- A surface sanitiser spray and cloth are to be made available for each classroom.
- Classrooms are to have be cleaned and disinfected daily after use.
- Sleeping mats:
 - Each child should have their own, labelled cot, mattress or stackable bed.
 - If stackable beds are used, they are to disinfected daily after use.
 - If covered mattresses are normally used:
 - Fabric covers are to be washed and the mattresses disinfected daily after every use.
 - Alternatively, fabric covers are to be removed. Parents are to send a blanket/cover that is to go home and be washed daily. The mattresses should be disinfected daily after every use.
 - Every care must be taken to avoid contact between learner's blankets and bed/mattresses.
 - After an educator has stored blankets and beds away, they are to cleanse their hands.
 - If possible, at nap time, ensure that learner's naptime mats (or cribs) are spaced out as much as possible, ideally 1.5 metres apart. Place learners head-to-toe in order to further reduce the potential for viral spread.
 - Classroom tablets / computers need to be disinfected in the

appropriate manner (disinfectant wipes).

- If applicable, learner desks must all face the same direction and not face one-another to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).
- If applicable, rotate the teachers' desk to face away from the learners to reduce transmission caused from virus-containing droplets (e.g., from talking, coughing, sneezing).⁴

4.3.2.5 **Nursery & Toddler Centres:**

4.3.2.5.1 Baby-Care Staff Protection:

- Due to the close physical nature in caring for young children, care providers can protect themselves by wearing disposable gowns, large size button up shirts (for easy removal that is not pulled over the face), wear long-sleeved shirts and keeping hair tied back and away from the face.
- Keep multiple changes of clothes on hand for changing if necessary.
- Engage in frequent hand washing or sanitising and regular cleansing of hands, neck, and anywhere touched by a child's secretions.
- Wear cloth masks and cover coughs and sneezes.
- A hand hygiene station is to be set up at the entrance to the baby-centre.
- For proper diapering of babies, see section 3.2.1 of the Caring for Our Children, 4th edition manual:
<https://nrckids.org/files/CFOC4%20pdf-%20FINAL.pdf> .
- Diapering procedure posters are available here:
<https://www.cdc.gov/healthywater/hygiene/diapering/childcare.html>
- Unwell babies, babies at risk, and babies with families at risk are to stay home.

4.3.2.5.2 Baby-Centre Sanitisation:

- Cleaning and disinfection of the room should be done at least once a day in

⁴ Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#clean>

nursery centres, with surface disinfection throughout.

- Special care must be taken with the use of chemicals in the nursery environment:
- Chemicals, concentrates, solutions, soaps and sanitisers must be kept out of child reach.
- Use of these substances must not be around the babies. Ensure the area is well ventilated and clear of children while in use and while drying.
- The following cleaning guidelines are taken from the American National Standards for cleaning, sanitizing and disinfection of educational facilities for children (CFOC by the AAP):

4.3.2.5.3 Cleaning and Sanitising Toys (section 3.3.0.2):

- Only keep toys that can be cleaned and sanitised. For Covid-19 purposes, remove all toys and items that require machine washing until further notice.
- Toys that are contaminated by body secretions by placement in the child's mouth or otherwise, should be removed from the play area and placed in a tub for cleaning at a later stage. The toys should be washed with soap and water, rinsed, sanitised and air-dried.
- Monitor children carefully to avoid sharing of mouthed toys.

4.3.2.5.4 Cleaning and Sanitising Objects Intended for the mouth (section 3.3.0.3):

- Thermometers, pacifiers, teething toys, and similar objects should be cleaned, and reusable parts should be sanitised between uses.
- Pacifiers should not be shared.

4.3.2.5.5 Cleaning Crib Surfaces and Bedding (section 3.3.0.4; 3.3.0.5):

- Bedding (sheets, pillows, blankets, sleeping bags) should be easily washable.
- Each child's bedding should be kept separate from other children's bedding, on the bed or stored in individually labelled bins, cubbies, or bags.
- Bedding that touches a child's skin should be cleaned weekly or before use

by another child.

- Cribs and crib mattresses should have a nonporous, easy-to-wipe surface.
- All surfaces should be cleaned and sanitised throughout the day and after use.

4.3.2.5.6 Washing, feeding or holding a child:

- Childcare providers should change the child's clothes if secretions are on the child's clothes. They should change their own clothing/remove the disposal gown, if there are secretions on it, and wash their hands again.
- Contaminated clothes should be placed in a plastic bag or washed in a washing machine. Contaminated gowns should be properly discarded.
- Infants and toddlers should have multiple changes of clothes on hand in the childcare centre or home-based childcare.
- Childcare providers should wash their hands before and after handling infant bottles prepared at home or prepared in the facility. Bottles, bottle caps, nipples, and other equipment used for bottle-feeding should be thoroughly cleaned after each use by washing in a dishwasher or by washing with a bottlebrush, soap, and water.⁵

4.3.2.6 **Playtime measures:**

- Learners from different classrooms may not be mixed. A staggered playtime roster for playground use must be setup and implemented.
- Before entry to the playground, learner hands are to be disinfected.
- Before exiting the playground, learner hands are to be disinfected.
- As much as possible, encourage learners to maintain safe social distancing. If possible, demarcate visual cues that demonstrate safe physical spacing.
- Because COVID-19 infection is spread by droplets either through coughing, sneezing or from hands to surfaces, outdoor areas have less risk than

⁵ Read more: <https://nrckids.org/files/CFOC4%20pdf-%20FINAL.pdf>

Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>

crowded indoor areas, in part due to ventilation. Therefore, air spraying of outdoor environments is not essential.

4.3.2.7 **Offices, printer room and staffroom measures:**

4.3.2.7.1 Offices/printer rooms/workrooms:

- Clean and disinfect all surfaces and high-contact areas throughout and at the end of the day.
- Implement physical safe social distancing guidelines in offices. I.e. demarcate seated and standing areas that are 1.5 meters apart. People are to maintain a safe social distance of 1.5 metres.
- A hand washing/sanitising facility should be implemented at all entrances.
- Offices are to be cleaned and disinfected daily after use and throughout the day
- Special attention is to be paid to the sanitising of phones, tablets, laptops, computers, copiers and stationery, particularly if any of these items are shared. As far as possible, avoid shared usage of these items.
- Hand hygiene supplies should be provided near shared office equipment and stationery (e.g. copiers, laminators, etc.).

4.3.2.7.2 Staff rooms:

- Clean and disinfect all surfaces and high-contact areas throughout and at the end of the day.
- Implement physical safe social distancing guidelines in the staff room. I.e. demarcate seated and standing areas that are 1.5 meters apart. Staff are to maintain a safe social distance of 1.5 metres.
- To avoid cross-contamination and maintain safe social distancing, a roster for staff-room use should be implemented.
- A hand washing/sanitising facility should be implemented at the staff room door.
- Upon entry/exit, each person using the staff room should wash / sanitise their hands as prescribed.
- Staff are to exercise caution when using communal areas and items,

especially taps, kettles, fridges and microwaves.

- There should be no sharing of cutlery and crockery and staff are to bring necessary items from home.
- Ensure a no touch refuse bin is available and is emptied and cleaned regularly.
- A surface sanitiser spray and cloth are to be made available for the staff room.

4.3.2.8 **Bathrooms:**

- Learners are to have designated toilets and hand-washing facilities, i.e. certain classes are assigned to a set of toilets to avoid cross-contamination.
- A rigorous cleaning schedule for bathrooms should be set and implemented.
- Be sure to disinfect taps, toilet handles, door handles and locks, soap dispensers and other touchable surfaces in the bathrooms throughout the day.
- Educators should avoid allowing large numbers of learners to go the bathroom at once. As far as possible, avoid the mixing of learners from different classrooms in the bathrooms.
- Age-appropriate hand cleansing facilities should be available.
- Hand cleansing with soap and water should take at least 20 seconds.
- Once hand washing is complete, hands should be dried with single-use towels.
- Put up hand-washing posters in the bathrooms.
- Ensure no touch refuse bins are available and are emptied and cleaned regularly.
- After using the toilet, wash hands instead of sanitising them to clean hands of grime and dirt and kill germs.

4.3.2.9 **Kitchens / meals / tuck-shop:**

- Sinks used for food preparation should not be used for any other purpose.
- Ensure a no touch refuse bin is available and is emptied and cleaned

regularly.

- Any staff that show signs or symptoms of illness of any kind are not permitted to work with or serve food (AAP).
- Avoid group dining scenarios – learners should eat in their classrooms and practice safe social distancing when eating.
- Learners should be supervised when eating to avoid sharing and ensure social distancing.
- Learners should wash their hands as prescribed before eating.
- If the school serves meals, dedicated personnel should dish the meals so that multiple individuals are not making contact with the food and serving utensils.
- Educators should wash their hands as prescribed before and after serving meals, and in between assisting learners to eat.
- Learners should be spaced adequately apart during mealtime.
- When clearing used dishes, utensils, bibs and placemats after eating, utmost care must be taken to avoid spreading. Used dishes, utensils, bibs and placemats could potentially be infected and should be removed from the dining area and placed into a designated used dishes tub for immediate washing.
- Where possible, once a learner is finished eating, they should place their used dishes, utensils and placemats in the designated used dishes tub, or alternatively place their lunch boxes/bags away into their school bags/cubbies before immediately washing their hands as prescribed.
- Once the meal tables are finished being used, before reuse, they should be cleared of any spills and food mess with soap and water, before being disinfected as prescribed. After cleaning tables, staff are to wash their hands as prescribed.
- The designated used dishes tubs are to be collected by kitchen staff for washing. Utmost care must be taken when handling these tubs and their contents.
- Tuck shops and coffee shops on campus should be closed until further notice.

4.3.2.9.1 Meals in a nursery:

- In the case where educators are required to feed babies and toddlers with food/milk from home or meals prepared by the school, they are to:
- Wash their hands and the baby's hands as prescribed.
- Ensure a clean area for feeding. High-chairs and baby feeding areas must be properly cleaned and disinfected between meals and between use for children.
- If possible, try to ensure babies eat from a designated high-chair and avoid sharing between babies.
- Educators are to engage in feeding only one baby at a time. There should not be any attempt to feed multiple babies at one time. While feeding, educators should try not to physically engage with babies other than the one being fed.
- Once feeding is complete, educators are to place all used dishes, cutlery and bibs in the designated used dishes tub. Bottles, bottle caps, nipples, and other equipment used for bottle-feeding should be thoroughly cleaned after each use by washing in a dishwasher or by washing with a bottlebrush, soap, and water.
- The baby's hands are to be washed and their faces cleansed.
- Educators are to wash their hands after feeding and cleaning a baby, and before engaging with another baby for feeding or other activity.
- Clear the eating area/highchair from spills and food mess with soap and water before disinfecting.

4.3.2.9.2 Washing used dishes:

- Kitchen staff are to exercise caution when working with used dishes.
- It is advised that kitchen staff use disposable gloves when handling used dishes.
- All dishes and cutlery should first be scraped to remove any leftover food.
- Wash all dishes and cutlery in a dishwasher on its hottest setting with the longest running time.

4.3.2.9.3 If dishes and cutlery must be washed by hand:

- Pre-clean - remove dirt and food by sweeping, scraping, wiping or rinsing with water. Remember to disassemble equipment before if applicable.
- Wash - use hot water and detergent (e.g. Sunlight Dishwashing Liquid). Soak if necessary.
- Rinse - rinse off detergents and any remaining food or dirt with clean, hot water. Not rinsing will decrease the effectiveness of sanitising.
- Sanitise - sanitise to eliminate/reduce microorganisms to safe levels using either the hot water method or the bleach method:
- Hot water method: completely soak dishes for at least 30 seconds in hot water of 77° Celsius (use a thermometer to check temperature). Remove dishes using gloves.
- Bleach method: completely soak dishes for at least 1 minute in a solution of 1 tablespoon chlorine bleach per 3 litres of cool to lukewarm water. Do not use hot water as hot water deactivates the bleach from Sanitising.
- Final rinse - rinse off sanitiser (if necessary).
- Dry - air drying is the most preferable method to dry. Cloth drying spreads germs.

4.3.2.9.4 For guidelines for Food workers, please access the following document: COVID-19 and food safety: guidance for food businesses <https://www.who.int/publications-detail/covid-19-and-food-safety-guidance-for-food-businesses>⁶

⁶ Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html#clean>

Read more: <https://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/protecting+public+health/food+standards/skills+and+knowledge+for+food+handlers/cleaning+and+sanitising+in+food+businesses>

Read more: <https://stopfoodborneillness.org/news-from-stop-clean-sanitize-disinfect/>

Read more: <https://nrckids.org/files/CFOC4%20pdf-%20FINAL.pdf>

4.3.2.10 **Minimising contact:**

- Areas that various classes make use of throughout the week are to be shutdown, i.e. CLA's, libraries, computer labs, halls, music rooms, etc.
- Gatherings of multiple classes may not be held.
- Learners from different classrooms may not be mixed.

4.3.2.10.1 High contact/traffic points:

- Implement, as far as possible, alternative options at high contact points to avoid contact, i.e. access biometrics and gates and doors at entrances, while maintaining required safety.
- Implement physical safe social distancing guidelines in the area. i.e. demarcate seated and standing areas that are 1.5 meters apart. People are to maintain a safe social distance of 1.5 metres.
- High contact/traffic points are to be disinfected throughout the day and at the end of the day.

4.3.2.11 **Personal protective equipment (PPE):**

4.3.2.11.1 Types of PPE to be used in the school environment:

- As far as possible, schools are to limit the use of medical PPE, which is in critical need in the medical community.
- Staff, visitors, parents and learners age two and up, are to make use solely of washable cloth facemasks. No learner under age two should wear a facemask upon entering and throughout their stay on the school premises.
- For detailed cloth face mask guidelines, contact the Covid-19 Compliance Officer.
- Cleaning staff and staff engaging in any cleaning/disinfecting activities should wear face shields (if required) and cloth masks, disposable gloves and gowns/coveralls/aprons/work uniforms for all cleaning and disinfecting tasks, including waste removal.
- It is advised that in baby and toddler care settings, staff wear a work apron/gown which can easily be removed and washed/disposed if

contaminated. Refer to nursery guidelines.

4.3.2.11.2 Proper use of PPE

- While making use of any gloves, gowns or face shields and cloth masks, be sure to avoid touching your face, eyes, nose, mouth or unwashed hand/s.
- Disposable gloves and gowns should be properly and carefully discarded.
- All staff are to report any compromises in gloves, gowns, face shields and cloth masks and potential exposure to infected areas/persons immediately to the principal.

4.3.2.11.3 Putting On PPE:

- Wash hands with soap and water
- Put on the plastic apron
- Put on the face mask
- Put on the eye protection
- Put on the gloves

4.3.2.11.4 Taking Off PPE:

- Wash the gloves with disinfectant and dry with a paper towel. Place the paper towel in a bin with a lid and bin liner (plastic bags).
- Remove the gloves and place it in a bin with a lid and bin liner (plastic bags).
- Remove the eye protection.
- Remove the plastic apron and place it in a bin with a lid and bin liner (plastic bags).
- Remove the face mask and place it in a bin with a lid and bin liner (plastic bags).
- Wash your hands with soap and water.

4.3.2.11.5 Properly discarding used PPE:

- Ensure that contaminated and used disposable PPE is discarded immediately after use into a refuse bin – do not place it on other touchable surfaces to avoid contamination. Keep gloves and gowns out of reach of

babies and toddlers⁷.

4.3.2.11.6 How to put on, use and take off of a mask

- Before touching the mask, clean hands with an alcohol-based hand rub or soap and water.
- Take the mask and inspect it for tears or holes.
- Orient which side is the top side for the nose.
- Ensure the proper side of the mask faces outwards (the coloured side).
- Place the mask to your face.
- Pull down the mask's bottom so it covers your mouth and your chin.
- Place the elastic loops behind the ears or tie at the back of the head so the mask is snug. Adjust as necessary so that the mask covers the nose and chin comfortably.
- After use, take off the mask by removing the elastic loops from behind the ears or untie the mask while keeping the mask away from your face and clothes, to avoid touching potentially contaminated surfaces of the mask.
- Place the mask in a safe area immediately after use.
- Perform hand hygiene after touching or discarding the mask – Use alcohol-based hand rub or wash your hands with soap and water.
- Wash the mask with soapy warm water and dry in sunlight. Iron before use.

4.3.2.12 **Entry/exit procedures & screening:**

4.3.2.12.1 Entry/exit area preparation:

- Ensure all high-touch areas are disinfected throughout the day.
- Implement, as far as possible, alternative options at high contact points to avoid contact, i.e. access biometrics, gates, latches, handles, bells and doors - while maintaining required safety.
- Implement physical safe social distancing guidelines at the entrance/exit

⁷ Read more: [Read more: https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html](https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html)

points. i.e. demarcate safe standing areas that are 1.5 meters apart when queuing to enter/exit the building. People are to maintain a safe social distance of 1.5 metres.

- At the main entry/exit points to the building, provide a hand cleansing facility.

4.3.2.12.2 Entry sanitisation:

- Staff, learners, parents and visitors are to sanitise their hands upon entry into the school.
- All persons entering the facility should be wearing a cloth mask. Children below the age of 2 should not wear facemasks of any kind.

4.3.2.12.3 Entry screening of learners and staff:

- If possible, stagger drop-off and pick-up times to avoid large amounts of people entering and exiting the school in a small space of time.
- Make use of only one entry point to control access into the school and ensure each person entering is screened.
- It is advised that as far as possible, parents/guardians are limited from entering the school. Admit persons to enter into the school only if absolutely necessary.
- Appoint dedicated screening staff. These staff should be the same screening staff on a daily basis and should be trained in proper screening, responding to a suspected/positive case and reading screening results.
- Screening staff are to take the necessary personal protection precautions.
- Screening staff are to conduct a Covid-19 symptom check on any persons entering the premises (parents/guardians/learners/siblings/visitors/staff/other):
 - Record the date and time of screening
 - Ask the person (parent or guardian in the case of a learner) if, in the last 24-hours they have experienced fever, cough, sore throat, redness of eyes, shortness of breath and/or difficulty in breathing. A check of each of these symptoms is required.
 - If they have been in contact with anyone confirmed positive for

Covid-19 or who may have Covid-19.

- Staff and learners are required to independently report whether they suffer from any related symptoms, namely body aches, loss of smell or loss of taste, nausea, vomiting, diarrhoea, fatigue, weakness or tiredness.
- Take the person's temperature.
 - If possible, use a contactless thermometer.
 - If a contact thermometer is used, it needs to be disinfected with alcoholic sanitising wipes between every use.
- If the person:
 - answers yes to any of these symptoms or questions;
 - appears to present with these symptoms; and/or
 - has a temperature of 38 degrees Celsius or higherthey may not enter the school premises. Follow the below protocol.
- If the person presents with symptoms, they must be referred to a health facility immediately and may not return until they are cleared of Covid-19 or have recovered from another unidentified illness. The person's details, temperature and symptoms, along with the time of screening and screener's details must be recorded for tracking purposes if necessary. Contact the NICD toll-free emergency hotline for COVID-19 on 0800 029 999 to report the suspected case and receive relevant advice. If the person answers no to the screening questions and does not display any symptoms, they may proceed into the school. The taken temperature, time of entry, drop-off parent/guardian, accompanying persons must be recorded.
- Appoint dedicated pick-up and drop-off helping staff to take learners from the entry/exit point to the classrooms and vice-versa.
- If sign-in is recorded on paper, hands must be sanitised before signing and pens must be wiped between use. If sign-in is done on a tablet, hands must be sanitised before use and the screen should be wiped after use.

4.3.2.12.4 The taken temperature, time of entry, any symptoms and question answers must be noted on a register. These registers are confidential and may not be shared or left available in public.

4.3.2.12.5 Entry/exit procedures:

- It is advised that as far as possible, parents/guardians/visitors/other are limited from entering the school unless absolutely necessary.
- Appoint dedicated pick-up/drop-off staff. These staff should be the same staff on a day-to-day basis.
- Once a learner has been successfully screened and cleared safe for entry, they are to be escorted to their classroom using safe social distancing guidelines as much as possible. This is to minimise contact of parents with staff and learners.
- In the case of young learners or exceptional cases, parents/guardians may be permitted to go with the child to the classroom, as long as they have been screened and cleared for entry.

4.3.2.13 **Therapists / specialist teachers:**

4.3.2.13.1 Therapists within the school environment will be expected to comply with all the policies and procedures set out by the school in relation to Covid-19. This includes:

- Signing an acknowledgment of information regarding the Covid-19 Policy and undertaking to comply with its stipulations.
- Adhering to the school's admission policies and procedures.
- Agree to screening, hygiene and social distancing procedures.
- Confirm they are, to their knowledge, clear of Covid-19 and have not been in contact with any positive Covid-19 cases.
- Therapists will be encouraged to hold all parent meetings virtually.
- Parents will be discouraged from utilising any waiting areas. Social distancing guidelines must be adhered.

4.3.2.13.2 Preparation of the therapy rooms:

- Clean and disinfect all surfaces and high-contact areas throughout and at the end of the day, and in between therapy session with learners.
- All material and fabric items to be removed from therapy rooms, e.g. rugs, plush toys etc. and stored (alternatively, fabric and material items must be washed daily after every use, and in between children sessions).

- It is advised that all toys are removed from the therapy room and only a selection is available per individual child session (rotate them in after disinfecting). This helps control what needs to be disinfected on a daily basis.
- Avoid using toys that are difficult to sanitise.
- Ensure a bucket to contain toys/equipment that have been used and need to be disinfected before they are safe to use again.
- Do not share / allow sharing of toys, stationary, equipment. Having a dedicated individual supply is advisable.
- As far as possible, implement safe social distances between people of 1.5 metres guidelines in the therapy space as far as possible.
- Ensure that there is adequate hand sanitiser and tissues available for each room.
- Upon entry/exit, each person using the space, including the therapist and the child should wash / sanitise their hands as prescribed.
- A surface sanitiser spray and cloth are to be made available for each space. Between sessions, surfaces including door handles, tables, cupboard doors and handles, chairs, soft-play mats and toys need to be sanitised.
- Therapists should wear a cloth mask.

4.3.2.14 Intra- and extra-murals / specialist teachers (when applicable):

- Sign an acknowledgment of information regarding the Covid-19 Policy and undertaking to comply with its stipulations.
- An intra-/extra-mural instructor / specialist teacher must travel between classrooms.
- All equipment used for a lesson needs to undergo proper sanitising between class changes. It is discouraged that learners share instruments / equipment during a lesson.
- Intra-mural instructors need to adhere to the Safe Hand Washing & Sanitising Guidelines and do so upon entry/exit to each class.
- It is encouraged that intra-mural classes are conducted outside where learners can space themselves out according to safe social distancing guidelines. If possible, demarcate visual cues to demonstrate safe social

distancing.

4.3.2.15 **Communal transport:**

4.3.2.15.1 Drivers will need to adhere to the school's admission policies and procedures. This includes:

- Signing an acknowledgment of information regarding the Covid-19 Policy and undertaking to comply with its stipulations.
- Agree to screening, hygiene and social distancing procedures.
- Confirm they are, to their knowledge, clear of Covid-19 and have not been in contact with any positive Covid-19 cases.

4.3.2.15.2 Vehicle hygiene:

- Vehicles used to communally transport learners and staff must ensure that the vehicles are sanitised before picking up and dropping off passengers.
- The sanitisers used to sanitise all public transport vehicles must have a minimum of 70% alcohol content.
- If there is any suspicion that a sick passenger has been transported, the vehicle must be sanitised in between the transport of passengers.
- For hard non-porous surfaces within the interior of the vehicle such as hard seats, arm rests, door handles, seat belt buckles, light and air controls, doors and windows, and grab handles, clean with detergent or soap and water if the surfaces are visibly dirty prior to disinfectant application:
 - Diluted household bleach solutions prepared according to the manufacturer's label for disinfection, if appropriate for the surface. Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser.
 - Alcohol solutions with at least 70% alcohol.
- For soft or porous surfaces such as fabric seats, remove any visible contamination, if present, and clean with appropriate cleaners indicated for use on these surfaces. Where possible, utilise washable seat covers and

wash after use.

- For frequently touched electronic surfaces, such as tablets or touch screens used in the vehicle, remove visible dirt, then disinfect following the manufacturer's instructions for all cleaning and disinfection products. If no manufacturer guidance is available, consider the use of alcohol-based wipes or sprays containing at least 70% alcohol to disinfect.
- Ensure adequate ventilation when chemicals are in use, keep doors and windows open and use disposable gloves. Gloves should be removed and responsibly disposed after cleaning, before washing hands thoroughly as prescribed or using a hand sanitiser.
- The vehicle must be clean and tidy.

4.3.2.15.3 Driver safety:

- Drivers must wear a cloth mask.
- Drivers should practice regular hand hygiene, avoid touching their nose, mouth, or eyes.
- Drivers should sanitise their hands upon entry and exit of the vehicle.

4.3.2.15.4 Passenger safety:

- As passengers enter and exit the vehicle, they are to utilise a hand-sanitiser to cleanse their hands, provided by the transporter.
- Passengers are to adhere to safe social distancing as much as possible.
- Passengers are to wear cloth facemasks while in transit. Cloth face coverings should not be placed on young children under age 2.
- Avoid picking up multiple passengers who would not otherwise be riding together on the same route.

4.3.2.15.5 As per the South African Department of Transport guidelines (subject to change).

- All minibuses must reduce seating capacity to mitigate the spread of the virus;
- Bus and taxi services shall not carry more than 50% of the licensed capacity;

and

- Private vehicles shall not carry more than 60% of the licensed capacity, and that all directions in respect of hygienic conditions and the limitation of exposure of persons to COVID -19, are adhered to.

For a copy of the government guidelines in this regard, please contact the Covid-19 Compliance Officer.⁸

4.3.2.16 **Visitors:**

- Visitors to the school should be limited as much as possible.
- Visitors are encouraged to be 'appointment only'.
- As much as possible, utilise virtual meetings.
- Schools are encouraged to implement a 'virtual tour'.
- Visitors should avoid classroom interaction as much as possible.
- All visitors need to adhere to the school's entry/exit procedures and in addition to:
 - Signing an acknowledgement of information regarding our Covid-19 Policy and undertaking to comply with its stipulations.
 - Agree to screening, hygiene and social distancing procedures.
 - Confirm they are, to their knowledge, clear of Covid-19 and have not been in contact with any positive Covid-19 cases.
 - Supply full contact details (date and time of entry and departure, name and surname, identity number, residential address and cellular number).
 - Visitor admission should be authorised by the principal.

4.3.2.17 **Construction Sites:**

⁸ Read more: <https://www.gov.za/Coronavirus/travel>

Read more: https://www.transport.gov.za/documents/11623/139399/Amendment_CombatSpreadPublicTransport_07April2020.pdf/0ccb264e-6890-41fe-bead-4d268018ed65

Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/disinfecting-transport-vehicles.html>

- A safety inspection is to be conducted and relevant measures to be implemented on construction sites before reopening.
- Construction sites and personnel are to adhere to safe social distancing and hygiene practices.
- As far as possible, limit the contact between construction personnel and the school community, and limit access into the school facilities.

4.3.2.18 Monitoring School Attendance and Record Keeping:

- Monitor school attendance and compare to usual attendance patterns.
- Be attentive to large increases in student and staff absenteeism due to respiratory illness.
- It is imperative that accurate records of persons entering and exiting the premises are maintained. In the event of a Covid-19 case being confirmed, contact tracing may need to be performed.
- A register containing the details of all employees, visitors and service providers that enter the work place on a particular day, recording: date and time of entry and departure, name and surname, identity number, residential address and cellular number of all employees, service providers and visitors.

4.4 Ensuring an appropriate response to a positive case being identified in the school:

- If a child/learner has been in contact with a suspected case of Covid-19 in a school, no restrictions or special control measures are required until the laboratory test results for Covid-19 have been received. There is no need to close the institution or send other children/learners or staff home. If a child/learner may have been exposed to a confirmed case of Covid-19, all close contacts of the confirmed case are required to quarantine in their homes for 14 days while being monitored for symptoms. They may not attend school.
- Learners who are not contacts of a confirmed case should attend school.
- All cases who become symptomatic will need to be tested for Covid-19 and active contact tracing will be implemented.

4.4.1 Response to suspected/confirmed Covid-19 case:

- All staff should be trained in how to respond to a positive case.
- Ensure that emergency contact lists are up to date.
- Ensure that there is a dedicated containment area for learners or staff that are unwell.
- This area must be marked as the isolation room, and:
 - It must be sanitised before and after use;
 - The isolation room may not be used for any other purposes;
 - No entry by unauthorised persons allowed;
 - It must have a handwashing facility / sanitisation station set up; and
 - Any use of the area must be recorded.

4.4.2 Containment of the suspected/confirmed Covid-19 case:

- A person who fails the screening may not enter the premises. If they cannot immediately leave, they are to be immediately and discreetly directed to the isolation room.
- A person who is already at the school and whose symptoms become apparent during the course of the day must be immediately and discreetly directed to the isolation room.
- Provide the person with an FFP1 mask, adhere to social distancing and ensure rigorous and frequent handwashing/sanitising.
- Anyone assisting a suspected or positive case should take utmost care around the person – wear the relevant PPE, maintain a safe social distance and ensure rigorous and frequent handwashing/sanitising.
- The person is to make arrangements to leave the school for to be tested. In the case of a learner, immediately contact his/her parent/guardian.
- Tell the parent/guardian that:
 - The learner is suspected to have Covid-19;
 - List the symptoms observed;
 - Tell the parent that the learner is safe and being kept in the isolation room until they can be fetched for testing.

- Contact the nearest health facility, the NICD tollfree emergency hotline for Covid-19 (0800 029 999) or the provincial officials.
- Follow any directions given by the NICD or provincial health officials.
- The school will be contacted by the relevant public health officials to discuss the case, to identify people who have been in contact with the infected person and advise on any further actions or precautions that should be taken.
- If a school has not been contacted regarding a possible case of Covid-19 in the school, contact the NICD or provincial health officials.
- Public health officials, with the assistance of relevant staff, will conduct a risk-assessment and give recommendations on the management of children/learners and staff
- It is not necessary to close the school unless directed to do so by health officials and until a risk assessment has been done.
- The person must leave the school premises as quickly as possible to minimise the possible risk of spreading.
- Utmost caution must be taken to avoid creating a stigma around any unwell persons.
- Ensure that you record as much information as possible:
 - Symptoms displayed by the person;
 - Who they have been in contact with;
 - Areas in and around the school they have been in.

4.4.2.1 Once the person has left the facility:

- Assess the risk of transmission
- Lockdown the designated containment area.
- Ventilate the area as much as possible.
- Disinfect the designated isolation room, any potential affected areas and all surfaces.
- Rigorously disinfect the areas the suspected or positive case person has been
- Rigorously disinfect items the suspected or positive case person has used

- Refer those staff members and learners who may be at risk for screening.
- Take any other appropriate measure to prevent possible transmission.

4.4.3 It may be the situation that a suspected/confirmed case is not at the school facility but has been in contact with someone who is (e.g. a relative of the child at the school). Thus, the school community is at risk and will still need to act appropriately.

4.4.4 Next steps for the person who is suspected/confirmed to have Covid-19:

- Refer the learner/staff member to a health facility for testing and medical attention. Request a report from the person on the results of a health consultation. It is imperative that if the person is tested for Covid-19 that the school be informed of the results in order to take appropriate measures to protect others. If the person is confirmed negative for Covid-19, they are to stay home from the school until they have recovered from the unidentified infection / until they are well.
- If the person is confirmed positive for Covid-19, they must self-quarantine for at least 14 days. They must be retested to confirm a negative Covid-19 status and inform the principal. Medical assistance must be sought if required.
- Broadacres Academy will ensure that such person strictly adhere to the guidelines of this Covid-19 Policy upon his/her return to the school and will closely monitor such person for symptoms on return to the school.

4.4.5 If a person in the school community shares a home or has been in contact with a suspected/confirmed Covid-19 case, they should also be isolated, tested, and self-quarantine until they and those in their home environment are cleared.

Next steps for others in the school environment:

- Any persons who have been in contact with the confirmed case person/s must immediately ensure their protection and wash their hands as prescribed.
- Immediately notify the Department of Health and the Department of Employment and Labour who will advise on immediate next steps.

- Lockdown any areas in which the suspected/confirmed ill persons have accessed. Ventilate these areas as much as possible, for as long as possible before beginning cleaning and disinfecting.
- If they have been in contact with a number of people, prevent the compromised groups from moving around the school and interacting with other persons as much as possible.
- An assessment will be undertaken by the public health officials and advice on the management of pupils or learners and staff will be based on this assessment.
- Those who were in contact with the infected person are required to self-quarantine at home for a period of 14 days or for a duration as prescribed by the DoH while being monitored for symptoms.

4.4.6 Disinfecting the school environment:

- Disinfect offices, bathrooms, common areas, classrooms, surfaces, high-contact areas, equipment and anything or any room the suspected/confirmed Covid-19 case could have touched.
- Ensure the area is well ventilated before and during cleaning.
- Clean dirty surfaces with soap and water before disinfecting with a bleach solution or alcohol based hard-surface cleaner.

4.4.7 Communication:

- After informing local health officials and the GDE, communicate to staff, learners, parents and visitors of the occurrence of a suspected/confirmed Covid-19 case.
- Be clear about the status of the person.
- Ensure you uphold the confidential nature of the matter and to protect the person/s involved.
- Encourage support and community, discourage and counter stigmatization, discrimination and panic.
- Be clear about the next steps and precautions that will be taken by the school.

- Be clear about the next steps and precautions that staff, learners, parents and visitors need to take.
- Follow-up regularly with the suspected/confirmed Covid-19 case.
- Keep the staff, learners, parents and visitors regularly updated regarding the matter.

4.4.8 Further action:

- If a case is positively confirmed, report it to the NICD toll-free emergency hotline for Covid-19 on 0800 029 999 and the Provincial Education Department.
- Contact tracing will need to take place.
- All persons who may have been in contact with the positively confirmed case will need to be advised and referred to a health facility for testing.
- Confirmation of both positive and negative testing should be communicated to the school.
- If any cases are positively confirmed, follow the local authority guidelines. To stop or further the spread of Covid-19, the school may need to be closed while virtual teaching resumes.
- In this scenario, ensure a plan of action is in place for virtual teaching and support of families and staff.
- The reopening of schools will depend on the duration, spread, containment and elimination of the Covid-19 virus. Consult with health officials in this regard.⁹

4.4.9 Response to a Covid-19 outbreak in the school _____ :

Action to be taken when a case of Covid-19 (Learner or staff) is confirmed in your childcare facility or school:

⁹ Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html>

Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

- The school will be contacted by the relevant public health officials to discuss the case, identify people who have been in contact with them and advise on any actions or precautions that should be taken.
- If you are not contacted by a health official, please contact the South African public hotline 0800 029 999 who will refer you to the relevant contact.
- An assessment of each childcare or education institution will be undertaken by the public health officials with relevant staff. Advice on the management of learners and staff will be based on this assessment.
- When there is a confirmed case, a risk assessment will be undertaken by the educational establishment with advice from the public health officials.
- The decision to close a school will be school specific, based on various factors such as establishment size and pupil mixing. There may be short-term closures or longer-term closures depending on the outcome of the risk assessment and the spread of Covid-19.
- Communication with staff, learners, parents and providers will be important, remembering to uphold the confidential nature of the situation.
- The school must have contingency plans to revert to online learning.
- The reopening of the school will need to abide by local health department directives.¹⁰

4.5 **Supporting the mental health and wellbeing of our staff, learners and parents:**

4.5.1 **Staff care:**

- Promote the social and emotional well-being of staff.
- Create awareness of the resources and support available to them if they experience unusual amounts of negative emotions and anxiety.
- Having a counsellor available to staff could be an excellent resource in helping staff to appropriately process their feelings and address their

¹⁰ Read more: https://www.gov.za/sites/default/files/gcis_documents/childcare.pdf

Read more: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools-faq.html>

reactions to stress.

- Try to create a sense of community in this difficult and uncertain time.

4.5.2 **Learner coping awareness guidelines:**

- Children may exhibit the following signs as a response to stress and anxiety from the uncertainty and changes happening around them:
- Sleeping difficulties, changes in sleeping habits;
- Appetite changes or unhealthy eating habits;
- Concentration difficulties;
- Unexplained stomach- headaches and body pain;
- Anxiety, worry, sadness;
- Sadness;
- Withdrawal;
- Clinginess;
- Resistance or refusal to be left alone;
- Excessive crying or irritation in younger learners;
- Returning to behaviours they have outgrown (for example, toileting accidents or bedwetting);
- Irritability and “acting out” behaviours in teens;
- Poor school performance or avoiding school;
- Avoidance of activities enjoyed in the past;
- Use of alcohol, tobacco, or other drugs.¹¹

4.5.2.1 **Educators and parents should respond to learners in the following ways:**

- Continue to be supportive and comforting;
- Listen to their concerns and be reassuring;
- Explain that these reactions are normal to a scary, abnormal situation;
- Continue to give them your time, affection, praise and love;

¹¹ Read more: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>

- Create an environment that is as calm and stress-free as possible;
- Keep a consistent routine in the classroom and at home;
- Limit access to news and social media coverage on Covid-19 – it can be misunderstood and cause unnecessary anxiety;
- Don't keep them in the dark about Covid-19 and what is happening. Be honest in an age-appropriate way and help them by teaching them how to be safe.¹²

¹² Read more: https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/talking-with-learners.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fcommunity%2Fschools-childcare%2Ftalking-with-learners.html

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ANNEXURES

6 INFORMATION ABOUT COVID-19

What is Covid-19?

Covid-19 is a disease caused by a new strain of coronavirus. 'CO' stands for corona, 'VI' for virus, and 'D' for disease. Formerly, this disease was referred to as '2019 novel coronavirus' or '2019-nCoV.' The Covid-19 virus is a new virus linked to the same family of viruses as Severe Acute Respiratory Syndrome (SARS) and some types of common cold.

What are the symptoms of Covid-19?

Symptoms can include fever, cough and shortness of breath. In more severe cases, infection can cause pneumonia or breathing difficulties. More rarely, the disease can be fatal. These symptoms are similar to the flu (influenza) or the common cold, which are a lot more common than Covid-19. This is why testing is required to confirm if someone has Covid-19.

How does Covid-19 spread?

The virus is transmitted through direct contact with respiratory droplets of an infected person (generated through coughing and sneezing). Individuals can also be infected from and touching surfaces contaminated with the virus and touching their face (e.g., eyes, nose, mouth). The Covid-19 virus may survive on surfaces for several hours, but simple disinfectants can kill it.

Who is most at risk?

We are learning more about how Covid-19 affects people every day. Older people, and people with chronic medical conditions, such as diabetes and heart disease, appear to be more at risk of developing severe symptoms. As this is a new virus, we are still learning about how it affects learners. We know it is possible for people of any age to be infected with the virus, but so far there are relatively few cases of Covid-19 reported among learners. This is a new virus and we need to learn more about how it affects learners. The virus can be fatal in rare cases, mainly among older people with pre-existing medical conditions.

What is the treatment for Covid-19?

There is no currently available vaccine for Covid-19. However, many of the symptoms can be treated and getting early care from a healthcare provider can make the disease less dangerous. There are several clinical trials that are being conducted to evaluate potential therapeutics for Covid-19.

How can the spread of Covid-19 be slowed down or prevented?

As with other respiratory infections like the flu or the common cold, public health measures are critical to slow the spread of illnesses. Public health measures are everyday preventive actions that include:

- Staying home when sick;
- Covering mouth and nose with flexed elbow or tissue when coughing or sneezing. Dispose of used tissue immediately;
- Washing hands often with soap and water; and
- Cleaning frequently touched surfaces and objects.

As we learn more about Covid-19 public health officials may recommend additional actions.

Read more: https://www.who.int/docs/default-source/coronaviruse/key-messages-and-actions-for-covid-19-prevention-and-control-in-schools-march-2020.pdf?sfvrsn=baf81d52_4

7 STAFF, LEARNER AND FAMILY RISK ASSESSMENT CRITERIA

Covid-19 is a new disease and knowledge of the extent, risks and implications of the disease is developing. As we strive to safeguard each staff member, child and their families and all our patrons, it is imperative that we identify at-risk persons who could be impacted by the activity. All information below has been obtained from the World Health Organisation, South African National Institute for Communicable Diseases and the American Centre for Disease Control and Prevention and combined and adapted as necessary for our school. Each family associated with the school is to complete this form. We are particularly concerned with the persons living together in a household and those who might interact with the school and/or your child.

The information provided below will be used to make decisions for the safety of your family and everyone at our school. If necessary, you will be contacted by the school to discuss next steps and procedures.

Go through the below checklist carefully. Mark any area that is applicable to you, your child or immediate family. Specify who the at-risk person/s are.

Date	
Child/ren full name/s and class name	
Members of household	
Risk Criteria	Mark with a ✓ if applicable. Please specify the name of the person this applies to.
I/we have been in contact with someone confirmed positive with Covid-19	
I/we have been in contact with someone who may be confirmed positive with Covid-19	
I/we have shown symptoms of Covid-19 and am awaiting test results	
I/we have been confirmed positive for Covid-19	
Below is a list of the conditions of individuals who may have increased risk of serious Covid-19 infection. Please tick the appropriate boxes if you, your child or immediate family fits any of the below categories. Please specify which conditions are applicable and who they apply to.	
People 65 years and older	
People who live in a nursing home or long-term care facility	

Risk Criteria	Mark with a ✓ if applicable. Please specify the name of the person this applies to.
People of all ages with underlying medical conditions, particularly if not well controlled, including:	
Blood disorders (e.g., sickle cell disease or on blood thinners)	
Chronic kidney disease as defined by your doctor. Patient has been told to avoid or reduce the dose of medications because kidney disease, or is under treatment for kidney disease, including receiving dialysis	
Chronic liver disease as defined by your doctor. (e.g., cirrhosis, chronic hepatitis) Patient has been told to avoid or reduce the dose of medications because liver disease or is under treatment for liver disease.	
Compromised immune system (immunosuppression) (e.g., seeing a doctor for cancer and treatment such as chemotherapy or radiation, received an organ or bone marrow transplant, taking high doses of corticosteroids or other immunosuppressant medications, HIV or AIDS, smokers, immune deficiencies)	
Current or recent pregnancy in the last two weeks	
Endocrine disorders (e.g., diabetes mellitus)	
Metabolic disorders (such as inherited metabolic disorders and mitochondrial disorders)	
Heart disease (such as congenital heart disease, congestive heart failure and coronary artery disease)	
Lung disease including asthma or chronic obstructive pulmonary disease (chronic bronchitis or emphysema) or other chronic conditions associated with impaired lung function or that require home oxygen	
Neurological and neurologic and neurodevelopment conditions [including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury].	
People with severe obesity (body mass index [BMI] of 40 or higher)	
Additional relevant information	

I, _____ (parent / guardian name), hereby acknowledge that all information contained herein is true and accurate to my knowledge as of the date of completion.

 Parent / Guardian Signature

8 LIST OF DELIVERABLES

8.1 Posters

- Hand washing
- Hand Rubbing (sanitiser)
- Support & Encouragement posters
- Keep your distance
- Preventing spread in the workplace/school
- Symptoms posters
- Entry checkpoint signage (What to expect, measures in place, entrance screening)
- Area closed (i.e. library)

8.2 Formal School Communication to Parents

- Info Fliers
- Covid-19 Policy
- Weekly comms newsletter
- Acceptances / Undertakings relating to the Covid-19 Policy to be signed by parents

8.3 Internal School Documents Needed

- Risk assessments (staff/learners/parents/visitors)
- Risk assessment of the school premises
- Registers:
 - Attendance
 - Entry to premises log and screening register
 - Sick learner/staff register
 - Visitor register
- Sanitisation register / cleaning checklists
- NICD Notification Template
- Communication with construction workers, therapists, extra-mural

providers, Munger staff

- Classroom checklists (e.g., are windows open for ventilation, do we have sufficient space between desks, are we washing our hands regularly, etc.);
- Rosters:
 - Staffroom roster (assumed staffroom is open);
 - Printer room roster
 - Kitchen guidelines
- Staff / learner training material
- Classroom layouts for each class
- Acceptances / Undertakings relating to the Covid-19 Policy to be signed by drivers, therapists, specialist teachers and instructors
- Permits for all staff members (Form 2 of Annexure A to the latest regulations)

8.4 PPE

- Cloth facemasks for staff
- Disposable facemasks for visitors
- Disposable gloves
- Face shields
- Disposable gowns
- Disposable overalls
- FFP1 surgical masks

8.5 Chemicals

- 70% Alcohol hand sanitiser
- Anti-bacterial handwash
- Disinfecting Bleach
- Alcohol surface spray

8.6 Misc.

- Contactless Thermometers
- Desk screen barriers

- Disinfectant wipes
- Spray bottles
- Hand sanitiser dispenser (no contact)
- Tape for demarcating floors
- Cloths
- Tubs (contaminated toys, food utensils, cloths)
- Flu Shot for Staff
- Info packs for staff which will include policy, perhaps this detailed plan etc.
- Paper Towels

BROADACRES NURSERY AND PRESCHOOL DETAILED COVID-19 POLICY

SUPPLEMENT DOCUMENT

This supplement policy is based on the published Standard Operating Procedures and Guidelines for an early childhood development programme and/or partial care facilities that provides an after school service on measures to address, prevent and combat the spread of Covid-19, released by the Department of Social Development on 23 June 2020. The information herein relates specifically to our nursery and preschool, accommodating children ages 3 months – 6 years old, and notes changes, additions or overrides to the school's original Covid-19 policy finalised on 05 June 2020, in relation to our nursery and preschool learners. The supplementation remains subject to change as government guidelines and regulations are gazetted and published from time to time, and is applicable during the National State of Disaster.

1 CHALLENGES CHILDREN WILL FACE AMIDST RETURNING TO SCHOOL DURING COVID-19

- Understanding Covid-19 and the associated risks;
- The ability to understand and practice social distancing, appropriate hygiene, avoid touching surfaces, sneezing and coughing etiquette and the use of PPE;
- Changes in the use of stationary, equipment and learning materials, and changes in the schooling environment; and
- The impact of changes in their lives, ability to learn and their wellbeing since March 2020.

2 MONITORING OF COVID-19 COMPLIANCE AND IMPLEMENTATION

- The Covid-19 compliance officer is to monitor the workplace plan and procedures, and implementation regularly.
- A written report will be submitted to the Covid-19 Committee on a monthly basis.

3 STAFF PREPARATION TO RETURN

- Staff are to return at least 5 days prior to the reopening of the school.
- In addition to training required in the original policy, staff are to receive training on the following:
 - Prior to opening cleaning requirements and changes to learning environments;

- routines and schedules for cleaning of classes, equipment, offices and ablutions;
- keeping children safe from chemicals and personal safely when cleaning;
- entry/exit from premises procedures, how to conduct the screening procedure and receiving and supporting children and parents;
- outside play management / scheduling;
- how to respond to symptoms and illness and recognising symptoms in self and children;
- integrating protective measures in an age-appropriate way into their classrooms and teaching children protective measures;
- support for mental and emotional well-being and intervention if mental health issues surface;
- encouraging parental involvement; and
- preparation to deal with kids who have comorbidities and how to handle this.
- Records on all staff training to be kept in case of inspection.
- All staff to sign the written procedure policy document as acknowledgment that they have been provided and understood.

4 **PREPARATION OF THE SCHOOL FACILITIES**

- Daily records of all cleaning must be kept.
- Entire school, to be cleaned as per previous guidelines including:
 - play and recreation apparatus;
 - appliances;
 - crockery / cutlery; and
 - the outside of premises.
- Learning and teaching materials to be cleaned as per previous guidelines including:
 - Educational toys;
 - Stationary;
 - plastic and plastic covered books; and
 - all sandpits must be emptied.
- Ensure sufficient ventilation in classrooms (even in winter) – parents to dress kids warmly.

5 **COMMUNICATION TO PARENTS**

- Parents must be informed in writing that:
 - the return of a child to school is voluntary and at their discretion;
 - children who return will be screened daily;
 - a child must be accompanied by a parent/guardian every day for screenings;
 - If parent / guardian can't be present – they can designate another person to accompany the child or they can complete a symptom screening form every day and submit to school.
 - Inform parents that if the screening information is not available, a screening will be done regardless.
 - how to prepare their children prior to their return and how they can support their child;
 - provide suggestions on how a parent can get their child ready for the return to a different way of doing things and what to expect for screenings.
 - entry/exit procedures;
 - date and times of return;
 - Parents have a right to access all the measures the school is putting in place to safeguard itself, staff and children from Covid-19.
- The school must have up to date contact details of parents /guardians.
- Parents can prepare children by:
 - Practicing good morning hygiene (washing, brushing teeth);
 - Washing hands before leaving the home;
 - Reminding children to wash hands, cough and sneeze into elbow, not touch face, how to wear a mask, physical distancing.

6 **VULNERABLE CHILDREN**

- A child with a known underlying health condition that creates higher risk for Covid **may not return** unless a doctor gives written authorisation that it is safe for the child to return.
- Children diagnosed with the following are considered vulnerable to contract and fight Covid-19:

- Chronic severe respiratory tract disease (inherited/genetic e.g. cystic fibrosis, acquired e.g. chronic lung disease)
- Congenital cardiac disease (pre-corrective surgery)
- Severe immunodeficiency (inherited e.g. severe combined immunodeficiency diseases or acquired e.g. HIV with low CD4 count, Malignancy, immunosuppressive drugs)
- Severe neurodevelopmental disability
- Well controlled asthma, allergic rhinitis is NOT a risk factor.

6 ENTRY PROCEDURE & SCREENINGS

6.1 Procedure:

- Screening is not done to identify cases of Covid-19 – its an early risk identification measure.
- Entry procedures must include, in written form:
 - A schedule for daily arrival;
 - process for receiving and screening of all children;
 - information of all staff on screening duty, staff screening responsibilities, and time that staff must be at the screening area prior to opening.
- Signs must be posted at the screening area indicating:
 - What parents are expected to do;
 - That all persons entering the school will be screened;
 - Social distancing and cloth masks are necessary.
- Re-entry to premises requires the repeat of the screening procedure.
- Any identified symptoms must be reported to the Covid-19 Compliance Officer.
- Screener's hands must be washed **in-between** screenings.
- All persons entering must sanitise hands on arrival. Children should be supervised and assisted to wash their hands with soap and water.
- Do screenings as close to entrance as possible, preferably at location before entry to premises.
- Screening equipment must be disinfected every day.
- Keep spare batteries for thermometers.

6.2 **Staff Roles in Screenings**

- The morning entry procedure is to be warm and welcoming for children. A staff member should be present to welcome children. During first week after reopening – **all staff present** to welcome children and assist with anxious, upset children.
- All staff should be equipped to carry out the screening procedure and should practice performing screenings prior to opening.
- Staff members must be screened every day.

6.3 **Parent/Guardian role in Screenings**

- Parents must wear masks when dropping off children.
- Only one parent/guardian is to enter school to avoid crowding.
- Parents should be present at screenings to provide information to the school.

6.4 **Age-relative Screening Adaptations**

- Children aged 0-18 months:
 - Parent/guardian must be present to provide information.
 - Give maximum support to children this age as they are screened.
 - Do not use sanitisers.
 - Wipe hands gently with a clean, soapy cloth; rinse and dry.
- Children aged 19-36 months:
 - Parent/guardian must be present to provide information.
 - Give maximum support to children this age as they are screened.
 - Do not use sanitisers.
 - Children are to wash hands with soap and water, under supervision and with assistance to ensure proper hand washing.
- Children aged 3 years and older:
 - Parent/guardian must be present to provide information. Only in exceptional cases can the parent/guardian be absent from screenings.
 - Children should wash hands independently for 20 seconds, under adult supervision and with assistance if needed.

7 **EXIT PROCEDURES**

- Staggering of departure times is recommended to avoid overcrowding.
- Children are to wash hands immediately prior to departure.
- Waiting areas must abide by social distance demarcations.
- Parents/guardians entering the school to fetch a child must be screened.

8 CHILD ENGAGEMENT

- Avoid crowding at classroom entrances. Avoid 'lining-up' to get into classrooms.
- Hand washing for children:
 - Children to wash hands before entering classroom.
 - Children 3 years and younger need to be supervised and supported when washing and sanitising hands.
 - Children to use hand-washing as far as possible rather than hand sanitisers. Hand washing is strongly advised for children younger than age 3.
- Children are to have a dedicated space for their own belongings (bags, shoes, hats, art shirts, lunch boxes).

9 SOCIAL/PHYSICAL DISTANCING

- "*Physical distancing*" is preferred to "social distancing" as a term. Physical distancing is easier for children to understand.
- Physical distancing will be a challenge with young children.
- As far as possible, distance at least **1m** apart for children within the school environment, where practical.
- Try to integrate physical distancing as naturally as possible for the children.
- Physical distancing requirements are NOT a reason to leave children with nothing to do.
- To help feed a child, change diapers, potty train and give comfort – physical distancing is not always possible or necessarily advisable. Staff to take reasonable measures and use their discretion in order to meet the needs of the child, and protect themselves and the child.
- Avoid all mixing of children at any point during the day, including playtime. Children to remain with same classmates throughout the day.
- Adjust classrooms with physical markings to keep spaces of 1m between seats at tables and on carpets.

- Plan activities and games that enable and practice physical distancing.
- Think of ways to support children while maintaining physical distancing.
- The relationship between the teacher and child is integral and important for nurturing and care – keep this in mind when deciding how to reasonably implement physical distancing.
- **Physical distancing with children birth - 18 months old:**
 - Children of this age group will not understand the concept of physical distancing.
 - Organise the physical space to assist with physical distancing.
 - Staff supervision and intervention is of key importance.
- **Physical distancing with children 19-36 months old:**
 - Give gentle guidance to children in this regard. Do not force physical distancing if children struggle with the concept but rather find alternate ways to reduce potential transmission in classroom adjustments and creative activities.
- **Physical distancing with children 3 years and older:**
 - Children over age 3 should start to understand the idea of physical distancing although may find it hard to consistently put into practice.
 - Explain the concept in an easy, playful manner. Use gentle, positive reinforcement.
 - Find alternate ways to reduce potential transmission in classroom adjustments and creative activities.

11 **CHANGES IN DAILY ROUTINE**

- The normal daily routine should be adjusted to accommodate Covid-19 education and hygiene practices.
- Help children deal with stress, sadness and anxiety and other areas linked to Covid-19. Create opportunities for children grade R and younger to talk about their feelings, experiences, what's happening around them etc.
- Where possible, learning can be done outside.
- Continue inside play with practical adjustments. Play for shorter periods, more frequently.
- Ensure sufficient time between activities for cleaning of materials.

- No water or sensory play areas permitted until further notice.

10 **PLAY TIME**

- Facilitators should remain with their class during playtime.
- Playtimes should be rotated between classes to reduce contact. Segregate play times if possible.
- Play games that encourage and enable physical distancing – physical distancing requirements are NOT a reason to leave children with nothing to do.
- Parents should teach physical distancing at home and should understand that physical distancing principles are difficult for children to understand and practice.
- Outside play equipment must be cleaned before and after use.
- Children to wash hands before entering and exiting the playground.
- No sand pits/ball ponds may be used.

11 **PPE IN ECD**

- Facemasks, when used correctly, are effective against the spread of Covid-19.
- Children aged 5 and younger will find it difficult to cope with correct mask usage and may increase the risk due to regular touching and fiddling.
- Wearing of plastic shields unnecessary although not discouraged.
- No need for children to wear aprons, rubber, plastic or latex gloves or other PPE.
- No visitor is permitted entry without a face mask (children aged 6 and up require a mask).
- If a child age 0-6 arrives to school wearing a mask, safely remove it and store away until they leave school.

11.1 **Facemask usage in ECD:**

- No child aged 0 - 2 to wear a facemask or face shield as it poses a suffocation risk.
- No child age 2 to 5 is required to wear a facemask or shield.
- Children aged 6 and older may wear masks if they are able to comply with safe practices.
- Children aged 7 and older must wear a face mask.

11.2 **Presentation of symptoms:**

- Masks only need to be utilised for ages 2-5 if the child presents with symptoms and needs to be isolated - must be worn under supervision and does not need to be worn in the isolation area / sick bay.
- Have 1 facemask available for every 6-10 children required for if/when children become sick and show symptoms

11.3 **Staff PPE in ECD:**

- Staff are to wear masks and/or shields at all times.
- Staff should have at least 2 cloth masks provided by the school.

11.4 **Mask Education:**

- Wearing of facemasks can be practiced and integrated into the ECD program.
- Share with parents info on why masks are important and how to playfully practice using at home.

12 **HANDWASHING**

- Integrate hand washing into learning – both reasons for handwashing and how to do it properly.
- Children to wash hands when entering and exiting classrooms and between learning activities.
- Children aged 3 and under to be supported and supervised when washing hands.
- Hands should be hand dried after washing or by using paper towels or air-dried.
- Hand washing with soap and water is preferred to hand sanitising. The use of hand sanitisers must be supervised and is not recommended for children under age 3.

13 **BATHROOM ROUTINES**

- Children are to wash hands before and after using the bathroom.
- Only a few children in a bathroom at a time. Avoid crowding in bathrooms.

14 **COUGHING AND SNEEZING**

- Teach children to cough and sneeze in the correct manner (into their elbows) and encourage parents to practice this at home.
- Tissues used for coughing and sneezing must be discarded immediately.

15 **LEARNING AND TEACHING MATERIALS**

- All used equipment, toys, resources (inside and outside) must be washed twice daily when children are not in the learning space and left to air dry.
- Children may not wash the toys as an activity as this increases their risk of contracting Covid-19.
- Clothing, stationary, school bags and food can be bought from home.
- No toys or 'recyclable' materials (toilet rolls etc.) to be bought from home (all levels of lockdown).
- Store away items that can't be cleaned easily. Reduce use of soft toys – any that are used must be regularly washed.
- Tech equipment should avoid being shared and must be cleaned between uses
- Sandpits and ball pits must be emptied and not refilled for all levels.
- Paper based materials are not considered high risk and don't need to be cleaned.
- Plastic based books to be wiped down regularly.
- Rotate toy batches to ensure good cleaning between use.
- No items are to be sent home. If possible, rather send photos of artwork.

16 **FOOD BROUGHT FROM HOME**

- Lunchboxes must be removed from school bags and disinfected on the outside before returned to the child.
- No food may be shared between children.
- Strict supervision necessary for meal times.
- 1.5m between children when eating.
- Children should have their own utensils that get washed immediately and stored in that child's storage space.

17 **ISOLATION AREA / SICK BAY**

- A child in the isolation area may not be left alone.
- All symptoms must be recorded.

- The area must be sanitised after use (beds and equipment).
- Only staff dealing with child may enter (qualified first aiders),no unnecessary entry.

18 **RECORD KEEPING**

18.1 Keep accurate records of the following:

- attendance, reasons for absenteeism and daily medical documentation;
- daily screenings answers and results;
- staff training;
- visitors book (entry/exit time, ID number, names, contact number, signature);
- if a child is positive for covid-19, keep records of screening, testing, quarantine, illness and hospitalisation.

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