



CORONAVIRUS (COVID-19) and Emergency Management Services

The 2019 novel coronavirus or SARS-CoV-2 is a new respiratory virus that has not been identified before; and thus people have no immunity to it. The virus causes diseases of varying severities ranging from mild (e.g. similar to common cold) to severe (e.g. pneumonia).

TRANSMISSION



- ▶▶ Person-to-person **contact** or touching contaminated surfaces
- ▶▶ Likely spread via respiratory **droplets** within a distance of two meters (1-2m) through coughing and sneezing
- ▶▶ Estimated incubation period is between 2-14 days

Common sequence to acquire COVID – 19

Source – You must be in direct contact with an infected individual or contaminated material

Inoculation – There must be an inoculation process from the source to the recipient e.g. touching your face with contaminated hands

IDENTIFYING POTENTIAL SOURCES

Employers should:

- Have a workplace policy and procedure and ensure workers are familiar with it.
- The policy should include medical management procedures to address COVID-19 in the workplace.
- Communicate and make available a platform for workers to access the latest policy and relevant information around COVID-19.
- Identify exposure risks for different categories of workers and implement appropriate control measures.
- Determine if workers could be exposed to activities or materials where the virus may be encountered.
- Review HR policies around business travel, sick leave, and other related policies to account for COVID-19.

COMMON SYMPTOMS



Cough



Fever



Shortness of breath



Sore throat



Headache

Other symptoms include:
Body aches and pains
Weakness or fatigue
Severe respiratory distress

W-O-R-K-E-R-S RESPONSIBILITIES

Wash hands regularly using soap and water (~20 sec) or alcohol-based hand rub (~70%) or

Obey health and safety policies and procedures

Remember to cover nose & mouth with a flexed elbow/ tissue when coughing & sneezing

Key is to avoid exposure and also refrain from exposing others to potential risks

Ensure you don, doff and dispose of personal protective equipment properly

Report any situation likely to present a potential or serious danger to life or health

Self-monitor for signs of illness and self-isolate or report illness to managers, if it occurs



Different workers have different risk exposures:

Based on job specific risk assessments, consider the following:

- Office based worker
 - Administration and clerical – where sharing of equipment is unlikely
 - Call centre and communal space sharing – where sharing of equipment is likely e.g. computers, desks, telephones, headsets etc.
- Field workers exposed to confirmed, suspected or potential source of infection



Office based workers should:

- ✍ Rearrange work stations to promote 1m spacing as far as reasonably practicable.
- ✍ Ensure adequate ventilation and sunlight into offices so that droplets can dry out quickly.
- ✍ Create awareness on good hand hygiene (hand washing with soap and water for at least 20 seconds and or the use of hand sanitizer with at least 70% alcohol).
- ✍ Promote good respiratory hygiene (elbow coughing and sneezing).
- ✍ Avoid touching your face, especially while working.
- ✍ To limit personal contact, maintain a minimum 1m social distance where reasonably possible.
- ✍ Perform frequent cleaning and disinfection of touched surfaces (e.g. headsets, doorknobs, light switches, countertops, remote controls, desks, keyboards, etc.).

Vaccinations

There are currently no vaccines for COVID-19 however, it is advisable to take the flu vaccine to prevent influenza and unnecessary testing for COVID-19

What to do if you suspect you have been exposed to COVID-19

- ▶ Alert your supervisor and occupational health clinic immediately.
- ▶ If you are experiencing symptoms, inform your health care provider about any contacts and recent travel to areas affected by COVID-19.

For more information, contact

NICD: 080 002 9999

www.nicd.ac.za or www.nioh.ac.za

Field workers should:

- ▶ Understand details of the incident you are responding to and the associated COVID-19 risk.
- ▶ Ensure adequate and appropriate PPE is available. As a guide consider the following based on a risk assessment:
 - A single pair of disposable patient examination gloves. Change gloves if they become torn or heavily contaminated.
 - Disposable isolation gown.
 - Respiratory protection (i.e., N-95 respirator), and
 - Eye protection (i.e., goggles or disposable face shield that fully covers the front and sides of the face).
- ▶ Drivers, if they provide direct patient care (e.g., moving patients onto stretchers), should wear all recommended PPE.
- ▶ If the transport vehicle does **not** have an isolated driver's compartment, the driver should remove PPE and perform hand hygiene. A respirator should continue to be used during transport.
- ▶ Avoid touching your face especially while working.
- ▶ After the patient is released, remove and discard PPE and perform hand hygiene.
- ▶ Used PPE should be considered contaminated and discarded in accordance with safe practice.
- ▶ Other required aspects of Standard Precautions (e.g., injection safety, hand hygiene) must continue.
- ▶ Special precautions may be required if an aerosol-generating procedure is performed e.g.:
 - bag valve mask (BVM) ventilation,
 - oropharyngeal suctioning,
 - endotracheal intubation,
 - nebulizer treatment,
 - continuous positive airway pressure (CPAP),
 - resuscitation involving emergency intubation or cardiopulmonary resuscitation (CPR)
- *The need for special precautions are best discussed with your organisations health & safety department or further health and safety technical experts as this includes advanced PPE e.g. Powered Air Purifying Respirators (PAPRs), disposable coveralls, etc.
- ▶ Consider ventilation in the vehicle when transporting a patient to limit exposure.
- ▶ The cleaning of a vehicle after transporting a COVID-19 patient should be managed with the appropriate means and controls.