



ISASA

Independent Schools Association of Southern Africa

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MEMORANDUM

To:	ALL ISASA MEMBERS
From:	ISASA POLICY, MEMBERSHIP AND OPERATIONS UNITS
Date:	6 MARCH 2020
Subject:	UPDATE MEMO: NOVEL CORONAVIRUS

1. Introduction

On 12 February 2020, ISASA issued an initial memorandum on the Coronavirus (Covid-19). Today's memorandum is being issued to update members on new developments in relation to the virus.

On 26 February 2020, the Minister of Health, Dr Zweli Mkhize, responded to a series of questions that had been sent to the Department of Health by the Daily Maverick.¹ These questions and answers address the country's readiness to handle a Coronavirus outbreak. The most pertinent questions and answers are reproduced in Section 6 of this memorandum.

2. First confirmed case of Covid-19 in KwaZulu-Natal

The Minister of Health has confirmed that the country's first suspected case of Covid-19 tested positive in KwaZulu-Natal.

The man who tested positive arrived in South Africa from Italy on 1 March 2020. He flew via Dubai into King Shaka International Airport and travelled to his home in Hilton. He started to display symptoms on 3 March 2020, and both he and his doctor have gone into self-isolation. The Minister of Health said the infected man's symptoms were not very severe, but that the man said he was experiencing discomfort.

As of Thursday night, officials were contacting those who had been seated near him on the plane. Minister Mkhize also confirmed that tracer teams with epidemiologists and clinicians from the National Institute of Communicable Diseases are active in KwaZulu-Natal, tracking down other people who may have had contact with the infected man. Direct contacts such as family will be placed into quarantine, and a broader group of contacts will be checked for symptoms such as fever.

In Italy, China, the United Kingdom and elsewhere, measures to stop or slow the spread of the Covid-19 virus included shutting down schools and universities. Minister Mkhize said South Africa would not do this based on one case.

¹ <https://www.dailymaverick.co.za/article/2020-03-02-are-we-ready-for-covid-19-the-south-african-government-responds-to-22-questions/>

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As a purely precautionary measure, Cowan House Preparatory School has opted to close today and will be making a decision regarding re-opening the school in due course. St Stithians College has opted to notify parents of the indirect exposure of one of its parents who had had a meeting with someone who shared offices with the Hilton man. St Stithians has requested that the pupil whose parent had indirect contact with the Hilton man voluntarily quarantine himself for a period of 14 days. Furthermore, they are reviewing their procedures to ensure they have a suitable protocol in place should future instances arise. These decisions have been taken independently by the two schools who are taking a proactive and precautionary approach to the situation.

The Minister has pledged to keep the public abreast of any developments and updates. The official statement can be viewed on the [ISASA website](#).

The National Institute for Communicable Diseases (NICD) also has a toll-free number that deals with Covid-19 questions: 0800 029 999.

3. How can you protect yourself from infection?²

As we advised in the first memorandum, circulated on 12 February 2020, the following precautionary measures should be practiced:

- Wash your hands frequently with soap or use an alcohol-based hand sanitizer. The Centre for Disease control recommends an alcohol content of at least 60% in the hand sanitizer for it to be effective.
- Maintain social distancing – maintain at least 1 metre (3 feet) distance between yourself and other people, particularly those who are coughing, sneezing and have a fever.
- Avoid touching eyes, nose and mouth.
- If you have fever, cough and difficulty breathing, inform your health care provider *telephonically* if you have travelled to an area where 2019-nCoV has been reported most especially, China, Italy, South Korea, Iran and Japan, or if you have been in close contact with someone who has travelled from such an area and who had respiratory symptoms at the time you had contact with them. Your doctor will advise you on how and where to seek medical treatment.
- If you have mild respiratory symptoms and no travel history to or within an affected area, carefully practice basic respiratory and hand hygiene and stay home until you are recovered.

4. What should you do if you suspect there is an infected child or staff member at your school?

ISASA has received several queries from members wanting to know how to deal with suspected cases of infected learners or staff members at school. ISASA recommends that such cases be treated with caution so as not to cause unnecessary trauma to those involved. ISASA further recommends that any learner or staff member presenting with Covid-19 symptoms be advised to *seek immediate medical advice telephonically* and then proceed to the medical centre to which their General Practitioner directs them. If confirmed as being ill with Covid-19 they are then advised to self-quarantine at home for a minimum period of twenty-one days. Such a person should produce a doctor's clearance certificate upon return to school.

² <https://www.ecdc.europa.eu/en/novel-coronavirus-china/questions-answers>

5. What does this mean for independent schools?

- Stay informed on the status of the Novel Coronavirus, the affected areas and identification of symptoms.
- If you have been travelling in an affected area and are showing symptoms, contact a doctor telephonically immediately and follow their recommendations.
- *Avoid* travelling to affected areas. All non-essential travel should be avoided.
- Practice good hygiene as advised above: for example, sneeze or cough into a flexed elbow, or use a tissue and discard it immediately into a closed bin. It is also very important for people to wash their hands regularly with either alcohol-based hand sanitiser ($\geq 60\%$ alcohol volume) or soap and water.
- As noted above, a **clinician hotline** has been set up to answer questions from the public. The hotline number is **0800 029 999**. Member schools are encouraged to make use of this facility should they be faced with a possible case of infection.

6. ISASA's Position

ISASA is not a public health expert and, consequently, will take its lead from the relevant government departments who will issue updated guidelines, as the need arises. We commit to keeping membership updated through a dedicated tab on the website, where all pertinent materials submitted to ISASA by member schools or gathered from media reports will be available.

Furthermore, we cannot issue any blanket statements about whether schools should close or cancel activities. Each school would need to conduct a risk assessment based on their specific set of circumstances and determine what the appropriate plan of action is. Boards and Heads should have urgent discussions about how, in line with their existing emergency and health protocols, they can limit their exposure.

Certainly, all staff should be briefed, thoroughly, on procedures and processes to prevent the spread of infections in general and should be vigilant when observing illness in the pupils in their care, their colleagues and themselves. They should be briefed on precisely what they are expected to do in the event they believe a learner, staff member or they, themselves, are unwell in order to comply with their schools protocol.

Parents should be advised to keep their children home from school if they are symptomatic for illness and seek medical advice, *telephonically* in the first instance. Children should be deemed 100% well again by a medical professional before being allowed to return to school.

Schools should dispel fears of non-payment of wages for staff who do not qualify for paid sick leave in terms of their contract. We would encourage schools to advise such staff that, if medical proof of illness is provided immediately upon their return to work, wages will be paid. This will discourage those who are ill from ignoring the safety of others and themselves by attending work out of pressing financial need.

As this is an emerging situation, we would encourage schools to stay apprised of developments and adopt measured, proportional responses to the threat posed by this virus *in so far as it affects each individual school*. Currently, around 78% of those affected are between 30 and 75 years of age. Both the World Health Organisation (WHO) and the Chinese Centre for Disease Control reported a relatively low level of people under 19 years contracting the virus, with such cases representing only 1.2% of the total number of cases reported.

7. Information section on ISASA website

During the next week ISASA will be setting up a Covid-19 information section on our website (www.isasa.org). We will upload recent news to this section, as well as any resource documents we have collected or that have been sent to us by member schools. We already have several posters and other documents provided by schools and we thank them for making these available for use by the association. Schools that would like to contribute resource material should please email Simon Lee at simonl@isasa.org.

8. Questions and Answers from the *Daily Maverick* to the Minister of Health

These questions and answers are reproduced verbatim as they address the pertinent issues about which all South Africans are concerned. ISASA confirms that it is not the owner of the information provided, nor does it intend to present it as such. Below is not the entire interview, the rest of the questions and answers are available on the link provided in footnote 1.

- **What should someone in South Africa do if he or she suspects they may have contracted Covid-19? Especially people who have travelled to Covid-19 affected countries or who have been in touch with someone who travelled to Covid-19 affected countries. What number should they call? What will happen after they call this number?**

People who develop symptoms of respiratory illness including cough, fever and shortness of breath either during and/or after travel to countries where coronavirus is known to be circulating must contact the **General Public Hotline Number on 0800 029 999**. The operator will then guide the caller on the steps he or she should take, including how to seek appropriate medical care and share information about travel history with their healthcare providers.

- **What is your advice for the public in South Africa regarding the use of masks?**

There is no evidence that masks protect people who are not sick/infected. If you are healthy, you only need to wear a mask if you are taking care of a person with suspected 2019-nCoV infection. Wear a mask *if you are coughing or sneezing*. Masks are effective only when used in combination with frequent hand-cleaning with alcohol-based hand rub or soap and water. If you wear a mask, read the package insert that will guide you on the proper use and disposal of the mask.

- **Are there self-isolation guidelines for South Africa, such as those in the UK, and what steps have been taken to disseminate such guidelines to the public?**

The [Standard Operating Procedures for Preparedness, Detection and Response to a Coronavirus \(2019-NCOV\) Outbreak in South Africa](#)³ is the document that outlines the standard operating procedures for detection and response to case(s) of suspected novel coronavirus disease (2019-nCoV) in South Africa. This document has been widely disseminated to all stakeholders across the country, accompanied by the relevant training for all personnel rendering services related to the country's response to coronavirus.

³ <https://sasom.org/wp-content/uploads/2020/02/SOP-Coronavirus-29-Jan-2020.pdf>

- **In some places, ships, hotels or entire towns have essentially been placed under quarantine. What government entity in South Africa will take decisions regarding whether to quarantine larger groups like this and according to what legal framework or set of guidelines will decisions in this regard be made in South Africa?**

There is supporting legislation in the National Health Act, National Plague Control Guidelines⁴ and the WHO 'quarantine considerations in the context of Covid-19' guidelines, published 22 February 2020.

- **Should people in South Africa be placed under quarantine, either in facilities, or in their homes or their communities, what support will the state provide such people given potential loss of income and reduced access to services and food.**

Quarantine would be in a facility. All amenities and provisions would be provided. The state is not obliged to compensate for loss of income.

- **What government entity in South Africa will take decisions regarding travel restrictions inside the country and according to what legal framework or set of guidelines will decisions in this regard be made in South Africa?**

There are no restrictions on travel or trade. If such a decision were to be made it would likely be a cabinet decision.

- **What plans have been put in place should healthcare workers get sick with Covid-19 and be unable to do their jobs – potentially rendering some already understaffed facilities even more understaffed?**

The management of staff capacity when a colleague is unable to work due to illness will certainly not be a new concept because of Covid-19. All facilities have their systems of dealing with staff capacity and managing staff shortage due to sick leave, annual leave, death or disability etc.

- **Do we have enough N95 masks for health workers and what is being done to encourage health workers to make use of these masks?**

There is a worldwide shortage of N95 masks and ordinary facemasks, however we have not had any reports of a mask shortage crisis in any of our facilities. N95 masks are very familiar to South African healthcare workers who have to protect themselves from tuberculosis (TB) and other infections that are spread by air droplets. Healthcare workers in this country need very little prompting to use N95 masks when necessary - we communicate constantly with them on their own personal protection and the proper manner of using personal protective equipment and disposing of them appropriately.

- **What is being done to ensure that health facilities with poor access to enough clean water are able to promote handwashing?**

The Multisector National Outbreak Response Team (MNORT) includes the Department of Water and Sanitation which will be able to deal with any issues arising out of any such challenges. None of the designated hospitals fall into this category.

⁴ http://www.nicd.ac.za/assets/files/National_Plague_Control_Guidelines.pdf

- **What is being done to protect and educate Community Health Workers on how to handle any suspected cases?**

The SOP (Standard Operating Procedure) is a step by step manual that instructs healthcare workers on correct procedure for the management of suspected or confirmed Covid-19 cases and how to protect themselves as well. Healthcare workers have been trained across the country and know how to collect the relevant specimens. The stock of personal protection equipment has been increased. The clinicians' hotline runs 24 hours a day and is fielding many calls.

- **Public sector drug-resistant TB patients were quarantined by force in South Africa in 2007/2008 – a policy that was eventually dropped in favour of a decentralised care model. What lessons has government learned from that experience that can be drawn on in the Covid-19 response?**

We are guided by current guidelines from the World Health Organisation (WHO) and our current laws on the quarantine from Covid-19. We cannot really make comparisons between TB and Covid-19: although they are both spread by droplets the pathologies are quite different and we are still learning a lot about Covid-19 so it needs to be managed on its own merits.

- **So far little is known about how Covid-19 will impact the health of people living with Human Immunodeficiency Virus (HIV) and/or TB. What assumptions are being made in this regard and are any special precautions being put in place given that South Africa has large HIV and TB epidemics?**

What we know about Covid-19 is that fatalities and serious morbidity certainly seems to be prevalent amongst those who are immuno-compromised. That does not just mean HIV+ or TB patients. That can be the very old and very young, those with pre-existing chronic conditions like diabetes and asthma, or those on medication that causes one to be immunocompromised. It is very important to remember, in our context, that most of our people living with HIV are on Antiretrovirals (ARVs) and have very high CD 4 counts⁵. This makes them as immunocompetent as anyone not living with HIV or AIDS. South Africa is taking all the necessary precautions to ensure that all South Africans, regardless of their immune system status are protected from Covid-19.

- **How many people are known to have travelled from China to South Africa since mid-December and how many of these people have been tested for Covid-19?**

The NICD has to date tested 156 patients of which 109 were persons under investigation. All tested negative. The Department of International Relations and Cooperation or the Department of Home Affairs would be in possession of information around the number of travellers who have come from China.

- **Which airports in South Africa are checking for possible infections and are they checking every incoming flight?**

All.

In addition to these questions, the Minister published a press release on the same date detailing the following: the background to the Coronavirus Outbreak, South Africa's Readiness, Evacuation of South African citizens in China and Quarantine procedures should there an outbreak in South Africa. This statement is can also be viewed on the [ISASA website](#).

⁵ CD4 cells (also known as CD4+ T cells) are white blood cells that fight infection. The more you have, the better.

For more information on Covid-19 please refer to the ISASA website or contact the ISASA Office: Confidence Dikgole – Director: Policy and Government Relations at confidenced@isasa.org or Nhlamulo Mvelase – Policy Analyst at nhlamulom@isasa.org.