

# **GUIDELINES TO MANAGE NON & GOVERNMENT HOUSING PROJECTS UNDER CONSTRUCTION DURING AND POST COVID-19 LOCKDOWN**

## **GUIDELINES TO MANAGE NON & GOVERNMENT HOUSING PROJECTS UNDER CONSTRUCTION DURING AND POST COVID-19 LOCKDOWN INCLUDING INFORMAL SETTLEMENTS, INTEGRATED RESIDENTIAL DEVELOPMENT PROGRAMME, SOCIAL HOUSING, RENTAL PROGRAMME AND COMMERCIAL DEVELOPMENTS.**

### **1. Brief Background**

1.1 This document is intended to consolidate practical guidance available from government on how to manage and contain the spread of COVID-19. It addresses risks to both construction workers and management on sites under construction within the 29 identified overcrowded informal settlements within the Informal Settlements Upgrading Programme, social housing projects within the Social housing and Rental programme as well as the integrated residential development projects and commercial.

1.2 In accordance to the Department of Health presentation on Covid-19 response mechanisms, presented by Professor Karim, it has been indicated that it is ideal to deal effectively & simultaneously with three objectives:

- a. The most favourable health outcome.
- b. An effective economic response, and
- c. Appropriate support to the poor.

1.3 Within the appropriate support to the poor, shelter is one of the critical elements and sector to be considered especially with dense informal settlement. In the process of de-densification, the Department identified 29 Informal Settlements that are overcrowded of which necessitated de-densification. The process of de-densification is to be undertaken through the Informal Settlement Upgrading Programme, Integrated Residential Development programme, and Social and Rental Housing Programme. Over and above, ensure that people are provided with food, water and sanitation for those who cannot afford. Ensure that employment creation especially for women and

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youth are catered for in stimulating economic activities and capability through training and learning new methods of doing things.

1.4 Further, in the presentation from Dr Karim, it's stated that economic sectors to be opened need to demonstrate high level of social distancing and low rate of infection between the customers and staff. The process is explained in section 1.1 to 1.3 and section 2 explains the actual hygiene and measures to be undertaken whilst implementing.

1.5 As a country, we need to be able to Identify, quarantine & trace positive Individuals - catch potential super-spreaders starting with those who display symptoms, focusing on front-line health worker & those in essential service value chains and extend of the vulnerability to vulnerable communities and be able to test everyone. The work can be undertaken by the Department in consultation with the Provincial Department of Health to receive a go-ahead on the state of its readiness to continue with the implementation process especially for the relocation process.

1.6 The sector might be required to go back to lockdown level 5 if it may be determined given the nature of the work being undertaken? The process of relocation needs to be done in such a way that removal and relocation is undertaken and finalised for each family within a day. The Department to determine how many families may be relocated in a period of a day, demolition of the shack and disposal of the shack and ensure that both processes the beneficiaries and the workers are protected through disinfections, sanitisations and protective personal equipment both in the removal site and the relocation site.

1.7 The Department of Transport underwent a massive disinfection process as was advised by the Department of Health. Also with Human Settlement, it is expected to undertake the disinfectant process in the identified projects to be undertaken? The Department needs to develop health and hygiene mechanisms in all the stages of implementation starting with the informal settlements identified and the site were

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workers will be working in and demonstrate and report on the readiness status. A checklist to identify the state of readiness is attached as annexure 1. Department of Employment and Labour's COVID-19 Occupational Health and Safety Measures in Workplaces that are compulsory are attached as [Annexure 2](#).

## **2. Informal settlements upgrading programme**

### **2.1 What is Informal Settlements Upgrading Process**

2.1.1 Informal Settlements are common to most developing countries which undergo a process of rapid urbanisation and have limited resources to address the housing needs of all its citizens and in particular the poor who flock to cities in search of a “better life and future” for their families.

2.1.2 Hence the Programme for the Upgrading of Informal Settlements is one of the most important programmes of Government which seeks to improve the living conditions of millions of poor people by providing secure tenure and access to emergency services as well as basic services and housing.

2.1.3 Experience has shown that access to basic services, secure tenure and a house provides a platform/foundation to households to improve their social and economic circumstances.

2.1.4 One of the basic tenets of the programme is that beneficiary communities must be involved in all aspects of the project cycle throughout to ensure that existing fragile community survival networks are not compromised and to empower communities to take charge of their own settlements design standards and housing solutions. All members of the community, also those that do not qualify for subsidies, are included.

2.1.5 The Programme therefore aims to bring about social cohesion, stability and security in integrated developments, create jobs and economic growth for

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communities which did not previously have access to land and business services, formal housing and social and economic facilities and amenities.

2.1.6 This Programme will benefit all persons living in informal settlements who meet the following criteria: households that comply with the Housing Subsidy scheme qualification criteria; in order not to exclude any community members, households with a monthly income exceeding the maximum income or qualifying for housing subsidies as approved by MINMEC, are also included subject to certain conditions;

- i. households headed by minors, who are not competent to contract may benefit with assistance from the Department of Social Development; persons without dependants; and
- ii. persons who are not first-time home owners. Applications for the following people may be considered on a case-by-case basis: persons who have previously received housing assistance and who previously owned and/or currently own a residential property; and
- iii. immigrants whose residence status is uncertain on the conditions and under guidance prescribed by the Department of Home Affairs.

## **2.2 Process of Implementation for De-densification in the overcrowded informal settlements.**

## **2.3 Site Identification, Design, Planning and site lay-out as well as township establishment.**

2.3.1 All the identified 29 overcrowded informal settlements has undertaken the above process.

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## **2.4 Consultation Process with Communities**

2.4.1 The projects ready for implementation already engaging with their Community Based Organisation and already forms part of the partnership agreement between Government and the CBO's and are to abide to the partnership. Continuous knowledge sharing and communication to the beneficiaries to be undertaken on a regular basis.

## **2.5 Identification of families for relocation**

2.5.1 Families identified for relocation already forms part of the waiting list within the Departments database and they qualify for a subsidy housing and the priority on the list are the elderly, child headed households and families that needs immediate relocation due to the effect of the COVID-19 within the family for isolation and quarantine.

## **2.6 Identification of units for re-blocking**

2.6.1 In the process of re-blocking to allow movement for the purpose of de-densification, there are units that are identified for removal to allow open spaces, movement of vehicles such as police cars, ambulances as well as vehicles and trucks to allow easy movement within the informal settlement.

2.6.2 The relocated families shacks to be demolished following the hygiene and health measures.

## **2.7 Process of relocating beneficiaries and transportation**

2.7.1 The process of relocation has to done in a manner that will prove that social distancing is maintained at high level. Since the service is rendered for the poor, transportation needs to be organised by the state and ensure that all hygiene and health protocols are adhered to and only a few families

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maybe moved at a time to ensure the work is undertaken within a day. At least relocate a minimum of 10 and a maximum of 20 families at a time.

## **2.8 Disinfection process during relocation / re-blocking**

2.8.1 All projects have to undergo the disinfection process as stipulated by the Department of Health regulation and stipulated in section 2 for each projects.

## **2.9 Emergency Housing Intervention Process**

2.9.1 All the hygiene and health processes to be undertaken as stipulated.

## **2.10 Temporary Relocation Areas**

2.10.1 All the temporary relocation areas should have undergone the NHBRC guidelines and HDA principles to ensure that the land identified is suitable for human habitation.

## **2.11 Temporary Residential Units and NHBRC Regulations**

2.11.1 All alternative technologies being used should have been endorsed by the NHBRC guidelines. Other technologies for sanitisation, energy as well as waste disposal to be consulted with NHBRC for approval in consultation with other Sector Departments responsible and consideration of other alternative technologies considerations to ensure the provision of basic services.

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## **2.12 Plans for relocating to permanent structures and time frames envisaged**

2.12.1 Since the plans for the current relocation are temporary, permanent plans for relocation or plans for ensuring permanent structure and solutions needs to be submitted to the Department. The permanent plans need to take into account the Human Settlement Indaba Declarations with all the stakeholders.

## **2.13 How the Department is to curb the Covid-19 spread in the implementation of the above processes**

2.13.1 Projects that are identified within high level rate on infections will be immediately stopped as soon as its identified that the risk of the spread are high in the area. All work will be stopped, hence it imperative to do work that even if you stopped, no material damage will be experienced.

## **2.14 Integrated Residential Development Programme**

2.14.1 The Integrated Residential Development Programme (IRDP) provides for the acquisition of land, servicing of stands for a variety of land uses including commercial, recreational, schools and clinics, as well as residential stands for both low, middle and high income groups. The land use and income group mix will be based on local planning and needs assessment.

2.14.2 The IRDP can be undertaken in phases or in one single phase. The first phase could provide serviced stands, whereas the second phase provides for housing construction for qualifying low income beneficiaries and the sale of stands to persons who for various reasons, don't qualify for subsidies, and/or the disposal of other stands such as commercial uses.

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2.14.3 This Programme will assist people who: lawfully resides in South Africa (i.e. citizen) of the Republic of South Africa or in possession of a permanent residence permit. Certified copies of the relevant documents must be submitted with the application). Legally competent to contract (i.e. over 18 years of age or legally married or legally divorced or declared competent by a court of law and sound of mind);

- Neither the applicant nor his or her spouse has previously benefited from government assistance;
- Has not owned fixed residential property; and has previously owned fixed residential property, such a person may only qualify for the purchase of a vacant serviced site.

2.14.4 In addition to the above the following criteria must also be satisfied: persons must be married or habitually cohabit; single persons must have financial dependants; single persons without financial dependants such as the aged, military veterans, etc. may be assisted; households must earn a monthly income in the range as annually announced; and persons who have benefited from the Land Restitution

2.14.5 In addition, the programme also makes provision for the creation of non-residential stands such as: Institutional stands e.g. police stations, schools and clinics; business and commercial stands; stands for non-profitable community services e.g. churches and crèches/nursery schools; and stands for public use e.g. parks and community facilities etc. Special conditions apply to the sale and transferring of these stands.

### **2.15 Land identification Process, Site layout, Planning and Design**

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2.15.1 For the identification of the IRDP projects, the above needs to in the approved business plans. Design, planning and construction of installation of bulk and link water and sanitation provision for housing and human settlements, subject to compliance with COVID19 preventative measures as outlined in section two.

### **2.16 Identification of Projects for completion in level 4**

2.16.1 For level 4, only projects that needs to be finalised to be completed. This is to include completion of state projects which are either at roof and/or finishing level, subject to the relevant Covid-19 preventative measures as directed in section 2.

2.16.2 Private sector construction to be allowed to resume work for the completion of projects which are either at roof and/or finishing level, subject to the relevant Covid-19 preventative measures being put in place

### **2.17 Identification of beneficiaries to be allocated units and the relocation process including transport of the beneficiaries**

2.17.1 Relocation process to be undertaken as indicated in bullet 2.7 above.

### **2.18 How will the Department curb the spread in the implementation of the above mentioned processes?**

2.18.1 Projects that are identified within high level rate on infections will be immediately stopped as soon as it's identified that the risk of the spread are high in the area. All work will be stopped, hence it imperative to do work that even if you stopped, no material damage will be experienced.

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### **2.19 Social Housing and Rental Housing**

- 2.19.1 The SHRA was given a mandate not only to invest in the sector, but to regulate it as well. One such area of regulation for the SHRA is income and rental. 'We regulate social housing institutions to lease out units to people who can afford them, people who belong to the correct earnings bracket, so that they are not charged an exorbitant rental that leads to them being crammed into their apartments,' explains acting SHRA CEO Advocate Seeng Ntsaba-Letele. 'Our main targets in social housing are income bands, and we limit the rentals that occupants can pay. We stipulate that the maximum monthly rental a person can pay is 33.3% of their gross earnings.'
- 2.19.2 The plan advocated integrating people into cities, bringing them closer to their places of work and other amenities such as transport, schools, hospitals and recreational facilities. However, the SHF was later dissolved and replaced with the Social Housing Regulatory Authority (SHRA) in August 2010, following the promulgation of the Social Housing Act No 16 of 2008.
- 2.19.3 The SHRA has to strike a balance between ensuring that the beneficiaries pay an affordable rental and still making sure that social housing institutions remain financially viable

### **2.20 Land identification Process, Site layout, Planning and Design**

- 2.20.1 For the identification of the IRDP projects, the above needs to have been undertaken. Rental Housing Tribunals to resume operations.

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## **2.21 Identification of Projects for completion in level 4**

2.21.1 For level 4, only projects that needs to be finalised to be completed. This is to include completion of state projects which are either at roof and/or finishing level, subject to the relevant COVID 19 preventative measures as directed in section 2.

## **2.22 Identification of beneficiaries to be allocated units and the relocation process including transport of the beneficiaries**

2.22.1 Relocation process to be undertaken as indicated in bullet 2.7 above.

## **2.23 How will the Department curb the spread in the implementation of the above mentioned processes?**

2.23.1 Projects that are identified within high level rate on infections will be immediately stopped as soon as it's identified that the risk of the spread are high in the area. All work will be stopped, hence it imperative to do work that even if you stopped, no material damage will be experienced.

## **3 Curbing the Spread of Covid 19 in the implementation of the above programmes onsite as well as de-densification and relocation as well as re-blocking.**

### **3.1 Summary of the symptoms and how COVID-19 is spread**

3.1.1 The following symptoms may develop in the 14 days after exposure to someone who has COVID-19 infection:

- ✓ Cough,
- ✓ Difficulty in breathing/shortness of breath
- ✓ Fever of 38.0° C [100.4° F] or greater using an oral thermometer).

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3.1.2 In general, these infections and indeed many others can cause severe symptoms particularly in people with weakened immune systems, older people, and those with long-term conditions like diabetes, cancer and other chronic lung disease.

3.1.3 From what is known about other corona viruses, the spread of COVID-19 is most likely to happen when there is close contact with an infected person. It is likely that the risk increases the longer someone has close contact with an infected person. Respiratory secretions produced when an infected person coughs or sneezes containing the virus are most likely to be the main means of transmission. There are 2 main routes by which people can spread Covid-19:

3.1.3.1 infection can be spread to people who are nearby (within 2 metres) or possibly could be inhaled into the lungs,

3.1.3.2 it is also possible that someone may become infected by touching a surface, object or the hand of an infected person that has been contaminated with respiratory secretions and then touching their own mouth, nose, or eyes (such as touching contaminated surfaces (e.g. door knob) or shaking hands then touching own face).

3.1.4 The Home building sector must comply with the current provisions on **health and safety obligations** to manage the spread of COVID-19. Working arrangements on sites under construction must take precautionary measures as recommended by health authorities and implement them to minimise the risk of exposure to COVID-19.

3.1.5 It is the contractor's responsibilities to contact the National Department of Health or its accredited public health advisory centres.

### **3.2. Compliance to government's social distancing rules**

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- 3.2.1 Prior to resuming construction activities, get all workers approved for constructions activities tested.
- 3.2.2 Daily, screen all persons prior to entering construction sites
  
- 3.2.3 Provide recommended Personal Protective Equipment (PPEs) on all sites under construction.
- 3.2.4 Enforce the 1 person/ every 1-1.5m<sup>2</sup> (minimum) rule for all activities under execution.
- 3.2.5 Spread people out so that they are working 2m<sup>2</sup> (minimum) apart whenever possible, including during meetings.
- 3.2.6 Limit access to building sites to essential workers involved in daily activities.
- 3.2.7 Limit external visitors/third parties (with an exception of by-laws/standards enforcers) and at a time when no one else is on site apart from the builder and/or site supervisor.
- 3.2.8 Anyone with symptoms or who has been exposed to the virus should not be allowed to come to work and should alert the supervisor.
- 3.2.9 Anyone who has been out of the country must self-quarantine for 14 days (minimum), regardless of whether or not they're showing symptoms.
- 3.2.10 Limit person-to-person exchange of items like brochures.
- 3.2.11 Limit handling credit cards; use tap facilities where available.

### **3.3. Compliance to government's self-isolation rules:**

3.3.1 The following symptoms may develop in the 14 days after exposure to someone who has COVID-19 infection:

- 3.3.1.1 Cough,
- 3.3.1.2 Difficulty in breathing,
- 3.3.1.3 Fever (38.0° C [100.4° F] or greater using an oral thermometer).

3.3.2 Compulsory Daily screening of all workers and visitors prior to entering sites.

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- 3.3.3 Keep persons displaying cold, flu/fever or similar symptoms away from sites until the symptoms have passed or a negative test is provided to the site supervisor.
- 3.3.4 Consider the 14-day self-isolation rule for anyone returning from overseas or from inter province.
- 3.3.5 Keep any person who has been in contact with a covid-19 positive person and required to self-isolate off – site.
- 3.3.6 Keep lists of all visitors on site daily- with contacts numbers for tracking & tracing.

### **3.4. Provision of adequate hygiene facilities on site**

- 3.4.1 Providing adequate cleaning products and facilities
- 3.4.2 Implementing regular hand washing schedules
- 3.4.3 Regularly (at least daily) cleaning and disinfecting of any common areas prior and post use
- 3.4.5 Cleaning/disinfect shared tools/plant before and after each use
- 3.4.6 Increasing ventilation for building sites where internal work is being undertaken
- 3.4.7 Office equipment such as phones, keyboards, and desks should be sanitized regularly.
- 3.4.8 Communal areas (kitchens, bathrooms, hallways) should be sanitized regularly, including door handles and faucets.
- 3.4.9 Make hand sanitizer and cleaning products widely available.
- 3.4.10 Consider temporarily stopping non-essential mail and deliveries, or have a drop-off location for shipments to avoid contact with delivery personnel as much as possible.

### **3.5. Access to appropriate safety equipment on site**

- 3.5.1 Observe all Health and Sanitation measures from the Health Authorities at all times - where in doubt ask. Contact details in the Department of Health

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Regulations.

- 3.5.2 Providing all workers with access to personal protective equipment (PPEs) including gloves, masks and eye protection appropriate to the work they are performing on site.
- 3.5.3 Provide more hand washing/Sanitation stations and encourage frequent hand washing.
- 3.5.4 Do not share personal protective equipment (PPEs) and limit sharing of tools and equipment where it cannot be avoided, sanitise before and upon receipt.
- 3.5.5 Wear gloves as often as possible. Sanitize equipment (personal and shared), washrooms, and other shared facilities more often, especially areas that are most likely to be handled.
- 3.5.6 Ensure waste bins and garbage receptacles are emptied regularly and safely.

### **3.6. Minimise: activity overlaps & number of people on site**

- 3.6.1 Implementing a 'no more than 8 workers/ house rule'
- 3.6.2 Implementing a 'no more than 30 workers/project rule'
- 3.6.3 Scheduling sub-trades and work to minimise people on site.
- 3.6.4 Introduce designated work zones away from other workers performing different tasks
- 3.6.5 Schedule regulatory inspections and checks to implement a one only on site check (builder/manager and inspector)
- 3.6.6 Stagger shifts, breaks, and lunch breaks to minimize the number of people in one area. Have multiple break areas or allow everyone on the jobsite to take their breaks (alone) in their personal vehicles/or in isolation
- 3.6.7 Limit how many people are on the site at one time

### **3.7. Facilitate where possible non-contact deliveries, payments and travelling out of peak times**

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3.7.1 Maximise non-contacts activities on site as far as it can be practicable with orders and site deliveries

3.7.2 Maintaining work sites operation times to allow workers to travel to and from site in off peak times

3.7.3 Where signatures are required, use own pen

### **3.8. Facilitate site inductions and updates on latest government (recognised health authorities) requirements**

3.8.1 Undertaking on-site inductions prior to permitting anyone on to site

3.8.2 Conducting regular ‘tool box’ discussions to enable workers to stay informed on risks and hazards including specifically about latest Government COVID-19 updates

3.8.3 Advise workers of the steps that will be taken should a person enter the site with the virus or advise the site supervisor that they have been in close contact.

### **3.9. Clients management:**

3.9.1 Confirm before entering a construction site that nobody else will be on site that has been overseas/ high risk country or showing symptoms or has the covid-19

3.9.2 Conduct safety induction and point out where disinfectants are located.

### **3.10 Report non-compliances**

3.10.1 Report non-compliances immediately to the authorities

<b>Department of Health</b>	0800 029 999
<b>WhatsApp number</b>	<b>0600 12 3456</b>
<b>South African Police</b>	10111

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Services	

3.10.2 REGULATORY CONTACTS: NHBRC contact details listed below: -

<b>INSTITUTION</b>	<b>Contact Number</b>
NHBRC	011 317 0000
NHBRC toll Free	0800 200 824
<b>EASTERN CAPE</b>	<b>Contact Number</b>
<b>Port Elizabeth</b>	041 365 0301
<b>East London</b>	043 721 1377
<b>FREE STATE</b>	<b>Contact Number</b>
<b>Bloemfontein</b>	051 448 7955 / 6 / 7
<b>Bethlehem</b>	058 303 0440
<b>GAUTENG</b>	<b>Contact Number</b>
<b>Johannesburg</b>	011 317 0000
<b>Tshwane</b>	012 444 2600
<b>Soshanguve</b>	087 310 4354
<b>KWAZULU NATAL</b>	<b>Contact Number</b>
Durban	031 374 8100
Newcastle	034 312 3507
<b>LIMPOPO</b>	<b>Contact Number</b>
<b>Polokwane</b>	015 297 7519
<b>Bela Bela</b>	014 736 6043/4513
<b>Tzaneen</b>	015 307 5097
<b>Thulamela</b>	015 962 7500 / 7799
<b>MPUMALANGA</b>	<b>Contact Number</b>
<b>Nelspruit</b>	013 755 3319

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<b>Witbank</b>	013 656 1641/2
<b>NORTHERN CAPE</b>	<b>Contact Number</b>
<b>Kimberley</b>	053 832 6850
<b>NORTH WEST</b>	<b>Contact Number</b>
Rustenburg	014 594 9900
<b>Klerksdorp</b>	018 462 0304
<b>Mafikeng</b>	014 594 9900
<b>WESTERN CAPE</b>	<b>Contact Number</b>
Cape Town	021 913 9210
<b>George</b>	044 871 1209

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**Annexure 1: Construction Site Readiness Checklist**

	<b>Item</b>	<b>Yes</b>	<b>No</b>
	<b>Department of Health Regulations</b>		
1	High level of infection as determined by the Department of Health to ensure that the area is not a hotspot		
2	Ready in case of screening, quarantine sites and testing of staff and beneficiaries before project starts on site and before relocation		
3	Disinfections three times a day on communal toilets and water points		
4	Hygiene and health education measures as well as continuous communication		
5	Protective gear for CBO's		
6	Fifty units finalised before relocation with all the necessary basic services		
7	Fifteen to twenty families to be moved within a day for relocation and re-blocking purposes		
	<b>Site Preparation</b>		
	<b>Re-Blocking and Relocation Process</b>		

Annexure 2: Is attached with this document.

[COVID-19 draft guidelines for management of housing construction sites](#)