



*Operational Plan:*

**Employee Return to Workplace Post  
COVID19 Lockdown**

*“Keep Safe – Stop the Spread”*

Template N<sup>o</sup>  
CDC-CS-HR-001-20

**23 April 2020**

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## DOCUMENT CONTROL SHEET

We, the undersigned, accept this document as a stable work product to be placed under formal change control as described by the Procedure CDC-OP-REP-001-13 Procedure Control of Documents.

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### SIGNING OF THE ORIGINAL DOCUMENT

We, the undersigned, accept this document as a stable work product to be placed under formal change control as described by the Change Control Procedure document.

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Annexure A: Protocols for Preventing the Spread of COVID 19 at CDC

## 1 EXECUTIVE SUMMARY

On 31 December 2019, the World Health Organization (WHO) reported a cluster of pneumonia cases in Wuhan City, China. 'Severe Acute Respiratory Syndrome Coronavirus 2' (SARS-CoV-2) was confirmed as the causative agent of what is now known as 'Coronavirus Disease 2019' (COVID-19). Since then, the virus has spread to more than 100 countries, including South Africa. According to the department of health, as at 28 April 2020, 4793 positive cases have been identified, 90 deaths, 1473 recoveries, and 178 470 tests conducted.

Consequently, the CDC established the COVID-19 Task Team and implemented COVID-19 protocols, as an aggressive measure to swiftly respond to the COVID-19 pandemic in line with the published regulations, and as advised by the medicals professionals, WHO and Department of Health, as well as the other government departments, such as the Compensation Fund and Department of Labour.

Furthermore, His Excellency subsequently issued directive on the levels of restrictions from Level 5 to Level 1, with the initial implementation of Level 4 from 01 May 2020.

Therefore, the CDC's Operational Plan focuses on ensuring the organisation is ready for the post lockdown level 5 and beyond levels to protect its employees, clients, investors, and stakeholders. Consequently, the following will be implemented for Level 4:

- Taking into account the CDC's eleven (11) operating sites with its main Head Quarters in Port Elizabeth and ten (10) regional offices (commonly known as satellite offices), in various Provinces, the following return to work protocols will apply:

**(a) Staggered Return to the Office**

- Business Continuity Processes and Functionality has defined critical employees that would be required to return to the office;
- Return to the office will be staggered in all offices to comply with the one third restriction to the number of employees, therefore only 166 employees throughout the CDC (including satellite offices) will return to the office;
- The staggered employees will still be expected to be in the office on a rotational basis while others continue to work from home utilising virtual tools they were provided prior to the lockdown until normal operations resume

(Level 1) or as further pronouncements are made by the President of the Republic of SA;

- Employees in the office will be required to maintain physical distancing of 1.5 to 2 m;
- Office sharing shall be discontinued until the COVID-19 virus has been eradicated or can be treated;
- To ensure acceptable physical distancing at the office, alternative CDC buildings with available space will be utilized to accommodate employees e.g., the RIC, NMBLP, and the CCA building;
- The CDC houses in the respective regions will be used for office space;
- The number of meetings in the office will be limited to a maximum of ten (10) people; and
- It is promoted that employees above the age of sixty (60) will be offered the option to work from home or to be granted leave with full pay if they cannot work virtually.

**(a) Screening and Testing**

- All CDC employees (including visitors where applicable) including satellite employees will be screened before entering the CDC buildings;
- All CDC employees will be required to undergo testing for COVID-19 before they return to the office, in line with the government regulations and directives; and
- Applicable standard protocols for screening and testing for prevention control in all CDC offices are presented in Annexure A.

**(b) Mandatory PPE and Disbursements**

- The CDC will obligate all its employees to use the prescribed PPE. In line with the regulations, and after careful considerations to safety and costs, all employees will be required to wear fabric masks. The CDC will provide these masks to all its employees; and
- At the main gate, CDC employees (and visitors where applicable) will be trained on how to wear a mask. In addition, an online video will be uploaded on the CDC website prior to staggered employees return to the office.

**(a) Signage and Communication Material**

- Clear infographic images and schematic diagrams (the signage) will be placed at CDC buildings reception, foyers on all floors, and entrances to boardrooms,

in order to educate and remind employees of requirements and protocols to curb the spread of corona virus;

- Employees will receive regular email updates on developments;
- A COVID-19 Online Portal will be utilised by employees to access information, protocols, and as a refresher from time-to-time (<http://www.coega.co.za/DocumentList.aspx?cmd=browse&objID=80&catID=2065>); and
- The COVID-19 Task team will be operational throughout the level 4 to level 1 and will provide regular updates to Executive Management and Operations Management Teams, and Chief Executive.

**(b) Contact Management and Tracking**

- For risk management, contact tracing and monitoring will be implemented; and
- The contact management and tracking database will be actively managed by the CDC to ensure that contact risk is immediately identified and proactively managed.

**(a) Protocol for Employee Testing Positive for COVID-19 at the workplace**

- An employee who tests positive for COVID-19 will be placed under self-isolation as guided by the government regulation; and
- CDC office will be required to close temporarily to ensure contact with the other employees is established and testing is conducted before operations resumes in line with the government regulations.

## 2 INTRODUCTION

The World Health Organization (WHO) declared COVID-19 a global pandemic on 11<sup>th</sup> March 2020. SARS CoV-2 (a novel coronavirus) originated in Wuhan, China where the first cases were reported in late December 2019, and spread rapidly across the globe. The first case in South Africa was diagnosed on the 03<sup>rd</sup> March. The rapidity of spread across the globe, has demonstrated unprecedented transmission, leading to South Africa having 4 361 positive cases, 1473 recoveries, and 86 deaths as at 25<sup>th</sup> April 2020.

A State of national disaster was declared by His Excellency, President Cyril Ramaphosa on 15<sup>th</sup> March 2020, and on On 23 March 2020, the President further announced the 21-day lockdown, which was subsequently extended to 30 April 2020. The national lockdown meant that similarly to other organisations, the CDC employees had to work virtually using platforms which have been set up to enable a conducive and productive working environment from home.

As of 23<sup>rd</sup> April 2020, the President has announced a gradual easing of the lockdown following a Risk Adjusted Strategy for economic activity to resume in certain sectors under restricted conditions after the 30<sup>th</sup> April 2020. This strategy is easing the level of restrictions from Level 5 to Level 4, which is easing the total lockdown with only essential services operating, to a level where identified selected sectors are permitted to resume operations under continuing extreme precautionary conditions in order to limit further transmissions and outbreaks. Importantly, is that during this phase, businesses and organisations are permitted to only operate with a **third of the workforce** in the physical operations to contain the risk of transmissions and spread of the virus, while continuing with the virtual work strategies which have been put in place during national lockdown.

Therefore, this document is intended to serve as the Operational Plan for the management of all CDC operations including the satellite offices during the gradual phased restoration of operations after the lockdown and as the President makes announcement regarding the Levels of restrictions. It is to ensure a coordinated response plan in managing and preventing the spread of COVID-19 within the organisation, and to promote a health and safe working environment that will continue to curb the contamination and spread of the virus. It provides guidance and response, and describes applicable protocols, steps and actions to be undertaken by the CDC in preparing for the return of staff to the workplace.

## 2.1 The Mandate of the COVID 19 Task Team

In the wake of the declaration of the state of national disaster by the President of the Republic of South Africa, the Chief Executive Officer (CEO) of the CDC identified and formally set up a multi-disciplinary team to serve as the COVID-19 Task Team. The Task Team is enjoined with the support of the Corporate Services and Operations Executives, and the specialist clinical services and advices of Dr M.T. Jarana, the CDC's Occupational Medical Practitioner (OMP). The following are the Task Team members:

**Table 1: COVID-19 Task Team Members**

Team Members	Business Unit
Zola Ngoma	CS-HR
Viwe Biyana	SHEQ
Amanda Mbokodi	SHEQ
Dr Ayanda Vilakazi	Marketing, Comms and Branding
Crevlyn Edgar	ICT
Phaphama Msimang	ICT
Bonginkosi Mthembu	Executive Corporate Services
Themba Koza	Executive Operations

The mandate of the team is to ensure the following:

- (a) Coordinate the development and implementation of protocols to prevent, respond and manage the COVID-19 outbreak in the CDC;
- (b) Communicate to CDC employees all operational decisions taken regarding COVID-19;
- (c) Report to EXMA on a regular basis on prevailing issues to ensure that strategic insights are acquired;
- (d) Facilitate training of frontline employees on all preventative protocols to ensure a proper understanding and effectiveness of the measures undertaken;
- (e) Coordinate measures and support to staff to ensure continuity of the CDC business operations during the COVID-19 lockdown; and
- (f) Overall, to ensure that the employee health, safety and wellness are safeguarded and promoted.

Therefore, this operational plan has been developed by the Task Team, following a consultative approach to obtain inputs and ideas, and solicit buy-in for the proposed approaches and protocols as they will ultimately be a responsibility of every manager in the organisation to enforce in order to protect employees and teams from the corona virus.

### **3 BACKGROUND**

It is common knowledge now that the Corona Virus disease, referred to as COVID-19, is a viral infection of the upper respiratory system, which presents with flu like symptoms ranging from mild fever, dry cough, runny nose, sneezing, to moderate and severe symptoms like productive cough, high fever, shortness of breath, and general malaise. When severe, it can present with pneumonia, cough with haemoptysis, and respiratory failure. According to the WHO, it is transmitted through droplets spread in the air during coughing and sneezing from an infected source, and via respiratory droplets landing on environmental surfaces surrounding the infected person which are then transferred by the contact route through contaminated hands to a person's face and mucous membranes. It is incurable and the vaccine may be available in one year.

It is emphasized that water, sanitation and good hygiene management play a major role in Infection Preventing and Control (IPC) of the Corona Virus, and to curb the spread, the following prevention and control measures have been recommended as the most effective:

- (a) Frequent hand washing with soap and running water;
- (b) Use of Alcohol Based Hand Rub (ABHR) or Sanitiser;
- (c) Encourage cough etiquette and respiratory hygiene;
- (d) Good ventilation and minimal contact;

- (e) Social distancing by keeping a physical distance of 1.5 to 2 m when in contact with other people;
- (f) Individuals to avoid touching the face unless hands are clean; and recently
- (g) Use of Protective Personal Equipment (PPE) in the form of a fabric face mask is necessary when going into public spaces even if the individual is asymptomatic; and
- (h) If an employee or any other person feels ill, to stay at home and seek medical attention.

As the COVID-19 outbreak continues to evolve, much is being learnt about the transmission of the disease. The COVID19 situation report issued by WHO on 02 April 2020 indicated that the virus can be transmitted from symptomatic, pre-symptomatic and asymptomatic people infected with COVID-19, more information is provided below.

### **3.1 Symptomatic Transmission**

By way of definition, a symptomatic COVID-19 case is a person who has developed signs and symptoms compatible with COVID-19 virus infection. Symptomatic transmission is therefore transmission from a person while they are experiencing symptoms to others who are in close contact through respiratory droplets, by direct contact with infected persons, or by contact with contaminated objects and surfaces.

### **3.2 Pre-symptomatic Transmission**

The incubation period for COVID-19, which is the time between exposure to the virus (becoming infected) and symptom onset, is on average 5-6 days, however can be up to 14 days. This period, is also known as the “pre-symptomatic” period, and some infected persons can be contagious. Therefore, transmission from a pre-symptomatic case can occur before symptom onset. Pre-symptomatic transmission has been documented through contact tracing efforts and enhanced investigation of clusters of confirmed cases as some people can test positive for COVID-19 from 1-3 days before they develop symptoms. Thus, it is possible that people infected with COVID-19 could transmit the virus before significant symptoms develop and are exhibited. It is important to recognize that pre-symptomatic transmission still requires the virus to be spread via infectious droplets or through touching contaminated surfaces.

### **3.3 Asymptomatic Transmission**

Asymptomatic transmission refers to transmission of the virus from a person, who does not develop symptoms and these are cases picked up and reported as part of contact tracing efforts.

Because there is no cure for the virus as yet, recovery is only through the body producing antibodies to fight the infection during which time a diagnosed or suspected person is placed in either isolation or quarantine depending on the severity of the symptoms.

The aforementioned background is therefore important to outline and understand as it informs this operational plan and the approach the CDC has adopted to not only manage but also contain COVID-19 in its operational environment.

#### 4 CDC PROTOCOLS TO CURB THE SPREAD OF COVID-19

The CDC has eleven (11) operating sites and ten (10) regional offices (commonly known as satellite offices) with its main Head Office in Port Elizabeth. The following **Table 2** depicts the location of the CDC operating sites and number of employees per location:

**Table 2: Staggered Return by Office Location**

Location / Office	Number of Staff
Head Office	266
VACC	22
BPO	7
HCS	50
NMBLP	3
Cape Town	11
Pretoria	11
East London	48
Mthatha	23
Durban	29
Kimberley	1
<b>Total</b>	<b>471</b>

## 5 STAGGERED RETURN TO THE OFFICES

In line with the pronouncements by H.E. President Ramaphosa regarding the levels of COVID-19 restrictions wherein with effect from 1 May 2020, the country will implement Level 4 Restrictions, which is aimed to gradually open the economy post Level 5 lockdown. Therefore, the CDC will implement the following to ensure a phased in approach to return critical employees to the office and in compliance with the government regulations:

**Table 3: Staggered Return to the Office**

Location / Office	Number of Staff	Staggered Return (One third of the workforce)
Head Office	266	90
VACC	22	8
BPO	7	3
HCS	50	17
NMBLP	3	1
Cape Town	11	4
Pretoria	11	4
East London	48	16
Mthatha	23	8
Durban	29	9
Kimberley	1	1
<b>Total</b>	<b>471</b>	<b>161</b>

- Return to work will be staggered in all offices with limited numbers per office as indicated above i.e. a third of the workforce or 161;
- Employees will come to the office on a rotational basis and as such the virtual way of work will continue until normal operations resume;
- The numbers proposed will include tenants operating in all CDC office premises as the operating and IPC measures will be integrated;
- All employees will be required to maintain physical distancing of 1.5 to 2 m;
- Office sharing shall be discontinued until the COVID-19 virus has been eradicated or can be treated;

- (f) To ensure acceptable physical distancing at the office, alternative CDC buildings with available space will be utilized to accommodate employees e.g., the RIC, NMBLP, and the CCA building;
- (g) The CDC houses in the respective regions will be used for office space during the COVID-19 restrictions to enable compliance with the physical distancing requirements;
- (h) CDC facilities with already high occupancy rates will not be considered as they may not align with the risk based strategy of managing overcrowded spaces and minimization of physical contact;
- (i) The strategy for employee presence at the office is a biased strategy towards elimination of risk factors to ensure sustainable business continuity;
- (j) The contact at the office will ensure alignment with the prevailing regulations regarding group gatherings and physical distancing;
- (k) The number of large gatherings is limited to a maximum of ten (10) people, and therefore CDC meetings will have to comply with this restriction;
- (l) It is promoted that employees above the age of sixty (60) be offered the option to work from home or to be granted leave with full pay if they cannot work virtually;
- (m) Upon voluntary declaration, employees with comorbidities as identified and confirmed by their medical clinicians will be offered;
- (n) Employees to conduct business travel in accordance with the pronounced regulations in each stage of the lockdown;
- (o) As outlined below, workplace protocols for screening and prevention of COVID-19 will be applied on a daily basis to ensure proper surveillance and prevention of the spread of infection;
- (p) Effective management and support of sick employees will be undertaken; and
- (q) Number of employees coming to the office using public transport to be highly controlled to minimize the risk of spread of the virus as these employees are highly vulnerable to contamination with the virus.

## **6 SCREENING AND TESTING OF EMPLOYEES AND VISITORS**

All CDC employees including in satellite offices will be screened before entering CDC buildings to eliminate the spread of contamination. At the following CDC offices, Head Office, VACC, BPO, HCS and PTA, the screening and testing will be conducted at the security gate, whereas in KZN, East London, Mthatha and Cape Town Offices, screening will be at reception due to the operational settings at these offices.

## 6.1 COVID-19 Protocol for Screening and Testing

The applicable standard protocols for screening and testing for prevention control in all CDC Offices are presented in **Annexure A**. They will be modified as and when requirements are amended and pronounced through government regulations; however, they remain relevant with all the Government Disaster management regulations and notices that have been issued to date. The following will apply:

- (a) The screening process will be automated to reduce physical touching and potential contamination;
- (b) Employees who present with high risk symptoms will be referred to the CDC Wellness Centre, and in satellite offices employees will be referred to the designated Occupational Medical Practitioner in their respective regions;
- (c) Determination for isolation or quarantine will be made by the medical practitioner upon a referral process being made;
- (d) Honesty and voluntary declarations are going to be encouraged from all employees as this will be highly essential to manage the risk of infections and spread in the workplace;
- (e) All employees will be required to present themselves for testing; and
- (f) If a risk is identified from a CDC visitor, they will be denied access and referred to their family medical practitioner.

## 6.2 Mandatory PPE and Disbursements

According to **Section 8 of the Occupational Health and Safety Act No. 85 of 1993**, an employer has a responsibility to ensure that the workplace under its control is safe and without risk. The hierarchy of controls requires that other controls are considered and implemented, and Personal Protective Equipment (PPE) be provided as a last resort. The CDC has implemented the following administrative controls:

- (a) Employees who are feeling sick to stay at home to protect others from infection as per CDC Protocols;
- (b) Non-contact thermometers to detect staff temperature levels will be mandatory as a risk mitigation measure;
- (c) Screening of all employees and visitors at the point of entry as per CDC Protocols
- (d) Implementation of social distancing at all offices;
- (e) Frequent cleaning of common areas e.g. lifts, door handles, sanitary facilities etc.;
- (f) Sanitisers to disinfect the hands will be made available at all entry points e.g. entrance points, boardrooms, ablution facilities, reception areas.

Among other mechanisms of ensuring a safe working environment is the use of Personal Protective Equipment (PPE). It is an essential equipment that serves to protect employees against health and safety risks at work, and employers have a duty to provide appropriate PPE and ensure that employees use it appropriately to make the workplace a safe environment, even though some hazards might remain. Importantly is that PPE is needed to reduce the risk, and the need for PPE is more pronounced in managing the risk of spread of COVID-19.

Under normal business operations, the CDC does not obligate employees to wear PPE; however, due to the magnitude of risk that comes with the infectious and contagious spread of COVID19, the CDC will obligate all CDC employees to use the prescribed PPE. The following PPE will be therefore be mandatory:

- (a) A surgical mask was considered, however and due to the latest pronouncement by the President, Fabric Masks will be made available to all employees as they enter CDC buildings. It will be mandatory for all employees and worn daily and at all times when at the office. A surgical mask offers an enhanced level of protection and will therefore be made available to employees once the Department of Health and government has improved the stock level – this is to allow front line staff and health officials to wear surgical masks, which are currently in short supply;
- (b) Cleaning and frontline staff receiving goods and visitors will be required to wear masks and gloves;
- (c) Employees in the frontline such as reception, document control, and access points including security personnel will be compelled in addition to masks to wear face-shields;
- (d) Sanitisers to disinfectants for the hands will be made available at all entry points e.g. entrance points, boardrooms, ablution facilities, and reception areas;
- (e) Non-contact thermometers to detect staff temperature levels will be mandatory as a risk mitigation measure; and
- (f) Employees who are feeling sick to stay at home to protect others from infection.

### **6.3 Workplace Preparedness Training**

To prepare the CDC for a staggered return of employees to the office, the following training measures will be undertaken before 1 May 2020 to ensure that the workplace and the operating environment is adequately prepared to resume business activities under acceptable control measures and standards:

- (a) Training of SHEQ and HR members of the Task Team on how to wear masks and other protocols has been conducted by the Department of Health to ensure that the team is

- well versed with the preparations and mitigation measures that need to be undertaken and implemented by the CDC to ensure a safe workplace;
- (b) SHEQ and the Security team will be trained by the CDC Occupational Medical Practitioner (OMP) on the effective usage and maintenance of a mask;
  - (c) Through Careways, the CDC's Employee Assistance Programme (EAP) service provider, a help desk that will function on a daily basis will be set up to provide Psychological Wellness support to employees in need;
  - (d) An online video will be commissioned and uploaded on the CDC intranet and website to demonstrate to employees how to wear a mask. This video will run daily before operations resume, and for the first week after operations have started; and
  - (e) A live demonstration on how to effectively utilise a mask will be undertaken by SHEQ and Security at the main gate of the CDC buildings on the first day of return to the office. In other offices where it is not possible to set-up training, the reception areas will be utilised for the demonstration.

#### 6.4 SIGNAGE FOR COVID-19

Clear signage shall be posted in foyers on all floors and entrances to all boardrooms to inform all staff of IPC requirements and protocols as schematically presented in the depiction below. The signage will be in place on the first day of return to work in all CDC Offices.



Figure 1: Signage for COVID 19



Figure 2: Signage for COVID 19- Wearing of Masks

## 6.5 Contact Management and Tracking

Contact tracing has emerged as a key basic principle to stop the COVID-19 transmission and requires vigilance and active management. It is therefore important that the CDC follows suite and standardise this practice within the organisation for effective risk management and tracking should there be employees and visitors diagnosed positively with COVID-19.

The contact management and tracking database will be actively managed by the CDC Analytics function to ensure that contact risk is immediately identified and proactively managed. To ensure effective contact management and tracking, the following practises will be established:

- (a) Reception, Security and Document Control to keep a detailed data log and contact details of visitors and goods delivered on a daily basis;
- (b) Meeting attendance registers to be kept with full contact details of the attendees including external parties and clients;
- (c) All employees are obligated to tag for access when moving between the various floors for traceability in the eventuality of case management;

- (d) Use of lifts to be discontinued, except for employees living with disabilities, as it will be difficult to keep track of contacts made during the use of a lift;
- (e) Instructions will be clearly provided on shared contact spaces on how to sanitise the equipment after each individual use to ensure ongoing sterilisation and disinfection e.g. printers, microwaves, etc.; and
- (f) Employees that have had exposure or contact with infected persons to declare so as to reduce exposure to other employees and for the necessary referrals to be made.

## 6.6 Protocol - Employee Tests Positive for COVID

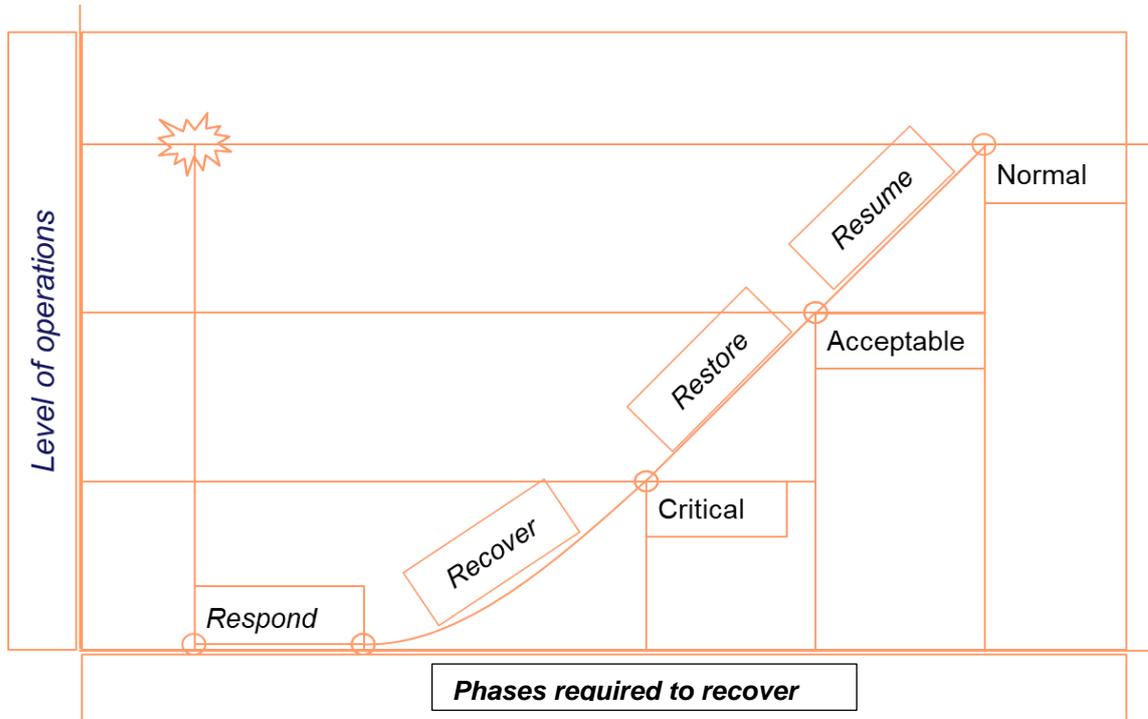
This protocol will apply in all CDC offices when an employee has tested positive for COVID19.

- (a) An employee who tests positive for COVID-19 will be placed under self-isolation, as guided by the CDC OMP or designated regional OMP;
- (b) Cleaning and decontamination will be conducted immediately after confirmation of results and will be facilitated by Facilities Management and overseen by SHEQ to ensure that it satisfies the required health and safety decontamination requirements;
- (c) Employees that have been in contact or exposed to the COVID-19 positive employee will be immediately placed in isolation in accordance with applicable DOH guidelines;
- (d) Tracking of contacts using automated programme as will be set up and managed by the Analytics function will be activated and managed in accordance with the applicable rules;
- (e) During the period of isolation or quarantine, all affected employees will be granted special leave;
- (f) Employees will be offered Wellness Support according to their respective needs; and
- (g) Under the instructions of the CDC OMP, employees will be retested and returned to work if results are clear and declared fit to return to work.

## 7 BUSINESS CONTINUITY PLANNING

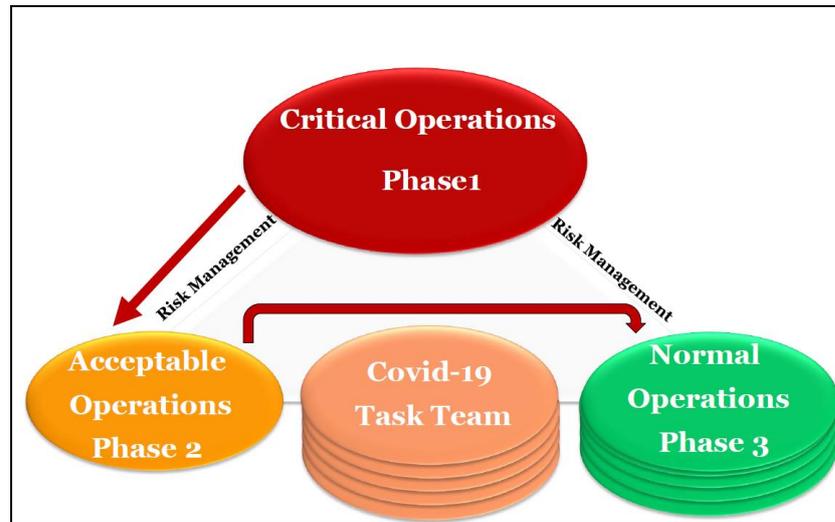
The Business Continuity Planning Framework (BCPF) developed by ICT and approved in 2014 has been used as a basis to inform and prioritise a synchronised programme of functions required to restore business operations following a crisis or significant business disruption. This has been done in line with business requirements, risk appetite, corporate responsibilities and financial practicalities and needs of the organisation. The BCPF has provided a very sound guideline of how the recovery should be conducted and approached, taking into consideration the situation at hand. In addition, it has provided, a governance process against which recovery should be considered, in order to respond, recover, resume, and restore operations. The BCPF roadmap recovery phases are

depicted below and they seem to accord very well with the risk based strategy and easing of restrictions to adjust to normality.



**Figure 3: BCP Recovery Phases**

The BCP recovery phases also outline that business continuity recovery should be approached in phases, with the first phase focusing on restoration of critical operations in each business operation and functional area, following by the ramp up phase to an acceptable operational phase, and later restore normal operations as adjustments and easing continue to be applied. The BCP COVID-19 recovery phases are illustrated below.

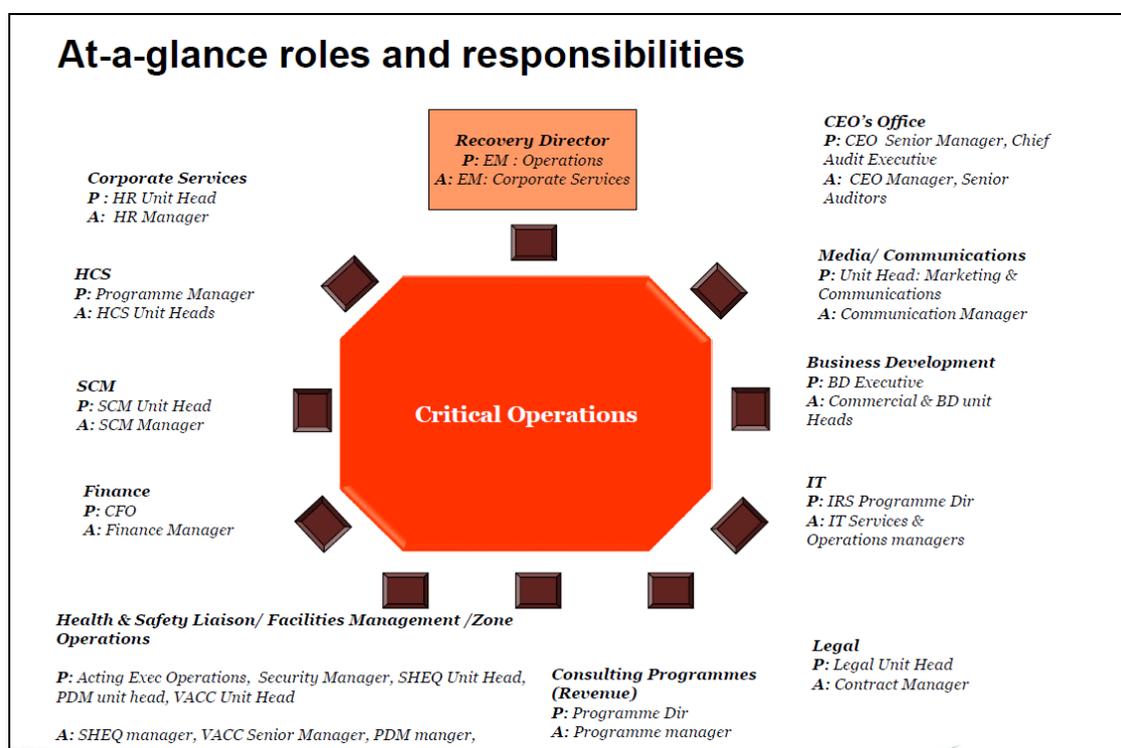


**Figure 4: BCP COVID 19 Recovery Phases**

It is therefore recommended that to resume business activity anchored on risk based strategy, the following should apply:

### **7.1 Business Continuity Processes and Functionality**

The following critical process have been identified as critical for business continuity based on the framework and principles indicated in the BCP COVID-19 recovery Phases outlined above and further align with the roles and responsibilities within the critical functions outlined in the schematic diagram below:



**Figure 5: Roles and Responsibilities for CDC Critical Operations**

- (a) Critical operations in each functional area and business operation to resume business activities as a priority;
- (b) Supply Chain Management (SCM) for finalisation and award of any bids that were underway in order to enable project execution and income generation;
- (c) Financial management for payment of suppliers and invoice generation for any income generating work that has been conducted, if any;
- (d) COVID-19 Task Team to oversee all applicable protocols and manage ongoing risk on a daily basis;
- (e) EXMA for strategic decision making considering that the organisation will be going with only critical operations and therefore abnormal circumstances;
- (f) OPSMA to oversee effectiveness of the operational activities for the critical functions that would have resumed;
- (g) Revenue generating programmes that have active and ready projects for implementation and income earning capacity;
- (h) ICT support function to support critical and virtual operations for stability and efficiency;
- (i) Internal Audit for finalisation of ongoing audits to meet the reporting and compliance timelines; and
- (j) Security personnel to safeguard CDC assets and manage the risk profile of the SEZ.

## 7.2 Recovery Plan

The Recovery Plan for the CDC is yet to be developed as it will be based on the activities that were put on hold during the lockdown period and the extent of time required to recover.

## 8 SHE REPRESENTATIVES

The following are the SHEQ representatives that have been identified for the implementation of the COVID-19 Operational Plan post the national lockdown in line with Level 4 restrictions.

**Table 3: SHEQ Representatives**

Office	SHEQ Rep
CDC HO	Siseko Gwavu
NMBLP	Amanda Mbokodi
VACC	Tabo Langa
HCS	Jabulani Maluleke
BPO	Viwe Biyana
CTN	Phumela Hoza
EL	Nzwane Mdikane
KZN	Mduduzi Sithole
MTA	Tabisa Ngalo
PTA	Simphiwe Silwana/Zukiswa Bizana

## 9 COMMUNICATION, MONITORING AND REVIEW

- (a) The Task Team shall communicate the Covid-19 Operational Plan through internal communication to all staff. Line managers are encouraged to discuss the Operational Plan with their teams and provide appropriate feedback to the Task Team.
- (b) EXMA, OPSMA and the Task Team shall monitor the implementation of the Operation Plan, and ensure its alignment with government protocols and CDC sustainability objectives.
- (c) The Task Team will conduct periodic reviews of the Operational Plan and recommend appropriate adjustments in line with government's pronouncements and criteria in the lockdown stages of the risk-adjusted strategy for economic activity; and
- (d) COVID-19 Online Portal will be utilise to ensure easy access to information already communicated.

## 10. CONCLUSION

After the WHO proclaimed the COVID-19 as a pandemic, the CDC established the COVID-19 Task Team and implemented COVID-19 protocols to swiftly respond to the COVID-19 pandemic and to comply with the national lockdown regulations, which restricted economic activity for non-essential companies and employees. However, His Excellency President Ramaphosa has subsequently issued a directive on the levels of restrictions from Level 5 to Level 1, with the initial implementation of Level 4 from 01 May 2020. As a result, the CDC's Operational Plan 2020 intends to provide protocols to ensure safety of employees and stakeholders and to curb spread of the corona virus in the workplace in line with Level 4 restrictions. The CDC's protocol describes processes to be followed protocols to ensure safety of employees and stakeholders and to curb spread of the corona virus in the workplace in line with Level 4 restrictions.

## 11 RECOMMENDATIONS

The COVID- 19 Tasks Team wish to make the following recommendations to ensure a safe return of employees to the workplace and in compliance with Level 4 restrictions, as directed by His Excellency, President Ramaphosa.

Taking into account the CDC's eleven (11) operating sites with its main Head Quarters in Port Elizabeth and ten (10) regional offices (commonly known as satellite offices), in various Provinces, the following return to work protocols will apply:

### (a) Staggered Return to the Office

- Business Continuity Processes and Functionality has defined critical employees that would be required to return to the office;
- Return to the office will be staggered in all offices to comply with the one third restriction to the number of employees, therefore only 166 employees throughout the CDC (including satellite offices) will return to the office;
- The staggered employees will still be expected to be in the office on a rotational basis while others continue to work from home utilising virtual tools they were provided prior to the lockdown until normal operations resume (Level 1) or as further pronouncements are made by the President of the Republic of SA;
- Employees in the office will be required to maintain physical distancing of 1.5 to 2 m;
- Office sharing shall be discontinued until the COVID-19 virus has been eradicated or can be treated;
- To ensure acceptable physical distancing at the office, alternative CDC buildings with available space will be utilized to accommodate employees e.g., the RIC, NMBLP, and the CCA building;
- The CDC houses in the respective regions will be used for office space;
- The number of meetings in the office will be limited to a maximum of ten (10) people; and
- It is promoted that employees above the age of sixty (60) will be offered the option to work from home or to be granted leave with full pay if they cannot work virtually.

### (b) Screening and Testing

- All CDC employees (including visitors where applicable) including satellite employees will be screened before entering the CDC buildings;
- All CDC employees will be required to undergo testing for COVID-19 before they return to the office, in line with the government regulations and directives; and
- Applicable standard protocols for screening and testing for prevention control in all CDC offices are presented in Annexure A.

**(c) Mandatory PPE and Disbursements**

- The CDC will obligate all its employees to use the prescribed PPE. In line with the regulations, and after careful considerations to safety and costs, all employees will be required to wear fabric masks. The CDC will provide these masks to all its employees; and
- At the main gate, CDC employees (and visitors where applicable) will be trained on how to wear a mask. In addition, an online video will be uploaded on the CDC website prior to staggered employees return to the office.

**(c) Signage and Communication Material**

- Clear infographic images and schematic diagrams (the signage) will be placed at CDC buildings reception, foyers on all floors, and entrances to boardrooms, in order to educate and remind employees of requirements and protocols to curb the spread of corona virus;
- Employees will receive regular email updates on developments;
- A COVID-19 Online Portal will be utilised by employees to access information, protocols, and as a refresher from time-to-time (<http://www.coega.co.za/DocumentList.aspx?cmd=browse&objID=80&catID=2065> ); and
- The COVID-19 Task team will be operational throughout the level 4 to level 1 and will provide regular updates to Executive Management and Operations Management Teams, and Chief Executive.

**(d) Contact Management and Tracking**

- For risk management, contact tracing and monitoring will be implemented; and
- The contact management and tracking database will be actively managed by the CDC to ensure that contact risk is immediately identified and proactively managed.

**(e) Protocol for Employee Testing Positive for COVID-19 at the workplace**

- An employee who tests positive for COVID-19 will be placed under self-isolation as guided by the government regulation; and
- CDC office will be required to close temporarily to ensure contact with the other employees is established and testing is conducted before operations resumes in line with the government regulations.