



# HIGHER HEALTH

Higher Education and Training  
Health, Wellness and Development Centre

## **Protocol on Invigilation of Tests and Examinations during COVID-19 within Post School Education & Training (PSET) Institutions**

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The information contained in this document, be it guidelines, protocols, recommendations, diagnostic algorithms or treatment regimens, is offered in the public interest. To the best of the knowledge of the guideline and protocol writing team, the information contained in this protocol is correct, in line with protocols released by NICD, Department of Health and WHO. Implementation of any aspect of these protocols remains the responsibility of the implementing agency in so far as public health liability resides, or the responsibility of the individual clinician in the case of diagnosis or treatment. It is the responsibility of the person using these guidelines to check for updated versions of this document on the HIGHER HEALTH website at [www.higherhealth.ac.za](http://www.higherhealth.ac.za)

Guidelines and Protocol writing committee: HIGHER HEALTH Scientific Technical Task Team,  
Review committee including Professor Tim Tucker and Dr Nandi Siegfried

**Dr Ramneek Ahluwalia**  
**Chief Executive Officer**

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## Introduction

With the lifting of lockdown regulations to Level 1, the national intent is for the economy to open and for institutions to actively re-engage in usual pre-COVID-19 activities. Within the PSET sector, students will be required to sit for invigilated exams (under supervision) during November and December 2020, or as soon as possible thereafter, if further delays are experienced. All PSET institutions are hereby requested to attend to this new HIGHER HEALTH protocol “Invigilation of 2020 exams and written tests in the context of COVID-19” to ensure students and staff remain safe during this period.

Refer to the ***HIGHER HEALTH Guidelines for Post School Education and Training (PSET) Institutions for management of and response to the COVID-19 (April 2020)***, for greater detail on general campus preparation, COVID-19 prevention, screening, testing, isolation, quarantine, linkage to treatment, disinfection and cleaning, physical and social distancing, as well as communication strategies for managing COVID-19 once campus is fully operational:

<https://higherhealth.ac.za/wp-content/uploads/2020/05/Guidelines-for-Post-School-Education-and-Training-PSET-Institutions-for-management-of-and-response-to-the-COVID-19-outbreak.pdf>

Refer to the ***HIGHER HEALTH Protocol on Managing Clusters of Outbreak of COVID-19 within Post School Education & Training (PSET) Institutions*** (10 September 2020):

<http://higherhealth.ac.za/wp-content/uploads/2020/09/HIGHER-HEALTH-Protocol-on-Managing-Clusters-of-Outbreak-of-COVID-19-within-the-PSET-Institutions.pdf>

New in this section is a dedicated approach to ensuring safe exam venues in three parts:

1. **BEFORE THE EXAM**: Preparation of the exam venue and exam materials
2. **DURING THE EXAM**: Maintaining safety in the exam venue
3. **AFTER THE EXAM**: Ensuring safe management of exam materials after the exam

The HIGHER HEALTH team can advise on appropriate contact details for the relevant COVID-19 Advisory Teams for your institution.

## Important terms to understand

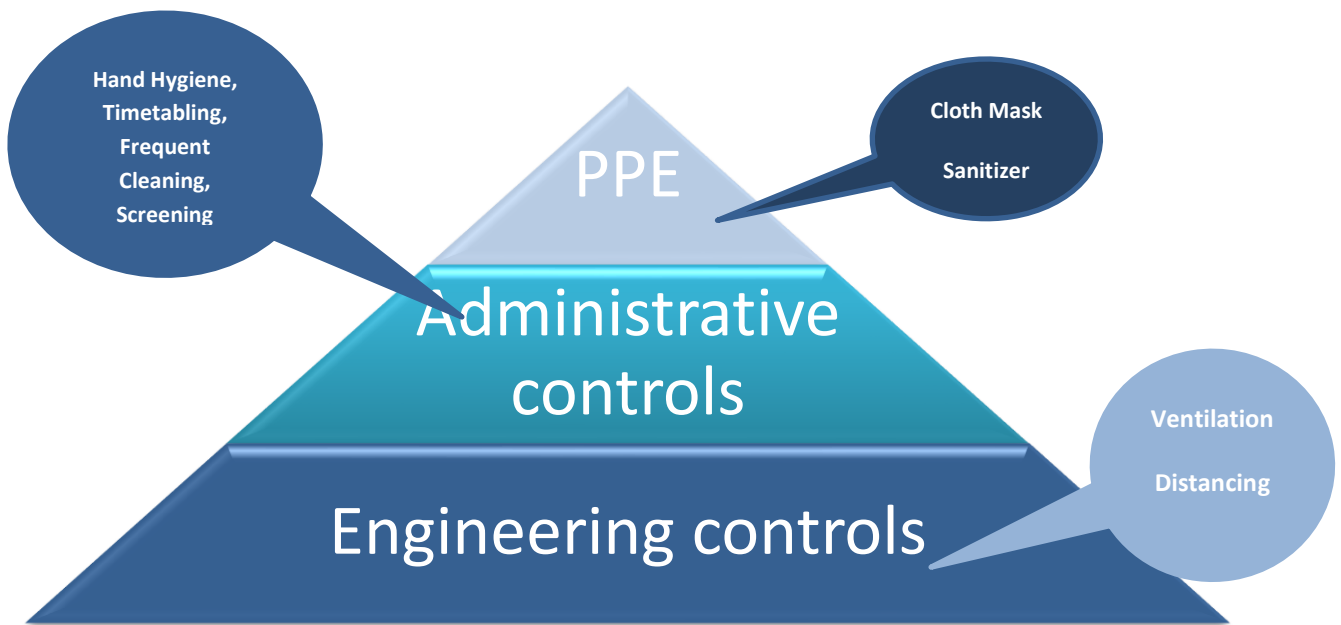
<b>Screening</b>	Students and staff entering the campus premises complete a behaviour and symptom questionnaire to screen for COVID-19 contact or possible COVID-19 illness. This may include a temperature check
<b>Suspected COVID-19</b>	When a staff member or student appears ill or displays symptoms compatible with COVID-19 based on symptom screening according to the NICD case definition but is either not tested or awaiting SARS-CoV-2 test result
<b>Confirmed COVID-19</b>	A staff member or student with laboratory confirmation of SARS-CoV-2 infection (using an RT-PCR assay), irrespective of clinical signs and symptoms.
<b>NICD Case Definition</b>	<p>The National Institute of Communicable Diseases (NICD) Case Definition for COVID-19 is:</p> <p>Any person presenting with an acute (<math>\leq 10</math> days) respiratory tract infection or other clinical illness compatible with COVID-19, or an asymptomatic person who is a close contact of a confirmed case.</p> <p>Symptoms include ANY of the following respiratory symptoms: cough, sore throat, shortness of breath, anosmia (loss of sense of smell) or dysgeusia (alteration of the sense of taste), with or without other symptoms (which may include fever, weakness, myalgia, or diarrhoea)</p> <p><i>[note that referral to individuals with COVID-19 as a 'case' can be stigmatising and if possible, these terms should be avoided but are included here for clarity according to conventional terminology]</i></p>
<b>Cluster</b>	<p>In general, a cluster is an aggregation of cases grouped in place and time that are suspected to be greater than the number expected, even though the expected number may not be known.</p> <p>For COVID-19, a cluster occurs on campus when <math>&gt; 2</math> individuals with confirmed or suspected COVID-19 are identified within seven days in the same class or lecture hall, student group, or between individuals working in the same area on a campus</p> <p><i>[not that the terms 'cluster' and 'outbreak' are not used strictly as defined and are used interchangeably in practice and management is the same]</i></p>
<b>Outbreak</b>	<p>In general, an outbreak is when a cluster has a common source.</p> <p>For COVID-19, an outbreak occurs when all the individuals in a cluster on campus are likely to have been infected by the same individual who was positive for COVID-19</p>

	<i>[not that the terms 'cluster' and 'outbreak' are not used strictly as defined and are used interchangeably in practice and management is the same]</i>
<b>Close contact</b>	Staff member or student who has been in contact with an individual with confirmed COVID-19 for >15 minutes within 1.5 meters without a mask. This includes working together in closed, poorly ventilated spaces.
<b>Casual contact</b>	Staff member or student who has been in contact with an individual with confirmed COVID-19 for a short duration (<15 minutes) and maintained physical distancing (>1.5 m) with a confirmed case/s or who was wearing a mask.
<b>Period of Infectivity</b>	Time the individual with confirmed COVID-19 was present on campus while in the infectious period as determined by: <ul style="list-style-type: none"> <li>• In an individual with confirmed COVID-19 who has symptoms, the infectious period begins 48 hours prior to symptom onset and lasts until 10 days after symptom onset.</li> <li>• In an individual with confirmed COVID-19 with no symptoms: <ul style="list-style-type: none"> <li>○ Where the <u>source of infection is unknown</u>, the infectious period may be regarded as commencing 48 hours before the date of the sample, to 10 days after the sample was taken.</li> <li>○ Where the <u>source of infection is known</u>, the infectious period can be estimated based on a minimum incubation period of 48 hours following exposure</li> </ul> </li> </ul>
<b>Quarantine</b>	A period during which someone who has been exposed to someone who is confirmed to have COVID-19, is separated from healthy people and observed for the development of symptoms of COVID-19. This is usually for a period of 10 days in the case of COVID-19. Quarantine can be involuntary if demanded by the State
<b>Isolation</b>	A period during which someone who is suspected or confirmed to have COVID-19 is separated from people who are healthy. The period is for a minimum of 10 days. Isolation can be involuntary if demanded by the State
<b>Self-isolation</b>	A term used widely in the context of COVID-19 to imply that an individual who either has COVID-19 or has been exposed to someone with COVID-19 voluntarily selects to separate themselves from other healthy people. During this period, the individual should not go out, wear a mask in the home, and have separate living and ablution facilities where possible.
<b>De-isolation</b>	An individual with confirmed COVID-19 can stop isolation precautions and return to campus after 10 days from the day symptoms start (if mild symptoms) or date when the test was done (if no symptoms). If admission to hospital is needed for treatment of COVID-19, at least 10 days from discharge and when well enough to

	return to campus. Repeat testing for SARS-CoV-2 is <b>NOT</b> required before return to work or study on campus.
<b>Environmental decontamination</b>	All equipment and rooms where individuals who have confirmed COVID-19 have been within the last seven days should be identified for appropriate cleaning. Following a thorough cleaning, <u>surfaces are wiped</u> , not sprayed with disinfectants such as 1000 ppm chlorine (hypochlorite) or 70% alcohol, as recommended.

## An important concept: Hierarchy of Prevention and Control

The exam venue and the conduct of invigilation during the exam should adhere to prevention and control measures according to the figure below. Optimizing engineering and administrative controls are equally important as individual behaviours - such as wearing of masks, physical distancing – to mitigate transmission risks.



### What are COVID-19 related Non-Pharmaceutical Interventions (NPIs)?

NPIs are non-drug interventions to prevent the spread of the SARS-CoV-2 from a staff or student with COVID-19 to other students or staff on campus. NPIs are categorised as:

1) Engineering controls – *what we can do to the exam environment* to reduce transmission, such as ensuring adequate cross ventilation and sufficient space in the venue, keeping 1,5metre physical distancing among individuals or half the capacity of the size of the venue or maximum of 250 individuals irrespective of the maximum capacity of the venue.

2) Administrative controls – *what we can arrange* to reduce transmission, such as COVID-19 screening, hand hygiene, cough etiquette and surface cleaning, disinfection, including environmental cleaning between each exam. Please refer to

- HIGHER HEALTH COVID-19 Protocol on Routine Cleaning at PSET institutions
- HIGHER HEALTH COVID-19 Protocol on Screening Testing Linkage to Care for the PSET
- HIGHER HEALTH Protocol on Managing Clusters of Outbreak of COVID-19 within the PSET Institutions

- <https://higherhealth.ac.za/wp-content/uploads/2020/06/HIGHER-HEALTH-COVID-19-Protocol-on-Routine-Cleaning-at-PSET-institutions.pdf>
- <https://higherhealth.ac.za/wp-content/uploads/2020/06/HIGHER-HEALTH-COVID-19-Protocol-on-Screening-Testing-Linkage-to-Care-for-the-PSET.pdf>
- <http://higherhealth.ac.za/wp-content/uploads/2020/09/HIGHER-HEALTH-Protocol-on-Managing-Clusters-of-Outbreak-of-COVID-19-within-the-PSET-Institutions.pdf>

3) Personal protective equipment – *what we can wear* to reduce transmission, such as non-medical (cloth) face masks are mandatory and other prescribed PPEs for individuals with co-morbid conditions. Please refer to **HIGHER HEALTH COVID-19 Protocol on Routine Cleaning at PSET institutions** for further guidance on PPE

## Section 1 BEFORE THE EXAM

### Preparation of the exam venue and exam materials

#### Training of invigilators

1. All invigilators must receive COVID-19 training as prescribed by HIGHER HEALTH, WHO, NICD. HIGHER HEALTH will support institutions with both virtual and onsite trainings.
2. Invigilators to be capacitated on disinfection and cleaning protocols, hygiene procedures, COVID-19 screening and other HIGHER HEALTH prescribed guidelines and protocols, already mentioned
3. Consider that more invigilators than usual may be required if additional exam venues are to be used and that they too will require the above trainings to understand the current regulations
4. Remember to tell your invigilators that masks and face coverings may be used to conceal unauthorized materials such as notes or communication devices. Your invigilators must monitor candidate behaviour closely during the exam. They should look for candidates who may be talking, or any activity which suggests a candidate has concealed unauthorized materials in their face covering.



## Preparation of the exam venue

1. Assign responsibilities:
  - a. Designate campus point person to oversee preparation and maintenance of all exam venue(s) across campus
  - b. Assign campus administrator ensure safe and secure storage of registers of students attending each exam in case of contact tracing
2. Selection of appropriate exam venue(s) to meet the following requirements:
  - a. Largest available venue(s) to meet 50% capacity regulations when exams in progress, not exceeding 250 maximum capacity
  - b. Sufficient space for appropriately distanced desks, tables and chairs at 1.5 m distance apart (in all directions).
  - c. Ventilation opportunity –windows should be able to be opened, check that doors can remain ajar
  - d. You may need to use more rooms for exam venues because physical distancing means you can fit fewer candidates into a room than normal. This may also mean you need more trained invigilators available to watch candidates
  - e. If you have approval to use an alternative venue off campus, please ensure that the venue meets the COVID-19 related restrictions, regulations and guidance at the new venue, before the exam
3. Invigilators preparations
  - a. Before distribution of exam papers, hands must be sanitized
  - b. A cloth face mask must be worn at all times
  - c. Preferably wearing of non-surgical gloves, just before the distribution of the exam papers and similarly during collection of the exam papers
4. All students and staff, including invigilators, to use the **HIGHER HEALTH HealthCheck** Screening App prior to attending campus. Only students who have a green HealthCheck passport should be allowed into the exam venue
5. Provide sanitizer points at the entrances to the exam venue
  - a. If less than 50 students, use a single entrance only
  - b. If more than 50 students, where possible, use two entrances divided by alphabet e.g. A – M; N – Z or by student numbers
  - c. Maintain 1.5m physical distance between students entering the venue door

- d. Avoid congestion at the venue entrance and exit by allowing procedural mechanism of few students to enter at regular intervals, maintaining physical distance protocol. The groups of students can be organised as per the seating plan that is outlined in point 6.
6. Create a desk plan organized by student name or student number for each exam in advance and post it outside the venue so students review this and know where they are to sit before, they enter the venue (if possible)
7. Place markers on the ground or barriers outside the venue to ensure physical distancing before entering the venue and advise students (and indicate on desk plan in point 6.) a one-way system for walking within the venue
8. Allow students whose exam desks are furthest away from the entrance to enter the exam room first
9. Students to enter the venue one at a time at 1.5m distance from each other and go immediately to their designated seats
10. If more than one exam subject is written simultaneously in the same venue, students can be separated in the venue by subject cohort e.g. Tourism students on one side of venue, Equine Studies on other side (this is to facilitate cohorting if contact tracing is necessary).

#### **Preparation of exam materials**

1. Question papers and exam booklets to be distributed ideally on the desk in advance by the invigilator(s) before the students enter the venue. If this is not possible, papers and booklets to be handed out by the invigilator(s) to the seated student with due attention to sanitizing every 10 desks

## Section 2: DURING THE EXAM

1. All students and staff to wear masks and optional visors
2. A one-way system should be in operation in the venue so that students walk in a single direction in the room (this can be indicated on the desk plan outside the venue)
3. Invigilator to take a register of all students present and sign off each student on a list
4. Invigilator to notify students and staff that if anyone sickens during the exam (including the invigilator(s)), to alert the invigilator(s) (or campus point person if only a single invigilator) who will accompany the individual to the designated institutional isolation room
5. The invigilator must remind all students that if anyone sickens in the following 48 hours after the examination, they must alert the campus officials to allow for contact tracing
6. Invigilator to remind students that if they leave anything behind after the exam (such as a pencil case), these items may be thrown away or destroyed for hygiene reasons
7. If the exam papers and booklets are not already on the students' desks (see Section 1), the invigilator to distribute these to each student after thoroughly sanitizing before dissemination, after disseminating every 10 booklets, and after all booklets have been disseminated
8. If students require more writing paper or a booklet during the exam, the invigilator can bring a box of booklets to the student and the student can select a booklet after sanitizing. Alternatively, an invigilator sanitizes, selects a booklet and hands it to the student followed by sanitizing
9. Invigilator(s) to limit walking around the room unless a student raises their hand for a question; if walking is necessary, utilize the one-way system in operation
10. Should a student require a bathroom break, conventional institutional rules for examinations apply; however, the student must sanitize before returning to the venue
11. Students can leave the exam venue according to conventional campus practice e.g. up to 30 minutes before the end of the exam. Exam scripts to be placed into designated boxes – according to subject and/or question at the front of the venue
12. At the end of the exam the invigilator(s) ensure that students place all the exam scripts into designated boxes – according to subject and/or question. The invigilator must not collect the scripts to avoid unnecessary touching

## Section 3 AFTER THE EXAM

1. The invigilator to transport boxes of scripts to a designated secure storage site for quarantine overnight. The scripts can be sent to examiners for marking after a minimum of 12 hours.
2. Invigilator to ensure register of students is given to the designated administrator for secure storage
3. Venue, including practical equipment, to be thoroughly cleaned between each exam including desks, chairs and all other surfaces as well as allocated bathrooms and toilets
4. If student or staff notifies institution that they became ill within 48 hours after the exam with suspected or confirmed COVID-19, the designated COVID-19-point person to ensure the register is sourced from the administrator. Evaluation of the contact risk to all students sharing the exam room must be conducted. Pay attention to those who sat in direct proximity to the individual who reported illness, and to the duration that all students were in the examination room. The decision as to who is a close contact should be made in consultation with local public health officials or the designated institutional COVID-19 Cluster Management Team and appropriate contact tracing actions taken. See <http://higherhealth.ac.za/wp-content/uploads/2020/09/HIGHER-HEALTH-Protocol-on-Managing-Clusters-of-Outbreak-of-COVID-19-within-the-PSET-Institutions.pdf>

### References:

The guidance document was partly informed by the *FactSheet: Guidance on running exams in the November 2020 series A guide for exams officers and Heads of Centre*, Cambridge Assessment International Education. Available at:

<https://www.cambridgeinternational.org/Images/591776-exams-officer-guide-to-november-2020-exams-factsheet.pdf>