
	UNIVERSITY OF CAPE TOWN		
	Managing the COVID-19 pandemic on UCTcampuses 2022	Reference Number	UCT / COV / 001
		Implementation Date	16 June 2020. Revised 23rd June 2022 Current revision 25 July 2022
		Rev / Amendment No	Rev 015
		Rev / Amendment Date	25 July 2022




Managing the COVID-19 Pandemic on UCT campuses in 2022

(Revised: July 2022)

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1.Preamble

The original version of the COVID-19 Return to UCT Policy Framework (16 June 2020) had been reviewed in June 2022 to incorporate the updated South African Government regulatory prescripts.


UCT remains a contact university with ‘in person’ activities and ‘remote’ connectivity still forming an integral part of the academic project. The National State of Disaster on COVID-19 was repealed on 5 April 2022. On 22 June 2022, further regulations were repealed which sees South Africans no longer needing to wear masks indoors and outdoors in public settings, with the restrictions on gatherings and physical/social distancing meterage removed.

The 22 June 2022 regulatory changes formed part of what is formally known as the Regulations Relating to the Surveillance and the Control of Notifiable Medical Conditions. The 22 June 2022 Government Gazette references the following:

- 16A: "Wearing of face masks to contain the spread of COVID-19", which required a mask in any public-use indoor space or when in public transport;
- 16B: "Regulation of gatherings to contain the spread of COVID-19", which limited any gathering of more than 100 people to 50% of maximum venue capacity if everyone was vaccinated, or to an absolute maximum of 1,000 people indoors or 2,000 people outdoors if vaccination status was not checked;
- 16C: "Regulation of persons entering the country to contain the spread of COVID-19", which demanded either vaccination certificates or recent negative PCR tests, or proof of recovery from COVID-19, from all travellers older than 12 entering South Africa.

UCT continues to transition to a state of the ‘new normal’. Staff and students will be present on university campuses for ‘in person’ activities as required by faculties and departments. UCT continues to maintain a risk adjusted, co-ordinated, integrated approach in ensuring the return of students and staff to UCT campuses. The following has been considered:

- Balancing lives and livelihoods given the impact of the pandemic;
- The diverse University activities and operational requirements;
- The numerous physical locations, number of staff and student groupings, different degrees of risk;
- Returning university business operations to a state of normality with a blend of in-person face-to-face contact and remote connectivity in order to deliver on core academic activities and operations in support of the academic project;
- The health and safety of staff and students remains a priority.

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2. Application

This Policy Framework applies to all faculties and departments, staff, and students. This includes all persons who enter any campus, including visitors, vendors, contractors, or persons who enter UCT premises for purposes of delivery of goods and services.

3. Purpose of the Document

This document serves as UCT's Policy Framework applicable to all UCT campuses. The document also serves as a guideline for managers at UCT to adopt an appropriate Risk Adjusted and Containment¹ approach.

Deans, Executive Directors, Heads of Departments and Heads of Units should use this document as a guide to review their respective Risk Adjusted Campus Plans that will, as far as is reasonably practicable, ensure that 'in person' campus activities comply with the respective health and safety prescripts and protocols.

Approach to managing the COVID-19 pandemic at UCT

This Policy takes into account the following key aspects:

- 3.1 Maintaining health and safety protocols as described in the respective legislative prescripts;
- 3.2 Scheduling and maintaining controlled activities on campuses for 'in person' activities and services;
- 3.3 Decision making to take place in the respective faculties and departments as it relates to 'in person' activities and services, and 'remote connectivity'.

4. Maintaining health and safety prescripts and protocols


Preventive measures will be the mainstay of 'campus preparedness' to ensure the safety of staff, students and visitors to UCT and ensure that adequate containment is in place in the event of a cluster outbreak¹.

Given the continued presence of the pandemic and with experts monitoring new waves and possibly new variants in the future, remote work and connectivity, and 'online learning' will be considered where it is feasible as per the faculty or departmental decision. UCT will continue to review the COVID-19 protocols as per expert specialist advice.

Campus protocols and guidelines have been developed in consultation with the UCT COVID-19 Co-ordinating Committee (CCC), and in accordance with the national and/or provincial and/or district risk-adjusted strategies for the higher education sector and taking into consideration those students who are in residences.

¹ Containment in this context means that specific areas where a case may occur, are responded to by the COVID-19 Response Team and managed to prevent spread beyond that localised unit/workplace in the university, which includes self-isolation of positive cases, identification of contacts and self-quarantining if symptomatic.

² Governmental authorities include but are not limited to the National and Provincial Departments of Health, the NICD, the City of Cape Town, the National Department of Higher Education, Science and Technology, and the National Department of Trade and Industry.

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5. Risk Assessments

As per the guidelines of the [Code Of Good Practice](#), UCT has conducted an adjusted risk assessment to identify and assess areas of high risk where COVID-19 may be more easily spread due to activities or locations. Results of the assessment will be shared with faculties and departments through the Central Occupational Health and Safety Advisory Committee representatives. Control measures that are reasonable and practicable have been documented in response to the risk rating. These may include special measures to mitigate the risk of infection or serious illness or death in respect of individual staff members who may be at increased risk.

Staff with co-morbidities who are required to work on site or return to campuses have been assessed in terms of their medical vulnerabilities by the Occupational Health Unit (OHU) in the Department of Properties & Services (P&S). Where staff members declare their medical vulnerability in terms of COVID-19 or declared that they are at ‘high’ or ‘very high’ risk, the line manager will need to engage the practitioners in UCT’s OHU to assess the staff member’s health risk. This assessment will also take into account the physical area where the staff member works and to identify the resultant risk of exposure. The OHU staff in conjunction with the Organisational Health Division in the Human Resources (HR) Department will need to work in collaboration with the staff member’s HR Business Partner to decide if the staff member is authorised to return to UCT or not.

There may be conditions set for the return of the staff member to site or relevant campus. Based on the risk assessments, one such condition may be the need for the staff member to be vaccinated. In this case, the staff member will be provided with supportive counselling from UCT and will also have the opportunity to seek counsel from Occupational Health and Safety representatives or a representative from a chosen Staff Union. All health-related information will remain confidential and will only be available to the OHU in P&S.


6. Decision making at Faculty or Departmental level

The COVID-19 Co-ordinating Committee (CCC) will continue to advise the executive on policies and frameworks that should guide faculties and departments. The success of the preparedness, prevention, and mitigation strategy is highly dependent on the leadership and teamwork at multiple levels of the university system.

Deans, Executive Directors, Heads of Departments and Heads of Units will determine their ‘fit for purpose’ campus activities based on the teaching and learning, research, and operational activities taking into account the COVID-19 protocols and related processes to support these requirements at faculty and departmental level.

It remains important that staff and students follow the health and safety protocols when on campuses. Line managers should balance the need to deliver operationally with the health and safety needs of staff and students. Decisions should enable the return of as many staff and students to full operation. Line managers have the discretion to plan for staff and students to be physically present on campus and adhere to the necessary health and safety protocols and guidelines. Each manager should determine specific work needs and requirements in consultation with the faculty or departmental leadership.

The “Return to Research Task-team” under the leadership of the Deputy Vice-Chancellor: Research and Internationalisation, has indicated that staff, post-doctoral fellows, and students will continue to support ‘in person’ research activities on the various campuses.

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7. Ventilation and venue capacity

From the time UCT implemented the phased in return to campus in 2020, numerous venue assessments have been carried out to ensure venues that were opened were adequately ventilated and the required social distancing implemented as prescribed by the various lock down levels.


Based on the advice of a panel of internal experts and in alignment with the Code of Practice, the following is applicable:

- Masks are no longer required to be worn indoors or outdoors. However, should a person choose to wear a mask, they may continue to do so;
- Other Personal Protective Equipment (PPE) such as KN95 masks will be made available in specific high-risk areas and where a person chooses to continue to wear a mask;
- Masks are recommended to be worn should a person have mild flu-like symptoms, and the individual should distance themselves from others as a further precaution;
- Venues must be well ventilated by means of mechanical or natural ventilation;
- All centrally bookable teaching and learning venues have been installed with appropriate Heating, Ventilation and Air Conditioning (HVAC) systems, and where required, High Efficiency Particulate Air/Absorbing (HEPA) filter have been placed on re-circulating HVAC systems where full fresh air systems are not available;
- For venues where mechanical HVAC ventilation is absent, natural ventilation is an appropriate alternative, open windows and doors should be greater than 5% of square meterage of room¹;
- Where no ventilation is available (no HVAC or natural ventilation), the venue will be assessed using CO₂ monitoring. Where the venue has a CO₂ reading higher than 1100ppm, the venue capacity should be reduced to an adequate level for existing air quality until ventilation is rectified;
- Where required, assurance programmes on the efficiency of ventilation mechanisms will be carried out by the Occupational Health, Safety and Environment and Maintenance and Operations Divisions in the Department of P&S. Carbon dioxide monitoring is one such technique that will be utilised.

8. Vehicle safety and hygiene

UCT will ensure that all transport vehicles for staff and students are maintained regarding hygiene standards and that all the necessary precautions are taken to ensure the prevention of spread of COVID-19 in vehicles.

¹ A venue with 100m² floor area should have an area of 5m² of windows that can open.

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9. Access to the COVID-19 Vaccines

All UCT staff and students are encouraged to join the voluntary vaccination programme. UCT will access up-to-date comprehensive evidence-based information about COVID-19 vaccines.

As per the guidance provided by the World Health Organization, vaccination remains the most effective measure against the COVID -19 virus. Vaccination dramatically reduces serious illness and death from COVID-19 if infected and also reduces transmission of the virus from person to person. UCT will continue to promote vaccination, aligning itself with the National Framework and regulations. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/covid-19-vaccines/advice>

To assist UCT to better understand and assess the vaccination coverage and status within our UCT community, staff and students will be requested to voluntarily declare their vaccine status via the [UCT online Health Centre](#). All data will be pooled together without any personal identifiers and only aggregated data will be analysed and presented e.g. proportion of staff and students who have completed the voluntary vaccination declaration and proportion vaccinated. No personalised data will be shared under any circumstances.


10. COVID-19 data disclosure to the National Department of Health (NDoH)

The Disaster Management Act (DMA) requires all employers to comply with legislative requirements under the Department of Employment and Labour (DoEL) and the Department of Health (DoH). In October 2020, the DoEL imposed an additional obligatory requirement on all employers who employ more than 50 staff to submit four reporting streams to the [NIOH](#) (National Institute of Occupational Health).

The NIOH reporting complies with the Protection of Personal Information (POPI) Act and treats all personal information as confidential. As there is no longer an obligation for the employer to report COVID-19 positive cases to the NDoH, UCT will discontinue any streams of related COVID-19 reporting to the NIOH. Staff members, however, will still be required to report COVID-19 positive symptoms to the employer.

11. Daily Symptom Screening of persons: staff, students, and visitors

The use of the Daily Health Screening Symptom tool for accessing UCT campuses has been discontinued. Staff and students who develop symptoms whilst on campus should isolate in their residences and report their symptoms to their manager or student co-ordinator.

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12. Reporting Covid-19 Positive case

COVID-19 is a notifiable disease and staff are required to follow these steps when testing positive as prescribed by the [NICD](#).


Specific designated isolation rooms and facilities for staff and students has been discontinued at this stage of the pandemic. The trajectory of the pandemic will continue to be monitored and the protocols for isolation and quarantine relevant at the time will be followed.

12.1 Staff

- Staff should report their status to their line manager and Occupational Health Unit whether working from home or on campus. An automated system on the UCT App is available for the reporting of COVID-19 positive cases. The process flow is illustrated in Annexure 1.
- Staff requiring assistance to contact the line manager who will complete the reporting on their behalf.
- Reporting of COVID-19 positive cases and return to work will no longer be reported to the NIOH.
- All reporting and handling of data is compliant with the POPI Act.

12.2 Students

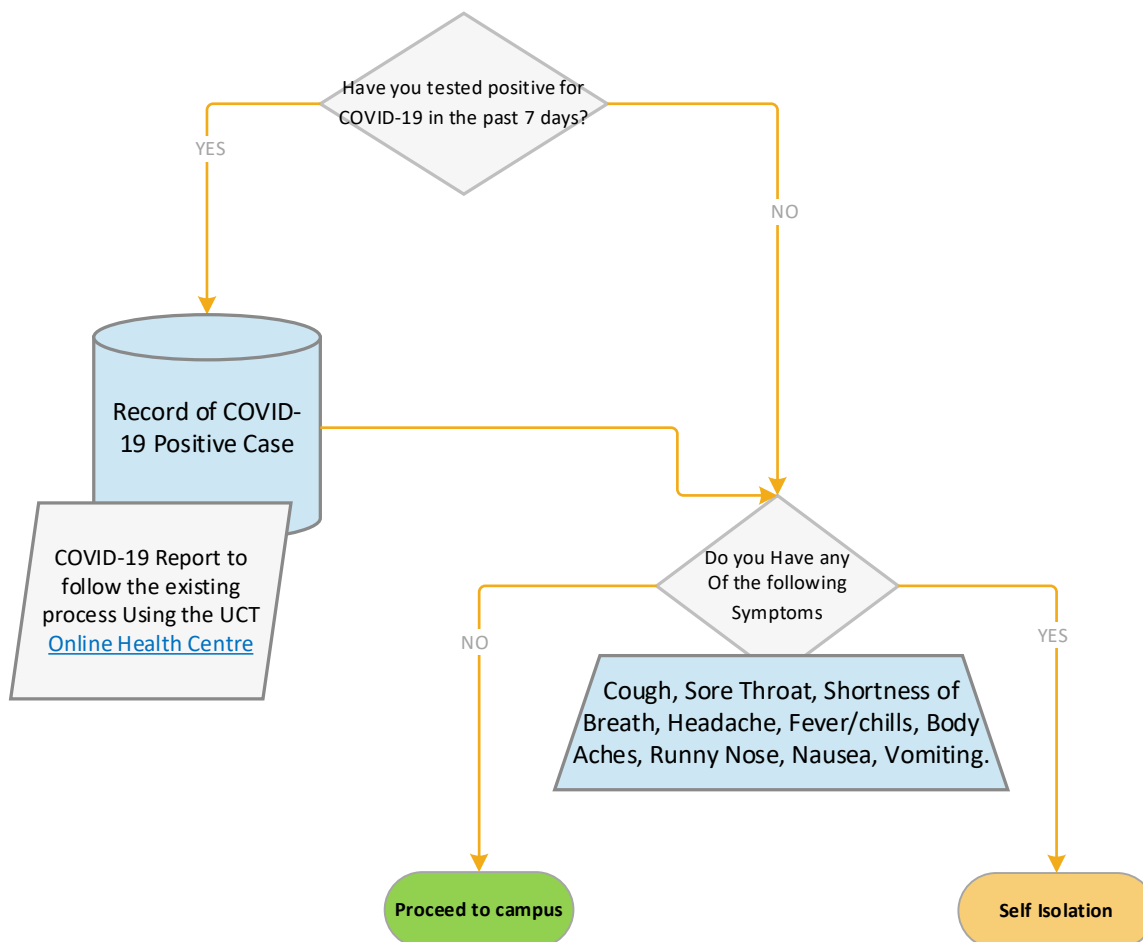
- Students must report their COVID-19 positive status to Student Wellness Service.
- An automated system on the UCT App is available. The process flow is illustrated in Annexure 1.
- UCT has established and maintains the COVID-19 confidential medical Students Register managed by the Student Wellness Service.
- All reporting and handling of data is compliant with the POPI Act and the Health Professions Council of South Africa regulations.
- Students in residences are to isolate at their respective accommodation if they test positive for COVID-19. The Department of Student Affairs will make arrangements for double room occupants who are tested positive.
- A COVID-19 rapid response team is in place to respond to outbreaks on campuses.


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Annexure 1 COVID-19 Positive Reporting

All COVID-19 reporting shall be done through the UCT ServiceNow Health Centre process as per the process flow below:

COVID-19 Positive & Symptoms Reporting



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Glossary of Terms

Several concepts have been introduced in relation to the spread and management of the COVID-19 pandemic. While public health experts are not always in agreement, it is necessary to provide the meanings of the terms used and applied in this document.

Case

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

Cluster outbreak

Currently refers to an aggregation of 2 or more COVID-19 cases grouped in a place and time that are or are suspected to be COVID-19 positive and may be subject to change from time to time.

Contact

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

Containment strategies


Aim to minimise the risk of transmission from individuals who have contracted the virus to those without the virus, in order to contain and prevent the spread of COVID-19. This may include actions to detect individuals who contracted the virus ('cases') early on and trace such an individual's contacts, or the confinement of affected persons (quarantine). Individuals with COVID-19 must be isolated from any contacts with others for the specified duration. Containment in the workplace refers to the ability to 'contain' those who have contracted the virus within a defined space or area, and thus prevent the further spread of the virus. In a very large workplace and setting such as a university, containment is possible in defined areas where a person who has contracted the virus appears. For example, even in a university residence the infection could be contained in that the individual could be isolated, and an affected individual, who is not infected nor ill, can be in quarantine for the prescribed 7-day period.

COVID-19

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

Mitigation

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

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Pandemic

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

Prevention This refers to the measures taken to minimise the risk of getting infected with the virus causing COVID-19 and includes measures such as handwashing, physical distancing, minimising travelling, and such like.

SARS Coronavirus 2

This is the virus that causes COVID-19.

Vaccine

A substance used to stimulate the production of antibodies and provide immunity against serious COVID-19, prepared from the causative agent of the virus, its products, or a synthetic substitute, treated to act as an antigen without inducing the disease.