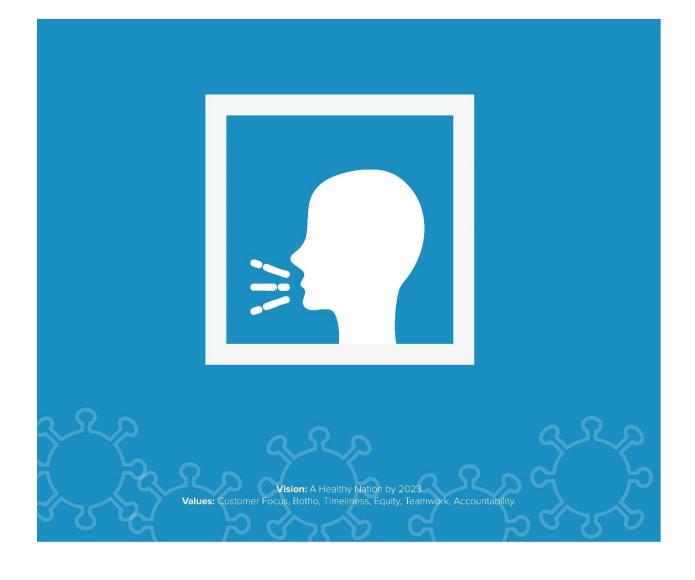


MANAGEMENT OF INDIVIDUALS PRESENTING WITH SYMPTOMS SUGGESTIVE OF COVID-19 IN WORKPLACES



Foreword

On January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization (WHO) declared the Severe Acute Respiratory Syndrome due to novel coronavirus (SARS CoV-2) outbreak a "Public Health Emergency of International Concern" (PHEIC) and the WHO declared the outbreak of Coronavirus Disease (COVID-19) a pandemic on 12th March 2020.

Botswana announced the first positive case in the country on 30th March and the first death the following day on 31st March 2020. This document serves to aid workplaces as they prepare themselves to screen individuals for COVID-19 as well as outlining how to handle suspected and confirmed cases.

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1.0 Management of Individuals Presenting with Symptoms Suggestive of COVID-19 in Workplaces

This document gives operational guidance on:

- How to manage symptomatic individuals identified in workplaces, businesses and schools i.e.
 - o Primary screening of all people entering a workplace
 - Secondary screening for COVID-19 associated risk
 - Isolation of COVID-19 suspects in designated facilities
 - Precautionary Infection Prevention and Control (IPC) Measures to consider

2.0 Primary Screening

To reduce the risk of transmission of COVID-19; workplaces, businesses and schools should have screening stations to check body temperatures for employees, contractors and customers/clients and students. It is generally advisable that anyone who feels unwell with flu-like symptoms should not visit workplaces, businesses or schools during their time of convalescence. Everyone visiting a place of work or business will be screened for temperature using a non-contact thermal scan (infrared thermometer). Those found to be febrile (37.4°C and above), should not be allowed to access the workplace, business or school premise. However, all febrile persons should be temporarily isolated in a designated holding room or sick bay and seek medical assistance by calling the District Health Management Team (DHMT) Call Centre.

3.0 Secondary Screening

Secondary screening for symptoms consistent or suggestive of COVID-19 will be done by health personnel using a COVID-19 screening form (annex 1) at a designated health facility. Additionally, further risk assessment will be done regarding details of travel within or outside Botswana, as well as any possible contact with a known confirmed COVID-19 case. Those found to fit the suspect case definition (annex 2), will be taken for isolation and COVID-19 testing.

4.0 Isolation of Symptomatic Individuals (Suspect Cases)

All individuals who meet the suspect case definition as per appendix 2, will be isolated and tested for COVID-19 in a designated isolation facility in the district. Appropriate management will be instituted for all those who test positive for COVID-19 based on the clinical management guidelines.

5.0 Precautionary IPC Measures

Everyone visiting a workplace or business should be wearing a face mask. All staff/employees, visitors, clients, students and patients should perform regular hand hygiene at moments. Social distancing should also be maintained throughout all premises at all times and minimize any physical contact as much as possible. It is absolutely necessary to maintain cleanliness in all premises through routine cleaning as well as disinfection where and as prescribed in the IPC in the Workplace guideline.

NB: All individuals who are unwell with flu-like symptoms, are advised to stay at home.

PRIMARY SCREENING

Who needs to be screened (and Frequency of screening)

EVERYONE: All employees/staff (twice a day, beginning and end of shift)

All students (twice a day, beginning and end of school day)

All clients/customers visiting the premise (as they come)

Screening points

- At first point of access to a workplace, business or school premise
- Ensure social distancing of at least 2 meters between individuals waiting for screening, and the use of face mask by all
- Keep registers with demographics (names, gender, and age), contact numbers, physical address and recorded temperatures and visiting times (time in, time out). Keep a separate register for employees/students who need to be screened twice a day

Staff to perform the screening

Individuals can be screened by any trained member of staff, they do not need to be a nurse or clinician

The type of personal protective equipment (PPE) required

Individuals who are screening are required to wear a surgical face mask only

The type of screening to be done

Individuals will have their temperature checked using a non-contact infra-red thermometer

How to handle positive screens

Positive screens are those who have a temperature of 37.4°C and above

- Ask them to proceed to the temporary holding area or sick bay within the premise
- Call the number designated by the DHMT for secondary screening

How to handle negative screens

- These individuals may proceed into the workplace/business or school premise
- Advised to continue observing preventive measures

Equipment needed for screening

Shaded area, table, chairs, screening register, pens, non-contact infra-red thermometer, hand hygiene station

SECONDARY SCREENING

Individuals who need further (secondary) screening

All individuals with a temperature of 37.4°C or above

Suitable areas for secondary screening

- At a designated facility chosen by the DHMT
- Ensure a separate, well ventilated room for screening of such individuals
- The work area (surfaces) needs to be thoroughly disinfected in-between each use

Staff who should perform secondary screening

Individuals will be screened by health care personnel designated by the DHMT

PPE requirements for staff performing secondary screening

- Individuals who are screening are required to wear a surgical/N95/FFP2 mask, gloves and disposable apron (optional)
- Individuals being screened also need to wear face masks
- Surgical masks will be required for those who screen positive (symptomatic)

Secondary screening process

Febrile individuals detected during the primary screening will be asked to complete a screening form (appendix 1)

How to handle positive screens

Positive screens are those who select YES to either of the options in the screening form (appendix1) and meets criteria for COVID-19 suspect definition (appendix 2)

- Give them a surgical mask to wear
- Ask them to proceed to the isolation area for further management

How to handle negative screens

Negative screens (febrile only with no other respiratory symptoms) should be managed accordingly within the same health facility

Equipment required to perform secondary screening

Well ventilated room/area, table, chairs, screening forms, pens, non-contact infra-red thermometer, hand hygiene station, N95/FFP2 face masks, surgical face masks, disinfectant

ISOLATION OF SUSPECT CASES

Individuals who need to be isolated

Anyone who screens

• Has a temperature of 37.4°C or above **AND**

positive:

• Selects YES to either of the options in the screening form

These individuals should be wearing a surgical face mask

Places suitable for isolation

• In a separate, dedicated isolation room that is well ventilated

How to handle isolated individuals

- The individual will remain isolated in the facility
- Sample collection for COVID-19 testing should be done

PPE requirements for the healthcare worker

- Health Care Workers should wear an N95 mask, goggles/face shield, apron and gloves
- Individuals being isolated should wear surgical masks

Appendix 1



COVID-19 SCREENING FORM

Screening Facility:	NING FURM		
Date:			
Please complete your personal details below:			
First Name			
Surname			
Contact Number			
Omang/Passport Number			
Physical Address			
L			
Please tick YES or NO	Y	ES	NO
Have you travelled outside Botswana in the last 14 days?			
Have you travelled to any area within Botswana where co transmission of COVID-19 has been reported in the last 1-	-		
Have you been in contact with a known confirmed COVID the last 14 days?	-19 case during		
Do you have any of the following symptoms?			
Cough			
Shortness of breath			
Sore throat			
Runny nose*			
Chest pain			
*Rule out seasonal allergies (rhinitis, chronic sinusitis)			
Health Care Worker Name and Surname:		Signature:	

Appendix 2

SUSPECTED CASE

1. A patient with acute respiratory illness (sudden onset of at least one of the following: cough, sore throat, shortness of breath or fever) AND a history of any travel outside of Botswana or to a location within Botswana reporting community transmission* of COVID-19 during the 14 days prior to symptom onset;

OR

2. A patient with any acute respiratory illness (sudden onset of at least one of the following: cough, sore throat, shortness of breath or fever) AND having been in contact with a suspected, probable or confirmed case of COVID-19 (see definition of contact) in the last 14 days prior to symptom onset;

OR

3. A patient who is hospitalised with a severe acute respiratory illness (sudden onset of at least one of the following: cough, sore throat, shortness of breath or fever) AND in the absence of an alternative diagnosis that fully explains the clinical presentation.

PROBABLE CASE

1. A suspect case for whom testing for the COVID-19 virus is reported by the laboratory as inconclusive.

OR

2. A suspect case for whom testing could not be performed for any reason.

CONFIRMED CASE

A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.