CONSTITUTION HILL
COVID-19 WORKPLACE PLAN

1 September 2020

Department:	Facilities	Document number:	CH-C19-PLN-001	
Document Classification		Normal Document		
Document Type		Policy		
Name of Document:		Conhill Covid19 Policy & Workplace Plan		

DIGNITY JUSTICE RESPECT FREEDOM EQUALITY DIVERSITY DEMOCRACY **CONSTITUTION**HILL

Table of Contents

COVID-19 DECLARATION

The Board and Management of Constitution Hill in response to the Covid19 pandemic acknowledges that staff and clients deserve our renewed commitment to support and protect their Health in all the activities conducted by Constitution Hill.

Constitution Hill recognises that all have the Right to:
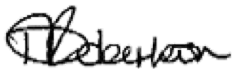
- Life
- A safe environment
- Healthcare services

The Constitution Hill Management understands it has a duty to protect staff and members of the public as prescribed by the OSHA (85 of 1993) and its regulations and codes of practice.

Constitution Hill Management commits to provide a safe and healthy work environment by:
- Identifying and providing necessary support to staff including information, counselling, healthcare services and protective equipment.
- Monitoring the workplace environment to ensure minimal exposure to SARS-CoV-2.
- Maintaining a clean and healthy workplace.
- Reviewing our operational plans and policies to improve our performance.

Signed:

Ms. Dawn Robertson
CEO
Constitution Hill Development Company
1 September 2020

ABBREVIATIONS

OVERVIEW

This COVID-19 Workplan has been developed by Constitution Hill Development Company (ConHill) based in Johannesburg, Gauteng; and is based at: The Old Fort 11 Kotze Street, Johannesburg. COVID-19 workplans are required as per **Regulation 16(6)(b) of the Disaster Management Act: Regulations relating to COVID-19 published on 29th April 2020** by Dr Nkosazana Dlamini Zuma, Minister of Cooperative Governance and Traditional Affairs.

The Regulations issued in terms of section 27(2) of the Disaster Management Act, 2002 (Regulations) and the COVID-19 Direction on Health and Safety in the Workplace issued by the Department of Employment and Labour (Directive) set out specific measures that employers are required to take to protect their employees in the workplace from COVID-19. Every employer that is permitted to operate will need to adhere to the sector-specific guidelines that apply to their business in addition to the measures set out in the Directive and the Regulations. Annexure E Workplace plans regulation 16(6)(b) states:

> A COVID -ready Workplace Plan must be developed prior to the reopening of an enterprise employing persons or serving the public. For small businesses, the plan can be basic reflecting the size of the business. while for medium and larger businesses, a more detailed written plan should be developed given the larger numbers of persons at the workplace.

The Plan for medium and large businesses must include the following:
1. The date the business will open and the hours of opening;
2. The timetable setting out the phased return -to -work of employees, to enable appropriate measures to be taken to avoid and reduce the spread of the virus in the workplace:
3. The steps taken to get the workplace COVID -19 ready;
4. A list of staff who can work from home: staff who are 60 years or older; and staff with comorbidities who will be required to stay at home or work from home:
5. Arrangements for staff in the establishment: (a) sanitary and social distancing measures and facilities at the entrance and exit to the workplace; (b) screening facilities and systems; (c) the attendance -record system and infrastructure: (d) the work -area of employees: (e) any designated area where the public is served; (f) canteen and bathroom facilities; (g) testing facilities (for establishments with more than 500 employees); (h) staff rotational arrangements (for establishments where fewer than 100% of employees will be permitted to work).
6. Arrangements for customers or members of the public, including sanitation and social distancing measures

This COVID-19 workplan has been authorised by Dawn Robertson as CEO of Constitution Hill Development Company.

Principles

The COVID-19 Workplan is based on the established principles of Infection Prevention and Control (WIPC) as contained in COVID-19 Disease: Infection Prevention and Control Guidelines of the Department of Health (DoH.) Even though these guidelines are aimed at health care facilities, the principles of WIPC are applicable to all workplaces and each principle has been evaluated, modified and applied in the manner suitable to Constitution Hill Development Company as an organisation. In this regard a variety of reference guidelines have been consulted including publications of the DoH and the World Health Organisation (WHO) Considerations for public health and social measures in the workplace in the context of COVID-

19: Annex to Considerations in adjusting public health and social measures in the context of COVID-19 (10 May 2020) has been referenced in the drafting of this COVID-19 Workplan.

Elements COVID-19 workplans:

The WHO has identified five elements of an effective in ensuring that Workplace Infection Prevention Control (WIPC) in all workplaces is visibly practiced throughout the workplace.
1. **System change (Build it):** availability of the appropriate infrastructure and supplies to enable the implementation of infection prevention recommendations;
2. **Education and training (Teach it)** of key role-players;
3. **Monitoring and feedback (Check it)** infrastructure, practices, processes, outcomes and providing feedback based on interpretation of data;
4. **Reminders and communication (Sell it)** improvements in the workplace;
5. **Culture change (Live it)** within the health facility or the strengthening of a safety climate.

Overview of Roles & Responsibilities:
The Employer:
Constitution Hill will provide the following measures to control and prevent the spread of the coronavirus in the workplace;
1. **Compliance Officer.** Constitution Hill will appoint a manager as a Compliance Officer. Each site must have a Compliance Officer. The Compliance office is responsible for overseeing the implementation of the workplace plan, oversee the adherence to the health and safety measures established in the workplace, address employee or workplace representative concerns and to keep them informed. The Compliance Officer for Constitution Hill is Mrs. Dorina Cloete.
2. **Employee training.** GGDA provided induction training to all employees on COVID-19. Group Staff induction was conducted in July 2020 and Compliance Officer Training for nominated staff took place in August 2020.
3. **Risk Assessment.** A risk assessment has been undertaken for Constitution Hill which is the baseline of the workplace plan. This risk assessment plan has been developed through the GGDA Group BCP Forum and is updated fortnightly. The plan is also part of the overall Workplan.
4. **Screening facilities.** Screening for symptoms will take place at the main entrances in form of questionnaire and temperature scanning using a touchless temperature scanner. Staff have been appointed at each facility to carry out the screening function.
5. **Isolation room.** Constitution Hill has set up an isolation room for employees exhibiting COVID-19 symptoms at the workplace.
6. **Rotational Plan.** A rotational plan is to assist in the safe return of employees to the workplace and one way of minimizing the number of workers at the workplace at any one time. The Constitution Hill rotational schedule is attached.
7. **Work Schedule/Timetable.** Every business unit head is responsible for drafting a work schedule which will serve as a control measure to minimize the number of workers at the workplace, taking into consideration employees with Comorbidities.
8. **Employees with Comorbidities** and over 60 will be allowed to work from home where possible, if not possible a risk assessment report for such employees will determine the correct route possible to facilitate the save return to the workplace of such employees.
9. **A Return to Work Form** will be provided to all employees for declaration of any comorbidities. This was used to develop the vulnerability schedule for the Constitution Hill
10. **Cloth Mask.** Each employee will receive minimum of two cloth masks to reduce the amount of virus containing droplets being coughed up by those with the infection and

transmitted to others and to surfaces that others may touch. Some infected persons may not have symptoms or may not know they are infected.

11. **PPE.** Face shields, gloves and proper PPE per job description will be supplied to employees as per their job description. Each line manager must ensure that employees receive the correct PPE.

12. **Sanitizers.** Each employee will be supplied with a 70% alcohol based hand sanitizer and a surface disinfectant. Sanitizers will be placed at entry points and designated areas in the workplace and sufficient quantities will be placed.

13. **Adequate soap and paper towels.** Constitution Hill will supply adequate facilities for regular washing of hands, the use of fabric towelling is prohibited.

14. **Social distancing measures.** Reception areas, canteen and other areas of queuing will be marked with social distancing stickers of 1.5m. Office areas will be arranged to adhere to 1.5m social distancing guideline.

15. **Procedure for handling a positive case.** Constitution Hill has developed a procedure for handling a COVID19 positive case at the workplace.

16. **Procedure for handling a COVID-19 symptomatic case.** In a case where an employee shows symptoms for COVID-19 while at the workplace, such an employee shall be immediately isolated by being taken to the isolation room and medical help shall be sought.

17. **Regular Cleaning Schedule.** All work surfaces and equipment shall be cleaned and disinfected before work begins, regularly during working period and after work ends. All areas such as toilets, common areas, door handles, shared electronic equipment are regularly cleaned and disinfected.

18. **Biometric Systems.** All biometric systems will be disabled at entry and exit points and will be replaced with a touchless system.

19. **Ventilation.** Constitution Hill will make sure the workplace is naturally well ventilated. Where possible mechanical ventilation will be used. Filters will be cleaned and replaced in accordance with the manufacturer's instructions by a competent person.

20. **Standard Operating Procedures.** Constitution Hill will draft protocols for employees to adhere to.

21. **Specialized Personal Protective Equipment**. Constitution Hill will provide such equipment as and when required and recommended in any guidelines given the nature of the nature of the worker's duties and associated level of risk. This will be checked regularly on the websites of the National Department of Health, National Institute of Communicable Diseases and the National Institute for Occupational Health.

22. **Information Signage.** Constitution Hill shall post COVID-19 information signage at the workplace on notice boards, kitchen, bathrooms, canteen, display screens and other common areas for continuous awareness.

23. **COVID-19 File.** Constitution Hill has a COVID-19 file which contains the risk assessment report, COVID-19 policy, workplace plan, rotational plan and work schedule, list of remote workers, list of employees with comorbidities, over 60 and pregnant, procedure for handling COVID-19 positive cases, procedure for handling employees showing symptoms at the workplace.

24. **Employee Register.** Constitution Hill shall keep a register of all employees and visitors entering the workplace.

25. **Health and Safety Committee.** A health and safety committee shall be established at Constitution Hill.

The Employee
All employees must comply with measures to curb the spread of the virus in the workplace introduced by the GGDA and Constitution Hill in accordance with regulations made in terms

of section 27(2) of the Disaster Management Act, 2002. The following measures must be adhered to by all employees:

1. **Employee training.** Every employee must attend an induction training on COVID-19 organized by the GGDA.
2. **Medical Surveillance.** Every employee must undergo medial surveillance per the Constitution Hill requirements.
3. **Screening facilities.** All employees will be screened for COVID-19 symptoms via questionnaire. A temperature reading will be performed using a touchless temperature scanner.
4. **Work Schedule/Timetable.** All employees are to adhere to the work schedule drafted by business unit heads, this will assist in keeping the required minimum number of employees at the workplace.
5. **Employees with Comorbidities**, over 60 and pregnant women are to declare their conditions to the Constitution Hill by filling in a Return to Work Form provided to all employees.
6. **Cloth Mask**. Every employee must wear a cloth mask provided, at the workplace and at all times.
7. **PPE.** Each employee must wear the proper PPE supplied by the Constitution Hill as per job description.
8. **Sanitizers.** Each employee must sanitize their hands regularly when in the workplace.
9. **Touching of the face.** Touching of the facial areas, mouth, nose and eyes should be avoided as much as possible.
10. **Greetings.** Employees shall not greet each other by hand, hugging or kissing. Elbow greeting is encouraged
11. **Coughing.** Coughing and sneezing should be shielded with a tissue paper and dispose immediately or into the inside of an elbow
12. **Social distancing measures.** All employees are to adhere to social distancing measures as per the floor markings.
13. **Information Signage.** All employees are to observe information signs in the workplace to keep themselves informed at all times.
14. **Self-Screening.** Employees are encouraged to download the MPILO app from their mobile phones to perform self-screening regularly. If an employee is displaying COVID-19 symptoms while at home, such an employee should inform their line manager and sought medical help, if possible be allowed to work from home. If an employee is displaying COVID-19 symptoms while at the workplace, such an employee should inform their line manager and isolation will take place immediately while in sought of medical help.
15. **Clean Desk Policy.** All employees should adhere to the clean desk policy
16. **Refusal to work due to exposure to COVID-19:** An employee may refuse to perform any work if the circumstance arises which with reasonable justification appear to that employee or to a health and safety representative to pose an imminent and serous risk of their exposure to COVID-19. An employee who refused to work must as soon as possible notify the employer of the refusal to work and the reason for the refusal. No employee may be dismissed, disciplined, prejudiced or harassed for refusing to perform any work if deemed exposure to COVID-19
17. **Specialized Personal Protective Equipment.** Constitution Hill will provide such equipment as and when required and recommended in any guidelines given the nature of the nature of the worker's duties and associated level of risk. This will be checked regularly on the websites of the National Department of Health, National Institute of Communicable Diseases and the National Institute for Occupational Health.
18. **Health and Safety Committee.** A health and safety committee shall be established at Constitution Hill.

Our approach to managing risk – systems and processes
Our approach to managing risk is based on our Compliance Assessment Framework, with particular focus for COVID-19 which includes this Policy and Minimum Operating Standards, Risk Assessment, Implementation Plans and ongoing review.

| IS THERE POTENTIAL FOR RISK ? | HAVE WE EFFECTIVELY ASSESSED IT ? | HAVE WE RECORDED IT AND IS OUR DATA GOOD ? | WHAT ACTION HAVE WE TAKEN ? | ARE THE ACTIONS SUFFICIENT ? |

Compliance Assessment Framework

At the heart of this Policy is that we will place the welfare of our staff and visitors before anything else. We will follow current guidance, move quickly to adapt to changes, and adopt learning from others where appropriate. Any member of staff is empowered to flag issues so that they may be resolved, or assurance provided. This should be via the line management chain in the first instance but progress to the CEO if required.

SECTION A: WORKPLACE INFECTION PREVENTION & CONTROL (WIPC)

Introduction

The Regulations provide that all businesses that are permitted to operate must develop a plan for the phased return of employees to the workplace prior to re-opening the workplace, which plan must be available for inspection. The plan must set out which employees are permitted to return to work, what the plans are for a phased return of employees to the workplace, what the health protocols are, and the details of the COVID-19 compliance officer.

At minimum, the workplace plan must specify the following:
- The date on which the business will re-open and the business's operating hours;
- Lists of employees falling under the following categories:
  - Those who can work from home;
  - Those who are 60 years and older who will be required to stay at home or work from home;
  - Those with comorbidities who will be required to stay at home or work from home;
- A timetable setting out the phased return to work;
- Details of the steps taken by the employer to get the workplace COVID-19 ready and the arrangements for employees, including:
  - the social distancing measures that will be implemented;
  - details of the sanitary facilities to be provided at the entrances to, and exits from, the workplace;
  - details of the screening facilities and systems to be implemented at the workplace;
  - details of the protocols to be followed in the case of a suspected case of COVID-19 at the workplace;
  - details of the system and infrastructure to be used to record attendance at the workplace;
  - identification of the designated work-areas of employees and details of the social distancing and sanitary measures to be implemented in those areas;
  - identification of any designated area where members of the public are served and details of the social distancing and sanitary measures to be implemented in such area;
  - identification of canteen and bathroom facilities and details of the social distancing and sanitary measures to be implemented in those areas;
  - details of employee rotational arrangements, for establishments where fewer than 100% of employees will be permitted to work at any given time; and
  - Details of the COVID-19 compliance officer appointed by the employer.
  - Special arrangements must be made for employees with comorbidities and those over the age of 60. These arrangements do not need to be set out in the workplace plan, although the lists of who these employees are, must be included in the plan. In terms of the Regulations and the Directive, the obligations placed on employers with greater numbers of employees are greater than those with fewer employees.

WORKPLACE INFECTION PREVENTION CONTROL ADMINISTRATION

Constitution Hill Development Company has adopted a COVID-19 policy as per the requirement of the Consolidated COVID -19 Direction on Health and Safety in the Workplace Issued by the Minister in terms of Regulation 4(10) of the National Disaster Regulation. The COVID-19 WIPC

(Workplace Infection Prevention Control) programme implementation by co-ordinated by the legally designated individuals as detailed below.

The CEO, as the 16 (1) according to the OHS Act, has the overall responsibility to ensure that the duties of Constitution Hill Development Company, as an employer, are properly discharged. The descriptions of these responsibilities are given in Section 8 of the OHS Act 'General duties of employers to their employees.' The CEO therefore is responsible for ensuring that an OHS system is implemented in the company and that the relevant resources are available for its maintenance. The CEO will therefore receive reports on the OHS performance of the company and will agree to any commitments, stated in the OHS Policy Statement, that are deemed necessary for the improvement of OHS performance.

The CEO has the overall responsibility to ensure that the OHS system is functional. This will include:
- Making the relevant legal appointments of suitably qualified and experienced persons for the performance of specific technical and managerial tasks relating to OHS management.
- Ensuring that the necessary resources are utilised for the maintenance of the OHS system on site.
- Receiving reports on performance and issue instructions for corrective and disciplinary actions.

Additionally, the Department of Employment and Labour have published Directives which contain additional and specific occupational health and hygiene instructions for employers to implement in order to mitigate or eliminate the transmission of the SAR-Cov-2 in the workplace.

The COVID-19 Compliance

The Constitution Hill Chief Executive Office is the designated COVID-19 Manager and will be appointed to ensure the implementation of and adherence to Standard Operating Procedures for the risk mitigation of COVID-19 in the workplace, as required by Government Notice NO. 479 29 APRIL 2020 - 479 Disaster Management Act (57/2002): Covid-19 Occupational Health and Safety Measures in Workplaces Covid-19 (C19 OHS), 2020 and the Risk Adjustment Strategy Regulations of 29 April 2020.

Constitution Hill will designate a COVID-19 Health and Safety Officer (COVID-19 Compliance Officer) as well as a COVID-19 Health and Safety Officer. In addition a Covid-19 WIPC Team will be established to assist, where necessary, with the implementation of and adherence to Standard Operating Procedures for the risk mitigation of COVID-19 in the workplace. This cross functional team will support the COVID-19 Compliance Manager and Officer in implementation of COVID-19 protocols, and any issues related thereto. The COVID-19 Compliance Manager will ensure they keep in touch with National DoH and NICD, and their Provincial department of health with respect to recommendations and guidelines for travel, tourism and hospitality operations during the COVID-19 pandemic.

The Compliance Officers will be appointed as per Consolidated COVD-19 Directive on Health and Safety in the Workplace of 04 June 2020.

COVID-19 Compliance Officer

The Compliance Officer is required to support the Compliance Manager in the implementation of phased in return of employees to the workplace, prior to reopening the workplace for business. The plan must include the following:

- What the plans for the phased-in return of their employees to the workplace are;
- What health protocols are in place to protect employees from COVID-19; and
- The details of the COVID-19 Compliance Manager and Officer;

Covid19 WIPC Team

An WIPC team made up of the Covid19 Compliance Manager, the Covid19 Compliance Officer, Management and the Health and Safety Representatives will be formed. The Health and Safety Representative will perform their duties as defined by the OHSA and participate in the COVID-19 WIPC Team

The WIPC team will ensure that:

1. Risk assessments of all aspects of operation in-line with the Department of Labour COVID-19 Occupational Health and Safety Measures in Workplaces
2. Develop, maintain and implement:
   - Standard hygiene and sanitising procedures (including schedules /logbooks) per area/facility/vehicle category etc.
   - Special area cleaning procedures – as required
   - Capacity limits and controls
   - Physical distancing plans
   - Guest/visitor/passenger/client procedures
   - Staff procedures
   - PPE standards for staff
   - PPE standards for guests/ visitors/passengers/clients
   - Procedures for staff with symptoms, and /or suspected COVID-19
   - Procedures for guests/clients/visitors/passengers with symptoms, and /or suspected COVID-19
3. Monitoring the implementation of the protocols and the effectiveness of the measures undertaken
4. Monitoring overall compliance, identifying and correcting gaps, and adapting plan to practical experience
5. Monitoring compliance with correct PPE usage – observing, CCTV, spot checks etc.
6. Maintain staff and guest/client/visitor/passenger health records
7. Maintain and checks logs of cleaning activities
8. Maintain and manage stock and use of PPE
9. Oversight of all staff and guest training and information provision
10. Independent Third-Party Hygiene Audits – as required
11. Independent Third-Party decontamination cleans – as required
12. Monitoring compliance with the Department of Labour COVID-19 Occupational Health and Safety Measures in Workplaces

RISK ASSESSMENT

The Consolidated COVD-19 Directive on Health and Safety in the Workplace of 04 June 2020 issued by the Minister of Employment and Labour in terms of Regulation 4(10) of the National Disaster Regulations provides that every employer is required to undertake a risk assessment to give effect to the minimum measures required in the Directive with reference to the specific circumstances in a particular workplace. The COVID-19 WIPC Team will jointly perform the Risk Assessment and confirm its determinations.

COVID-19 Risk Assessment Methodology and Model

This COVID-19 Risk Assessment methodology involves three (3) steps related to the classification of personnel, work tasks and workplace environmental conditions.
The guide Specialised health risk assessment for workplaces (by employers and self-employed persons) produced by the DoH and DEL was used to construct the risk assessment model.

1. Personnel Risk Classification

Firstly, Personnel Risk Classification is based on the established epidemiological evidence that persons who are over 60 years of age and/or who have poorly managed chronic health conditions are at greatest risk of severe negative health outcomes due to SARS-Cov-2 infection. The following Personnel COVID-19 Risk Classification Tool will be used:

Employee name	Personnel Risk Classification			Recommendations		
	Low^	Med #	High*	Administrative	Engineering	Personal

Table 1: Personnel Risk Classification

High*
1. 60 years and older
2. One or more of the underlying commonly encountered chronic medical conditions (of any age) particularly if not well controlled:
   - chronic lung disease:
   - moderate to severe asthma, chronic obstructive pulmonary disease (COPD), bronchiectasis,
   - idiopathic pulmonary fibrosis,
   - active TB and post-tuberculous lung disease (PTLD)
   - diabetes (poorly controlled) or with late complications,
   - moderate/severe hypertension (poorly controlled) or with target organ damage,
   - serious heart conditions: heart failure, coronary artery disease, cardiomyopathies, pulmonary hypertension; congenital heart disease
   - chronic kidney disease being treated with dialysis chronic liver disease including cirrhosis
3. Severe obesity (body mass index [BMI] of 40 or higher)
4. Immunocompromised as a result of cancer treatment, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, prolonged use of corticosteroids and other immune weakening medications
5. →28 weeks pregnant (and especially with any of co-morbidities listed above)

Medium #
One or more of the underlying commonly encountered chronic medical conditions (of any age) which is currently well controlled.

Low^
No chronic health conditions

The designation of personnel into risk categories is the first step in the COVID-19 Risk Assessment methodology. Specific Personnel COVID-19 Risk Controls will be recommended for each employee in order to minimise occupational exposure to SARS-Cov-2 and support their work performance. The "Guidance on vulnerable employees and workplace accommodation in relation to COVID-19(V4: 25 May 2020)" will be applied.

2. Workzone Risk Classification

Workzone Risk Classification is based on the understanding that workzone conditions are an establish factor in determining occupational exposure to SARS-Cov-2 . The following Workzone COVID-19 Risk Classification Tool will be used:

Workzone name	Workzone Risk Classification			Recommendations		
	Low^	Med #	High*	Administrative	Engineering	Personal

Table 2: Workzone Risk Classification

High*
High exposure risk workplace are those with high potential for negative health effects due to poor ergonomics, unsafe conditions involving electricity supply and connections(no extension cable used), slippery walkways, tripping obstacles present, unstable work surfaces, awkward loads requiring manual handling, poor environmental hygiene, poor ventilation ($\leftarrow$1 daily cleaning), crowded shared living spaces.

Medium#
Medium exposure risk workplace are those with reasonable potential for negative health effects due to adequate ergonomics, extension cables are well-managed, walkways conditions are managed, stable work surfaces, laptop and files requiring manual handling, adequate environmental hygiene (=1 daily cleaning), non-crowded shared living spaces, etc.

Low^
Low exposure risk workplace are those with low potential for negative health effects due to good ergonomics, safe conditions involving electricity supply and connections, walkways, stable work surfaces, no awkward loads requiring manual handling, good ventilation, good environmental hygiene ($\rightarrow$1 daily cleaning) single living spaces, etc.

The designation of workzone conditions into risk categories is the third step in the COVID-19 Risk Assessment methodology. Specific Workzone COVID-19 Risk Controls will be recommended for workzone in order to minimise occupational exposure to SARS-Cov-2 and support work efficiencies. The recommendations of The Department of Employment and Labour Workplace Preparedness: COVID-19 (SARS-CoV-19 virus) will be applied.

3. Task Risk Classification

Thirdly, Task Risk Classification is based on the understanding that certain tasks may require employees to work in close contact with persons. The following Task COVID-19 Risk Classification Tool will be used:

Task name	Task Risk Classification			Recommendations		
	Low^	Med #	High*	Administrative	Engineering	Personal

Table 3: Task Risk Classification

High*

High exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19.

Medium #
Medium Exposure Risk Medium exposure risk jobs include those that require frequent and/or close contact with (i.e. within 2 meters of) people who may be infected with SARS-CoV-2, but who are not known or suspected COVID-19 patients.

Low^
Lower exposure risk (caution) jobs are those that do not require contact with people known to be or suspected of being infected with SARS-CoV-2, nor frequent close contact with (i.e. within 2 meters of) the general public

The designation of tasks into risk categories is the second step in the COVID-19 Risk Assessment methodology. Specific Task COVID-19 Risk Controls will be recommended for each task in order to minimise occupational exposure to SARS-Cov-2 and support work efficiencies. The recommendations of The Department of Employment and Labour Workplace Preparedness: COVID-19 (SARS-CoV-19 virus) will be applied.

Review
The COVID-19 Risk Assessment will be reviewed annually or if any changes in the scope of services, work conditions and if any COVID-19 incidents occur. Revised risk assessments will be re-communicated to the staff.

Monitoring Methods
The following methods will be employed:
  I.   Safety inspections
        To check that standards are being implemented and management controls are working
        These inspections will be performed on a weekly basis by the Compliance Officer
        The COVID-19 Walk-through Risk Assessment of the DoH will be used.
        Other equipment inspection forms may be used as required.

  II.   Safety audits.
        To provide a detailed and analytical review of the management of health and safety.
        The Internal Audit will be performed by the Compliance Manager and the results communicated to the COVID-19 WIPC Team.
        An External Audit may be conducted by the parties contracted or legally mandated to perform these audits.

  III. Reactive monitoring
        To determine root causes to incidents or near misses and to identify reasonable corrective measures.
        All near miss reports, non-compliance reports and incidents will be investigated by the Compliance Officer and reported to the COVID-19 WIPC Team.

The Con Hill COVID-19 Risk Assessment is provided in the SOP Manuel.

COVID -19 CONTROLS
The Standard WIPC Precautions for COVID-19 that will be implemented are aimed at reducing the risk of transmission of SARS-CoV-2 from recognized and unrecognized sources via droplet and direct contact with an infected person. Staff and clients may serve as reservoirs for microorganisms, even if only colonised and not exhibiting any signs of infection. Standard Precautions are the basic level of infection prevention measures. The hierarchy of WIPC measures are briefly outlined below.

The Con Hill COVID-19 WIPC Protocols are attached in the SOP Manuel

I.   Administrative controls:
The principal administrative controls are as follows:
- Staffing

The number of staff members at the workplace will be kept to a minimum. A Schedule of returning staff members has been developed by the CEO and is included below as Annexure 3 Staff Return to Work Schedule.

- Physical distancing.

A physical distance of 2.0 m between persons at the workplace will be indicated by posters, seating limitations and arrangements.

- Personal Protective Equipment

Mandatory use of Respiratory Personal Protective Equipment (RPPE) will be indicated by posters, provision of RPPE to staff and clients and the enforcement of its use.

- Hand Sanitisation

Alcohol-based hand sanitizers will be provided at entrances and workplaces. Good hand hygiene habits will be re-enforced by education and information posters.

- Cough and Sneeze etiquette

Correct cough and sneeze etiquette and respiratory hygiene will be re-enforced by education and information posters.

- Occupational health

Each staff member will be screened for risk for COVID-19. All cases of occupationally acquired SARS-CoV-2 will be monitored and reported as per DoH guidelines, see below. All suspected contacts of COVID-19 PUI will be monitored as per DoH guidelines.

- Visitors

Ideally, no visitors should be allowed to the premises, until further notice. Exceptions can be allowed by express permission of the CEO. Any visitors should wear a mask and be instructed on hand and cough hygiene and physical distancing requirements

II.   Environmental Controls
Control of the built environment is essential for the maintenance of a healthy workplace. The measures to be implemented are contained in the SOP Manual, they are briefly as follows:

- Staff Placement

All office workspaces will be inspected by the WIPC team to determine floor area, windows and existing mechanical ventilation. The WIPC team will determine the suitability of workspaces for single or shared use. The WIPC Team will make recommendations to improve the environmental characteristics of workspaces.

Single Staff Offices
Staff will be assigned to single office cubicles as a preferred allocation of workspace. Windows and doors will be kept open to allow for maximal natural ventilation.

Shared Offices
Larger office cubicles will be used for shared office space. A maximum of two (2) staff members will occupy shared office space. A distance of at least 2.0m between workstations will be established.

- Ventilation

Natural ventilation is preferred method of ventilation management. Windows and doors to all office spaces will be kept open to maximise cross-ventilation, with due consideration made to weather conditions and other environmental disturbances. Mechanical ventilation will be limited to the use of the existing ceiling fans. Pedestal fans may be used to improve air flow. The existing air-conditioners will not be used until their use is recommended by the WIPC Team. Local area heaters may be used to ensure a comfortable workplace.

Noting the current arrangement of workplaces at ConHill, the ventilation plan aims to:
- introduce fresh air via the windows on the exterior of the office building,
- remove office air via the doors and louvre windows into the central passage
- allow the air in the central passageway to exit the office space via the door at the fire escape.
- The windows in the fire escape will be kept open.

WIPC team to check airflow using a smoke test.

- Workplace cleaning

Staff will remove all un-necessary paper materials from their offices. Documents for circulation will be shared electronically as a preferred method. Staff will clean their workplaces using sanitary wipes before and after use.

- Environmental Cleaning

The office environment will be cleaned once daily by sweeping and mopping.

- Catering

All staff will wash cutlery and crockery with warm soapy water before and after use.

- Waste Management

Office waste will be managed using normal waste management methods. Waste produced when managing a suspected COVID-19 case will be placed into the separate healthcare waste bin found in the sickroom. Such waste will be double bagged and disposed in the normal waste bin.

III. Personal Controls-Safe Work Protocols

Effective WIPC depends on the adoption of Safe Work Protocols by all staff members.

- Personal Protective Equipment

Mandatory use of cloth face masks as the minimum Respiratory Personal Protective Equipment (RPPE) when in public spaces.

- Hand Sanitisation

Frequent hand washing and use of alcohol-based hand rub (ABHR) Always perform hand hygiene before and after touching the notes or handling documents (persistence on cardboard and paper has been reported.) Do not touch your face unless your hands are clean. Staff will clean their hands:
- before doffing PPE and after removing PPE
- Before and after each client contact
- before and after using the biometric system
- before and after handling any documents

- Cough and Sneeze etiquette

Correct cough and sneeze etiquette and respiratory hygiene to be followed.

FACE MASKS/CLOTH FACE COVERINGS

The wearing of face masks or cloth face coverings (covering nose and mouth) provides an additional level of safety for visitors and employees and reduces the likelihood of contagious virus droplets transferring from one person to another. Masks/ face coverings should also fit well without gaps on the sides, top, or bottom.

All staff must wear masks at all time, except while taking meals. The business must provide sufficient disposable masks for a mask per staff member per shift, or a minimum of 3 cloth masks per staff member. One is worn on shift, including on transport home, one is in laundry (at home or provided by the business), and one is already clean and ready to wear the next day when returning to work. Visitors should be worn where staff are likely to be in close proximity to guests, or Perspex shields should be installed where possible – receptionists etc. Biohazard containers must be used for disposal of used disposable PPE.

1. Face masks/ face coverings and what must be provided by employers. Generally speaking, employees should wear face masks or face coverings to protect other employees and visitors.
2. It is recommending employees wear face masks/ face coverings (surgical or fabric, not N95) if employees are within 6 feet of another person (co-worker or guest).
3. Different types of masks/ face coverings (i.e. N95) may be required personal protective equipment (PPE) for employees in some positions, particularly those employees in First Aid, those cleaning and sanitizing First Aid facilities or equipment, or cleaning areas that may have bodily fluids (restrooms, if someone is sick on a ride, etc.) Follow local guidelines for the roles requiring a higher level of PPE.
4. Employees in personal offices or in single-employee work locations away from other employees or visitors (e.g. in a ride control booth) may not need to wear face masks or coverings while in those locations. Those locations should still be sanitized between employee rotations.

COVID-19 COMMUNICATION

Constitution Hill Development Company has a 'Duty to Inform' all staff, clients and visitors of the identified risks that may be encountered at the premises of Con Hill or during their participation in ConHill activities. Risk information will be conveyed by two main methods:

I.   Communication Protocol

There will be a bi-directional communication channel.

   a)   The Reporting of Unsafe conditions:

This is the 'bottom up' channel for the reporting of unsafe conditions.
1. The staff, clients and visitors will be encouraged to report any unsafe condition to the Supervisors/ Staff member/ Host, respectively, immediately.
2. The Staff member will report the matter to the Con Hill Compliance Officer.

   b)   ii) The Management of Risk

This is the 'top-down' channel for the issuing of instructions to staff, clients and visitors:
1. The Con Hill Compliance Officer and Con Hill Compliance Employee may instruct any person with regard to an immediate unsafe condition or action.
2. The Con Hill Compliance Officer will discuss all up-to-date risk controls with the entire work team as required

II.   COVID-19 WIPC Signage

Signage will be posed at each door, within the reception area and ablutions to ensure hand hygiene, physical distancing, cough and sneeze etiquette and mask use.

A schedule of signage has been developed and provided in the Standard Operating Procedures Manual.

STAFF COVID-19 WIPC TRAINING

Training must be provided to all staff to ensure that they understand:
  a. The virus, how it is spread, the symptoms and how long it survives on surfaces
  b. The required sanitisation and distancing procedures for themselves and for guests
  c. The effective use of PPE and what PPE they must use

Training should also cover support for staff, addressing their general fears and concerns, what happens if they have symptoms or test positive etc., and how this might affect their shift/team, and how the business will support them.

I.   Induction

All employees will be inducted by the Con Hill Compliance Manager and Officer at their first entry to the site. The induction will include:
  - COVID-19 Policy
  - COVID -19 Controls - Including Risk assessments and safe work procedures.
  - Emergency Procedures - Including Incident Recording and Reporting Procedures
  - Conhill Covid-19 Standard Operating Procedures

All inducted persons will sign individually the Induction Register.

II.   WIPC Training sessions

WIPC training sessions will be conducted once weekly, and include material on:
  - Physical distancing.
  - Personal Protective Equipment
  - Hand Sanitisation
  - Cough and Sneeze etiquette
  - Workplace hygiene

I.   WIPC Competence Training

Specific COVID-19 Competence training will be conducted in response to guidance provided by the relevant government departments.

CONHILL COVID-19 RISK MANAGEMENT PROGRAMME

I.   Return of staff:

The resumption of organisation activities will contain the following phases including Planning, Workplace Preparation, Reception of staff, Reception of clients/visitors and Commencement of off-site activities.

The CEO will determine which staff members are necessary for each phase of the controlled resumption of organisational activities.

II.   Workplace Planning

WIPC Team Appointed
  - The purpose and function of the WIPC team will be discussed with the staff via an on-line meeting resource.

- The members of the WIPC team will be selected.
- The WIPC Team will convene a follow-up on-line meeting to initiate its work.

COVID-19 Risk Assessment
- The COVID-19 Compliance Manager will prepare a draft COVID-19 Risk Assessment which will be discussed by the WIPC Team, amended and accepted.

WIPC Controls
- The COVID-19 Compliance Manager will prepare a draft COVID-19 Controls which will be discussed by the WIPC Team, amended and accepted.

Assign workplaces
- The CEO will assign staff members to separate work stations.

Procurement
- All necessary PPE, HH materials, Educational materials, ventilation equipment, cleaning equipment and materials will be procured by the CEO.
- A schedule of WIPC materials will be used to ensure adequate supply is provided in the SOP Manuel.

III. Workplace Preparation
The workplace will be prepared by:
- cleaning,
- positioning of HH materials
- posting of WIPC educational materials
- marking for physical distancing
- arranging workstations
- arranging seating in waiting area

IV. Reception of Staff
The designated returning staff will:
- receive the self-screen tool,
- complete and indicate any issues

Any changes to staff recruitment will be effected.
Staff work teams will be created and maintained in order to allow for easy of contact tracing.
The CONTACT LINE LIST, of the DoH, will be completed and filed in preparation of any positive case.

V. Reception of clients / visitors
Only urgent matters will be handled by arranging face-to-face meetings at the offices. All clients/visitors will be tele-screened before a staff member arranges any face-to-face meetings. The Compliance employee will screen and manage all clients and visitors are prescribed by the screening protocol.

VI. Commencement of off-site activities
All clients/partners will be tele-screened before a staff member arranges any face-to-face meetings. Staff members will follow all standard WIPC protocols when engaging in off-site activities.

COVID-19 OCCUPATIONAL HEALTH MANAGEMENT
COVID-19 Occupational Health at ConHill will be managed as per the requirements of the Guidelines published by the Departments Health and Employment and Labour.

SCREENING AND TESTING

If feasible, when a business re-opens, all staff should be tested for COVID-19 and for COVID-19 antibodies before returning to work. Any staff members who test positive cannot return to work until they have isolated for 10 days. If staff have antibodies this should be noted on their file and they can be considered lower risk, and possibly assigned to care for potential COVID-19 cases when these present.

The Guidelines for symptom monitoring and management of essential workers for COVID-19 related infection of the DoH will be implemented using a two-stage screening protocol.

Self-Screening
All employees will conduct a self-screen before embarking on the commute to work. The Self-Screen Tool will be distributed to all employees and all employees will be inducted into the correct use of the tool. Only employees who are asymptomatic will commute to the workplace.

Workplace Screening
All staff members temperatures will be recorded on arrival for shifts and on departing after shifts. These will be recorded on an appropriate manual or automated schedule. All temperatures will be taken with a non-contact thermometer. Any temperature outside of the normal range (above 37.5oC) requires action to be taken. The screening protocol will follow the Guidelines for symptom monitoring and management of essential workers for COVID -19 related infection of the DoH.

Referral
Any staff member with a temperature or showing COVID-19 symptoms must not work and must remain at home and self-isolate as per the Guidelines for symptom monitoring and management of essential workers for COVID -19 related infection of the DoH. Where practical, staff should self-isolate at home, with regular check-ins on progress and status from the Compliance Officer and HR.

The senior manager on duty responsible and the COVID-19 health and safety Compliance Officer must be involved in the decision and processes to deal with any staff member showing symptoms at any stage. If they show symptoms before a shift they should not start and should preferably not enter the premises.

Testing
The business should assist and advise the staff member when to seek medical support. Testing should be done wherever possible to confirm status.

Where a staff member is confirmed positive to have COVID-19, all staff on that members' shift team must self-isolate for 10 days. In the event that testing becomes widely and easily available all such staff members should be tested. COVID-19 free staff, or staff who have isolated for 10 days can return to work. The business must investigate the compliance with protocols related to the employees' work role and place, and identify whether there were failings or gaps that need to be addressed.

Reporting
All positive COVID-19 cases will be reported to the Department of Health and the Department of Employment and Labour to as per the Consolidated COVD-19 Directive on Health and Safety in the Workplace. Clinical management of suspected or confirmed COVID -19 disease Version 4 (18th May 2020)

Contact line tracking

The CONTACT LINE LIST completed during staff mobilisation will be check and confirmed, copied and issued to the DoH.

Investigation

The COVID-19 WIPC team will designate an investigation team to perform investigation as required by the Consolidated COVD-19 Directive on Health and Safety in the Workplace.

Records

All records generated during the implementation of this COVID_19 Workplan will be archived for the stipulated minimum period. Review and Audit. The COVID-19 Workplan will be reviewed by the ConHill WIPC Team on an ongoing basis. The Plan may also be audited by an external agency appointed if necessary. All issues that are raised by the Reviews and Audits will be addressed as soon as practicable and all changes will be communicated to the work team

HUMAN RESOURCE MANAGEMENT

1. It is important to understand and communicate to employees that they have a duty to take reasonable care for their own health and safety and to not adversely affect the health and safety of others.
2. Provide pre-opening training to employees to ensure they understand and feel confident managing the physical distancing and hygiene aspects of their roles. They should also know how to handle unsafe conditions and emergency situations.
3. Train employees thoroughly on their core responsibilities and on new, COVID-related protocols. Provide clear direction and guidance about what is expected. They should understand:
   - When to stay away from the workplace
   - What action to take if they become unwell
   - What symptoms to be concerned about
4. Instruct employees to wash their hands or use hand-sanitizer at frequent intervals and after any of the following: using the restroom, sneezing, touching their face, blowing their nose, cleaning, sweeping, mopping, eating, drinking, smoking, entering or leaving a guest area, and before starting their shift. This is a critical protocol to keep employees and visitors healthy.
5. Review employee sick leave policies and update as needed. Make sure policies don't inadvertently encourage employees to come to work when they aren't feeling well. Remind them to stay home if they are sick or not feeling well and not return to work until they are symptom-free for 72 hours. Encourage them to seek medical advice if they have a fever, cough, sore throat, loss of sense of taste or smell, or shortness of breath.
6. Consider operating only with essential personnel. Others (who can) should work from home, particularly in the early stages of reopening.
7. Separate work teams into groups (i.e. a Team A and Team B structure) to keep employees separate on different working days in case one person tests positive for COVID-19. That will allow operations to continue if one entire team or work group must be quarantined. Carefully consider employee rotation cycles to keep work teams together to reduce interactions with different groups of employees.
8. Personal Protective Equipment (PPE) should be worn by employees based on their role and responsibilities and in adherence to regulations, or guidance. Training on how to properly use, clean, and dispose of PPE is extremely important.
9. Be sure to communicate any operational changes to visitors prior to their visit and as they enter the museum.
10. Alternate schedules to avoid employees taking breaks at the same times in the same locations.

11. Consider reducing the use of shared equipment (computers, phones, radios, etc.). If equipment must be shared, employees should wash/sanitize their hands before and after using that equipment and the high-touch surfaces on the equipment should be sanitized frequently.
12. Employee/guest interactions should not be prolonged and social conversation that would extend interactions should be minimized.
13. Communicate regularly with employees to keep them informed of changes in operation or COVID-19-related protocols.
14. Ensure offices, venues, conference rooms are managed to facilitate physical distancing and to provide 2 meters of space between individuals.
15. Outside contractors and concessionaires should follow the same policies, procedures, and protocols as employees.
16. Think through how your existing policies and procedures apply when working from home, including:
    a. Notification of incidents, injuries, hazards, and changes in circumstances
    b. Consultation and review of work health and safety processes
    c. Attendance, timesheets, leave, and other entitlements and arrangements
17. Provide employees with a point of contact to discuss their concerns and access to support services, including employee assistance programs.

SUPPORT FOR STAFF

It is important to ensure that additional staff information is recorded and kept up-to-date including relevant medical history regarding chronic or other conditions and staff must be asked to inform HR/management if these change. It will be explained that these steps are for their own protection. Other staff information such as contact details, physical address, who they live with, next of kin etc., must be up-to-date.

In order to manage staff teams, and address PPE requirements and allocation of staff to shifts, we will identify working areas and rank then as high, moderate and low risk areas based on the type of job/activities and levels of contact with visitors and other staff.

At risk staff members, i.e., those who are older than 60 or have co-morbidity conditions should be given special consideration. Rosters can be adjusted so older/compromised staff work in low risk areas, and there should be enhanced standard operating procedures for at risk workers including more PPE such as visors.

Staff should be allocated to separate shifts or shift teams per area or function and changes to teams should be avoided. This allows for mitigation if a staff member tests positive, as only one staff team will be required to isolate. Staff in teams should work, eat and arrive separately so there is no cross contamination between teams.

A similar increase in sanitising and surface cleaning in all staff areas as in public areas is required, plus the same schedules for completion to indicate sanitising has occurred. All surfaces must be wiped frequently as part of the surface-sanitising schedule.

On arrival staff must undergo a sanitising process including spraying or wiping shoes, clothes, handbag, cell phone and face mask before or just after entry. Walk-off mats can also be implemented at entrances. All staff members will have their temperature checked on arrival and before departing. Staff kitchens, and bathrooms must be operated under the same hygiene, sanitising and spacing standards. Only paper towels must be provided in bathrooms.

Where outsourced workers are concerned, the outsource company must ensure similar staff

records are kept, and must ensure their staff follow all standard operating procedures. They must also assist in keeping the same staff on the same shift or team, and in identifying at risk workers for additional attention.

HR policies must be updated to reflect all the changes due to the COVID-19 operating environment.

Most of the staff procedures and PPE requirements apply to offices as well. Office staff shifts will be staggered and teams/shifts reduced to limit the number of staff in offices. Desks and chairs will be removed, spaced apart or taped off to ensure proper distancing and spacing, with Perspex screens used to separate facing workstations and nearby workstations if required. Superfluous items will be removed from desks to limit surfaces and items for sanitising.

Regular hand sanitising for all employees and regular sanitisation of surfaces will be implemented and no-touch refuse bins. will be used for all waste and for sanitising wipes. Where equipment e.g. headsets, PCs, desks, telephones are used, these will be dedicated to one staff member and there will be no hot-desking.

Bookings/enquiries, will be by telephone or on-line with no walk-ins. Ventilation will be maximised via windows or air-conditioning. The WHO guidelines for offices being works-place ready in the COVID era will be followed.

SECTION B: FACILITY OPERATIONS/ MAINTENANCE/ TECHNICAL SERVICES OPERATIONS

SANITISING & HYGIENE PRACTICES

Frequent visitor and staff hand sanitising and/or hand washing is critical along with frequent proper sanitising of surfaces and these together are the key defence against COVID-19. Members of staff using an area continuously, such as a counter, desk or worktop will be responsible for sanitising their surface after very customer or as frequently as required. Surface sanitising schedules should be drawn up for other areas, which are not used continuously by a member of staff. Schedules will depend on footfall and type of usage and surface. These schedules must be initialled, or updated on an on-line workflow system, to ensure compliance with sanitising requirements.

We will reduce the number of touch points for workers. For example, leaving access doors open rather than requiring someone open and close doors where appropriate. Pay close attention to cleaning and sanitizing frequently touched surfaces in back-of-house locations. Consider establishing procedures to address cleaning and sanitizing shared equipment before and after each use.

Hands
Visitors will be required to sanitise their hands on initial arrival on the site, check-in counter, ticket counter/boom, pick-up counter. Sanitiser will be self-administered from a dispenser. Thereafter sanitisers and wipes for visitors to use will be available for pens, credit cards, phones, wallets, purses when used, and for changes in situation e.g., on exit, entering or leaving a facility, area or using bathrooms, or using lifts. Hand sanitiser must be widely available i.e., on hand for, or carried by, key staff in contact with visitors and available throughout the museum and facilities, in lifts etc. Staff must hand sanitise or wash hands before and immediately after entering the work premises, and frequently while on shift, particularly after touching items or surfaces. Appropriate non-touch bins should be available for disposal of wipes everywhere wipes are
provided.

Surfaces
Surfaces throughout front and back of house areas must be wiped or cleaned with an appropriate disinfectant detergent. As far as possible, this must happen after every "use" or change of person/people using the area. All other equipment, mops, wet cloths etc., are sanitised by dipping in sanitising solution after each clean. Colour coded cloths should be used for different surfaces etc. and disinfected separately. At the end of shifts, cloths and mops should be sanitised in solution for 30 minutes. The virus does not live very long on surfaces, particularly porous surfaces. The current WHO statement is "studies have shown that the COVID-19 virus can survive for up to 72 hours on plastic and stainless steel, less than 4 hours on copper and less than 24 hours on cardboard."

Housekeeping
Each staff member will:
- minimise paper and cardboard materials in their workzone.
- clean their workstation using antiseptic wipes before and after use.

At the end of the shift waste materials will be placed in bins provided.

PHYSICAL DISTANCING: CALCULATING CAPACITIES

A key tenant of this guidance is based on managing physical/social distancing between visitors on site and within exhibitions and other spaces on the Hill. There are formulas below to assist with these calculations, but we will need to take into account movement on the site and the visitor dynamics, including how many individuals visit versus family units (a group of individuals living in the same home together.)

The following guidelines will be followed when determining capacities that allow for physical distancing.

1. The space between any persons in public areas and back of house areas should be a minimum of 1.5 metres at all times, with two metres preferred. Exceptions are when one person, e.g., a receptionist or cashier, is wearing a visor, or if there is a Perspex or similar shield between the people concerned. Identify realistic capacities based on queue length, waiting areas adjusted to allow for 2 meters of physical distancing between individuals. This calculates to 4 square meters/per person) square.
2. When considering physical distancing, we know many visitors visit with family members and others living in the same household. If that is the case, those family members can be closer to each other. Just be sure each individual or party from another household is separated by the physical distancing requirement of 2 meters. It is important to assess this "family" dynamic as it may allow you to increase our physical distancing capacity.
3. Identify realistic capacities for common areas. Do not include spaces that cannot be accessed in your common areas. Only evaluate guest-accessible areas.
4. Combining items 1 and 3, we can estimate our visitor areas that can be used to measure and estimate capacity for our museums.
5. It is better to be conservative on our initial estimates, monitor guest flow, resolve problem areas, and adjust our plan frequently. As health conditions improve, we may be able to gradually increase our capacities.
6. To calculate capacities, divide our total square /meters by the number of square /meters required per person.

The Coffee Shop:
Excess chairs/stools and tables should be removed, or tables combined to enlarge while reducing and spreading seat capacity to enforce distancing. Capacity may be subject to regulations e.g., max of 50 people including staff in one restaurant, otherwise the guideline is capacity at 50% of prior capacity. Discretion can be used for people from the same small family/friend group.

Queuing
At any queuing point or potential queuing point, i.e., for reception, ticket desk, counters, primary entrances, lifts, staff entrances, etc., floor markers and bollards, cordons, tape or rope must be used to manage queues and spacing at 1.5 metres. Queuing situations must be monitored and adjusted if proven to be inadequate.

Lifts
Capacities of service and public lifts must be controlled at 30% of person capacity. This will require clear signage at all lift entrances and in lifts, and markers on lift floors. If possible staff should man main lift entrances assist with queues, and ensure that the correct number of people enter lifts. Discretion can be applied where use is one or two same small family/friend groups.

Access Control

Selected access points of the ConHill Offices will remain open during normal office hours. The biometric systems have been deactivated. Registers will be maintained at all points of entry and exit.

SANITATION & CLEANING OPERATIONS

1. Sanitize high-touch areas frequently. Those include: door handles, trash receptacle touchpoints, control equipment, phones, computers, office equipment, counters, elevator buttons, handrails, tables, seats, benches, high chairs, toilets, sink faucets and toilet handles, soap dispenser push plates, baby changing stations, towel dispenser handles, cleaning tools, counter tops, door knobs, light switches, sinks, queue rails, dining surfaces, etc.

2. It is difficult to recommend a single approach to cleaning/sanitizing frequency as a number of factors should be taken into account when making that decision. Those factors include traffic/number of touches, environment (indoor/outdoor, warm/cold, wet/dry), location, the surface being cleaned, and the cleaning agent properties (including virus kill times and drying times)/guidelines/instructions. As a result, throughout this document, you will see the term that cleaning/sanitizing should be done "frequently." That means each facility should access the factors listed above and consult product specifications to determine how often cleaning should take place.

3. Visitors will appreciate seeing employees cleaning and sanitizing within the attraction. Consider making them visible through their uniform or provide a special identity for the group, i.e. "the Clean Team."

4. The frequency and approach to sanitizing should be based on the guidelines provided on the cleaning chemicals, which should be determined based on the surface being cleaned. Make sure virus kill times/drying times are considered carefully prior to reopening an area for guest access.

5. Carefully select the right chemicals/cleaning agents to ensure they will kill COVID-19. (Cleaners that kill the coronavirus should be effective.) Follow application guidelines and safety precautions carefully. Follow product guidelines on application frequency and PPE required. Remember that different products may be required for different surfaces.

6. Require and keep the Material Safety Data Sheet (MSDS) safety sheet for all products used in case an accident occurs while using the product. Train employees on the proper handling and use of all disinfectants, sanitizers, and other cleaning agents.

7. Hand sanitizer (alcohol-based hand rub) should be an anti-microbial agent that kills or renders inactive 99.9% of all known bacteria, viruses, and fungi that are present on surfaces. (Hand sanitizers should contain at least 60% alcohol.)

8. Disinfectant is an agent that destroys, neutralizes, or inhibits the growth of disease-carrying microorganisms. Descriptions of products of this type include the suffix "cide," meaning "to kill," e.g. bactericide, fungicide, virucide.

9. Remember to clean and sanitize surfaces and equipment in guest and behind-the-scenes areas. That includes sanitizing control and dispatch panels after each employee rotation as well as employee safety gates and railings.

10. Employees should treat all bodily fluids as if they are infectious. They always wear PPE if moving materials with fluids on them or cleaning areas where fluids have been.

11. Review education and training of housekeeping employees and consider if content and curriculum meets current needs.

12. If an employee has been exposed to COVID-19 at the workplace or in the attraction, thoroughly clean areas where the employee/guest has been.

13. Consider placing signs or posters in handwashing areas to remind visitors to wash for at least 20 seconds with soap and water.

RESTROOM CLEANLINESS
1. Consider dedicating employees to cleaning/disinfecting restrooms frequently. They should also monitor/control restroom capacity to uphold physical distancing guidelines in those facilities. Consider closing or otherwise disabling every other (or every two) toilets to ensure visitors maintain physical distancing protocols in restrooms.
2. Be extra vigilant with cleaning, disinfecting, and sanitizing protocols. Document processes and procedures to ensure they are effective.
3. Pay extra attention to high-touch surfaces in restrooms including door handles, trash receptacle touchpoints, countertops, benches, toilets, sink faucets and toilet handles, soap dispenser push plates, baby changing stations, towel dispenser handles, doorknobs, light switches, and sinks.
4. Provide a means for employees and visitors to dry their hands. Paper towels that can be disposed of in the trash are preferred.

MEDIC | FIRST AID ROOM
1. Have a containment room or isolation area for visitors or employees with potential COVID-19 symptoms. The guest with the symptom and his/her party should all be moved to the containment area for further assessment of the individual's condition.
2. Secondary assessment of an individual with COVID-19 symptoms or temperature over 38 C may include confirmation of the person's temperature and an assessment of other symptoms.
3. Follow the established local protocol for managing individuals with COVID-19 symptoms. Otherwise, if a person is in distress or having difficulty breathing, call an ambulance. If they are not in distress, provide a COVID-19 information pamphlet and suggest they follow up with a medical professional. Instruct them they should not use public transportation when leaving the property (no Gautrain, taxi, ride-share service, bus, etc.)
4. Focus on the person with symptoms; provide a COVID-19 pamphlet to his/her entire party so they are aware of the information. Discourage the party from visiting the attraction that day if they've been in close proximity to the person displaying symptoms. Consider providing discounted/complimentary admission for them to return when everyone is well and symptom free.
5. In First Aid rooms, must maintain appropriate physical distancing.
6. Be sure to disinfect this area thoroughly after it is used.
7. Designate a separate, secondary area to handle visitors with other injuries or non-COVID-19 illnesses.
8. Insure employees wear proper PPE (following standard protocols for healthcare workers) when working closely with those who may have COVID-19 (or who have an inhalation risk). That PPE may include some combination of gowns, N-95 masks, eye protection, and gloves.

GOODS RECEIVING
Delivery people on the premises should be kept to a minimum. Less suppliers, less supplier deliveries, and drivers and less off-loading staff entering the premises. Runners/off-loading members of our own staff are preferable to handle deliveries. Staff members manning the loading and off-loading should wear shoe protection eg gum boots, protective boiler suits or gowns, and wash hands frequently between each delivery or upload.

All goods must be fully sanitised at a station. Spay sanitisers are recommended. The entire area, and all its surfaces should be sanitised at regular intervals. Vendors should be advised on how you will accept goods and how their staff should arrive with necessary protective gear

PROCUREMENT MANAGEMENT
1. Ensure appropriate supply of PPE and cleaning supplies. Order them as soon as possible as some items are difficult to get in a timely manner.
2. Set up alternatives to requiring signatures. Use, and ask contractors/delivery services to use, electronic records where possible, to minimize physical interaction.
3. Implement a pre-planned delivery schedule to enable tracing and avoiding cross contamination of different vendors and staff.

FOOD AND BEVERAGE OPERATIONS
1. Reduce seating to support physical distancing in seating areas. Families/people residing in the same house can be seated together. The World Health Organization Guideline recommends having a maximum of four persons for 10 square meters of space.
2. Tables should be arranged such that the distance from the back of one chair to the back of another chair should be more than 1 meter apart and that visitors face each other from a distance of at least 1 meter. Check with local health officials or government guidelines on seating configurations as they may have different guidelines.
3. Host stands and service areas should be frequently sanitized.
4. Replace reusable menus with single-use, disposable paper menus, or menu signs.
5. If a queue is required, create floor or other markings that identify spaces for appropriate physical distancing. Make sure pick-up areas are arranged so visitors and employees can remain 2 meters away from each other.
6. Dining tables, stools, and tables should be sanitized after each use.
7. Self-serve condiments containers and utensils should be removed from public access and available from cashiers or servers. Those containers should be cleaned between each use. Alternatively, condiments can be provided in single-serving packets.
8. All straws should be wrapped. Consider pre-packaged plastic flatware.
9. Make sure sneeze guards or other barriers are in place where needed and sanitized frequently. Evaluate the size and position of sneeze guards to ensure they serve as an appropriate barrier between visitors, employees, and food.
10. Self-service food operations (not including pre-packaged food), including buffets and salad bars should be carefully evaluated or eliminated. If they must continue, physical distancing between visitors and employees must be managed and it is necessary to change tongs and ladles more frequently, always leaving these items in separate containers. Clean and sanitize buffet surfaces frequently. Consider having employees serve the food as an alternative approach.
11. Only pre-packaged food should be placed in self-service counters. Add signs that remind visitors to only handle what they intend to purchase. For added safety and to reduce contact, consider removing pre-packaged items and make them only available from an employee.
12. Self-service options and refillable drink containers should be avoided if possible, to reduce the likelihood of multiple visitors touching common surfaces.
13. Sanitize trays thoroughly after every use. Sanitize all tray stands frequently.
14. Touch-free payment options, including contactless payments should be used when possible.
15. Avoid cash handling when possible. If cash handling is permitted, cash must not be handled by employees who handle food.
16. Check presenters, pens, and other reusable guest contact items should be single use or sanitized after every use.

17. Storage containers should be sanitized before and after each use.
18. Kitchens should be thoroughly cleaned and sanitized regularly. General kitchen cleaning should be frequent and performed according to use.
19. Follow usual procedures for washing and disinfecting dishes, silverware, and glassware in a dishwashing machine, including items that have not been used as they might have been in contact with the hands of visitors or employees. If manual washing is required, follow the usual steps (wash, disinfect, rinse). Drying using disposable paper towels is recommended. Tablecloths and napkins should be washed in the usual manner.

RETAIL AND MERCHANDISE
1. Sell hand sanitizer (with at least 60% alcohol), masks/ face coverings, and face coverings as guest convenience items.
2. Educate customers with appropriate signage to only touch what they intend to purchase.
3. Create floor markings that provide minimum guide distances between customers queuing for service or cashiers.
4. Use physical barriers to separate staff from visitors at cash registers and in merchandise pick-up locations where needed. Many businesses are using plexiglass/acrylic panels for these barriers to provide optimum visibility.
5. Cash wraps, physical barriers, phones, handles, knobs, hard surfaces, handles, and frequently touched surfaces should be sanitized frequently and upon shift change
6. Some items should be placed in plastic packages to reduce handling/facilitate sale

SECTION C: VISITORS OPERATIONS

PREPARING FOR THE ARRIVAL OF THE PUBLIC

In preparation for the opening of Constitution Hill we need to define a maximum number of visitors allowed on site and inform the public about it. This will include defining a maximum number of visitors per exhibition room and inform the public with appropriate signage at the entrance to each exhibition room. It is recommended to set a maximum number of people per square meters to allow a safety distance of 1.5 m between each visitor.

We also need to determine average visit time to establish time slots. We might want to consider opening hours dedicated to certain groups of public (e.g. → 65 years of age) We will need to notify the public of context-related restrictions on the institution's website and before entering the site.

Why museums are different from other mass gatherings
It is important to remember the difference between museums and attractions and other venues for mass gatherings such as sports arenas, movie theatres, and concerts:

1. Capacity can be reduced/managed to allow for appropriate social distancing.
2. Exposure time is limited. Visitors generally move throughout their experience
3. The visitors are not sitting in a single location, elbow-to-elbow, for an extended period.
4. A large percentage of museum attendance is made up of family members and others who live in the same home and thus do not need to be physically distanced from each other.

TOPLINE CONSIDERATIONS FOR CONHILL REOPENING TO VISITORS

These considerations regard operational adjustments for facilities to consider before reopening prior to the development of a treatment or widely accessible vaccine for COVID-19. They will be adjusted and simplified as time goes on, conditions improve, and new best practices are identified. These considerations are designed to be a rough outline, subject to discussion and adjustment as needed with input from government agencies and health authorities.

1. Allow healthy people to enjoy the facility with the use of masks/face coverings for visitors and staff.
2. Provide means to wash/sanitize hands frequently.
3. Manage density of people within the facility to keep people or family units that have been isolating together 6 feet (2 meters) apart.
4. Physical distancing guidelines must be observed.
5. Reduce touch areas where possible and sanitize high touch surfaces frequently.
6. Protect employees with various approaches, including barriers, protective coverings, and distancing.
7. Have a plan in the event a guest falls ill on site.
8. All employees should wear masks/face coverings while on the job, interacting with others. Visitors must wear masks/face coverings as well.
9. Utilize touch-free/contactless payment options when possible.

10. Reduce capacity to allow for appropriate physical distancing. The capacity should be calculated based on the guest-accessible square footage in museum spaces, queue lines, retail locations, and other common areas. Be sure to consider how emergency procedures (i.e. a severe storm) could impact accessible space.
11. Reduce face-to-face purchase transactions when possible. Encourage visitors to purchase tickets online if possible. Consider all-inclusive package offers. Visitors should print their tickets at PnP/at home and hand them over on arrival during screening – in exchange for wrist bands which can be captured separately at VC twice a day.
12. Place acrylic (plexiglass) or other types of barriers/hygiene screens between guest and staff in frequent, close interaction areas wherever practical to reduce contamination. Clean the barriers/hygiene screens regularly.
13. Proactively communicate guidelines and expectations for health and hygiene procedures and precautions in the front-of-house areas for visitors and in the behind-the-scenes areas for employees.
14. Limiting face-to-face contact with others is the best way to reduce the spread of COVID-19. Clearly mark physical distancing spaces/guidelines with floor markings, seat markings, or signs to make it easy for the visitors to understand what is expected.

HEALTH SCREENING/TEMPERATURE CHECKS FOR VISITORS

Due to the unreliable nature of advance screening and temperature checks, particularly in outdoor environments, they are not recommended as a primary operating principle. In the absence of those mandates, here are operating guidelines to consider:

1. If you are conducting health screenings, you may want to ensure they are done for visitors, employees, vendors, contractors, and visitors.
2. Screening locations should be positioned as close to an individual's point of entry to the property as possible and away from other security or admissions operations.
3. Screening areas should be set up in compliance with physical distancing protocols.
4. Screening should be conducted with discretion and to maintain privacy.
5. Those performing initial screenings do not need to be medical professionals but should be trained on the screening procedure. They should wear the appropriate Personal Protective Equipment (PPE.)
6. Health screening forms may be helpful to determine if someone has been exposed to COVID-19 or if they are experiencing symptoms. Consult with local health experts to identify the correct questions to ask.
7. Temperature should be below 38 C. If temperature is above that threshold, the individual should be given a mask/ face covering and moved to an isolation area or room for further evaluation. Make sure you are using accurate temperature-taking devices and understand that instrument's limitations (+/- .01 can be significant) as well as the conditions under which the device may provide an inaccurate reading.
8. This isolation area should be separate from the initial screening area and provide a climate-controlled environment.
9. Additional testing and evaluation should include a second temperature check to confirm the initial result and a review of symptoms.
10. COVID-19 symptoms include: fever 100.4 F/38 C or higher, cough, shortness of breath or difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, and a new loss of taste or smell.
11. If the individual still presents a concern following the second screening, he/she and his/her entire party (including all family members/people living in the same household, or employees who live in the same household or commute together) should be denied entry to the attraction and given guidance to seek medical care.

12. If person is in distress or having difficulty breathing, call an ambulance. If they are not in distress, provide a COVID-19 information pamphlet and suggest they follow up with a medical professional as soon as possible. Instruct them that they should not use public transportation when leaving the property (no subway or bus.) Ideally, they would not use taxi/ ride-share if possible, but if alternate transportation is not available, all those in the vehicle should wear masks/ face coverings (including the driver.)

13. Focus on the person with symptoms but also provide a COVID-19 pamphlet to entire party so they are aware of the information. Discourage the individual's party from visiting the attraction that day if they've been in close proximity with the person displaying symptoms. Consider providing discounted/complimentary admission for them to return when everyone is well and symptom free.

14. If you are requiring visitors to complete a screening form as a condition of entry, it may be best to gather the relevant data as early in the arrival or entry process as possible to avoid frustration.

Note: As a general rule, attractions should clearly communicate to both visitors and employees that if they are not feeling well, are running a fever, or displaying any symptoms of COVID-19, they should stay home. This information should be communicated prior to arrival on property and on arrival.

Face masks/cloth face coverings for visitors

1. Face masks or cloth face coverings provide additional safety for visitors and employees. Visitors must wear them, particularly in these circumstances:
   a. When interacting with attraction employees
   b. In areas where it would be difficult to maintain at least 6 feet (2 meters) of physical distance from others including in elevators, indoor locations, or in other confined spaces
2. Government requires people wear masks/ face coverings in all public places. Be sure you understand these guidelines as they impact your operations.
3. Consider how to manage the guest relations implications for those refusing to wear masks/ face.

STANDARD PROCEDURES FOR VISITORS DISPLAYING COVID-19 SYMPTOMS

The operations must have to hand and available the telephone numbers of the health authorities, medical centres, general practitioners, public and private hospitals, and testing centres and services to be used.

All staff should be aware of basic procedures, but the Compliance Officer should, at all times, be tasked with managing the response to a guest or staff member with a high temperature, COVID-19 symptoms, or a positive test result.

As far as possible, prompt testing for both staff and visitors should occur, as full knowledge of COVID-19 status assists in ensuring the correct steps are taken as soon as possible, as well as allowing non-COVID-19 positive staff, teams, to continue business as normal.

GUEST CONFIDENCE/GUEST COMMUNICATION

1. Consider the importance of warning visitors about the risk of contracting COVID-19 in any public space, including posting signs/messages like the following example: We are committed to keeping you healthy and safe, but we cannot guarantee you won't be exposed to COVID-19. We rely on you to protect yourself too:

- Wash your hands often and avoid touching your face
- Maintain your distance from others
- Cover your mouth and nose
- Avoid touching surfaces
- If you're sick, please don't participate and encourage your family not to participate until you are well.

2. Signs with health and hygiene reminders should be visible throughout the property.
3. Communicate new operational procedures to visitors prior to arrival, on the attraction's website, and through social media to establish expectations and instil confidence, including:
   a. Identifying COVID-19 symptoms and messaging that asks guest to come back another day if anyone in their party is experiencing the symptoms
   b. Directives on wearing masks/ face coverings for employees and visitors
   c. Physical distancing guidelines
   d. Capacity limits that facilitate social distancing
   e. Enhanced cleaning and sanitizing protocols
   f. Use of temperature checks/thermal scanning cameras (if required)
4. Take a proactive approach with messaging to visitors prior to arrival and on arrival of methods being deployed for employee and guest safety.
5. Consider marketing campaigns about the actions put in place to show the guest safety measures that are being taken.
6. Signs should be placed to remind visitors of physical distancing requirements.
7. Signs should be placed in restrooms and throughout facilities to remind visitors of appropriate handwashing standards (soap, water, 20 seconds).
8. Ensure in-attraction cleaning/sanitizing team is highly visible to provide reassurance.
9. Consider a guest tip line (phone number) or build the functionality into an app that would allow visitors to report health, safety, or cleanliness concerns to management in a timely manner.

Guest Responsibility
Consider the following points when communicating to visitors about their responsibility:

1. If you or any member of your party or family is not feeling well, don't visit. Plan to come when everyone is well.
2. Currently, government health organizations are recommending people 60 years and older, those who live in a nursing homes or long-term care facilities, and people with underlying medical conditions (particularly if not well controlled) should either remain home or keep their distance from others. Underlying medical conditions include chronic lung disease or moderate to severe asthma, serious heart conditions, immunocompromised, severe obesity (body mass index [BMI] of 40 or higher), diabetes, chronic kidney disease undergoing dialysis, and liver disease.
3. Please wear a mask/ face covering throughout your visit if you can safely do so. This is for your own protection and for the protection of other visitors and employees in the attraction.
4. Employees will also be wearing masks/ face coverings. Masks/ face coverings can be purchased from various sources or homemade as long as they cover your nose and mouth.
5. Wash your hands frequently and practice good hygiene while visiting our museum:
   a. Wash hands frequently with soap and water for at least 20 seconds throughout your visit. Use hand sanitizer as an alternative. (Wash them after coughing or sneezing, before eating, after toilet use, and when hands are visibly dirty.)
   b. When coughing or sneezing, cover your mouth and nose with a flexed elbow or tissue. Throw tissue into a trash receptacle after use.
   c. Apply hand sanitizer before, during, and/or after your visit.

6. We have enhanced our already-stringent cleaning protocols considering the COVID-19 pandemic. We apologize if you experience any delays or inconvenience as a result of these procedures.
7. Follow social/physical distancing guidelines carefully, maintaining 6 feet (2 meters) of space from others. Family members and others (a "family unit") who live in the same household can be closer together. All others should strictly adhere to the physical distancing guidelines. This will apply throughout the museum.
8. To facilitate adherence to physical distancing guidelines, we may reduce capacity or close some areas. Please be patient and understanding with these necessary operational changes.
9. If you feel ill once you are on site let an employee know. You and your party may be asked to move to a special area within a facility for further assessment.

ADMISSION AND ENTRY
1. Reconsider attraction capacity. It should be a calculation based on square footage (square meters) that allows for 2 meters of physical distancing per person. Family groups residing at the same physical address can stay together in one 2 meter)space as long as the group is at 2 meters away from any other individuals or family group.
2. Group Size Limitations for Guided Tours occupancy at all times to 50% of the tour
3. Limit group size should be no more than 10 persons.
4. Recommend limiting tour parties to members of the same household only
5. Guides and guests should maintain 2m of distance and wear face coverings
6. Place signs or markings on the pavement to outline physical distancing guides/spaces.
7. It is better to start with a smaller initial capacity, assess physical distancing behaviour, and increase capacity gradually.
8. Where possible, stagger arrival times to minimize queue lines or crowds at the attraction entrance. Consider a timed ticketing program that staggers arrivals.
9. Encourage (and consider incentivizing) advance, online ticket purchases to reduce transactions on site and reduce congestion at the attraction entrance.
10. Encourage visitors to reduce the number of personal items they bring into the facility.

PAYMENTS
1. Encourage visitors to make purchases online (prior to their visit) or from apps once inside the attraction to minimize on-site payment transactions.
2. Cash handling should be avoided if possible. If cash handling is required, employees should wash or sanitize their hands frequently.
3. Try to arrange credit card readers so visitors can insert/swipe their own cards, so the employees don't have to do it for them. If the credit card machines are still close, the employee should step back while the guest makes payment.
4. Clean credit, cash machines frequently. Provide handwashing stations or sanitizer nearby.
5. Clean/sanitize cash bags/employee tills prior to distribution and upon return.
6. Assign one person to each Point-of-Sale (POS) terminal if possible. Terminal should be sanitized between each user and after each shift. If multiple employees are assigned to one POS terminal, servers should sanitize their hands before and after each use.
7. Use physical barriers to separate staff from visitors at cash registers where possible.

CONFERENCES & FUNCTIONS

It is likely that the holding of conferences and functions will be subject to regulations with respect to holding any events and the size of events. In the event that meetings, conferences and functions, of any size, can be held, the extensive WHO guidelines, which include a comprehensive risk assessment framework will be used. It has a template with eight areas of risk mitigation and 49 possible risk mitigation steps in total, which enables detailed risk mitigation strategies to be developed. In any event, conferences and meetings will be operated on a similar basis to other public areas and restaurants, with revised floor plans and reduced capacities at 50%, or ensuring 1.5-metre distance between delegates or patrons.

Guiding Principles

- A gathering refers to a planned or spontaneous event, indoors or outdoors, with a small number of people participating or a large number of people in attendance such as a community event or gathering, concert, festival, conference, parade, wedding, or sporting event.
- The *more people* an individual interacts with at a gathering and the longer that interaction lasts, the higher the potential risk of becoming infected with COVID-19 and COVID-19 spreading.
- The *higher the level of community transmission* in the area that the gathering is being held, the higher the risk of COVID-19 spreading during a gathering.
- The size of an event or gathering should be determined by safety laws and regulations.

The risk of COVID-19 spreading at events and gatherings increases as follow

- Lowest risk: Virtual-only activities, events, and gatherings.

- **More risk:** Smaller outdoor and in-person gatherings in which individuals from different households remain spaced at least 6 feet apart, wear masks, do not share objects, and come from the same local area (e.g., community, town, city, or county).

- **Higher risk:** Medium-sized in-person gatherings that are adapted to allow individuals to remain spaced at least 6 feet apart and with attendees coming from outside the local area.

- **Highest risk:** Large in-person gatherings where it is difficult for individuals to remain spaced at least 6 feet apart and attendees travel from outside the local area.

General COVID-19 rules of admission will apply in the processing of Conference and Event delegates, these include:
- The wearing of masks is mandatory
- Touch-free sanitizer stations will be placed at all entrance and exit points
- Delegates must maintain the recommended social distancing of at least 1.5m at all times
- All delegates will be subjected to thermal screening. A significant elevation in body temperature may result in access being denied
- Constitution Hill has a dedicated isolation room for the management of suspected cases of COVID-19 while on site

VENUE MANAGEMENT AND TREATMENT:

- Frequent sanitisation of high touch surfaces (door handles / railings / lifts / chairs / tables and ablutions)
- Venues will run at half capacity; attendance of any business meetings will be limited to 50 delegates as per guidelines for public gathering guidelines
- Chair and table / desk sets to maintain the recommended distancing of 1.5m
- Venue capacities to be recalculated at the recommended distancing of 1.5m
- Cocktail functions will not be held. Arrival areas, and tea breaks/foyer areas will be demarcated with grids, bollards, tapes, etc., for spacing and queue management.
- Food service will follow the food service protocols.
- Sanitising and hygiene will follow all the procedures prescribed for other spaces on site
- Only individual water and individual mints etc, will be provided, i.e., not in containers or bowls.
- Any pens and papers provided will be on request, and delegates will be told to keep any such pens and papers in their possession. Any pens left will be wiped or disposed of, and paper left will be disposed of.

FOOD SERVICES

Buffets for meetings and conferences should be discontinued if possible and food should be plated and/or provided in portions as far as possible. Menus should be revised to reduce complexity. There should be limited self-service at buffets; only to select or pick-up pre-portioned items.

Any buffet service should be handled by staff only, from behind Perspex if possible. Self-service juice, coffee etc. machines and receptacles should also be manned by staff. Pre-portioned plated items, on buffets or delivered to tables should be the main way guests are served. Offering deli-type take-away/grab-and-go style meals and options – with disposable containers, crockery cups and cutlery should be instituted where possible with a small rubbish bag provided to insert waste and disposables after use for collection. Menus should be replaced with a fixed board, or printed disposable menus.

Waiting staff to stand at least a meter from tables with floor markings to assist, and if possible guests should sit on one far side of a table from where the waiting staff serve. Alternatively, the excess space can be used for serving tables/stations on which plated food is placed close to the guests' table and the guest collects the food from that table.

Clearing and cleaning systems must be implemented with designated containers for different items cleared and sealable refuse containers for food waste. Clearing staff should be different to service staff where size and volumes permit. Items on waiting stations should be minimised.

EVENT ORGANISERS AND EXTERNAL SERVICE PROVIDERS

In all instances where event Organisers assume the role of employer, (i.e., event management / support / setup crews), the existing provisions of the Occupational Health and Safety Act (OHSA) must be adhered to as well as the specifically provisioned Directions pertaining to the COVID-19 Occupational Health and Safety measures in the Workplace (C19 OHS) as gazetted by the Department of Employment and Labour (DoEL) on 29 April 2020.

The purpose of the COVID-19 directives is to stipulate measures that must be followed to protect the health and safety of workers (event crews) and the members of public who enter the "workplace" / event venue that may be exposed to the activities provided by the event organiser. These include the **implementation of policies and procedures to protect workers and visitors from the risk of exposure.**

These Directions outline the employer's obligation to implement health and safety measures to reduce and eliminate the escalation of COVID-19 in the workplace. They include developing written control measures to prevent this exposure.

Under the obligations of **OHSA**, every worker/staff member is obliged to comply with measures introduced by their employer regarding COVID-19. The employer in this regard constitutes anyone employing others in the "place of work".

Measures highlighted in legislation include the implementation of:

- social distancing measurements;
- provision of physical barriers;
- health symptom check;
- temperature screening;
- work arrival procedures;
- symptom protocols around entering the workplace;
- ensuring the provision of cloth masks;
- sanitizing and disinfecting protocols;
- hygiene and hand sanitisation;
- supervision of the above processes.

The event organizer is also legally obliged to abide by and adhere to existing **Safety at Sports and Recreational Events Act 2 of 2010 (SASREA)** of providing safety measures to safeguard the physical well-being and safety of persons and property at events held at venues. **These events include:**

- sports;
- recreational;
- religious;
- cultural;
- exhibitional;
- organisational or similar events

The Local Authority By-laws and event permit processes will continue to apply as do the South African National Standards applicable to events particularly the SANS 10366:2015 Edition 2.2 for Health and Safety at Events – Requirements.

MARKETING AND COMMUNICATIONS
Messaging
- Conduct a pre-opening audience survey to identify visitor needs and comfort level, e.g.: "This would make me feel comfortable about visiting with my family. This is a prerequisite for my family to visit. This would prevent me from coming with my family."
- Craft pre- and post-visit visitor messaging, including materials to download in advance for onsite use
- Station trained staff at entrances to remind visitors of safety measures

and review required behaviour.
- Continue digital engagement across all platforms, synergistically complementing and extending the onsite experience.
- Integrate Instagram moments that show the museum as orderly and fun
- Implement ongoing audience feedback loops and daily report
- Prepare communications plan to deploy quickly in case of rolling closures

Targeted Campaigns
- Mount a multi-channel reopening digital and print marketing campaign for press, constituents, donors, and partners, positioning the museum as a safe, stimulating, and social "third" space that families should visit regularly for entertaining and educational experiences.
- Offer free days for first responders and their children
- Promote a stay-caytion campaign for local markets, leveraging the fact that
- families will be traveling less and compensating for declining domestic and international tourism
- Package take-over days for corporate members

ADDITIONAL QUESTIONS AND NOTES

Gloves – Gloves provide a false sense of security and are therefore not recommended as a part of general protocols. If someone wears gloves, touches an unclean surface, then touches their face or another surface, they will spread germs. Rather, frequent hand washing is important to ensure hands are clean. Hence, gloves are not included in most of this guidance. This guidance does not apply to protocols that require gloves (i.e. food handling, cleaning functions with chemicals, First Aid operations), which should be strictly followed.

Hot vs. Cold Water for Hand Washing – Its recommends handwashing be performed for 20 seconds using warm or cold water and soap. Hot water is not required, and warm and cold water are equally effective. The key is in the duration (20 seconds or more) and the use of soap. The chemical make-up of soap/soap bubbles break the walls of the bacteria and the water washes it away.

Liability Waivers – These need to be in place. We may also want to post signs/notices to ensure visitors understand there is known risk associated in being in public spaces with others. These conversations should take place with legal.

Temperature Checks/Screening on Entry – Temperature checks are not recommended as a primary operating principle due to the inconsistent nature of readings. Individuals carrying COVID-19 can be asymptomatic, including maintaining a normal body temperature. As a result, screening is not an effective way to keep individuals with the disease out of a facility. It is effective to assume everyone is COVID-19 positive and take the necessary precautions to avoid spreading the disease (handwashing, physical distancing, cleaning, and sanitization).