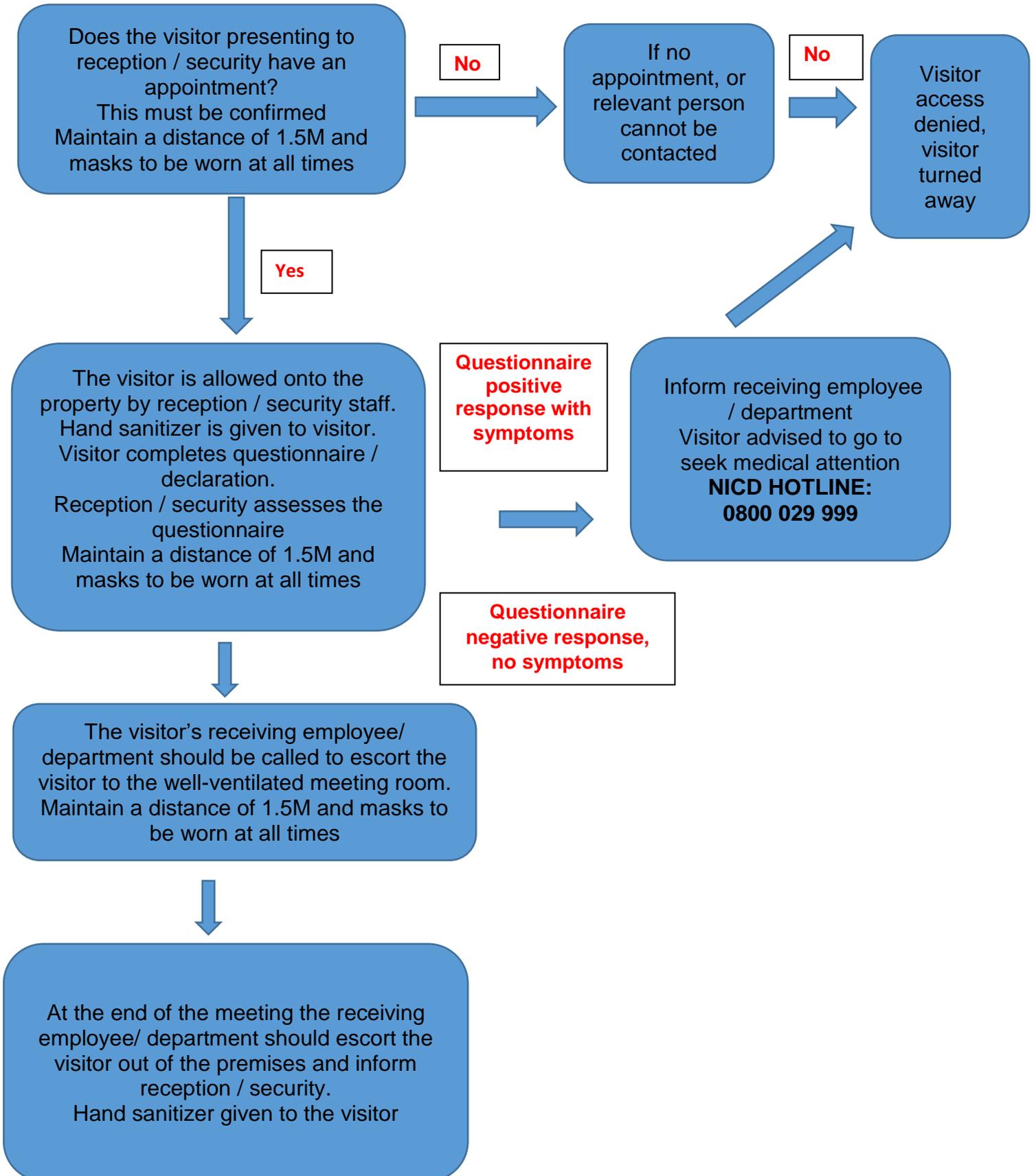




Example of a protocol for visitors gaining access to workplaces



Access protocol for visitors requesting access to the workplace.

All access points should be locked and controlled from a distance of at least 1.5 m away (a mark can be made indicating this); the controlling employee should enquire from the visitor if they have an appointment. If they do, a phone call must be made by the controlling employee to the visitor's recipient to confirm this. This should be done while the controlling employee maintains a distance of 1.5m. Once it has been confirmed by the visitor's recipient that the visitor should be allowed to enter the premises, the visitor is then allowed onto the property by the controlling employee. Hand sanitiser should be given to the visitor. The visitor should be asked to complete the questionnaire with the pen allocated for visitors only. The pen should be sanitized between uses. All this should be done while maintaining the appropriate social distance between the controlling employee and the visitor. Once the questionnaire has been filled in by the visitor, the questionnaire should be shown to (but not handled) by the controlling employee. The controlling employee should review the questionnaire and if there are any 'yes' answers; the visitor's recipient should be informed and the visitor advised to seek medical attention and asked to leave the premises, the visitor should also be informed of the NICD Hotline number. If the controlling employee review the questionnaire, and all responses are 'no' the visitor's recipient should be contacted to collect the visitor and the visitor should be escorted to the meeting venue. The meeting room should be well ventilated, a distance of at least 1.5 m must be maintained between people and masks must be worn at all times. After the meeting, the visitor's recipient should escort the visitor to the exit point. Hand sanitiser should be given to the visitor before exiting the premises. Questionnaires to be filed and stored.

COVID-19 Self-Declaration for entry into the workplace

Access is subject to completing this document.

Name and Surname			
Cellular number			
Reason for visit			
Name of person being visited			
1. Have you been in contact in the last 10 days with someone who is confirmed to have COVID-19	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2. Are you currently suffering from any of the following symptoms?			
Fever or chills	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Cough	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Sore throat	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Body pains / headache	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Shortness of breath/ chest discomfort	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Loss of smell or taste	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Nausea, vomiting or diarrhoea	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Unexplained fatigue, weakness or tiredness	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

DECLARATION

I hereby declare to the best of my knowledge that the information disclosed is correct at the time of completion. I further undertake to inform the National Health Laboratory Service (NHLS), should I be diagnosed with COVID-19 within the next 10 days so as to facilitate contact tracing.

Date	Signature

Please note, _____ (name of business) reserves the right of access to our facility