

Kavango Zambezi Transfrontier Conservation Area (KAZA TFCA)



Harmonised COVID-19 Safe Travel Guidelines

21 March 2021

Submitted to:

KAZA TFCA Secretariat and SADC/GIZ Transboundary Use & Protection of Natural Resources in the SADC Region (TUPNR)

A project assisted by the German Government via The Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH



Implemented by:
giz Deutsche Gesellschaft
für Internationale
Zusammenarbeit (GIZ) GmbH

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1. ACRONYMS

CDC	Centers for Disease Control and Prevention
COVID-19	Coronavirus Disease 2019
ECDC	European Centre for Disease Prevention and Control
EU	European Union
F&B	Food & beverage
GVPC	Guests / visitor / passenger / client ¹
IPC	Infection prevention and control
KAZA TFCA	Kavango Zambezi Transfrontier Conservation Area
MICE	Meetings, Incentives, Conferencing, Exhibitions
PPE	Personal protective equipment
SADC	Southern African Development Community
SARS-CoV-2	Severe acute respiratory syndrome coronavirus 2
TGCSA	Tourism Grading Council of South Africa
TUPNR	Transboundary Use and Protection of Natural Resources
UKRI	United Kingdom Research and Innovation
UNEP	United Nations Environment Programme
UNWTO	United Nations World Tourism Organization
WHO	World Health Organization
WTTC	World Travel & Tourism Council

¹ Acronym utilised in *Tourism & Hospitality Industry Standard Protocols for COVID-19 Operations*, Tourism Business Council of South Africa, 1 October 2020.

2. ACKNOWLEDGEMENTS

The production of national COVID-19 tourism guidelines and protocols by Kavango Zambezi Transfrontier Conservation Area (KAZA TFCA) Partner States provided the foundation on which the “KAZA TFCA Harmonised COVID-19 Safe Travel Guidelines” were developed. It is the collective input and efforts of these national Ministries and their respective Tourism Boards, Agencies and Tourism Associations that a point of departure for a harmonised version was established.

The following are thereby acknowledged with gratitude:

- Angola Ministerio da Cultura, Turismo e Ambiente
- Agência Nacional da Região Okavango
- Botswana Ministry of Environment, Natural Resources, Conservation and Tourism
- Botswana Tourism Organisation
- Namibia Ministry of Environment, Forestry and Tourism
- Namibia Tourism Board
- Zambia Ministry of Tourism and Arts
- Zambia Tourism Agency
- Zimbabwe Ministry of Environment, Climate, Tourism and Hospitality Industry
- Zimbabwe Tourism Authority

The KAZA TFCA Secretariat is acknowledged for mobilising resources and driving implementation of the project.

The project was made possible with technical support from the SADC/GIZ Transboundary Use & Protection of Natural Resources in the SADC Region (TUPNR) project, and was prepared by Lisa Scriven of Utopia Africa.

3. DISCLAIMER

Due to the rapid way the scientific research related to COVID-19 is evolving and how national governments must continuously adapt their responses to the nature of the risk posed by the global COVID-19 pandemic, these guidelines should be considered as reflecting the most recent information available and best practice recommendations at the time of publication. While reasonable care has been taken in the compilation of these guidelines, which were informed by numerous sources, the parties to its compilation do not assume any legal nor other liability for any inaccuracy, mistake or other error contained herein and they shall further not be liable to users for any damage that may result from the use of its content. Users who proceed to make use of these guidelines accept the terms of this disclaimer.

Furthermore, this document is not intended to be an exhaustive list of all possible responses to the risks posed by COVID-19. It provides general guidance for the region and does not in any way replace national protocols. Businesses should ensure that their decisions regarding appropriate and applicable risk management measures, including for COVID-19 risk prevention, mitigation, and response, are informed by the latest advice from credible sources, including local public health authorities and the World Health Organization (WHO). This advice – as well as applicable gazetted provisions by Partner States – may change from time to time and a business' response should adapt accordingly.

4. INTRODUCTION

The COVID-19 pandemic has caused unprecedented disruptions to the global tourism economy, costing livelihoods and economic productivity in a sector that contributes over 6% of total employment in the southern African region. Recovery must be a priority, but it must be done safely and in a coordinated manner that also builds greater resilience as travel resumes. Restoring confidence within the destination's source markets through consistent and reliable messaging of destination preparedness, while ensuring that the destination is indeed prepared, are critical for such a recovery to happen efficiently and effectively.

To support the individual and collective efforts of the public and private sectors of the Kavango Zambezi Transfrontier Conservation Area in this recovery, this harmonised set of safe operating guidelines for the tourism industry has been documented. The guidelines have been informed by existing regional and global guidelines and protocol documents,² and offers guidance for a consistent and coordinated recovery response in the destination.

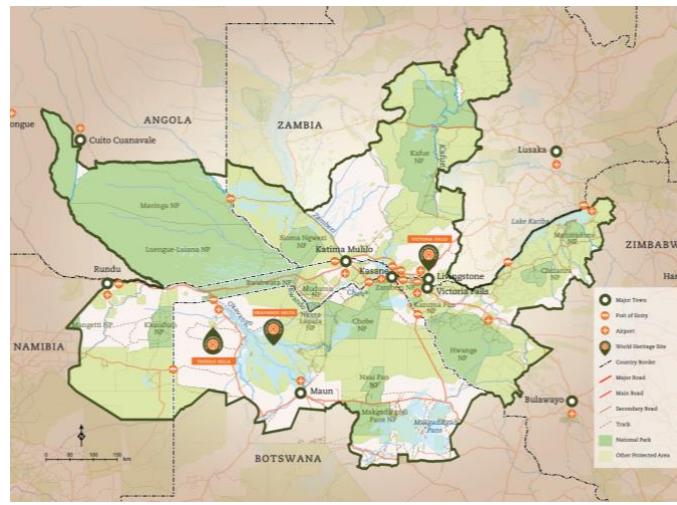


Figure 1 KAZA TFCA Map
Source: KAZA Secretariat and Peace Parks Foundation

² Refer to Annexure H for an overview of reference documentation consulted.

5. USING THIS DOCUMENT

Health and safety are integral to good business management, especially in the context of the tourism and hospitality industry where the well-being of multiple parties may be affected. New health and safety risks are presented by the COVID-19 pandemic and, as such, these guidelines are intended to support businesses to adapt and apply appropriate response measures to protect the health and safety of everyone in the workplace, including employees, suppliers, delivery personnel, and travellers alike.

Businesses are invited to use these guidelines as a framework to support them in determining which contamination risks are applicable to their operating environment and to implement the risk prevention (e.g. protection), mitigation (e.g. processes for infection prevention and control) and response measures deemed appropriate. The guidelines should be implemented in conjunction with national protocols and risk management responses should ensure that they address and adhere to applicable legal requirements and national directives.

These guidelines further embrace the necessary practical guidance for the progressive resumption of tourism services whereby as new and more efficient solutions become available, their deployment should be favoured, replacing less efficient or more burdensome measures.³

³ European Union (EU) Commission, [EU Guidance for the progressive resumption of tourism services and for health protocols in hospitality establishments – COVID-19, 2020/C169/01](#), section 26.

6. COVID-19 BASIC INFORMATION

Understanding the basics of COVID-19 is an important point of departure, both for a business owner and her/his employees. The selection of basic questions and answers regarding COVID-19 below has been informed by the World Health Organization (WHO)⁴ and the European Centre for Disease Prevention and Control (ECDC)⁵.

What is COVID-19?

COVID-19 stands for “Coronavirus Disease 2019”; 2019 being the year in which it was first detected. It is a disease caused by a new coronavirus known as SARS-CoV-2 virus.

How is COVID-19 transmitted?

Transmission from person to person is understood to be primarily via respiratory droplets that contain the SARS-CoV-2 virus. This happens mainly in one of two ways:

- One way these can be passed on is when a person is in close proximity of an infected person; when an infected person coughs or sneezes (or even when they are singing or just speaking) the respiratory droplets / secretions containing the virus can be inhaled by someone in her/his vicinity. This risk of transmission increases the longer close contact is maintained.
- The second main way transmission occurs is through contact with objects or surfaces that have been contaminated by the SARS-CoV-2 virus. An example is if an infected person coughs or sneezes into their hand, the virus can then be transmitted to objects that they touch with that hand. If another person then picks up or touches that object, they will have the virus on their hand. Should they then touch their own mouth, nose or eyes, the virus can infect them.

What are the symptoms of COVID-19?

The most common symptoms of COVID-19 are fever, dry cough and tiredness.

Other, less common symptoms that may affect some patients include loss of taste or smell, shortness of breath, congestion, red eyes (conjunctivitis), sore throat, headache, muscle or joint pain, skin rash, nausea or vomiting, diarrhoea, chills and dizziness.

Symptoms can range from mild to severe versions of one or more of the above, to no symptoms at all.

How long does it take to develop symptoms?

The time between exposure to COVID-19 and the moment when symptoms begin is, on average, 5-6 days. It can, however, range from 1-14 days.

It is important to remember that a person is still contagious, even if symptoms have not yet appeared (or never do appear). Therefore people who have been exposed to the virus are advised to remain at home and stay away from others (self-isolate) for 14

⁴ World Health Organization: <https://www.who.int/news-room/q-a-detail/coronavirus-disease-covid-19>

⁵ European Centre for Disease Prevention and Control: <https://www.ecdc.europa.eu>

days, in order to prevent the spread of the virus, especially where testing is not easily available.

Who is most at risk of severe illness from COVID-19?

Anyone can get sick from COVID-19 and become seriously ill or even die, no matter what age they are. Those at higher risk of developing serious illness are, however, people 60 years and older and those with weakened immune systems or underlying medical problems like obesity, high blood pressure, heart and lung problems, diabetes, or cancer.

For additional frequently asked questions and answers pertaining to COVID-19 basics, visit the World Health Organization's website at: <https://www.who.int/news-room/q-a-detail/coronavirus-disease-covid-19>

7. GENERALLY APPLICABLE GUIDELINES FOR TOURISM & HOSPITALITY

COVID-19 risk management, including prevention, mitigation and response measures, will be determined, in part, by the operating context of a tourism or hospitality business, including the scope of its tourism offering. There are, however, some guidelines that are applicable to all businesses in the tourism and hospitality industry; these are provided in this section. Businesses should review these generally applicable guidelines in their entirety to identify applicable risks and determine how they will implement an appropriate management response for their operating context.

7.1. Workplace Preparedness

While some tourism businesses were forced to reduce their operations drastically as a result of COVID-19 trading and movement restrictions, others ceased operating entirely. Irrespective of the extent of current business offerings, reviewing workplace readiness is worthwhile so that a business can be confident that it is transitioning from a lockdown context to a fully operational one where staff, guests / visitors / passengers / clients (GVPCs) and residents of the destinations are protected.

Health & Safety Management Systems

- Designate an individual or committee (depending on the size of the business) to be responsible for formulating and managing the business' COVID-19 risk management strategy, including prevention, mitigation, and response measures.
- Responsibilities of the designated individual, or an individual(s) on the committee, should include but are not limited to the following:
 - managing internal communication regarding COVID-19 concerns among staff members, i.e. they are the point of contact. All staff members should be made aware of who the designated point of contact is.
 - compiling contact numbers for local COVID-19 support and emergencies, e.g. dedicated hotlines, call centres, health authorities, nearest testing centre, public and private hospitals, etc., as applicable.⁶ These numbers must be readily available at strategic locations, including in vehicles.
 - initiating the business' response plan in the event of a suspected or confirmed case of COVID-19, including communicating with health authorities / medical personnel, as applicable.
 - monitoring updates made available by key government bodies and industry representatives regarding regulatory and risk context developments.

⁶ See Annexure B for a list of designated COVID-19 contact numbers available in the KAZA Partner States.

- engaging with suppliers and other business partners to confirm that they have similar COVID-19 risk management measures in place so as to ensure reasonable risk reduction across the tourism value chain and collaborate to reduce risk collectively.
- Procedures to ensure the effective implementation of the business' COVID-19 risk management strategy should be developed; these may include but are not limited to:
 - Operating capacity limits and protocols
 - Physical distancing plans
 - Staff procedures
 - GVPC procedures
 - Personal protective equipment (PPE) requirements and correct use
 - Infection prevention and control (IPC) per operational area
 - Response plan for suspected or confirmed cases of COVID-19
- All staff should sign the updated health & safety policies and procedures.
- COVID-19 risk management measures should be integrated into the business' existing health and safety management systems, if applicable.
- Management and supervisors must ensure that the COVID-19 risk management strategy is being adhered to throughout the operating environment.
- Records should be kept of training conducted, and cleaning and sanitising schedules as verification of the business' implementation of COVID-19 risk management strategy.
- Regularly monitor official requirements related to operating restrictions and ensure compliance, applying for necessary permissions to operate, if applicable.

Preparing the operating environment

- Designate main staff and GVPC entrances and set up necessary facilities, including those required for hand hygiene, registration (for contact tracing), and symptom screening.
- Ensure that hand washing / sanitising facilities are available in strategic front- and back-of-house locations.
- Set up “one-way systems” in back-of-house areas, where possible, designating doorways / openings as either entry or exit only.
- Ensure that staff changing rooms, canteens / similar, and office spaces are set up to allow for physical distancing.
 - Where necessary, post signage to indicate maximum number of staff to occupy the space at any given time.
- Ensure that an adequate supply of the required PPE is available on site.

Management of staff

- Limit the number of staff in the workplace by operating on the minimum staff complement required for business volumes.
 - Consider scheduling rosters that retain “fixed teams” in order to minimise the risk of virus transmission.
- Limit the number of staff in the workplace by allowing staff to work from home, where possible (e.g. a possible option for sales, marketing & reservations team members).
 - Where staff cannot work from home, investigate “live-in” options (i.e. staff staying on site), where possible.
- Provide private transport for staff, where possible.
- Where staff members have disclosed to the employer that they are in a higher risk category (e.g. if they have weakened immune systems or underlying medical problems like obesity, high blood pressure, heart and lung problems, diabetes, or cancer), identify lower risk operational areas in which they can work, avoiding close contact and high traffic positions.
- Conduct symptom screening of all staff, including freelance guides and outsourced drivers, for example, on arrival.⁷
 - Consider conducting more frequent temperature screening for customer-facing staff.
 - Temperature should be taken with a non-contact thermometer by an individual trained in thermal screening protocol.
 - Temperature should be recorded.
 - Staff with a temperature indicative of a fever⁸ should be refused entry to the premises and managed in accordance with the business’ response plan in the event of staff presenting with symptoms consistent with COVID-19. (*See section 7.5 Response plan guidelines.*)
 - Screening should also include a review of the most common symptoms associated with COVID-19.⁹
- All staff should be monitored to ensure they do not develop symptoms during their shift.
- Staff displaying symptoms consistent with COVID-19 must not report for work.
- Keep a daily register of staff who enter the operating premises in order to support contact tracing, should this become necessary.

⁷ An example of a staff screening template is provided in Annexure C.

⁸ Tourism businesses must apply the interpretation of “fever” as determined by the applicable Partner State Health Authority.

⁹ See Annexure D for a infographic of COVID-19 symptoms.

- Where required, submit this register to COVID-19 monitoring authorities.
- Shift changes and meal breaks should be managed to avoid congestion and congregation in back-of-house areas.
- Ensure that staff changing rooms are sanitised between shifts.
- Uniforms should be for use on site only and should not be worn outside of the workplace: staff should change into their uniform on arrival at the workplace, and out of it at the end of their shift before leaving.
 - Provide daily laundering of staff uniforms, if possible.

For additional guidance on preparing the workplace and staff management systems for a safe return to work, businesses may wish to consult the following:

- *World Travel & Tourism Council (WTTC) and Institution of Occupational Safety and Health (IOSH) guide to returning safely to work:*
www.iosh.com/returningsafely
- *International Labour Organization (ILO), Safe return to work: Guide for employers on COVID-19 prevention:*
https://www.ilo.org/actemp/publications/WCMS_744033/lang--en/index.htm

7.2. Staff Preparedness

Training

- All staff (including freelance / subcontracted individuals) should be trained in the following, at a minimum:
 - COVID-19 general awareness, including signs and symptoms;
 - Infection prevention and control measures for the operating context, including appropriate use of PPE and products; and
 - The business' response plan in case of staff or GVPCs presenting with symptoms consistent with COVID-19.
- Staff with higher risk duties should receive additional training, as appropriate for the tasks they are required to complete. These include guest room and vehicle cleaning, and laundry personnel.
- Training should be repeated on a regular basis to avoid lapses in the effective implementation of the business' COVID-19 risk management strategy.

Awareness

- Ongoing reminders regarding COVID-19 IPC should be provided for staff.
 - This may include daily briefings, displaying information posters, etc.
 - Consider electronic / virtual platforms, e.g. WhatsApp / similar, for communication to minimise in-person meetings.

Suppliers and delivery personnel

- All suppliers and delivery personnel should be made aware of IPC measures in place for the operating context prior to arriving at the site. This should include being made aware of their responsibility to adhere with these measures.
- Conduct thermal screening of all suppliers and delivery personnel on arrival.¹⁰
- Keep a register of all suppliers and delivery personnel in order to support contact tracing, should this become necessary.
 - Where required, provide this register to COVID-19 monitoring authorities.

7.3. Infection Prevention & Control (IPC)

Physical distancing

- One of the most effective ways to minimise transmission of the SARS-CoV-2 virus is to maintain a minimum distance between people. This “physical distance”¹¹ should be respected in the operating environment.
- Contact between staff members, and between staff and GVPCs should be avoided, wherever possible.
 - Introduce alternative greetings that do not require contact, e.g. waving, nodding, or respectful ‘bow’ with hands together.
- Where stipulated, legally prescribed capacity restrictions regarding business occupancy must be determined and respected.
 - Determined capacity limits should be displayed at the GVPC entrance / arrival / check-in / registration / boarding area.
 - Where capacity restrictions are not specified, occupancies must ensure adequate physical distancing between non-family/friend group members.

¹⁰ A staff / similar screening template is provided in Annexure C.

¹¹ See Annexure A for prescribed physical distance limits for each KAZA TFCA Partner State as well as those of selected global health authorities.

- Queue and crowd control measures should be implemented to ensure physical distancing is respected at the entrance to buildings and other areas where GVPCs may gather, e.g. vehicle / vessel boarding and disembarkation points, conference hall entrances, check-in counters, lifts, escalators, ticket purchase kiosks, food outlets, etc. These may include:
 - the use of floor / pavement markings, non-fabric cordons or similar;
 - requesting one person from each group/family should check-in on behalf of the whole party;
 - staggering registration / check-in (and check-out) times, where feasible, and / or;
 - positioning staff to roam areas where queues or crowds may form.
- Congestion and traffic may be further controlled by restricting access to the premises, e.g. to GVPCs and staff only.

Respiratory etiquette

- Staff should be encouraged to practice good respiratory etiquette: covering one's mouth and nose with a bent elbow or a tissue when coughing or sneezing.
 - Used tissue must be disposed of in a closed bin and wash / sanitise hands immediately.

General hygiene

- Staff should be encouraged to avoid touching their eyes, nose and mouth as there is a risk of virus transmission from surfaces they have touched.

Hand hygiene

- As an essential preventive measure, hand hygiene should be practiced by staff repeatedly throughout the day. Washing hands with soap and water / sanitising should be done when entering the premises at the start of a shift and frequently throughout the day, including but not limited to the following:
 - After visiting the restroom for any reason;
 - After sneezing, coughing, scratching or touching any part of one's head or face;
 - After breaks, eating, chewing gum, drinking, or smoking;
 - Before and after handling any raw food;
 - Before and after preparing any food item;
 - Before setting and after bussing any tables;
 - Before putting on and after removing gloves and other PPE;
 - After handling laundry, cash, or waste.

- Hand hygiene facilities should be available throughout the operating area; these may include but are not limited to reception counters, in public bathrooms, at entrances to F&B outlets and kitchen areas, at lifts, at entrances to meeting / conference rooms and exhibition halls, at vending machines, in vehicles, on board boats, at gambling tables and counters, during market visits / artisan interaction, etc.
- Hand hygiene facilities must be equipped with potable water and soap, or sanitiser with a minimum 70% alcohol content.
 - Where soap and water are provided, no-touch air dryers or natural air drying may be used to dry hands. Alternatively, disposable paper towels should be provided. Businesses are encouraged to procure sustainably-sourced paper towels (e.g. FSC-certified / similar) in consideration of the additional waste generated.

PPE & products

- Appropriate PPE to be provided, including face masks for all staff members.
 - If possible, a minimum of 3 re-usable face masks may be provided to each staff member, enabling them to use one per shift (while the other 2 – or more – are being aired out). This would result in rotating through their set of masks over at least a 72-hour period and reduce related risk of virus transmission.¹²
- Face masks must be worn correctly at all times.¹³ This includes all staff and freelance / subcontracted individuals, suppliers and delivery personnel, and GVPCs.
 - Exceptions may include when an individual is eating or drinking, when guests are in their bedroom, or when GVPCs are in family/friend groups exclusively (e.g. in a private vehicle or an area away from other people).
- Anyone not wearing a mask should be refused entry / access / participation.
- Spare face masks should be available in the event that a GVPCs does not have her/his own.
- Provision of additional PPE, such as disposable gloves¹⁴, face shields / goggles, etc., must be provided as may be required for specific tasks or positions.

¹² "Recent publications have evaluated the survival of SARS-CoV-2 on different surfaces. According to van Doremalen et al., the environmental stability of SARS-CoV-2 is up to three hours in the air post-aerosolization, up to four hours on copper, up to 24 hours on cardboard and up to two to three days on plastic and stainless steel." WHO website, accessed 10 Feb 2021

¹³ A communication tool from the World Health Organization regarding how to wear a non-medical fabric mask safely has been provided in Annexure D: Communication resources.

¹⁴ Disposable gloves are considered ineffective for the prevention of virus transmission and are, therefore, not recommended as a personal protective measure against COVID-19. Their use may further lead to inadequate hand hygiene and increased contamination of surfaces. (ECDC, July 2020) Disposable gloves may, however, be used for general hygiene reasons for certain tasks such as cleaning guest and public bathrooms, cleaning

- PPE for disinfection processes (in non-healthcare settings): rubber gloves, impermeable aprons, closed shoes. Eye protection should be provided in case of risk of splashing.¹⁵
 - PPE for staff providing service to GVPs who are in isolation because they present with symptoms consistent with COVID-19 should include goggles or a face shield, a surgical face mask, a disposable isolation gown and disposable gloves.
- Consider installing transparent panels (e.g. plexiglass/ similar) and / or face shields as additional protective measures for staff who are in frequent, close proximity to GVPs, e.g. reception, cashiers, drivers, etc.
- Enhanced cleaning and sanitising may make use of standard cleaning products.¹⁶
- Disinfection processes must use suitable chemical products, including bleach- and alcohol-based options, or other products approved by local health authorities.¹⁷
 - Staff must be trained in the safe management of chemicals used for disinfection, including awareness of any hazards related to their storage, use, handling, and disposal.
- Disposal of PPE and any other waste that may be contaminated must be collected separately in biohazard containers or plastic bags that can be closed securely, and which can be easily distinguished (visually) from other waste types. These must be then be safely disposed of as hazardous waste.
 - Where hazardous waste facilities are not readily available, waste bags should be kept for 72 hours and only then disposed of.

Ventilation

- Increasing the number of air exchanges per hour and supplying as much outdoor air as possible is recommended in order to reduce the potential viral load in indoor spaces. This may be achieved either by natural or mechanical ventilation, depending on the establishment.

vehicles, food handling, washing dishes and laundry, when using harmful chemicals for disinfection (e.g. bleach), and waste handling.

¹⁵ Cleaning and disinfection of environmental surfaces in the context of COVID-19, WHO, July 2020

¹⁶ Disinfecting surfaces for coronavirus: Does it reduce infection?, UK Research and Innovation, July 2020. SARS-CoV-2 is an enveloped virus and therefore is sensitive to common detergents and disinfectants effective against viruses. Standard detergents can be used to clean frequently-touched surfaces (e.g. door handles, banister rails, buttons, wash rooms, buses, etc.), ECDC, 2020

¹⁷ In settings where there are patients with COVID-19 (healthcare or home care), decontamination of surfaces with diluted household bleach, or other disinfectants active against viruses, is recommended after regular cleaning [117], ECDC, 2020.

- Heating, ventilation and air-conditioning (HVAC) filtration systems should be cleaned and serviced regularly to ensure they are operating correctly. Filters should be cleaned and replaced according to manufacturer's instructions.
 - Where possible, make use of high efficiency particulate air (HEPA) filters to minimise virus circulation (similar to airplanes).

Cleaning, sanitising and disinfection

- Implement well-defined COVID-19 cleaning, sanitising, and disinfection procedures for staff to adhere to. Procedures should refer to
 - regular¹⁸ cleaning (removed of visible dirt / similar) and sanitising requirements of all operational areas, including front- and back-of-house;
 - more frequent sanitising of high touch surfaces (to be determined based on footfall/ business volumes and contact frequency); and
 - disinfection.
- Identify high touch surfaces in the operating context and ensure that these are sanitised frequently throughout the day and after GVPC use. Common high touch surfaces include:
 - pens at reception/ check-in/ registration; these should be sanitised in front of guests before and after use
 - credit / debit card machines
 - key cards and room / locker keys
 - reception counters
 - hand rails
 - elevator buttons
 - vending and ice machines
 - printers
 - computer keyboards and mouse, including in business centres / similar where equipment may be used by multiple GVPCs
 - door handles
 - light switches
 - all surfaces in public bathrooms
 - chairs (especially arm rests)
 - and other frequently touched surfaces / objects specific to the operating context (see section 8 for operations-specific examples).

¹⁸ "Regular" is defined as at least daily by the WHO, ECDC and CDC. The World Health Organization suggests "at least twice daily" in healthcare settings., WHO, July 2020

Reduce high touch surfaces & usage areas

- Limit the number of high touch surfaces in the operating context as much as possible. Some opportunities include:
 - Offering contactless services such as advance and / or online bookings, online check-in/ registration, digital payment such as pre-payments, EFTs or Snapscan / similar, contactless check-outs, etc.;
 - Providing information in advance by digital means;
 - Keeping entrance and exit doors open (or automatically opening), where possible;
 - Remove valet parking services;
 - Office environment desks and chairs should be spaced apart, and unused items removed, where possible.
- When assessing risk related to high touch surfaces in rooms, F&B outlets, etc., carefully consider the balance between minimising risk of virus transmission and creating waste unnecessarily. Providing single-use/disposable items does not reduce the risk of virus transmission since single-use plastic, for example, presents the same potential for surface contamination as a re-usable item. Both present risk, but both can be sanitised to reduce that risk.¹⁹
- Remove all non-essential decorative and ‘shared’ items from communal areas. These may include:
 - Brochures, magazines and newspapers
 - Cushions
 - Vases
 - Games
 - Rugs
 - Curtains and blinds
- Areas that are not in use should be locked / access restricted to reduce cleaning, sanitising and disinfection requirements.

7.4. Guest / Visitor / Passenger / Client (GVPC) Management

Pre-arrival

- Advance bookings and the use of digital platforms to submit necessary information in advance should be encouraged. This will expedite registration/check-in procedures, ensuring that the contact period is minimised.

¹⁹ For more information, refer to [Recommendations for the Tourism Sector to Continue Taking Action on Plastic Pollution During COVID-19 Recovery, UNWTO, 2020](#)

- GVPCs should be advised in advance of the availability of travel information, payment options, etc through a digital platform, as applicable.
- GVPCs should be advised in advance of COVID-19 protocols in place so that they are aware of the requirements and are prepared, e.g. bring their own face mask and water bottle.
- GVPCs should be advised in advance of current advisories and regulations in place from health authorities / similar, including requirements for face masks and physical distancing in public.

On arrival

- Priority service should be provided to individuals who can be visibly identified as higher risk (or who have identified themselves as such), e.g. the elderly.
- Ensure that GVPC register is completed with sufficient personal information to facilitate contact tracing, should this become necessary.
 - This should include the GVPCs full name, date(s) of visit / stay, and local contact number (at a minimum). The register may also capture a GVPC's residential address, date of birth or passport / ID number, and email address.²⁰
 - The above information may be obtained in advance and simply verified on arrival to minimise contact time.
 - Information obtained must be treated with utmost confidentiality and only used for the purpose for which it was obtained.
 - Where required, submit this register to COVID-19 monitoring authorities.
- All GVPCs to wash their hands with soap and water / sanitise before entering the operating premises.
 - Staff may administer sanitiser for enhanced control or GVPCs may do it themselves. Automated or foot-activated dispensers may be used for contactless sanitiser dispensing.
- All GVPCs should undergo symptom screening on arrival, which includes thermal screening with a non-contact thermometer by an individual trained in thermal screening protocol.
 - Temperatures should be recorded.
 - Screening desk may be set up separately from reception/ check-in/ registration areas to avoid congestion.

²⁰ A GVPC register example is provided in Annexure C.

- Where a GVPCs presents with a temperature indicative of a fever,²¹ implement the business' response plan. (See *Section 7.5 Response plan guidelines*.)
- GVPCs should be made aware / reminded of COVID-19 protocols in place and measures that GVPCs are expected to adhere to, as well as contact numbers for COVID-19 health services. This may include:
 - Providing signage at entry points (which will ensure awareness for any GVPCs who did not make advance bookings).
 - Providing a COVID-19 'induction' for GVPCs.
 - Providing signage at key GVPC locations in the operating environment. This may include in guest rooms, at reception areas, in meeting / conference rooms, in lifts, on seat backs of coaches, etc. depending on what is appropriate for the operating context.

During the stay / experience

- Where the tourism and hospitality experience / stay is longer than one day, GVPCs may be monitored on an ongoing basis for symptoms that are consistent with COVID-19.
 - This should follow the same procedure as arrival screening, including recording of GVPC temperature.
 - Symptom screening should be at least daily and may be done more frequently, e.g. twice a day at dining times.

On departure

- Where the tourism and hospitality experience / stay is longer than one day, GVPCs may be screened on departure for symptoms that are consistent with COVID-19. These should follow the same procedure as arrival screening, including recording of GVPC temperature.

7.5. Response plan guidelines

In the event that a GVPC or staff member presents with symptoms that are consistent with COVID-19, the business' corresponding response plan must be initiated in accordance with national directives. Guidelines reflecting provisions of the KAZA TFCA Partner States and that are aligned with regional and global recommendations, are below.²²

²¹ *Tourism businesses must apply the interpretation of "fever" as determined by the applicable Partner State Health Authority.*

²² *Response plan guidelines draw largely on the recommendations reflected in Tourism & Hospitality Industry Standard Protocols for COVID-19 Operations, Tourism Business Council of South Africa (TBCSA), 1 Oct 2020.*

General

- The designated individual responsible for initiating the business' response plan in the event of a suspected or confirmed case of COVID-19 must be familiar with the response plan in its entirety, including the contact numbers for the applicable emergency and medical COVID-19 contacts in the destination.
- A separate room(s) should be designated for the isolation of symptomatic individuals while the business' response plan for suspected cases of COVID-19 is being set in motion. The designated room should be set up with all non-essential items removed in order to minimise contact surfaces.
 - In the case of mobile safaris, a separate isolation tent should be available for GVPCs and another for staff, should either or both present with symptoms consistent with COVID-19 while on safari.
 - In the case of meetings, incentives, conferencing, and exhibitions (MICE) and attractions, an isolation unit should be established outside of the venue for individuals displaying symptoms consistent with COVID-19, where possible.

GVPCs who present with symptoms consistent with COVID-19

- When a GVPC has not yet entered the operating site, s/he should be asked to return home and contact her/his doctor or other healthcare professional.
 - Where this is not possible, the GVPC should be isolated from other GVPCs and staff in the designated isolation room.
 - Where an isolation room is not available, the GVPC should be taken to a designated COVID-19 quarantine establishment / facility.
 - If symptoms are already severe, a medical professional should be consulted immediately.
 - Should transport be required, the driver must wear PPE for the duration of the transfer and, thereafter, the vehicle sanitised and disinfected as required for suspected or confirmed cases.
- When a GVPC develops symptoms during their stay / experience, s/he should be isolated from other GVPCs and staff in the designated isolation room and their symptoms monitored, including their temperature being recorded multiple times per day.
 - GVPCs must remain in isolation, single occupancy and not share any facilities such as ablutions.
 - If symptoms are severe, worsen, or persist more than one day, a medical professional should be consulted and their advice followed.
 - Medical advice may include referring the GVPC for a COVID-19 test; having the GVPC examined by a medical doctor (either in the isolation room, or being transported to a facility); continuing

isolation and monitoring the GVPC's symptoms; or referring them to a hospital for admission.

- Staff contact with GVPCs in isolation should be minimised.
 - Any staff member who does provide care or service (e.g. meal delivery) must use PPE at all times, and discard or disinfect the PPE (as appropriate) after each use.
 - See 7.3 IPC, PPE & Products for suggested minimum PPE to be used.
- Other operational areas that the GVPC may have occupied should be vacated and closed off to other GVPCs. The area(s) should undergo a thorough sanitising and disinfection process (i.e. "deep cleaning").

Cleaning requirements for suspected and confirmed cases

- Where a GVPC is suspected of, or confirmed as, having COVID-19 all rooms, vehicles, equipment, etc. with which they may have had contact should undergo a thorough sanitising and disinfection process.
 - If possible, allow 72 hours prior to commencing with the sanitising and disinfection process to minimise traces of the virus. At a minimum, ventilate the room / vehicle for at least 1 hour prior to commencing with the sanitising and disinfection process.
 - Windows and doors should be left open during the sanitising and disinfection process to allow for maximum ventilation.
 - Sanitise all surfaces with soap and water (or other conventional cleaning product) first.
 - Surfaces should then be disinfected with a bleach- or alcohol-based solution, or similar product approved by local health authorities for COVID-19 disinfection purposes. Care must be taken to prepare and use disinfectants according to the manufacturer's specifications so as to ensure their efficacy and avoid risks to staff and environmental health.
 - Staff must wear PPE as required for use of the sanitising and disinfection chemicals (refer to Material Safety Data Sheets – MSDS and section 7.3 IPC, PPE of these guidelines).
 - Safely dispose of cleaning products and PPE so as to not put human or environmental health at risk.
 - PPE, cleaning materials and any other waste must be collected separately in biohazard / sealable plastic bags that can be visually distinguished from other waste types. These must be then be disposed of safely as hazardous waste.
 - Where hazardous waste facilities are not readily available, waste bags should be kept for 72 hours and only then disposed of.

- Individuals who did not come into contact with the suspected or confirmed case may access the premises 24 hours after the sanitising and disinfection process has been completed.
- Staff who have interacted with a GVPC (or areas of the operating site that s/he occupied) who tests positive for COVID-19 should go into self-isolation for 10 days and monitor themselves for symptoms consistent with COVID-19.
 - Where possible, staff members (as referred to above) should be tested for COVID-19 before returning to work.

Staff members who present with symptoms consistent with COVID-19

- If a staff member presents with symptoms consistent with COVID-19 but has not yet entered the premises, s/he should be asked to return home and contact their doctor or other healthcare professional.
 - Should transport be required, the driver must wear PPE for the duration of the transfer and the vehicle sanitised and disinfected as required for suspected or confirmed cases.
 - The designated person who is responsible for managing COVID-19 communication should check on the staff member's progress (telephonically) on a regular basis.
- If the staff member develops symptoms consistent with COVID-19 while on shift, they should be isolated in a separate room.
 - If the staff member has severe symptoms such as shortness of breath and a fever, the designated public health helpline / contact centre should be contacted immediately and their instructions implemented.
- Thoroughly sanitise and disinfect the work stations used by the affected staff member.
- Where a staff member test positive for COVID-19, all staff on shift with her/him should self-isolate for 10 days and monitor themselves for symptoms consistent with COVID-19.
 - Where possible, all staff should be tested for COVID-19 before returning to work.

8. OPERATIONS-SPECIFIC GUIDELINES

Some operating environments in tourism and hospitality will require the implementation of measures that address risks that are specific to this context. Related guidelines are provided below to assist in related risk identification and management.

8.1. Accommodation

“Accommodation” includes but is not limited to hotels, country houses, guesthouses, B&Bs, lodges, self-catering, camping / caravan parks, and backpackers / hostels.

- Apply the “Generally Applicable Guidelines for Tourism and Hospitality”

Luggage handling

- An area outside the entrance of the establishment should be dedicated for luggage to be sanitised.
- Staff contact with luggage should be minimised prior to it being sanitised.
- High touch surfaces of the luggage, e.g. handles, should be sanitised.²³ NB This is not required if GVPCs handle their own luggage.
- Staff who handle luggage should wash / sanitise their hands immediately before and after doing so.

Guest room décor & amenities

- All non-essential decorative and ‘shared’ items in rooms should be removed. This may include: cushions, rugs, curtains / blinds, decorative throws, magazines, books, etc.
- Extra blankets should be removed from rooms and made available on request only.
- Room amenities may be managed as follows:
 - Provide an amenity ‘pack’ at check-in, or on request only.
 - Basic hygiene amenities, e.g. soap, shampoo, etc. may still be provided in bulk dispensers, and be subject to the room sanitising process on check-out.
- Mini bars should be left unstocked, or stocked with requested items only.

Guest room servicing

- Rooming of guests should be limited; rooming should only be offered to guests who require additional assistance due to disability or other reason.

²³ *The chemicals in disinfecting sprays / similar may damage some luggage materials and should be avoided, whereas sanitising requires less harmful products and is still deemed effective for COVID-19 risk prevention, ECDC, 2020.*

- Turn down service should be temporarily discontinued.
- Staff should not enter a room where guests are present.
- Frequency of guest room servicing and linen change should be reduced to minimise risk to staff through contact with contaminated objects / surfaces.²⁴
- Apply enhanced cleaning and sanitising of guest rooms upon check-out.
 - Allow ventilation of a check-out room before staff enter for cleaning (or any other) purposes for up to 72 hours to minimise risk of virus transmission, where possible.
- Guest room windows should be kept open during room cleaning, if possible.
- Exercise caution when using vacuum cleaners as they can cause contaminated particles to become airborne, thus presenting increased risk to cleaning teams. It is recommended to fit vacuums with HEPA filters, where possible.
- Staff use of PPE when cleaning guest rooms should be strictly enforced.
- High touch surfaces in guest rooms should be thoroughly sanitised. These may include:
 - Phones, remote controls, kettle, amenity containers, curtain pulls, door handles, light switches, wall surfaces close to beds and seating areas, arm rests of chairs / sofas, etc.
- Housekeeping trolleys / similar should be stocked with minimal supplies; only the essentials. Items remaining at the end of the shift should be sanitised, as should the trolley / similar.
- Housekeeping / cleaning staff should wash / sanitise their hands before entering and upon exiting a guest room.
- Dishes from the tea/ coffee tray should not be washed by housekeeping but taken to the scullery department for washing in line with normal dish washing and sanitising procedures.

Laundry

- Staff use of PPE when handling laundry, e.g. linen and towels, should be strictly enforced.
- When linen and towels are removed, care should be taken to not shake them out.
 - Used linen should be placed in a plastic bag that can be closed securely immediately upon removal from bed / bathroom for transport to laundry facilities.

²⁴ [What Hotel, Resort and Lodge Workers Need to Know About COVID-19, CDC, updated 12 Nov 2020](#)

- Consider making a plastic laundry bag available for GVPCs to deposit their dirty linen, minimising the housekeeping team's contact with it.
- If possible, place laundry bag aside (closed) for 72 hours to reduce risk of virus transmission.
- When ready for washing, laundry should be placed directly from the laundry bag into the washing machine.
- Launder with detergent and according to fabric care instructions.²⁵
- Staff should wash / sanitise hands immediately after handling laundry.
- Clean linen should not be brought into rooms until the sanitising and disinfection process has been completed.
- Care should be taken to ensure that dirty and clean linen do not come into contact with each other, e.g. on the housekeeping cart, during transport to laundry, or in laundry or storage areas.
 - Storage of clean linen should be in a closed room / closet / container.
 - Clean linen should be transported in a closed container to prevent contamination.

Room service

- Room service may be encouraged in order to minimise GVPC contact in restaurants.
- If offered, room service should be contactless. The following procedure may be applied:
 - Room service tray/ trolley to be placed outside guest room door, staff member to knock / ring to alert the guest of room service arrival and then step back to ensure physical distancing from the guest. Once guest retrieves tray/ trolley, staff member may leave and must wash / sanitise their hands immediately.
- Room service meals should be protected with a cover from the time they are plated to when they are delivered.
- Room service equipment should be sanitised before and after each service.

Dormitory rooms

- Dormitory style bedrooms where non-friend/family group members are sharing the same room should ensure that adequate physical distancing is possible. One measure to achieve this could be by allocating only 1 bed per bunkbed unit.

²⁵ When detergent is used, washing temperatures indicated on the fabric care label are acceptable. In the absence of laundry detergent, items must be laundered at temperatures in excess of 56°C in order to be effective against SARS-CoV-2 (or soaked in a diluted bleach solution). UKRI, 2020

Self-catering units

- A system should be implemented whereby GVPCs are assured that cutlery and crockery (e.g. utensils, plates, bowls, glasses, pots and pans) have been sanitised (see F&B section for dish washing guidelines). Examples include:
 - Provide cutlery and crockery in a closed container with a label indicating the date it was sanitised, and issue the container to GVPCs at check-in.
 - Provide above in self-catering units on check-in day, prior to GVPC arrival.
 - Above should include laundered washing up cloths and drying towels (where these are normally provided).
 - The above does not include appliances, which may be cleaned and sanitised as a high touch surface in rooms upon every guest check-out.

Camping and caravan parks

- Individual campsites should be occupied by members of the same friend/family group only.
- Communal areas should be for resident use only, unless physical distancing can be maintained.
- Communal ablution facilities should be managed to minimise contact and support physical distancing requirements. Options to achieve this may include:
 - implementing a roster to schedule ablution use
 - schedule should provide sufficient time between slots to allow for cleaning and sanitising
 - access by GVPCs should not be permitted during cleaning and sanitising
 - allocating a basin and shower or private ablution to each campsite, where possible
- Communal cooking and scullery facilities may operate on a similar basis to the above.
 - Where space permits, working areas may be demarcated and allocated per camping group.

8.2. Activities

Activities include but are not limited to rafting/ canoeing/ mekoro and other boat-based excursions, helicopter / scenic flights, game drives, walking safaris, quad biking, horseback riding, filming & photography, and cultural interactions.

- Apply the “Generally Applicable Guidelines for Tourism and Hospitality”.

General

- Smaller groups, e.g. friend/family groups travelling together, should be encouraged.
- Consider limiting the duration of activities to reduce contact time.
- Activity start times should be staggered to provide intervals between groups, avoiding congestion.
 - Coordinate with other activity providers in the area to ensure staggered times at locations where overlap may occur, e.g. where the same put-in point for boat-based activities is used by multiple companies.
- One person from each group/family should collect tickets / check-in on behalf of the whole party.
- Extra time for collection of necessary gear should be provided so that physical distancing can be maintained.
- Safety briefings should be conducted in open areas or outdoors, maintaining physical distancing between non-family/friend group members throughout.
- Mixing of non-family/friend group members in activities should be avoided. If mixing non-family/friend group members cannot be avoided, adequate physical distancing should be maintained between the respective groups.
- Vehicles / vessels and all equipment used for the activity should be sanitised before every use, with emphasis on high touch surfaces.
- Activity participants should be provided with hand washing facilities / sanitisers before and after the activity, and before and after refreshment / meal breaks, if applicable.
- Activity operator should ensure adequate waste disposal facilities are available and that waste is disposed of safely.

Rafting / Canoeing/ Mekoro excursions

- Rafting: trip participants numbers should be kept low as per minimum technical weight recommendations for the raft. In consideration of physical distancing, a maximum of 6 passengers is recommended; where participants are from the same friend/family group, this may be increased to a maximum of 7 passengers per raft. Larger friend/family groups should be split across more rafts, where feasible.
- Guides should ensure that physical distancing is maintained for the duration of the excursion.
- Where there is a risk of falling in the water, the wearing of face masks may present a safety hazard and is not advised.
- All equipment and boats/ rafts/ mekoros should be sanitised before and after every use, focusing on high touch surfaces, e.g. life jackets, helmets, paddles, poles, flotation devices, gunnel/ gunwale/ sides, etc.

- Multi-day trips should be avoided.

Other boat-based excursions (e.g. river cruises, fishing, etc.)

- Dining tables should be positioned to ensure adequate physical distancing between non-family/friend group members.
- Excess décor and high touch surfaces should be removed, e.g. table mats.
- All equipment and the vessel should be sanitised before and after each trip, focusing on high touch surfaces, e.g. fishing equipment, tackle, hand railings, tables, chairs, bar counters, etc.
- All meals / snacks should be plated (or boxed / similar) per passenger.
- Onboard sanitation facilities should be sanitised at least every 30 minutes, focusing on high touch surfaces, e.g. door and toilet handles, taps, etc.

Helicopter / scenic / inter-camp flights

- Aircraft cabin and all equipment, including vents, should be sanitised before and after each flight, focusing on high touch surfaces, e.g. headsets, safety belts, instrument panels, door handles, windows, etc.
- Binoculars, if available, should be sanitised before each flight and not shared outside of the friends/family group.
- Sanitisers should be made available throughout the flight.

Quad biking

- Quad bike capacity must respect prescribed vehicle occupation limits.

Game drives

- GVPCs should be informed of digital versions of wildlife, bird, and other nature guides available for download prior to game drive departure. These may then be referenced on their personal electronic devices.
- Physical distancing between non-family/friend group passengers should be respected on vehicles. This may be achieved by providing a visible indication of seats to be left vacant.
- Guest ponchos and blankets should be allocated to each guest for the duration of their stay and laundered on guest check-out / departure.
- All equipment and vehicle should be sanitised before each drive, focusing on high touch surfaces, e.g. seats, safety belts, door handles, roll bars, food and drink containers, etc.
 - GVPC binoculars, if available, should be sanitised before each drive and not shared outside of the friends/family group.
 - Guide/ ranger binoculars – a guide / ranger ‘tool’ – should be sanitised before each drive and not shared.

- Food and beverage containers should be sanitised before each drive.
 - Individual snack packs may be considered as the preferred option for refreshment breaks. Shared snacks should not be provided.
 - Guests may be requested to open their beverage containers to further minimise the risk of virus transmission.

Walking safaris

- GVPC binoculars, if available, should be sanitised before each walk and not shared outside of the friends/family group.
- Guide / ranger binoculars – a guide / ranger ‘tool’ – should be sanitised before each walk and not shared.
- Guiding / ranger staff should ensure that physical distancing is maintained during the walk.

Horseback riding

- All equipment should be sanitised before and after each ride, focusing on high touch surfaces, e.g. saddle, bridle, etc.

Hunting

- All hunting equipment should be sanitised before and after each hunt, focusing on high touch surfaces, e.g. firearms, gun cabinets, skinning equipment, skinning shades, etc.
- Food and beverage containers should be sanitised before each hunt.
 - Individual snack packs may be considered as the preferred option for refreshment breaks. Shared snacks should not be provided.
 - Guests may be requested to open their beverage containers to further minimise the risk of virus transmission.

Engaging with host communities

- Venue capacity (if any) and physical distancing, including no contact, must be respected.
- Participants must adhere to face mask requirements throughout the engagement.
- Staff must adequately monitor COVID-19 IPC measures to ensure they are respected.

Film & photography (i.e. professional crews)

- Extension microphones may be provided for interviews to ensure that physical distancing is respected.
- All equipment should be sanitised before and after each shoot, focusing on high touch surfaces, e.g. cameras, tripods, makeup tools, etc.

- Sharing of equipment should be discouraged, and wipes should be provided in the vehicle in case disinfection is required in the field.
- Food and beverage containers should be sanitised before each photography/filming outing.
 - Individual snack packs may be considered as the preferred option for refreshment breaks. Shared snacks should not be provided.
 - Guests may be requested to open their beverage containers to further minimise the risk of virus transmission.

8.3. Attractions

“Attractions” include but are not limited to amusement/ theme parks, golf courses, national parks/ nature reserves, and wildlife sanctuaries and interactions.

- Apply the “Generally Applicable Guidelines for Tourism and Hospitality”.

General

- Consider offering virtual guiding platforms for attractions, where available and appropriate.
- Smaller group tours, e.g. friend/family groups travelling together, should be encouraged.
- One person from each friend/family group should collect tickets on behalf of the whole party.
- Queuing areas should be managed to ensure that physical distancing is respected. This may include providing spacing guidelines / similar on the floor / pavement in areas where queues are most likely to form.
- Crowd flow should be managed to ensure physical distancing. This may include designating a single entry and a single exit, where possible.
 - Where this is not possible, entrance and exit should be supervised by staff to ensure physical distancing is respected.

Wildlife sanctuaries and interactions

- Although there is little conclusive research regarding transmission of SARS-CoV-2 from humans to animals, consideration may be given to temporarily discontinue contact with animals, where applicable, especially in the case of contact with endangered species.

8.4. Food and Beverage (F&B)

- Apply the “Generally Applicable Guidelines for Tourism and Hospitality”.

General

- F&B business may restrict the duration of dining times to minimise contact time.
- Outdoor dining venues should be used, where possible.
- Tables and chairs should be spaced to ensure that physical distancing is respected.
 - Excess tables and chairs/ stools should be removed.
- Servers are the only staff members who should engage with guests at their tables.
 - Servers should ensure they maintain the prescribed physical distance between themselves and guest dining tables whenever possible.
- Appropriate measures should be applied to minimise risk of virus transmission through contact with menus. These may include:
 - Write the menu of the day on a chalkboard(s) that can be seen from tables, or on a mobile board that can be placed at tables for contactless viewing
 - Use digital menus
 - Use laminated menus, which should be sanitised after each use
 - Provide “souvenir” menus that GVPCs can take home with them, perhaps even signed by the chef
 - Use disposable menus (consider sustainably-sourced options, e.g. FSC-certified paper, to compensate for the increased waste generated)
- Tables and chairs should be cleaned and sanitised after each use.
- Table condiments should be minimised.
 - Essential dining table items, e.g. salt and pepper dispensers, should be sanitised after each use.
- Table décor should be minimised.
 - If tablecloths or cloth napkins are used, they should be washed (in accordance with the fabric care label) after each use.
- Buffet service may be temporarily suspended and replaced with table service, where possible.
 - Where buffet service is retained, self-service opportunities must be restricted; service of food portions and beverages should be provided by staff only.

- Physical distancing between non-family/friend group members and wearing of face masks by all guests must be respected at the buffet.
- General principles of good food hygiene should be applied, with COVID-19 specific prevention measures including physical distancing, good personal hygiene and frequent hand washing / sanitising.²⁶
- Physical distancing must be respected in the kitchen, scullery and food storage areas.
 - If necessary, consider simplifying menus to reduce kitchen production line processes and, therefore, congestion in the kitchen.
 - Kitchen and scullery work stations may be demarcated to assist with physical distancing requirements. Kitchen staff should be encouraged to work within their demarcated station as much as possible.
- Staff should wash their hands thoroughly with soap and water before handling any food items.
- Dish washing procedures should include a high temperature sanitising stage, as per normal good hygiene practices.
- Surfaces and equipment in the kitchen, scullery and food storage areas should be sanitised frequently; this included prep counters, fridge handles and doors, appliances, and other equipment.
- Care should be taken if food portions are offered in individual packaging, i.e. wrapped in cling/ plastic film, as this does not offer improved protection against virus transmission; the wrapping itself becomes the high contact surface.
 - If individually wrapped portions are offered, the packaging of unused portions should be sanitised before unpacking and returning the food item to storage.

8.5. Travel Agencies & Tour Operators

- Apply the “Generally Applicable Guidelines for Tourism and Hospitality”.

General

- Consultations with GVPCs should be telephonic / online only; walk-in and in-person consultations should be temporarily discontinued.
- Be familiar with where local travel restriction announcements²⁷ are made, including Port of Entry requirements, and review these daily.

²⁶ Currently, there is no evidence to support transmission of the COVID-19 virus via food. Physical distancing, good personal hygiene with frequent hand washing, and application of general food hygiene measures are the most important precautions food workers should adopt. WHO, 2020

²⁷ See Annexure B for travel restriction and Port of Entry requirement announcements.

- Be familiar with destination and source market COVID-19 status to enable client engagement from an informed position and planning of sales strategies accordingly.
- A list of airline contact details should be compiled in the event of changes in travel restriction status for travellers who may be in transit or whose arrival/departure may be imminent.
- Ensure that travellers have requisite / recommended travel insurance in place, including COVID-19 / comparable clauses.
- Smaller group tours, e.g. friend/family groups travelling together, should be encouraged.
- Activity areas where local communities might be put at increased risk should be reviewed to ensure that appropriate risk management measures are implemented. This might include engaging with community partners directly to ascertain whether activities should be temporarily suspended or how these may be offered in a manner that minimises risk to all parties.
- Inclusion of sites where higher GVPC density may be an issue, e.g. more popular attractions and activities, should be reviewed. Investigate whether these may be visited at less popular times, or whether they may be replaced by lesser known attractions. The latter also provides an opportunity to distribute the benefits of tourism spend more broadly and create more awareness of the lesser known parts of the destination.
- Terms and conditions regarding cancellations and refunds should be updated and communicated to all GVPCs.

8.6. Venues

Venues include but are not limited to casinos, gyms and spas, swimming pools, tourist sites such as information centres, heritage sites and museums, MICE, and retail outlets such as curio shops.

- Apply the “Generally Applicable Guidelines for Tourism and Hospitality”.

General

- Queue management measures should be implemented to ensure that physical distancing is respected at the entrance to venues and other areas where queues may form, e.g. venue food outlets. This may include floor / pavement markings, non-fabric cordons or similar.
- Where possible, a single entrance and single exit may be designated for venues to manage crowd flow and ensure physical distancing.
 - Where this is not possible, venue entrance / exit should be supervised by staff to ensure physical distancing is respected.
- Prior to cleaning and sanitising, increased ventilation of rooms / venues should be allowed for at least one hour (and up to 72 hours) after GVPCs have vacated to minimise the risk of virus transmission.

MICE (meetings, incentives, conferencing, exhibitions)

- National regulation regarding the maximum number of persons allowed per gathering must be adhered to.
- Where the MICE event demands a higher number of delegates than permissible country thresholds, consider hosting events on virtual platforms. This may even grow / diversify the participant market by affording participation to delegates who are unable to travel.
- The duration of MICE events may be limited to minimise contact time.
 - Tea/ coffee/ meal breaks should be scheduled to allow for frequent sanitising of high touch surfaces and ventilation of the space.
- Venue space should be thoroughly sanitised before and after use.
 - High touch surfaces should be sanitised during delegate tea/ coffee/ meal breaks; e.g. chairs, door handles, etc. and after use, e.g. microphones and podiums, as applicable.
- Shared items, such as water pitchers and mint bowls, should be replaced by individual servings.
- Non-essential décor should be removed from the venue and meeting accessories, e.g. pens and paper, should be provided on request only and kept by delegates after the event.
 - Pens left behind should be sanitised and paper disposed of responsibly.
- Cocktail events should be avoided.
 - Where a cocktail event is held, physical distancing should be respected throughout.

Information centres & other tourist sites, e.g. heritage attractions, museums

- Provide digital brochures or other e-guides/ similar that may enhance the visitor experience, where possible.
- A physical barrier, e.g. partition / similar, may be placed in front of interpretive displays to prevent visitors from touching them.
- Sanitation facilities should be sanitised frequently (e.g. at least hourly, or more frequently during busier times) focusing on high touch surfaces, e.g. door and toilet handles, taps, etc.

Casinos

- Machines and chairs should be spaced apart to ensure that physical distancing is respected.
 - Machines that cannot be moved should be locked / turned off to prevent their use.
 - Extra chairs should be removed.

- GVPCs should be discouraged from congregating around gaming and food service areas.
- High touch surfaces should be sanitised at least daily and between each use as much as possible.²⁸ This includes dice, chips, machine handles/instrument panels, chairs, trays at security scanners, etc.
 - Items that are difficult to sanitise, e.g. cards, should be held for 72 hours before reuse.
- Eating and drinking at tables should be discouraged.
- Hand washing / sanitising facilities should be available throughout the venue.
 - Staff may circulate through the floor to dispense hand sanitiser to clients.

Swimming pools

- Swimming pools should be maintained as per normal, with careful monitoring of adherence to chlorine / similar anti-bacterial treatment schedules.
- The maximum capacity of the swimming pool should be determined, based on the prevalent physical distancing requirements.
 - Signage should be displayed to inform users of capacity restrictions.
- Physical distancing between non-family/friend group members must be respected both in the swimming pool and when entering and exiting it.
 - Signage and staff presence may be used to reinforce physical distancing requirements.
- Wearing masks in the water may present a safety hazard. As such, masks use should be strictly enforced only when users are not in the swimming pool. This makes the enforcement of physical distancing of even greater importance in order to manage risk.
- Pool loungers / similar should be adequately spaced to respect physical distancing requirements.
- Swimming pool area and equipment should be sanitised on a regular basis, or after each use, as applicable.
- Towels should be provided on request only.
- A laundry bin should be provided in which GVPCs can place their towel after use.

²⁸ Considerations for Casinos and Gaming Operations, CDC, Updated 31 Dec 2020

Gyms

- Unrestricted, 24-hour gym access should be temporarily suspended, where applicable.
- At least one member of staff should be present when a gym facility is in use to ensure physical distancing and hygiene protocols are being applied.
- Wearing a mask during strenuous exercise may present a health risk to individuals; as such, mask use should only be strictly enforced when gym facility users are not exercising.
- The above places greater importance on strict enforcement of physical distancing. Businesses may, therefore, consider the following:
 - Requiring increased physical distancing between gym users (i.e. greater than the legally prescribed limits)
 - Introducing time slots to restrict gym access to single / limited users. Allow sufficient time between slots to enable sufficient sanitising of gym equipment and water refill stations.
- Signage should be placed at entrances to notify gym users that they must comply with applicable COVID-19, e.g. that they should not enter if they have symptoms of COVID-19, physical distancing requirements, reminders for gym users to wipe equipment before and after each use, etc.
- Sanitising wipes / similar should be made available for gym users to wipe equipment before and after use.
- Sanitising wipes should be available in locker / changing rooms for gym users to sanitise locker contact surfaces before and after use.
- Clients may be encouraged to bring their own water bottle.

Spas

- Spa therapists should wear face masks at all times and wash / sanitise their hands frequently, including before and after working with each GVPC.
- Appointment times should be staggered to minimise contact between GVPCs and allow sufficient time between appointments to complete necessary cleaning, sanitising and linen replacement procedures.
- Treatment stations in a common area (i.e. not in separate rooms) should be spaced out sufficiently to allow for physical distancing between spa therapists.
- All treatment rooms, massage chairs/ beds, and equipment should be sanitised after each treatment.
- All towels and linen used for the treatment should be replaced after every spa treatment. (Follow the protocol for “laundry” under section 8.1.)
 - Clean towels and linen should not be brought into treatment rooms until the sanitising process has been completed.

- The number of towels and other linen used in treatment rooms should be minimised.
- Robes and towels should be provided on request only.
- Refreshments should be provided in individual servings; no shared pitchers/ tea pots/ similar should be offered.
- Lockers may be allocated to allow for physical distancing between GVPCs, in the event that they occupy the changing room at the same time.
- Changing rooms should be sanitised frequently throughout the day (in relation to traffic volumes) and lockers and locker keys should be sanitised after every use.
- Sanitising wipes should be available in changing rooms for spa users to sanitise locker contact surfaces before and after use.

8.7. Wheels Operators

Wheels operators include but are not limited to tourism service that make use of a motorised vehicle. This includes rental cars, airport shuttles, tour buses / vans, coaches, etc.

- Apply the “Generally Applicable Guidelines for Tourism and Hospitality”.

General

- Where stipulated, capacity restrictions regarding vehicle occupancy must be determined and respected.
 - Determined vehicle capacity limits should be communicated to passengers in advance and again on arrival.
 - Where vehicle capacity limits are not specified for shared vehicles, adequate physical distancing must be respected between non-family/friend group members.
- A tracking file / log book should be kept for each vehicle to support contact tracing, should this become necessary. In the case of coaches and other shared transport options, the driver or guide should be assigned responsibility for logging each stop made along the journey.
- All non-essential décor and other items should be removed from vehicles, such as magazines, brochures, maps, etc.
- Vehicles should be well ventilated prior to cleaning.
 - Where possible, allow for increased ventilation of vehicles for at least one hour (and up to 72 hours) after passengers have disembarked and prior to cleaning to minimise the risk of virus transmission.
- All vehicles should be sanitised and disinfected between trips, paying particular attention to high touch surfaces. These include door, window and boot handles, rear and side view mirrors, grip handles, arm rests, seatbelts,

gear stick, glovebox, fuel caps, windows, seat backs, seat pockets, vents, cup holders, microphones, etc.

- Consider putting a ‘seal’ across vehicle doors once it has been sanitised and disinfected to instil confidence in future passengers.
- In the event that a vehicle had a passenger who was a confirmed COVID-19 case, the vehicle should be taken off the fleet for the necessary period of time to allow thorough sanitising and disinfection. Ideally, vehicles should be left for 72 hours and allowed to ventilate prior to commencing the sanitising and disinfection process.

Coach / airport transfer / other shared wheels

- If assistance with luggage is provided by a staff member,
 - high touch surfaces of the luggage, e.g. handles, should be sanitised prior to handling²⁹ and
 - s/he should wash / sanitise her/his hands before and after handling luggage.
 - NB This is not required if GVPCs handle their own luggage.
- Passengers should be allocated a specific seat and requested to retain this seat allocation for the duration of the journey.
- Tour guide should ensure that interaction between her/his group and people not in her/his group is minimised. Appropriate measures may include:
 - Keep group members together at the same table during rest stops and meal times.
 - For overnight trips, arrange in advance for group check-in at accommodation to minimise interaction with other GVPCs.
- Physical distancing must be respected when boarding and disembarking the vehicle. This may include:
 - requesting passengers to board and disembark one at a time
 - loading the vehicle from the back to the front, and emptying from the front to the back
- Passengers should be requested to avoid touching seat backs and arm rests while boarding and disembarking.
- High touch surfaces on the vehicle should be sanitised during rest stops / meal breaks.
- Portable food and drink containers should be sanitised after each use and washed thoroughly at the end of trips.

²⁹ The chemicals in disinfecting sprays / similar may damage some luggage materials and should be avoided, whereas sanitising requires less harmful products and is still deemed effective for COVID-19 risk prevention, ECDC, 2020

- GVPC binoculars, if available, should be sanitised before each trip / tour and not shared outside of the friends/family group.
 - Guide / driver binoculars should be sanitised regularly and not shared.
- Air filtration systems should be sanitised at the end of each tour, and serviced regularly to ensure they are operating correctly. Filters should be cleaned and replaced per manufacturer's instructions.
 - Where possible, bus and coach air-conditioners should make use of high efficiency particulate air (HEPA) filters to minimise virus circulation inside the vehicle (similar to airplanes).
- Hand washing / sanitising facilities should be made available before boarding and when disembarking the vehicle, as well as on board.
- Extra face masks should be available on board in case passengers misplace or damage theirs.

9. ANNEXURE A: KAZA TFCA LEGAL CONTEXT

9.1. Port of Entry requirements for KAZA TFCA Partner States

Port of entry requirements, particularly testing, for tourism purposes to the five Partners States to the KAZA TFCA area present one of the most pressing matters for harmonisation efforts in the destination. Cross-border travel is crippled by the multiple and logically impractical testing demands currently required.

Current Port of Entry requirements are summarised below. These are accurate according to the information provided at the time of writing, but are subject to change without notice.

Testing requirement/s (PRE-VACCINE CONTEXT)

Angola	Botswana	Namibia	Zambia	Zimbabwe
Antigen test on arrival (by plane) Repeat test after 7 days of quarantine	Negative PCR certificate, valid for 72 hours from the time sample taken. Additional rapid test on arrival.	Negative PCR certificate, valid for 7 days from the time sample taken (not applicable for children 5 years of age and younger)	Negative PCR certificate, valid for 72 hours from the time sample taken (not applicable for children <5 years of age)	Negative PCR certificate, valid 48 hours since result issued

To facilitate ease of travel in KAZA, balanced with reasonable risk management, the following harmonisation is suggested:

Negative PCR certificate, valid at the first Port of Entry for 72 hours from the time sample was taken, and which remains valid within KAZA for 14 days thereafter.

- *Risk is limited for international arrivals whose stay is then managed in accordance with destination's COVID-19 protocols.*

Additional suggestions brought forward include:

A – PCR test at first SADC port of entry (excluding transit, if applicable) only. Acceptable subsequent testing requirements to require an antigen test only (in combination with proof of negative PCR on arrival).

B – negative PCR from country of origin with antigen testing done on arrival (not PCR)

C – negative PCR test (from time result is documented) valid for 14 days, allowing travel within KAZA for the duration. No testing on arrival.

Testing requirement/s (VACCINE CONTEXT)

Angola	Botswana	Namibia	Zambia	Zimbabwe
TBC	TBC	TBC	TBC	TBC
Suggested harmonisation: TBC				
<i>Suggest that KAZA Secretariat may play a role in facilitating discussions on the topic of a POE requirements in the context of vaccinations so that a harmonised response (at least in principle) is shared even before the context is realised.</i>				

Documentation requirement/s (at Port Of Entry)

Angola	Botswana	Namibia	Zambia	Zimbabwe
Travel Registration Form (in advance)	Self-screening and Passenger Locator Forms	Travel and Medical Declaration	Traveller Health Questionnaire	Traveller Locator Form
Suggested harmonisation:				
<i>No change is suggested. The current requirements have not been flagged as presenting significant barriers to intra-KAZA travel.</i>				

9.2. Other legal requirements

Additional legal requirements that will inform the implementation of the “KAZA TFCA Harmonised COVID-19 Safe Travel Guidelines” document are provided below. These are accurate according to the information provided at the time of publication, but are subject to change without notice.

Physical distancing³⁰

Angola	Botswana	Namibia	Zambia	Zimbabwe
2 metres (per good practice guide)	2 metres (per tourism protocols and government Gazette 12 June 2020) NB 1 – 2 m (MOHW IPC & BTO SOPs)	1 metre or more (per Ministry of Health & Social Service, within tourism protocols)	1 metre (per tourism protocols)	1 metre (per tourism protocols)
World Health Organization: “at least 1 metre”				
ECDC: “1 – 2 metres”				
Suggested harmonisation: “at least 1 metre”				

³⁰ “Although the evidence suggests that SARS-CoV-2 may travel more than two metres, the risk of transmission decreases with the distance from the infectious source. In a recent systematic review and meta-analysis, physical distancing of one metre or more was linked to an approximately five-fold reduction of the transmission risk.” ECDC, Sept 2020, p7

Face masks

Angola	Botswana	Namibia	Zambia	Zimbabwe
TBC	Required (per tourism protocols)	Required in public, including in vehicles	Required (per tourism protocols)	Required (per tourism protocols)
Suggested harmonisation:				
<i>Face masks required in public (except when eating or drinking, when in guest bedroom, and when in proximity of friends/family group exclusively including in a private vehicle shared exclusively by members of the same friends/family group)</i>				

10. ANNEXURE B: COVID-19 CONTACTS & ANNOUNCEMENTS

Dedicated COVID-19 Contact Details

Angola	Emergency number 111
Botswana	COVID-19 Contact Center, 24-hour Toll-Free Helpline numbers: 16649 / 0800 600 111
Namibia	COVID-19 Surveillance Team call centre: 0800 100 100 Whatsapp number: 0851 100 100
Zambia	Toll Free: 909 Non-toll free numbers: 0962 436 778 / 0974 493 553 / 0953 898 941 / 0211 269 432
Zimbabwe	TBC

Announcements Regarding Regulatory Status and Industry Protocols

Angola	TBC	
Botswana	https://www.gov.bw https://www.botswanatourism.co.bw/publications	Facebook: @BotswanaGovernment @BotswanaTourism
Namibia	https://namibiaturism.com.na/page/tourism-revival-initiative	Facebook: @MHAINamibia
Zambia	https://www.zambia.travel/covid-19-travel-measures/	
Zimbabwe	http://www.zimbabwetourism.net/health-and-safety/ http://www.mohcc.gov.zw/index.php?option=com_phocadownload&view=category&id=15&Itemid=741	

11. ANNEXURE C: SAMPLE COVID-19 PROTOCOL TEMPLATES

Sample: Staff register for temperature recording and contact tracing (developed by the Republic of Botswana COVID-19 Task Force). *May also be used for day visitors.*



SCREENING REGISTER (EMPLOYEES)

Name of Organisation: _____ Name of Screener: _____

Date: _____ Signature: _____

S/No.	Name and Surname	Contact Number	Temperature	
			AM	PM
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				

Sample: GVPC register for contact tracing

The template below was designed by the Tourism Business Council of South Africa to support contact tracing of GVPCs.

An adapted version for a business' context should consider gathering only what information is essential (or legally required) to enable contact tracing.

All information should be treated with necessary confidentiality to protect that individual's privacy. Information collected should be used for no purpose other than to contact an individual as required under COVID-19 contact tracing protocols.

Symptom screening infographic

A helpful tool to support staff who are responsible for screening symptoms is provided below. It may accompany the screening process documents for ease of reference.

The infographic can be downloaded from World Health Organization website:
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>.



SERIOUS COVID-19 SYMPTOMS REQUIRING IMMEDIATE MEDICAL CARE

- If you develop any of these symptoms, call your healthcare provider or health facility and seek medical care immediately.
- This is not an exhaustive list. These are the most common symptoms of serious illness, but you could get very sick with other symptoms – if you have any questions, call for help immediately.



Shortness of breath/ Difficulty breathing



Loss of speech or mobility or confusion



Chest pain

MOST COMMON SYMPTOMS



Fever



Cough



Tiredness



Loss of taste or smell

LESS COMMON SYMPTOMS



Sore throat



Headache



Aches and pains



Diarrhea



A rash on the skin or discolouration of fingers or toes



Red or irritated eyes

PLEASE NOTE:

- If you live in an area where malaria, dengue or other infections are common and you have any of above symptoms, seek immediate medical care according to the local health authorities.
- Stay in touch with your primary care provider to ensure you continue to receive the routine care you need, such as medication refills, follow-ups and other routine consultations.

12. ANNEXURE D: COVID-19 COMMUNICATION RESOURCES

The examples below may be adapted for a business' context and clientele, and used for effective communication regarding COVID-19 risk management measures.

The Republic of Botswana's COVID-19 Task Force makes relevant posters available here: <https://covid19portal.gov.bw/document-library>.

The Zambia Tourism Authority provides the poster below in its national protocol document. This type of communication may be suitable for staff, suppliers and delivery personnel, and GVPCs.



Reduce your risk of COVID-19

 World Health Organization
Representative Office
for Papua New Guinea



Clean your hands often



Cough or sneeze in your bent elbow – not your hands!



Avoid touching your eyes, nose and mouth



Limit social gatherings and time spent in crowded places



Avoid close contact with someone who is sick

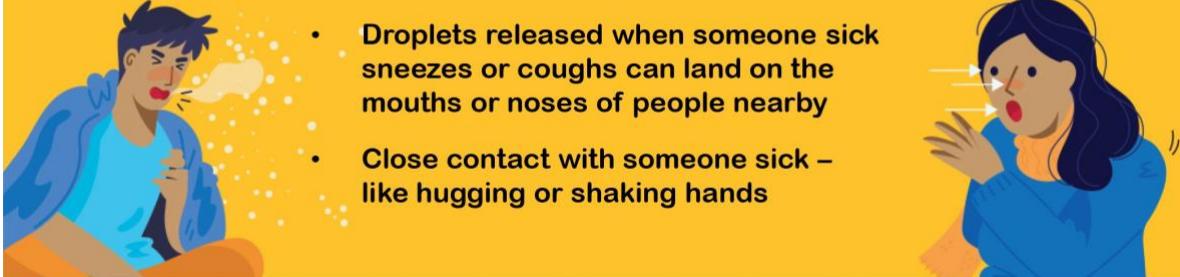


Clean and disinfect frequently touched objects and surfaces

COVID-19 Know The Facts

World Health Organization
Representative Office
for Papua New Guinea

COVID-19 spreads primarily from person to person



- Droplets released when someone sick sneezes or coughs can land on the mouths or noses of people nearby
- Close contact with someone sick – like hugging or shaking hands

COVID-19 mainly spreads from person to person But it can also be left on objects and surfaces...



So if you touch something contaminated and then touch your face or another's face, you might all fall ill.

Reduce your risk of COVID-19



- Clean your hands often
- Avoid touching your eyes, nose and mouth
- Avoid close contact with someone who is sick
- Cough or sneeze in your bent elbow – not your hands!
- Limit social gatherings and time spent in crowded places
- Clean and disinfect frequently touched objects and surfaces

General COVID-19 communication: sample poster from World Health Organization
(download poster and access videos at <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>)

HOW TO WEAR A NON-MEDICAL FABRIC MASK SAFELY

who.int/epi-win

Do's →

The infographic provides a step-by-step guide on how to use a non-medical fabric mask safely. It is divided into two main sections: 'Do's' (green background) and 'Don'ts' (red background). Each section contains illustrations and corresponding text instructions.

Do's:

- Adjust the mask to your face without leaving gaps on the sides
- Cover your mouth, nose, and chin
- Avoid touching the mask
- Clean your hands before removing the mask
- Remove the mask by the straps behind the ears or head
- Pull the mask away from your face
- Store the mask in a clean plastic, resealable bag if it is not dirty or wet and you plan to re-use it
- Remove the mask by the straps when taking it out of the bag
- Wash the mask in soap or detergent, preferably with hot water, at least once a day
- Clean your hands after removing the mask

Don'ts:

- Do not use a mask that looks damaged
- Do not wear a loose mask
- Do not wear the mask under the nose
- Do not remove the mask where there are people within 1 metre
- Do not use a mask that is difficult to breathe through
- Do not wear a dirty or wet mask
- Do not share your mask with others

Text at the bottom:

A fabric mask can protect others around you. To protect yourself and prevent the spread of COVID-19, remember to keep at least 1 metre distance from others, clean your hands frequently and thoroughly, and avoid touching your face and mask.

World Health Organization

Please help us to reduce the risk of COVID-19 transmission in your room

Our staff are taking special measures to prevent infection. In addition to frequent handwashing, wearing face coverings and thoroughly washing items before they are given to you, they will be reducing the number of times they enter your room.

This means your room will be serviced every 4-days and we have taken measures to make sure you still have everything you need:

If you need your rubbish and recycling collected more often, please leave the bin outside your door then call reception who will send someone to empty and sanitise it at soon as possible.

Each day we will leave a request card outside your door, please fill it out with any items that you need and leave it outside before 11pm. The items you requested will be left outside your door by 9am the next morning.

If you need more towels, an urgent change of your bed linens or assistance with cleaning up things like spilled drinks, please call reception who will send someone to help you as soon as possible.

Thank you for helping us to keep you, other guests and our staff safe.



13. ANNEXURE E: CERTIFICATION / ENDORSEMENT

Independent endorsement of the COVID-19 risk management strategy in place at a tourism business may be obtained on a voluntary basis. These endorsements may be used to support sales and marketing activities during the recovery phase to convey a business' commitment to providing a safe operating environment.

COVID-19 endorsements for the tourism and hospitality industry include:



World Travel & Tourism Council (WTTC) – Safe Travels Stamp
<https://wttc.org/COVID-19/SafeTravels-Stamp-and-Assets>



Safer Tourism Seal (STS)
<https://safertourismseal.com/>

14. ANNEXURE F: ONLINE COVID-19 TRAINING & TOOLS

Coronavirus disease (COVID-19) online training, World Health Organization (WHO)
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/training/online-training>

How to protect yourself and others, videos and infographics from the European Centre for Disease Prevention and Control (ECDC)
<https://www.ecdc.europa.eu/en/covid-19/prevention-and-control/protect-yourself>

How to reduce plastics and keep guests safe, GreenerGuest and Booking.com
<https://greenerguest.com/course/how-to-reduce-plastic-and-keep-guests-safe/>

Online training per sub-sector: accommodation, dining, wheels, attractions from the Tourism Business Council of South Africa (TBCSA)
<https://covidtraining.jurni.co.za/>

Resuming Business Toolkit, Centers for Disease Control and Prevention (CDC)
<https://www.cdc.gov/coronavirus/2019-ncov/community/resuming-business-toolkit.html>

15. ANNEXURE G: COVID-19 DATA & INFORMATION

Coronavirus Dashboard, John Hopkins University of Medicine

<https://coronavirus.jhu.edu/map.html>

COVID-19 Response Resources, UN World Tourism Organization (UNWTO)

www.unwto.org/covid-19-resources

COVID-19 Travel Regulations Map, International Air Transport Association (IATA) Travel

Centre

www.iatatravelcentre.com/world.php

Mythbusters: COVID-19 advice for the public, World Health Organization

www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters

Risk assessment tool to inform mitigation measures for international travel in the context

of COVID-19, World Health Organization

www.who.int/publications/item/WHO-2019-nCoV-Risk-based_international_travel-Assessment_tool-2020.1

16. ANNEXURE H: REFERENCES

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- Zimbabwe Tourism Authority, Guidelines for Designated Tourist Facilities for COVID 19, Approved by Cabinet Jun 2020

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- Botswana Tourism Organisation, Tourism Industry COVID-19 Standard Operating Procedures – Bed & Breakfast and Guest House, 31 Oct 2020
- Botswana Tourism Organisation, Tourism Industry COVID-19 Standard Operating Procedures – Game Lodges & Camps, Mobile Safaris & Camping Grounds, 31 Oct 2020
- Botswana Tourism Organisation, Tourism Industry COVID-19 Standard Operating Procedures – Hotels, 31 Oct 2020
- Botswana Tourism Organisation, Tourism Industry COVID-19 Standard Operating Procedures – Self-catering establishments, 31 Oct 2020
- Centers for Disease Control and Prevention (CDC), Cleaning and Disinfecting for Non-emergency Transport Vehicles, Apr 2020
- Centers for Disease Control and Prevention (CDC), Cleaning and Disinfecting Your Facility, Jan 2021
- Centers for Disease Control and Prevention (CDC), Considerations for Casinos and Gaming Operations, updated 31 Dec 2020

- Centers for Disease Control and Prevention (CDC), What Hotel, Resort, and Lodge Workers Need to Know about COVID-19, updated 12 Nov 2020
- European Centre for Disease Prevention and Control (ECDC), Disinfection of environments in healthcare and non-healthcare settings potentially contaminated with SARS-CoV-2, Mar 2020
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