COVID-19 SPECIAL GUIDELINE
FOR PUBLIC, SPECIAL & FULL SERVICE SCHOOLS
COVID-19 SPECIAL GUIDELINE FOR PUBLIC SPECIAL AND FULL SERVICE SCHOOLS

# No Learner Left Behind

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Foreword

In the first few months of 2020, the world witnessed an unprecedented global pandemic due to the rapid spread of corona virus. Corona is a highly contagious virus that leads to life threatening respiratory disorders. A number of deaths have been recorded especially in Asia, Europe, the United Kingdom and USA. South Africa has now become one of the countries in which corona virus is rapidly spreading.

As part of the measures to control the spread of corona virus, and protect learners and teachers who could be vulnerable due to the numbers and the nature of interactions in a teaching and learning environment, schools had to be closed on the 18th March 2020 ahead of the school scheduled closure on 20 March 2020.

This was followed by a nationwide 21 days lockdown, which was scheduled to end on the 16th of April 2020 but had to be extended until the end of April 2020 due to the threatening impact of the spread of the virus. Based on the risk adjusted assessment, the level of the lockdown was relaxed from risk level 5 to 4.

The lockdown has impacted on various Inclusive Education programmes which were supposed to be implemented in the last term of 2019/2020 financial year and the first term of 2020/2021 financial year. Some of the programmes which were negatively impacted by the lockdown are, inter alia, circuit managers’ workshop on Inclusive Education, monitoring and supporting of Public Special Schools and Full Service Schools as well as Care Centres. Term plenary meetings with the District Coordinators, full implementation of the Operational Plan Activities as well as the seminars with the various stakeholders were also compromised.

A new normal has emerged which requires that members of all SMTs (School Management Teams), SGBs (School Governing Bodies), SBSTs (School-based Support Teams), CBSTs (Circuit-based Support Teams), DBSTs (District-based Support Teams) and LRCs (Learner Representative Councils), as well as parents and all the stakeholders in the external environment who have special interest in our Public Special Schools and Full Service Schools must learn to live in a world afflicted by the COVID 19 pandemic.

This Guide is developed to equip all educators, managers, administrators and parents with competences to stem the spread of COVID 19 while ensuring that efficient and effective teaching and learning continues in both the Full Service and Public Special Schools.

I appeal to all stakeholders and role-players to use this guide and support the Department’s efforts to ensure that learners with special education needs continue learn and perform well within the context of COVID-19 pandemic.

Education is a societal matter!

MEC for Education, Ms P Boshielo
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Foreword</td>
<td>2</td>
</tr>
<tr>
<td>Acronyms</td>
<td>4</td>
</tr>
<tr>
<td>Glossary</td>
<td>5</td>
</tr>
<tr>
<td>Purpose</td>
<td>8</td>
</tr>
<tr>
<td>2. Policy underpinnings</td>
<td>8</td>
</tr>
<tr>
<td>3. LSEN Context</td>
<td>9</td>
</tr>
<tr>
<td>3.1. The new COVID-19 pandemic in South Africa</td>
<td>9</td>
</tr>
<tr>
<td>3.2. COVID-19 and Learners with Special Education Needs (LSEN)</td>
<td>9</td>
</tr>
<tr>
<td>3.3. Special COVID-19 Guideline for LSEN in Limpopo</td>
<td>10</td>
</tr>
<tr>
<td>3.4. Managing Learner enrolment and disability type during COVID-19</td>
<td>11</td>
</tr>
<tr>
<td>3.5. Managing Differentiated Curricula during COVID-19</td>
<td>15</td>
</tr>
<tr>
<td>3.5.1. Scholastic/Academic Curriculum</td>
<td>15</td>
</tr>
<tr>
<td>3.5.2. Vocational/Skills Curriculum</td>
<td>15</td>
</tr>
<tr>
<td>3.5.3. Social/Life Skills Curriculum</td>
<td>15</td>
</tr>
<tr>
<td>3.5. Assess Learners living with disabilities during COVID-19</td>
<td>16</td>
</tr>
<tr>
<td>3.6.1. Assessing differentiated curricula</td>
<td>16</td>
</tr>
<tr>
<td>3.6.2. Exit, external and independent examinations</td>
<td>17</td>
</tr>
<tr>
<td>3.6. Special Learner and Teacher Support Materials (LTSM) during</td>
<td>17</td>
</tr>
<tr>
<td>COVID-19</td>
<td>18</td>
</tr>
<tr>
<td>4. Safely, Security and Infrastructure</td>
<td>18</td>
</tr>
<tr>
<td>4.1. Accommodation and hostels</td>
<td>18</td>
</tr>
<tr>
<td>4.2. Induction and Training</td>
<td>19</td>
</tr>
<tr>
<td>5. Concluding Remarks</td>
<td>19</td>
</tr>
<tr>
<td>References</td>
<td>19</td>
</tr>
<tr>
<td>Annexures</td>
<td>19</td>
</tr>
<tr>
<td>Annexure A: Readiness checklist</td>
<td>20</td>
</tr>
<tr>
<td>Annexure C: National Disability Organisations</td>
<td>22</td>
</tr>
<tr>
<td>Annexure D: Indicators of Success</td>
<td>24</td>
</tr>
<tr>
<td>Annexure E: Means of verification</td>
<td>26</td>
</tr>
<tr>
<td>Annexure F: Basic and essential hygiene and sanitation package for</td>
<td>27</td>
</tr>
<tr>
<td>each school</td>
<td></td>
</tr>
</tbody>
</table>
## Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASD</td>
<td>Autism Spectrum Disorder</td>
</tr>
<tr>
<td>B&amp;D</td>
<td>Blind and deaf</td>
</tr>
<tr>
<td>BDPI</td>
<td>Blind, deaf and physically impaired</td>
</tr>
<tr>
<td>BPI</td>
<td>Blind and physically impaired</td>
</tr>
<tr>
<td>CBST.</td>
<td>Circuit Based Support Team</td>
</tr>
<tr>
<td>COVID 19.</td>
<td>Corona virus 2019</td>
</tr>
<tr>
<td>SARS-CoV-2</td>
<td>Severe acute respiratory syndrome corona virus 2</td>
</tr>
<tr>
<td>DBE</td>
<td>Department of Basic Education</td>
</tr>
<tr>
<td>DBST.</td>
<td>District Based Support Team</td>
</tr>
<tr>
<td>DCAPS</td>
<td>Differentiated Curriculum and Assessment policy Statement</td>
</tr>
<tr>
<td>DoH</td>
<td>Department of Health</td>
</tr>
<tr>
<td>EWP6</td>
<td>Education White Paper 6</td>
</tr>
<tr>
<td>FET</td>
<td>Further Education and Training</td>
</tr>
<tr>
<td>FSS</td>
<td>Full Service School</td>
</tr>
<tr>
<td>GET</td>
<td>General Education and Training</td>
</tr>
<tr>
<td>II</td>
<td>Intellectual Impairment</td>
</tr>
<tr>
<td>LDoE</td>
<td>Limpopo Department of Education</td>
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<tr>
<td>LSEN</td>
<td>Learners with Special Education Needs</td>
</tr>
<tr>
<td>LSPID</td>
<td>Learners with Severe to Profound Disabilities</td>
</tr>
<tr>
<td>LTSM</td>
<td>Learner and Teacher Support Materials</td>
</tr>
<tr>
<td>MMI</td>
<td>Mild to moderately impaired</td>
</tr>
<tr>
<td>NICD</td>
<td>National Institute for Communicable Diseases</td>
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<tr>
<td>NPIs</td>
<td>Non-pharmaceutical interventions</td>
</tr>
<tr>
<td>NSC</td>
<td>National Senior Certificate</td>
</tr>
<tr>
<td>NQF</td>
<td>National Qualification Framework</td>
</tr>
<tr>
<td>PBST.</td>
<td>Provincial Based Support Team</td>
</tr>
<tr>
<td>OHSA</td>
<td>Occupational Health and Safety Act</td>
</tr>
<tr>
<td>PI</td>
<td>Physically impaired</td>
</tr>
<tr>
<td>PPE</td>
<td>Personal Protective Equipment</td>
</tr>
<tr>
<td>PSS</td>
<td>Public Special School</td>
</tr>
<tr>
<td>SARS</td>
<td>Severe Acute Respiratory Syndrome.</td>
</tr>
<tr>
<td>SASA.</td>
<td>South African Schools Act</td>
</tr>
<tr>
<td>SASL.</td>
<td>South African Sign Language</td>
</tr>
<tr>
<td>SBST.</td>
<td>School Based Support Team</td>
</tr>
<tr>
<td>SGB</td>
<td>School Governing Body</td>
</tr>
<tr>
<td>SIAS</td>
<td>Screening, Identification, Assessment and Support</td>
</tr>
<tr>
<td>SII</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>SMT.</td>
<td>School Management Team</td>
</tr>
<tr>
<td>SOP</td>
<td>Standard Operating Procedures.</td>
</tr>
<tr>
<td>TOC</td>
<td>Technical Occupational Curriculum</td>
</tr>
<tr>
<td>TVS</td>
<td>Technical Vocational Stream</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
</tr>
</tbody>
</table>
### Glossary

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Albinism.</strong></td>
<td>Typically refers to oculocutaneous. It is a group of inherited disorders where there is little or no production of pigment melanin.</td>
</tr>
<tr>
<td><strong>Assistive Devices</strong></td>
<td>Any device that is designed made or adapted to assist a learner in performing a particular educational task. It is intended to compensate for any form of functional limitation that makes it difficult for a learner with a disability to access the curriculum such as, a wheel chair, mobility aids, hearing aids, visual aids.</td>
</tr>
<tr>
<td><strong>Autism</strong></td>
<td>Refers to a broad range of conditions characterised by challenges with social skills, repetitive behaviours, speech and non-verbal communication.</td>
</tr>
<tr>
<td><strong>Blind</strong></td>
<td>Unable to see because of injury, disease or a congenital condition.</td>
</tr>
<tr>
<td><strong>Care Centre.</strong></td>
<td>A private establishment that provides living quarters and care for chronically ill patients.</td>
</tr>
<tr>
<td><strong>Co morbidity.</strong></td>
<td>The presence of one or more additional condition often core-occurring with a primary condition.</td>
</tr>
<tr>
<td><strong>COVID-19 related Non-</strong></td>
<td>NPIs are non-drug interventions to prevent the spread of the SARS-CoV-2 from staff or learner with COVID-19 to other learners or staff in schools. NPIs are categorised as 1) engineering controls – what we can do to the environment to reduce transmission, such as ensuring ventilation and sufficient space; 2) administrative controls – what we can arrange to reduce transmission, such as staggered time-tabling, screening, hand hygiene, cough etiquette and regular environmental cleaning; and 3) personal protective equipment – such as face masks and eye protection visors.</td>
</tr>
<tr>
<td><strong>Corona Virus.</strong></td>
<td>A type of virus known to cause infections in humans. This new strain was unknown before December 2019, when an outbreak of a pneumonia of unidentified cause emerged in Wuhan, China. Identified by Chinese scientists, the virus is now called SARS-CoV-2 because of its similarities to the virus that causes severe acute respiratory syndromes (SARS). It appears to be transmitted through droplets spread by coughing. The virus affects the respiratory system. The main symptoms include general weakness and fever, coughing and later stages sometimes pneumonia and difficulty in breathing.</td>
</tr>
<tr>
<td><strong>Deaf learners.</strong></td>
<td>Lacking the power of hearing or having impaired hearing.</td>
</tr>
<tr>
<td><strong>De-isolation</strong></td>
<td>An individual with confirmed COVID-19 can stop isolation precautions and return to school or work once there is no fever or other COVID-19 symptoms</td>
</tr>
<tr>
<td><strong>Drooling learners.</strong></td>
<td>Learners dropping saliva uncontrollably from the mouth</td>
</tr>
<tr>
<td><strong>Endemic</strong></td>
<td>A disease or a condition regularly found among particular people or country.</td>
</tr>
<tr>
<td><strong>Environmental decontamination</strong></td>
<td>All equipment and rooms where individuals who have confirmed COVID-19 have been within the last seven (7) days should be identified for appropriate cleaning. Following a thorough cleaning, surfaces are wiped, not sprayed, with disinfectants with 70% alcohol,</td>
</tr>
</tbody>
</table>

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COVID-19 related Non-pharmaceutical interventions (NPIs)
**Epidemic**
A disease that affects a large number of people within a community, population or region.

**Food Handlers.**
Anyone who either handles food or surfaces that are likely to be in contact with food such as cutlery, plates and bowls.

**Full Service School**
It is a school that has broadened its mission and vision to meet the needs of all its students. A Full Service School should have additional support programmes and structures for teaching and learning, and provide moderate level of support such as Curriculum Differentiation and Differentiated Assessment, for example, concessions.

**Hard of hearing**
Inability to hear well.

**Hostel fathers.**
A man in charge of and living in a boarding school house or children’s home.

**Hostel mothers.**
A woman employed as a chaperon that is, one who supervises a young woman in a hostel.

**Inclusive Education**
Inclusion in education refers to a model wherein students with special needs spends most of their time or all of their time with non-special needs students.

**Infectivity Period**
Time the individual with confirmed COVID-19 was present while in the infectious period as determined by:
- In an individual with confirmed COVID-19 who has symptoms, the infectious period begins 48 hours prior to symptom onset and lasts until eight (8) days after symptom onset.
- In an individual with confirmed COVID-19 with no symptoms:
  - Where the source of infection is unknown, the infectious period may be regarded as commencing 48 hours before the date of the sample, to eight (8) days after the sample was taken.
  - Where the source of infection is known, the infectious period can be estimated based on a minimum incubation period of 2 days following exposure.

**Isolation**
A period during which someone who is confirmed to have COVID-19 is separated from healthy people. The period stops after 10 days or they have no more symptoms. Isolation can be involuntary if demanded by the State.

**Pandemic**
A pandemic is an epidemic that is spread over multiple countries or continents.

**Low vision**
The loss of sight that is not correctable with prescription eye glasses, contact lenses or surgery. It does not include complete blindness because there is still some sight that can be improved by the use of visual aids.

**Pandemic**
It is an epidemic that is spread over multiple countries or continents.

**Outbreak**
It is a greater-than-anticipated increase in the number of endemic cases. It can also be a single case in a new area. If it is not quickly controlled, an outbreak can become an epidemic.

**Physical disability**
A physical condition that affects a person’s mobility, physical capacity, stamina or dexterity. This can include brain or spinal cord injuries, multiple sclerosis, cerebral palsy, respiratory disorders, epilepsy, hearing and visual impairments among others.

**Physical distancing**
Refers to a physical space between people measured in metres. In South African schools, minimum of 1.5meters distance between individuals is permitted.

**Public Full Service School**
A school that has broadened its mission and vision to meet the needs of all students.

**Public Special**
A school catering for children with special needs. It is a special needs
| **School** | school that caters for learners with special educational needs. These schools provide a high level of support. They should provide specialist classrooms or school organisation or classroom organisation as well as specialised personnel. Learners in these schools in LDoE have blind, deaf, intellectual impairment and those living with albinism. Special schools as resource centres must offer support to mainstream and Full Service Schools. It is important that the special schools be strengthened to offer quality education to their own learners before they can give support to the other schools. |
| **Quarantine** | 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 eight (10) days in the case of COVID-19. Quarantine can be involuntary if demanded by the State. |
| **Sanitizers** | A liquid, gel or foam generally used to decrease infectious agent on hands. Preferably hand washing with soap and water. |
| **Screening for COVID-19** | A way for health workers to find out if you may have COVID-19 or not. |
| **Self-isolation** | An individual who either has COVID-19 or has been exposed to someone with COVID-19 voluntarily selects to separate her/himself from other healthy people. During self-isolation, the individual should not go out, wear a mask in the home, and have separate living and ablution facilities where possible. |
| **Social distancing** | Refers to a measure of distance across social boundaries. |
| **Special Schools** | Special schools are schools catering for children with special needs. |
Purpose

The purpose of this COVID-19 Special Guideline is to address issues of compliance as well as prevention and management of the spread of COVID-19 pandemic in Public Special Schools and Full Service Schools.

The main deliverables of this COVID-19 Special Guideline for Special and Full Service Schools are to:

1. orientate the SMTs, SGBs, SBSTs, Parents and Learners in Special and Full Service schools on the COVID-19 pandemic (see details in the COVID-19 Orientation Guide on the Limpopo Department of Education website),
2. guide Special and Full Service Schools on how respond to the COVID-19 pandemic, and
3. familiarise Special and Full Service Schools with safety standards to minimise the spread and infections of COVID-19.

Activity 1: Study the acronyms and glossary of concepts, and identify concepts you are not familiar with. You will revisit these concepts as you go through this Special Guideline.

2. Policy underpinnings

This Special Guideline must be read together with the following laws, policies and guidelines:

- The South African Constitution of 1996. Section 29,
- South African Schools Act (SASA), Act 84 of 1996, Section 8:4 (SASA),
- GOVERNMENT GAZETTE 02 AUGUST 2020 No 43578, Volume 662.
- Policy on Screening, Identification, Assessment and Support 2014,
- Education White Paper 6 of 2001

The South African Constitution of 1996. Section 29 states that everyone has the right to education which the state through reasonable measures must make progressively available and accessible.

National Education Policy Act; act 1996. The cooperation between the department and other state departments and provincial education department is guaranteed under this law.

South African Schools Act; act 84 of 1996; section 8:4 (SASA). A code of conduct must be aimed at establishing a disciplined and purposeful school environment, dedicated to the improvement and maintenance of the quality of the learning process. According to this Act, no learner is exempted from the obligation to comply with the code of conduct of the school.
Policy on Screening, Identification, Assessment and Support 2014 is a policy aimed at improving access to quality education for vulnerable learners and those who experience barriers to learning. Its main focus is to manage and support teaching and learning processes for learners who experience barriers to learning within the framework of the National Curriculum Statement Grades R – 12.

Education White Paper 6 of 2001 is a symbolic policy that states that all children can learn, and that all children and youth need support. As such, education structures, systems and learning methodologies should meet the needs of all learners. It also acknowledges that learning can also occur in the home and community and within formal and informal settings and structures.

Government Gazette 02 AUGUST 2020 No 43578, volume 662. Speaks about school break and arrangements after break.

Standard Operating Procedures (SOP) for teachers, non-teaching staff, and learners on the corona virus (2019 NCOV) or COVID-19 outbreak in South Africa. This procedural policy provides guideline for all administrators on the approved steps that must be taken to prevent the spread of and manage the cases of COVID-19 within the basic education sector.

3. LSEN Context

3.1. The new COVID-19 pandemic in South Africa

In January 2020, the World Health Organization (WHO) declared the outbreak of new corona virus. It was classified as a high risk virus and started to spread internationally. In March 2020 the WHO assessed COVID-19 as a pandemic which resulted in governments and health authorities globally adopting a firm resolution to contain the COVID-19 outbreak.

On 26/03/2020 the President of the Republic of South Africa announced a lockdown at risk level 5. This affected schooling country-wide resulting in learners losing teaching time of about two months.

Activity 2:

Indicate how the loss of two-months teaching time affected learning in Special and Full Service Schools. Also indicate how concepts you identified in Task 1 were applied in these schools.

3.2. COVID-19 and Learners with Special Education Needs (LSEN)

The Limpopo Special and Full-service schools were not spared by the COVID-19 pandemic. While the public ordinary schools received generic orientation and personal protective equipment, it became clear that Special and Full Service Schools needed more specialised personal protective equipment as well as special measures to mitigate against the spread of the COVID-19. Hence the revision of the COVID-19 Standard Operating Procedures (SOP) by the Department of Basic Education to accommodate learners with special education needs.
On the curriculum delivery side, learners with special education also needs special attention in order to efficiently and effectively implement differentiated curricula that meet their needs.

### 3.2. Special COVID-19 Guideline for LSEN in Limpopo

This Special Guideline has been developed to contextualise the revised Standard Operating Procedures issued by the DBE (Department of Basic Education) for all schools. Its aim is to allow principals, SMTs, SGBs of Public Special Schools and Full Service Schools to implement the revised SOP and related guidelines more appropriately and efficiently.

In order to guide the implementation of the revised SOPs and related protocols in Limpopo, it is important to know the school landscape that teach learners with special education needs. The two institutional forms that cater for learners with special education needs in Limpopo are special and full service schools.

**Task 3:**

How would you apply the concept/s identified in Task 1 to the largest category of learners with special education needs?

The special education needs that are addressed by the special schools in the Limpopo province can be categorised as follows:

- physically impaired,
- intellectually impaired,
- blind and
- deaf.

The following graph shows that the severely intellectually impaired form the greatest number of learners in special schools, followed by the mild to moderately impaired, and the blind and deaf. The physically impaired form the smallest number of learners living with disabilities.

![No of Disability Schools](image)

*Figure 1: The types of disabilities in the Limpopo special schools.*
Acronyms

MMI  = Mild to moderately impaired
SII  = Severely intellectually impaired
B&D  = Blind and deaf
PI   = physically impaired
BPI  = Blind and physically impaired
BDPI = Blind, deaf and physically impaired

3.3. Managing Learner enrolment and disability type during COVID-19

Task 4: Think about the total number of learners in Special Schools. How would you apply the concepts you identified in Task 1 to all these learners?

The enrolments in special schools range from 81 to 846. As indicated in Table 1 below, the majority of these schools teach learners who live with intellectual impairments. The following table shows the enrolments and disability type per school.

Table 1: Special schools, their enrolments and disability type

<table>
<thead>
<tr>
<th>No</th>
<th>School name (district)</th>
<th>Learner enrolment</th>
<th>Disability type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Asiphumelele (sekhukhune)</td>
<td>81</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>2</td>
<td>Bana-ba-thari (capricorn south)</td>
<td>168</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>3</td>
<td>Benedict &amp; hope (hostel) (capricorn south)</td>
<td>204</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>4</td>
<td>Bosele (hostel) (sekhukhune)</td>
<td>325</td>
<td>Blind and deaf</td>
</tr>
<tr>
<td>5</td>
<td>Botlokwa (capricorn north)</td>
<td>186</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>6</td>
<td>Fulufhelo Vhembe west)</td>
<td>846</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>7</td>
<td>General piet joubert (hostel) (capricorn north)</td>
<td>601</td>
<td>Mild to moderately intellectually impaired</td>
</tr>
<tr>
<td>8</td>
<td>Grace &amp; hope (hostel) (capricorn north)</td>
<td>400</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>9</td>
<td>Grace &amp; love (vhembe west)</td>
<td>162</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>10</td>
<td>Helene franz (hostel) Capricorn north</td>
<td>351</td>
<td>Physically impaired</td>
</tr>
<tr>
<td>11</td>
<td>Ipelegeng (sekhukhune)</td>
<td>189</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>12</td>
<td>Jane furse (sekhukhune)</td>
<td>282</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>13</td>
<td>Lebone (mogalakwena)</td>
<td>49</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>14</td>
<td>Letaba (hostel) (tzaneen)</td>
<td>189</td>
<td>Blind and physically impaired</td>
</tr>
<tr>
<td>15</td>
<td>Matobule</td>
<td>63</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>No</td>
<td>School name (district)</td>
<td>Learner enrolment</td>
<td>Disability type</td>
</tr>
<tr>
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<td>-------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>16</td>
<td>Mahlasedi (capricorn south)</td>
<td>440</td>
<td>Mild to moderately intellectually impaired</td>
</tr>
<tr>
<td>17</td>
<td>Mhinga (mopani)</td>
<td>138</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>18</td>
<td>New horizon (hostel) (capricorn north)</td>
<td>185</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>19</td>
<td>Nthabiseng (mopani)</td>
<td>152</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>20</td>
<td>Pfunanani (hostel) (mopani)</td>
<td>436</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>21</td>
<td>Phatlaphadima (hostel) (capricorn north)</td>
<td>201</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>22</td>
<td>Ratanang (hostel) (capricorn north)</td>
<td>352</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>23</td>
<td>Rehlahleng (hostel) (riba cross)</td>
<td>88</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>24</td>
<td>Rethuseng (hostel) (capricorn north)</td>
<td>116</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>25</td>
<td>Rivoni (hostel) (vhembe west)</td>
<td>94</td>
<td>Blind</td>
</tr>
<tr>
<td>26</td>
<td>Sedibeng (hostel) (waterberg)</td>
<td>98</td>
<td>Deaf</td>
</tr>
<tr>
<td>27</td>
<td>Setotolwane (hostel) (capricorn north)</td>
<td>221</td>
<td>Blind and deaf</td>
</tr>
<tr>
<td>28</td>
<td>Siloe (hostel) (capricorn south)</td>
<td>110</td>
<td>Blind</td>
</tr>
<tr>
<td>29</td>
<td>Suzan strijdom (hostel) Waterberg</td>
<td>405</td>
<td>Mild to moderately intellectually impaired</td>
</tr>
<tr>
<td>30</td>
<td>Thusanang (hostel) Waterberg</td>
<td>221</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>31</td>
<td>Tshilidzini (hostel) Vhembe east</td>
<td>360</td>
<td>Blind, deaf and physically impaired</td>
</tr>
<tr>
<td>32</td>
<td>Tshilwavhusiku Vhembe west</td>
<td>215</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>33</td>
<td>Tsoga-o-tirele (hostel) Capricorn south</td>
<td>308</td>
<td>Severely intellectually impaired</td>
</tr>
<tr>
<td>34</td>
<td>Yingisani (hostel) Tzaneen</td>
<td>193</td>
<td>Deaf</td>
</tr>
<tr>
<td>35</td>
<td>Ramokgwakga (Mopani West)</td>
<td>171</td>
<td>Severely to profound intellectual disability</td>
</tr>
</tbody>
</table>

Special PPEs, that are different from those that are given to Public Ordinary Schools, are required for Special Schools. These PPEs might not be included in the official database of the sector. It would be important for managers and educators to be aware of the types of PPEs that are required and find a creative way of ensuring their availability in schools.
Task 5:

Write a table with two columns and compare PPEs for Public Ordinary Schools with those of Special Schools. Indicate how you will apply concepts you identified in Task 1 to use of PPEs for Special Schools.

The PPEs for special schools in the Limpopo province are outlined in Table 2 below. You will notice that some of these PPEs are only relevant for Special Schools. It is thus important for SMTs and SGBs for Special Schools to be familiar with this type of equipment for learners with special education needs. As we proceed through this Special Guideline, you will notice that special and/or specialist LTSMs and curriculum delivery methodologies will also be required to meet the needs of learners living with different disabilities.

Table 2: PPEs for Special Schools

<table>
<thead>
<tr>
<th>Category</th>
<th>Type of PPEs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learners (8535)</td>
<td>60% (5121) – bucket hats with face shields</td>
</tr>
<tr>
<td>Educators (1300)</td>
<td></td>
</tr>
<tr>
<td>Kitchen staff</td>
<td></td>
</tr>
<tr>
<td>Cleaners</td>
<td></td>
</tr>
<tr>
<td>Hostel personnel</td>
<td></td>
</tr>
<tr>
<td>Other non-professional support staff</td>
<td></td>
</tr>
<tr>
<td>Drivers</td>
<td></td>
</tr>
<tr>
<td>Professional support staff-health professional (80)</td>
<td></td>
</tr>
<tr>
<td>Administrative measures (for offices, classrooms, hostels, etc.)</td>
<td></td>
</tr>
</tbody>
</table>

Table 2: Full Service Schools, their enrolments and disability type

<table>
<thead>
<tr>
<th>No</th>
<th>School name (district)</th>
<th>Learner enrolment</th>
<th>Disability type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Eureka</td>
<td>1072</td>
<td>2 ADHD; 54 visual; 24 hearing; 12 asthmatic; 2 speech, 1 reading; 6 behavioural</td>
</tr>
<tr>
<td>2</td>
<td>SJ Van Der Merwe</td>
<td>1287</td>
<td>8 physical; 1 albism; 6 asthmatic; 7 visual; 4 speech; 1 intellectual; 4 various physical ailments such as chronic abdominal pains, nose bleeding and kidney problems</td>
</tr>
<tr>
<td>3</td>
<td>Mahlodumela Prim</td>
<td>245</td>
<td>18 behavioural; 1 epilepsy; 1 physical; 2 speech; 1 asthmatic</td>
</tr>
<tr>
<td>4</td>
<td>HOAHS</td>
<td>902</td>
<td>4 physical</td>
</tr>
<tr>
<td>5</td>
<td>St. Brendans</td>
<td>691</td>
<td>3 physical</td>
</tr>
<tr>
<td>6</td>
<td>Mammoka Prim</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Potgietersrus Primary</td>
<td>1252</td>
<td>2 physical disabilities</td>
</tr>
<tr>
<td>8</td>
<td>N waxindzele Prim</td>
<td>644</td>
<td>2 ADHD; 1 Autistic; 1 physical; 1 epileptic; 24 intellectual</td>
</tr>
<tr>
<td>9</td>
<td>Mariveni Prim</td>
<td>599</td>
<td>52 dyslexia, 3 physical; 3 epilepsy; 1</td>
</tr>
<tr>
<td>No</td>
<td>School name (district)</td>
<td>Learner enrolment</td>
<td>Disability type</td>
</tr>
<tr>
<td>----</td>
<td>----------------------------------</td>
<td>-------------------</td>
<td>---------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>cerebral palsy, 5 attention deficit; 10 dygraphise; 1 partially sighted; 6 socio-economic problem.</td>
</tr>
<tr>
<td>10</td>
<td>Marumofase Primary</td>
<td>357</td>
<td>3 Autistic; 4 Severe behavioural disorder; 2 Hard hearing; 2 Physical disabled; 29 Specific learning disabled; 12 Severe mentally handicapped</td>
</tr>
<tr>
<td>11</td>
<td>Sibisi Primary</td>
<td>504</td>
<td>1 physical; 4 attention deficit; 5 intellectual; 15 socio economic</td>
</tr>
<tr>
<td>12</td>
<td>Titišane Primary</td>
<td>190</td>
<td>12 intellectual; 7 speech, 1 physical; 1 epilepsy; 1 autism</td>
</tr>
<tr>
<td>13</td>
<td>Ben Viljoen Sec</td>
<td>697</td>
<td>4 autistic; 25 ADHD; 3 Reading and concentration</td>
</tr>
<tr>
<td>14</td>
<td>Mokgalabje Primary</td>
<td>229</td>
<td>1 physical</td>
</tr>
<tr>
<td>15</td>
<td>Ikhwezilo kusa Prim</td>
<td>1030</td>
<td>1 paraplegic; 2 epileptic; 4 speech; 2 hard of hearing; 2 short sighted.</td>
</tr>
<tr>
<td>16</td>
<td>Mutende Primary</td>
<td>370</td>
<td>4 visual, 4 physical; 44 low cognitive levels.</td>
</tr>
<tr>
<td>17</td>
<td>Thohoyandou Technical</td>
<td>1502</td>
<td>5 physical; 30 reading; 10 hard of hearing; 10 poor handwriting; 1 albinism.</td>
</tr>
<tr>
<td>18</td>
<td>Tshiluvhi Primary</td>
<td>1400</td>
<td>6 physical, 2 visual; 1 epilepsy; 1 autism; 1 speech.</td>
</tr>
<tr>
<td>19</td>
<td>Tshisaulu Primary</td>
<td>1319</td>
<td>1 Auditory; 2 Visual; 2 Physical; 3 Epilepsy ; 23 Intellectual</td>
</tr>
<tr>
<td>20</td>
<td>Eltivillas</td>
<td>932</td>
<td>2 Albinism; 2 Physical; 2 visual; 2 Epilepsy; 1 artificial heart.</td>
</tr>
<tr>
<td>21</td>
<td>Mmamakwa Primary</td>
<td>1227</td>
<td>3 Attention deficit disorder; 3 Dyslexia; 1 Cerebral palsied; 6 Epilepsy; 1 Hard of hearing; 6 Intellectually disabled; 2 Anxiety Disorder; 3 Partially sighted; 8 Impaired upper limb; 6 Specific learning disorder</td>
</tr>
<tr>
<td>22</td>
<td>Raeleng Secondary</td>
<td>976</td>
<td>2 Disorder; 6 Epilepsy; 10 Hard Hearing; 43 Partially Sighted; 2 Impaired lower limb; 11 Attention Deficit Hyperactive; 1 Profound Intellectual Disabled; 10 Chronic Medical Condition</td>
</tr>
<tr>
<td>23</td>
<td>Thabo Mbeki Primary</td>
<td>389</td>
<td>3 Physical</td>
</tr>
<tr>
<td>24</td>
<td>Mmera Primary</td>
<td>678</td>
<td>3 Physical; 1 Albinism; 6 Visual; 5 Epilepsy; 4 Speech</td>
</tr>
<tr>
<td>25</td>
<td>Mutende</td>
<td>370</td>
<td>4 physical; 25 visual; 5 poor handwriting and 14 speech</td>
</tr>
</tbody>
</table>
3.4. Managing Differentiated Curricula during COVID-19

Task 6:

Write a table with three columns and compare curricula offered in Public Ordinary Schools with those of Special and Full Service Schools in the first two columns. In the third column, indicate how you will apply concepts you identified in Task 1 to the rollout of differentiated curricula in Special and Full Service Schools.

Special schools offer a diversified Curriculum to meet the needs of different types of learner disabilities and barriers to learning. The types of curricula cover:

3.5.1. Scholastic/Academic Curriculum. There are 9 Special Schools that offer Scholastic Programmes in Limpopo. Such a curriculum is similar to that which is rolled out in mainstream schools including reading, writing, numeracy and literacy. The nine special schools that offer scholastic/academic curriculum are:

1) Setotolwane Special School (Deaf and Blind)
2) Helene Franz Special School (Physically Disabled)
3) Letaba Special School (Blind and Physically Disabled)
4) Yingisani Special Schools (Deaf)
5) Bosele Special School (Deaf and Blind)
6) Siloe Special School (Blind)
7) Tshilidzini Special School (Blind, Deaf and Physically Disabled)
8) Rivoni Special School (Blind)
9) Sedibeng Special School (Deaf)

3.5.2. Vocational/Skills Curriculum. There are 26 Special Schools for the Intellectually Impaired Learners which offer Vocational and Social Skills Programmes. Such a Curriculum covers subjects such as Mathematics, Life Skills, FAL, Agricultural Studies, Ancillary Health Care, Hospitality Studies, Maintenance, Art and Crafts, Beauty and nail technology, Brick laying and plastering, Consumer Studies encapsulating Food production and Sewing, Hair dressing and beauty care, Motor Mechanics, Natural Sciences, Office Admin, Plumbing, Welding and Woodworking and Timber.

The Technical Occupational Stream is aligned to the Senior Phase. It is organised according to Years, named Technical Occupational (TO) Year 1, Year 2, Year 3 and Year 4. **NQF level 1 Qualification**

This stream is 75% practical and 25% theory.

The province is piloting Technical-Occupational Curriculum in four schools: Piet Joubert, Mahlasedi, Bana ba Thari and Susan Strijdom.

3.5.3. Social/Life Skills Curriculum (Learning Programme). Ten Special Schools offer social skills without workshops. Teachers in these special schools equip learners with life skills or coping skills for the adaptive behavior which includes real life skills, inter alia, such as:
grooming, dressing, safety, safe food handling, school rules, cleaning and Social skills. This curriculum is meant for the PID learners and the subjects in the Learning Programme are Mathematics, Life Skills, Language and communication.

The ten special schools that offer social/life skills curriculum without workshops curriculum are:

1. Asiphumelele,
2. Rethuseng,
3. Lebone,
4. Rehlahleng,
5. Matobule,
6. Nthabiseng,
7. Tsoga O Itirele,
8. Jane Furse,
9. Ipelegeng,
10. Minga and
11. Phatlaphadima

3.5.4. Differentiated CAPS (DCAPS).

Differentiated curriculum is aligned to intermediate phase. It is organised according to **Grades i.e Grade R-5**

This stream is 80% practical and 20% theory. Five special schools in the province have been selected to pilot the DCAPS and they are; Nthabiseng Special School, Grace and Love Special School, Pfunanani Special School, Thusanang Special school and

Task 7:

Use one concept you identified in Task 1 and demonstrate how you will apply it when delivering social/life skills curriculum without violating COVID-19 rules and regulations.

3.5. Assess Learners living with disabilities during COVID-19

3.6.1. Assessing differentiated curricula

The implementation of the above-mentioned differentiated curricula requires use of different assessment strategies. For example, normal pass requirements would be needed for scholastic/academic Curriculum and vocational/skills curricula, whereas special assessment approaches will be needed for social/life skills curricula.

In order to implement a varied assessment regime, there is a need to:

- Ensure that appropriately qualified educators and subject advisors are appointed to teach and assess different curricula in special and full service schools,
• Involve and make key stakeholders aware of differentiated curricula for special and full service schools, and
• Ensure delivery of appropriate LTSM to support delivery of differentiated curricula in full service and special schools.

3.6.2. Exit, external and independent examinations

Thus far, only two learners have written the South African Sign Language (SASL) in the 2019 National Senior Certificate examinations and have both passed. The external and independent examinations are, thus far, written by those who have enrolled for scholastic/academic curricula. As the schooling system strives to be inclusive, it is important to build capacities and capabilities of special and full-service schools to develop quality assessments tasks and adequately prepare for differentiated curricula.

Task 8:

Indicate how you would apply for concessions of two learners who, one is living with partial visual impairment and the other having had a tragedy at home during the examination time.

3.6 Special Learner and Teacher Support Materials (LTSM) during COVID-19

The Department annually distribute LTSMs to all schools in the province. The Departmental LTSM catalogue contains, largely, the hard copies of LTSMs in the form of textbooks, workbooks and guides.

The LTSMs that are designed for learners with special education needs include those for the blind and partially sighted. These exist in the form of Braille textbooks. The types of braille used in all the 6 special schools for the blind/partially sighted (see Table 3 below) are:

• Grade 1/ Uncontracted Braille and
• Grade 2 Braille/Contracted Braille

The Department has identified Siloe Special School for the Blind as the Braille Production Unit with capacity and capability to produce quality and bulk Braille LTSMs.

The following table provides the braille capacities and capabilities in special schools.

**Table 3: braille machines and their designers**

<table>
<thead>
<tr>
<th>School</th>
<th>Tactile graphic designs</th>
<th>Brailist</th>
<th>Apex braille machines</th>
<th>Braille master copies</th>
<th>Braille embosser/Printer</th>
<th>Perkins braille machines</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setotolwane</td>
<td>None</td>
<td>Yes</td>
<td>14</td>
<td>Master copies are kept by the provincial office</td>
<td>3 (1 needs repairs)</td>
<td>117 (21 good &amp; 96 not working)</td>
</tr>
<tr>
<td>Siloe</td>
<td>Yes</td>
<td>Yes</td>
<td>72</td>
<td>1 (old)</td>
<td>80 (35 not good condition)</td>
<td></td>
</tr>
<tr>
<td>Letaba</td>
<td>None</td>
<td>Yes</td>
<td>9</td>
<td>1</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>Bosele</td>
<td>None</td>
<td>None</td>
<td>26 (21 good, 5)</td>
<td>2</td>
<td>32 (7 not repairable)</td>
<td></td>
</tr>
</tbody>
</table>
Given the braille picture in special schools, the following table provides summary picture of the braille challenges and needs in the Limpopo special schools.

**Table 4: Braille challenges in special schools**

<table>
<thead>
<tr>
<th>Name of school</th>
<th>Challenges &amp; needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setotolwane</td>
<td>LTSM, Supply of Braille books</td>
</tr>
<tr>
<td>Siloe</td>
<td>No Braille Technician</td>
</tr>
<tr>
<td>Rivoni</td>
<td>No Braille Technician</td>
</tr>
<tr>
<td>Tshilidzini</td>
<td>No Braille Technician</td>
</tr>
<tr>
<td>Letaba</td>
<td>Braille machines are broken. Lack of Finance to repair. Braille paper very expensive. No Text Books except in Mathematics gr 4 – 7</td>
</tr>
<tr>
<td>Bosele</td>
<td>No Braille list</td>
</tr>
</tbody>
</table>

The Special and Full Service Schools thus need to conduct risk assessments on an ongoing basis to identify LTSM challenges and measures to overcome them.

## 4. Safely, Security and Infrastructure

It is important to ensure that all measures to be taken during the COVID-19 pandemic promote the following values:

- **Safety** – All teachers, learners and support staff must feel safe within the school and at home.
- **Stability and equilibrium** – All teachers, learners and support staff must feel relaxed, composed and grounded onsite and offsite.
- **Care and support** – All teachers, learners and support staff must be part of meaningful relationships that bring and enhance support amongst themselves.
- **Hope** – All teachers, learners and support staff must be given a sense of hope and believe in the ideal that things will work out well.

These values must find expression in the physical milieu in which learners, educators, administrators, managers and parents inhabit. The accommodation and hostels are the physical milieu that must promote healthy and high hygienic standards to minimise the spread and impact of COVID-19.

### 4.1. Accommodation and hostels

The accommodation of learners with intellectual disabilities in schools and hostels, where applicable, during the COVID-19 pandemic requires the consideration of the complex and unique needs and accommodations required to ensure their school attendance is in their best interest. The Minister of Health, has described the fight against COVID-19 as a people’s war against the virus:

*We will defeat the pandemic on the basis of collective social behavioural change that creates a whole new culture of distancing, of use of masks, cough etiquette and ensuring that everybody is cautious of their individual roles, because unless*
From the above, it is obvious that our chance to win against the COVID-19 pandemic lies in our acts of meticulous planning, preparation and constant awareness. A higher degree of these capabilities is, however, required where schools have learners and persons with disabilities or who may be vulnerable and susceptible to contracting COVID-19. For instance, a range of complicating factors may arise in a school context, due to the nature of vulnerabilities and the manner in which schools manage their daily practices in response to these complexities that may compromise the safety of learners, teachers and support staff.

A checklist of school readiness in terms of accommodation and hostels is found in Annexures A and B. Use it to assess school readiness and areas to intervene as and when it is desired.

4.2. Induction and Training

All staff need to use this Special COVID-19 Guideline to induct and train educators, administrators, learners and parents in order to ensure full knowledge and understanding of the following:

- Latest up to date advice and guidance on public health and hygiene;
- What to do to ensure optimal learning during COVID-19;
- Control measures to prevent the spread of COVID-19;
- Duties and responsibilities of staff during COVID-19; and
- Display, advocacy and communication about COVID-19.

5. Concluding Remarks

This guideline provides an outline of the steps that needs to be taken in order to limit the spread and impact of COVID-19 among learners with intellectual disabilities. Special and full-service schools are alerted to the fact that the strength of these guidelines lies in them being used and applied in conjunction with directions from the following documents, which are freely available at www.education.gov.za:

- Corona virus Orientation Guidelines for Schools, Teachers, Support Staff and Learners on the COVID-19 Outbreak in South Africa;
- DBE Guidelines for Schools on Maintaining Hygiene during COVID-19 Pandemic;
- ELRC Collective Agreement 1 of 2020: Concession process to follow for employees with a co morbidity (COVID-19); and
- Standard Operating Procedure for the Prevention, Containment and Management of COVID-19 in Schools and School Communities.

References


National disability organisations (see Annexure c)
## Annexures

### Annexure A: Readiness checklist

<table>
<thead>
<tr>
<th>#</th>
<th>Activity</th>
<th>Done</th>
<th>Not Done</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Cleansing at school and hostels</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>PPEs for learners and Educators available</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Communication with parents on the return dates and time</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Manage teachers and support staff vacancies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Arrangements made to limit visitors access into the school</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Plan to keep record of contacts of all teachers, learners and all who may visit the school</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Establish the number of learners returning to hostel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.</td>
<td>Plan to manage dining hall activities for learners and staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9.</td>
<td>Plan to display expected hygiene practices at the hostels</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.</td>
<td>Plan for social distancing and washing of hands in between the school and hostel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11.</td>
<td>School buildings checked: water system availability and functionality, Offices, Classrooms and Hostels ventilation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.</td>
<td>School COVID-19 team established</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13.</td>
<td>Procedures on screening available</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14.</td>
<td>List of teachers and learners with co morbidities if any available</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>Orientation on COVID-19 done</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16.</td>
<td>Classrooms prepared for Learners and Educators</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17.</td>
<td>Daily and frequency cleaning plan available</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td>Support Staff duty plan available</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td>Re-allocation of duty done for teachers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20.</td>
<td>Isolation room available and prepared</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21.</td>
<td>Signage/posters for COVID-19 compliance displayed in offices, classrooms, bathrooms etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Annexure B: Checklist to guide management of COVID-19 pandemic

<table>
<thead>
<tr>
<th>Activity</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct COVID-19 Orientation session for SMT &amp; SGB</td>
<td>Principal</td>
</tr>
<tr>
<td>Arrange deep cleaning at school</td>
<td>SGB</td>
</tr>
<tr>
<td>Check availability of PPEs</td>
<td></td>
</tr>
<tr>
<td>Communicate with parents on return date and times</td>
<td></td>
</tr>
<tr>
<td>Manage teachers and support staff vacancies</td>
<td></td>
</tr>
<tr>
<td>Make necessary arrangements to limit visitors access into the school</td>
<td></td>
</tr>
<tr>
<td>Keep record of contacts of all teachers, learners and all who may visit the school</td>
<td></td>
</tr>
<tr>
<td>Manage deep cleaning of the school including hostels</td>
<td></td>
</tr>
<tr>
<td>Establish the number of learners returning to hostel</td>
<td></td>
</tr>
<tr>
<td>Plan management of dining hall activities for learners and staff</td>
<td></td>
</tr>
<tr>
<td>Display expected hygiene practices at the hostel</td>
<td></td>
</tr>
<tr>
<td>Have a plan for social distancing and washing of hands in between school and hostel times</td>
<td></td>
</tr>
<tr>
<td>Plan for screening on arrival and daily</td>
<td></td>
</tr>
<tr>
<td>Plan social distancing for sleeping arrangement at hostel</td>
<td></td>
</tr>
<tr>
<td>School buildings check: Water system availability and functionality, Offices, Classrooms and Hostels ventilation</td>
<td></td>
</tr>
<tr>
<td>Establish School COVID-19 Team</td>
<td></td>
</tr>
<tr>
<td>Include SGB and SBST members in the COVID-19 team</td>
<td></td>
</tr>
<tr>
<td>Set up procedures on screening, issuing out PPEs to teachers and learners</td>
<td></td>
</tr>
<tr>
<td>Conduct COVID-19 Orientation</td>
<td>SMT</td>
</tr>
<tr>
<td>Establish the number of teachers who may not report due to comorbidities</td>
<td></td>
</tr>
<tr>
<td>Prepare number of teachers, classrooms and learners</td>
<td></td>
</tr>
<tr>
<td>Prepare daily and frequency cleaning plan</td>
<td></td>
</tr>
<tr>
<td>Set up plan for screening</td>
<td></td>
</tr>
<tr>
<td>Prepare support staff duty plan</td>
<td></td>
</tr>
</tbody>
</table>
## Annexure C: National Disability Organisations

<table>
<thead>
<tr>
<th>#</th>
<th>Organisation</th>
<th>Position</th>
<th>Name</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Albinism Society South Africa</td>
<td>Ms</td>
<td>Nomasonto Mazibuko</td>
<td><a href="mailto:mazibukong@gmail.com">mazibukong@gmail.com</a></td>
</tr>
<tr>
<td>02</td>
<td>Autism SA</td>
<td>Ms</td>
<td>Sandra Klopper</td>
<td><a href="mailto:director@autismsouthafrica.org">director@autismsouthafrica.org</a></td>
</tr>
<tr>
<td>03</td>
<td>Cheshire Homes</td>
<td>Mr</td>
<td>Bernard Montwedi</td>
<td><a href="mailto:benny@cheshirehomesa.org.za">benny@cheshirehomesa.org.za</a></td>
</tr>
<tr>
<td>04</td>
<td>DEAFBLIND SA</td>
<td>Mr</td>
<td>Philip Dobson</td>
<td><a href="mailto:Deafblind.care@nid.org.za">Deafblind.care@nid.org.za</a></td>
</tr>
<tr>
<td>05</td>
<td>DEAFSA</td>
<td>Mr</td>
<td>Bruno Druchen</td>
<td><a href="mailto:Brunodruchen@deafsa.co.za">Brunodruchen@deafsa.co.za</a></td>
</tr>
<tr>
<td>06</td>
<td>Disabled People South Africa (DPSA) Youth with Disabilities</td>
<td></td>
<td>Wonderboy Qaji</td>
<td><a href="mailto:w.qaji@webmail.co.za">w.qaji@webmail.co.za</a></td>
</tr>
<tr>
<td>07</td>
<td>Disabled People South Africa (DPSA)</td>
<td>Mr</td>
<td>Robert Masambo</td>
<td><a href="mailto:Mthini2281@gmail.com">Mthini2281@gmail.com</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td><a href="mailto:rmasambo@mpg.gov.za">rmasambo@mpg.gov.za</a></td>
</tr>
<tr>
<td>08</td>
<td>DPSA (Women with Disabilities)</td>
<td>Ms</td>
<td>Poppy Mocumi</td>
<td><a href="mailto:mocumipoppy@gmail.com">mocumipoppy@gmail.com</a></td>
</tr>
<tr>
<td>09</td>
<td>Disabled Children Action Group (DICAG)</td>
<td>Mrs</td>
<td>Sandra Ambrose</td>
<td><a href="mailto:info@dicag.co.za">info@dicag.co.za</a></td>
</tr>
<tr>
<td>10</td>
<td>Down Syndrome South Africa (DSSA)</td>
<td>Dr</td>
<td>Barbara Monyemore</td>
<td><a href="mailto:dssa@icon.co.za">dssa@icon.co.za</a></td>
</tr>
<tr>
<td>11</td>
<td>Epilepsy South Africa</td>
<td>Ms</td>
<td>Marina Clarke</td>
<td><a href="mailto:Nationaldirector.no@epilepsy.org">Nationaldirector.no@epilepsy.org</a></td>
</tr>
<tr>
<td>12</td>
<td>National Association of Persons with Cerebral Palsy (NAPCP – Cerebral Palsy)</td>
<td>Mr</td>
<td>Johan Viljoen</td>
<td><a href="mailto:viljoen@napcp.org.za">viljoen@napcp.org.za</a></td>
</tr>
<tr>
<td>13</td>
<td>National Council of Persons with Physical Disabilities South Africa (NCPDPSA)</td>
<td>Ms</td>
<td>Therina Wentzel</td>
<td><a href="mailto:nationaloffice@ncppdsa.org.za">nationaloffice@ncppdsa.org.za</a></td>
</tr>
<tr>
<td>14</td>
<td>Ubuntu Centre (Network for Users and Survivors of Psychiatry) NUSP</td>
<td>Ms</td>
<td>Annie-Marie Robb</td>
<td><a href="mailto:theubuntucentre@gmail.com">theubuntucentre@gmail.com</a></td>
</tr>
<tr>
<td>15</td>
<td>QuadPara</td>
<td>Mr</td>
<td>Ari Seirlis</td>
<td><a href="mailto:aris@iafrica.com">aris@iafrica.com</a></td>
</tr>
<tr>
<td>Association of South Africa (QASA)</td>
<td>Mr Happy Mpanza</td>
<td>0829014150</td>
<td><a href="mailto:aris@iafrica.com">aris@iafrica.com</a></td>
<td></td>
</tr>
<tr>
<td>South African Disability Alliance (SADA) SECRETARY</td>
<td>Mr John Malherbe</td>
<td>071 360 4124</td>
<td><a href="mailto:sada.secretary@gmail.com">sada.secretary@gmail.com</a></td>
<td></td>
</tr>
<tr>
<td>South African Federation for Mental Health (SAFMH)</td>
<td>Ms Bharti Patel</td>
<td>0117811852</td>
<td><a href="mailto:Bharti@safmh.org">Bharti@safmh.org</a> <a href="mailto:charlene@safmh.org">charlene@safmh.org</a></td>
<td></td>
</tr>
<tr>
<td>South African National Council for the Blind (SANCB)</td>
<td>Mr Jayaseelan Gopal (Jace) Nair</td>
<td>082 040 6533</td>
<td><a href="mailto:jace@sancb.org.za">jace@sancb.org.za</a></td>
<td></td>
</tr>
<tr>
<td>SANCB</td>
<td>Ms Sandra Dreyer</td>
<td>082 7871 350 / 021 448 4302</td>
<td><a href="mailto:Sandra@ctsb.org.za">Sandra@ctsb.org.za</a></td>
<td></td>
</tr>
<tr>
<td>SANCB</td>
<td>Ms Amanda Matthee</td>
<td>073 366 7351</td>
<td><a href="mailto:matthea@eskom.co.za">matthea@eskom.co.za</a></td>
<td></td>
</tr>
<tr>
<td>SANCB</td>
<td>Mr Jayaseelan Gopal (Jace) Nair</td>
<td>082 040 6533</td>
<td><a href="mailto:jace@sancb.org.za">jace@sancb.org.za</a></td>
<td></td>
</tr>
<tr>
<td>South African National Deaf Association (SANDA)</td>
<td>Mr Khulekani Trevor Ngcobo</td>
<td>0723013115 (sms only)</td>
<td><a href="mailto:khulekani@sanda.org.za">khulekani@sanda.org.za</a></td>
<td></td>
</tr>
<tr>
<td>South African Deaf Women Association (SADWA)</td>
<td>Ms Olga Zanele B lose</td>
<td>082 819 2817 079 898 0364 (sms only)</td>
<td><a href="mailto:olgablose@yahoo.co.uk">olgablose@yahoo.co.uk</a></td>
<td></td>
</tr>
<tr>
<td>Muscular Dystrophy Foundation</td>
<td>Ms Rae Bagus</td>
<td>011 472 9703 011 907 5057</td>
<td><a href="mailto:pbdnational@mdsa.org.za">pbdnational@mdsa.org.za</a></td>
<td></td>
</tr>
<tr>
<td>PACSEN (Parents for Children with Special Educational Needs)</td>
<td>Mr Jennie Hoff</td>
<td>0721862694 /(012)333-0149</td>
<td><a href="mailto:pacsengauteng@absamail.co.za">pacsengauteng@absamail.co.za</a></td>
<td></td>
</tr>
<tr>
<td>Transport Users Group of SA (TUGSA)</td>
<td>Mr Jerry Magagula</td>
<td>011 407 7124 011 494 8207 071 485 5940</td>
<td><a href="mailto:jerrymag@joburg.org.za">jerrymag@joburg.org.za</a> <a href="mailto:tugsa63@gmail.com">tugsa63@gmail.com</a></td>
<td></td>
</tr>
<tr>
<td>Dementia SA</td>
<td>Ms Marilyn Erfort</td>
<td>021 421 0077/8</td>
<td><a href="mailto:Adminsupport1@dementia.asa.org">Adminsupport1@dementia.asa.org</a></td>
<td></td>
</tr>
<tr>
<td>South African Disability Development Trust (SADDT)</td>
<td>Mr Thulani Tshabalala</td>
<td>082 805 8161</td>
<td><a href="mailto:thulani@saddt.org.zamarlena">thulani@saddt.org.zamarlena</a>@saddt.org.za</td>
<td></td>
</tr>
<tr>
<td>SA National</td>
<td>Mr Dumisa Mrwata</td>
<td>0719848255</td>
<td><a href="mailto:dmrwata@yahoo.com">dmrwata@yahoo.com</a></td>
<td></td>
</tr>
</tbody>
</table>
Military Veterans (DASANMVE) | 082 348 9843 | npmxosana@gmail.com
---|---|---
31 | Association of Hearing Loss Accessibility and Development (AHLAD) | Ms Michelle Tonks | 021 552 4786 082 781 7715 | info@ahlad.org
32 | Western Cape for Forum for Intellectual Disability | Ms Vanessa Japhta | 021 510 4686 | advocacy@wcfid.co.za
33 | Western Cape Network on Disability | Ms Natalie Johnson | 061 602 7256 | info@wcdisability.org.za
34 | Disabled Children’s Action Group | Mr Mbusi Nzimande | 061 439 0650 |
35 | South African Disability Alliance | Ms Marina Clarke |  | chair@sada.org.za

**Annexure D: Indicators of Success**

<table>
<thead>
<tr>
<th>Category</th>
<th>Thrust</th>
<th>Action/s</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>School inclusive policy</strong></td>
<td>Protocols</td>
<td>Infuse COVID - 19 protocols in the Inclusive Education policies and supporting documents, such as SIAS and EWP6, the Standard Operating Procedures for teachers, non-teaching staff and learners on the COVID -19, the Collective Agreement 1 of 2020 (30 May), the Children’s Act and the Constitution of RSA as well as the South African Schools Act</td>
</tr>
<tr>
<td></td>
<td>Policy of special schools and Full Service schools</td>
<td>Purpose and Objectives of COVID-19 Draft of policy should orientate teachers, Learners , parents and school community focusing on special schools and Full Service schools</td>
</tr>
<tr>
<td></td>
<td>Policy file</td>
<td>Ensure that the file containing the names and numbers of all parents is available. This will assist in case there is an emergency. Have a list of teachers who will return to school considering their age and other factors. The SMT or Time Table Committee must amend the general Time Table, thus, teachers amend their class Time Tables too.</td>
</tr>
<tr>
<td></td>
<td>Policy coordination</td>
<td>Policy to give clear directives to Management, Teachers, Learners and Parents for proper coordination</td>
</tr>
<tr>
<td></td>
<td>Policy dissemination and communication</td>
<td>Flow of information on COVID-19 through school structures should be clearly spelt out for each component</td>
</tr>
<tr>
<td></td>
<td>Advocating policy</td>
<td>Set up systems to advocate the policy through school and community structures for Special and Full Service schools</td>
</tr>
<tr>
<td></td>
<td>Policy management</td>
<td>Clear directives for management, Teachers , Parents and learners on how to operate during the pandemic</td>
</tr>
<tr>
<td></td>
<td>Structure of teams to implement policy</td>
<td>Set up teams to support SMTs, SGBs, learners and parents when implement the policy</td>
</tr>
<tr>
<td>Policy systems and ownership</td>
<td>Use inclusive approach to set up and efficiently and effectively roll out policy systems</td>
<td></td>
</tr>
<tr>
<td>Challenges in implementing policy</td>
<td>Find out special schools opportunities and challenges through the SMTs, SGBs and school community</td>
<td></td>
</tr>
<tr>
<td>Policy support</td>
<td>School and school community structures should be supported by the District and Head office Teams</td>
<td></td>
</tr>
<tr>
<td>Observing the COVID - 19 protocols for different disabilities</td>
<td>For special and full service schools offering academic curricula, the general health protocols need to be followed. For schools offering programmes for learners with severe to profound intellectual disabilities, special protocols and support materials need to be applied. These could include basic hygiene measures for learners and people living with disabilities may include touching rails by the blind learners, difficulty in bathing themselves, needs to be taken to the toilet, learners who are unable to wash their own hands or even sanitise and learners who use pushed wheelchairs</td>
<td></td>
</tr>
<tr>
<td>Code of conduct for learners and work ethics for the employees</td>
<td>The SMT, SGB and SBST must ensure that both the teaching and non-teaching staff obey COVID - 19 protocols at all times, and develop and abide by a school based COVID - 19 work ethics policy.</td>
<td></td>
</tr>
</tbody>
</table>

### Inclusive teaching and learning

| Inclusive vision | The SMTs should have an inclusive vision that caters for all learners in the special and full service schools. |
| Staff orientation | Orientate teachers and support staff to make them feel at ease with the new normal. They must be screened daily on arrival. Issue PPEs to then learners upon arrival. Teachers must wear face visors in the classroom to accommodate lip readers. |
| Optimising inclusive teaching | The SMTs will need to protect the teaching time to ensure optimal learning among learners with differing disabilities |
| Sifting, adapting and taking the curriculum content suitable for the learners living with disabilities. | Learners must not share a desk. Put the names of learners on the desks with an adhesive device. No sharing of stationary including pens, rulers, rubbers, calculators and pencils. If learners were sharing workbooks prior to COVID -19 era, these must be photocopied and each learner has their own work book. All the study/learning materials must be sanitized prior to being handed out to learners. |
| Supporting teaching | Teachers and learners in the school need support staff to ensure effective teaching and learning |

### Safety and security

| Minimise external disturbances | The SMT and governing body should protect the vulnerable learners against external disturbance from the school community. |
| Physical security | The SGB must ensure that the school fence remains intact to protect the vegetable and flower garden from domestic animals entering the school and ravaging the crops. Of importance is the strengthening of security at the gate/main entrance in a way that adheres to all health protocols. |
| Food storage | Disinfect the room that stores groceries. People entering the |
grocery room should put on protective clothes and sanitize every time they enter the room. The room should have designated staff entering it and their names be recorded. Food handlers should be well trained.

Safe utilisation of movable and immovable resources

Teachers may not move boxes of chalk, chalk board dusters, white board markers and white boards, computers and laptops from one classroom to the other. They may also not share the teaching and learning materials. Immovable school assets that are touched have to be sanitized every time they are used. Surfaces of tables and door handles need frequent sanitization.

Inclusive Governance

Governance structures
SGBs, SMTs and SBSTs are pillars for good governance and leadership to ensure COVID-19 compliance.

Annexure E: Means of verification

<table>
<thead>
<tr>
<th>Item</th>
<th>How to deliver the activity</th>
<th>How I will know I delivered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capabilities</td>
<td>Conduct orientation sessions for SMTs, Teachers and SGBs on understanding COVID -19 and how to manage schools during this pandemic</td>
<td>Minutes and roll call of the session available</td>
</tr>
<tr>
<td></td>
<td>Clarify the objective of the orientation guidelines for special and Full Service schools</td>
<td>Administered checklist of the guideline objectives</td>
</tr>
<tr>
<td></td>
<td>Promote guiding values during COVID-19</td>
<td>Less or no negative reports on management of COVID-19</td>
</tr>
<tr>
<td></td>
<td>Conduct induction and training</td>
<td>Attendance reports</td>
</tr>
<tr>
<td></td>
<td>Monitor system controls and protective measures</td>
<td>Compliance list</td>
</tr>
<tr>
<td></td>
<td>Establish school COVID-19 committee</td>
<td>Record of committee members</td>
</tr>
<tr>
<td></td>
<td>Amendment of School policies to cater for COVID -19 needs</td>
<td>Minutes of meetings, attendance registers and invitations.</td>
</tr>
<tr>
<td>Policy guidelines</td>
<td>Orientation and training of all educators and support staff on the new normal; COVID - 19 regulations</td>
<td>Training handouts, copies of SIAS, EWP6, SOPs and any relevant material needed to be given to participants.</td>
</tr>
<tr>
<td></td>
<td>Provision of specialised PPEs</td>
<td>Invoices of the procured PPEs</td>
</tr>
<tr>
<td></td>
<td>Develop the daily cleaning register and control list of those who will enter the food storage room</td>
<td>Registers developed and used.</td>
</tr>
<tr>
<td></td>
<td>Train the staff and learners on the COVID -19 protocols</td>
<td>Corona virus posters in the school premises, social distancing markings on the floor.</td>
</tr>
<tr>
<td></td>
<td>SGB and SMT meetings to infuse the COVID - 19 protocols in the policy on the learner code of conduct and teacher rules.</td>
<td>Minutes of the SGB meeting, a copy of the amended Learner code of conduct and records of the COVID -19 protocols in the minute book for the staff.</td>
</tr>
<tr>
<td></td>
<td>Learners do not share a desk, stationery, text books and do not exchange their desks.</td>
<td>Pasted learner’s names on their desks, stationery in a box on each desk for each learner, record of text and work books received by each</td>
</tr>
</tbody>
</table>
SMT meeting with the SGB and SBST to share the Draft policy on COVID-19 in order to finalise it into a COVID-19 school policy

Finalised school based COVID-19 policy

Teacher orientation on the usage of PPEs

Records of screening and evidence of PPEs (PPEs received and signed for)

Movable and immovable assets

Mounted chalkboard and interactive board as well as white board in each classroom.

Annexure F: Basic and essential hygiene and sanitation package for each school

- Cloth masks or face shields
- Liquid soap dispensers
- Bracket (for hand sanitiser) Medical grade stainless steel to fit hand sanitiser
- Paper hand towels
- Germ kill liquid soap
- Hand sanitisers (minimum 60% alcohol) 500ml Pump action long nose pump
- Gloves - Surgical & Examination - Natural Rubber Latex
- Gloves - Heavy Duty, elbow length if possible
- Plastic Aprons (disposable)
- Goggles/Face-Shields/Visors
- Biohazard bin liners
- Cleansing wipes
- Disinfectant
- Digital thermometer scanner
- Biohazard bags
- Deep cleansing kit (1 per school)
- Respirators