

TRANSNET



ANNEXURE A: SCOPE OF WORK FOR OCCUPATIONAL HEALTH MANAGEMENT

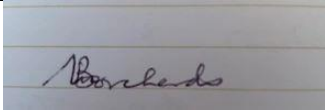
COMPILED:	OCCUPATIONAL HEALTH AND WELLNESS
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1. LEGAL FRAMEWORK

- 1.1. National Health Act No 61 of 2003.
- 1.2. Occupational Health and Safety Act No 85 of 1993.
- 1.3. Nursing Act No 33 of 2005.
- 1.4. Health Professions Act No 56 of 1974.
- 1.5. Employment Equity Act 55 of 1998
- 1.6. The National Road traffic Act 93 of 1996.
- 1.7. Labour Relations Act No 66 of 1995.
- 1.8. Basic Conditions of Employment Act No 75 of 1995.
- 1.9. Medicines and Related Substances Act No 101 of 1965.
- 1.10. Compensation of Occupational Injuries and Disease Act No 130 of 1993.
- 1.11. National Environmental Management: Waste Act No 59 of 2008.
- 1.12. National Railway Safety Regulation No 16 of 2002.
- 1.13. Rail Safety Regulator SANS 3000, Chapter 4 (Human Factor).
- 1.14. Civil Aviation Act No 13 of 2009
- 1.15. Protection of Personal Information Act No 4 of 2013
- 1.16. Applicable Maritime Medical Standards Code (SAMSA)
- 1.17. Fire standard
- 1.18. Applicable SANS Standards
- 1.19. Any other applicable regulatory requirements/legislations

2. GOVERNING PRINCIPLES, ROLES AND RESPONSIBILITIES

2.1. Good faith

The Client and Service Provider shall at all-time deal with each other in a manner that is fair and honest, and not act in any way to the detriment each other party.

2.2. Beneficence

Beneficence requires health professionals to do well and choose the best option of care under given circumstances and act with care and kindness at all times.

2.3. Mutual trust

The parties shall at all times conduct themselves in a manner that will not destroy or seriously damage the trust relationship and confidence between themselves thereby detrimentally prejudicing the interests of the other party.

2.4. Ethics

The Occupational Health Practitioners shall abide by the Professional Code of Ethics as prescribed by the respective Statutory Bodies.

2.5. Confidentiality

- 2.5.1. The Service Provider shall hold in confidence all personal, medical information of the employees that come to their knowledge and shall not divulge the information to any external parties, labour union representatives, fellow employees, supervisors or managers without the written consent of the employee.
- 2.5.2. The Service Provider shall disclose information of a personal nature when required by law in consultation with Transnet Legal Services.

2.6. Client's responsibilities (Transnet Group Occupational Health and Wellness)

- 2.6.1. To facilitate and ensure employees are released by their respective Operating Divisions to attend the clinic for their Occupational health, medical surveillance, treatment of ailments, chronic monitoring, promotive and preventative care.
- 2.6.2. Act as a facilitator between different Transnet Operating Divisions and the Service Provider whilst Operating Divisions' Occupational Health Manager manages the day-to-day activities of the clinics on-site.
- 2.6.3. Facilitate audits to ensure quality control of the clinical facilities and services rendered.

2.7. Service Provider

- 2.7.1. Ensure that Transnet SOC Limited clinics are always adequately staffed to ensure continuity of services.
- 2.7.2. Responsible for providing quality health service which address the needs of employees holistically-physically, psychologically, emotionally and socially to ensure an employee who is effective and productive at all times.
- 2.7.3. Assist Transnet in the development of Occupational Health Management plans with clear deliverables and any other health related projects as and when requested to do so, including the development and review of Occupational Health Risk Assessments focusing on vulnerable groups such as pregnant women and employees exposed to hazards.
- 2.7.4. Providing detailed reports reflecting total monthly clinics attendance and invoices of costing per contact to be provided for payment of services rendered for services provided only through off-site, preferred provider and mobile clinics.
- 2.7.5. Sourcing of specialists required to provide an integrated, comprehensive care to Transnet employees.

- 2.7.6. Assist in incapacity case assessments, management and medical report compilation of such cases as and when required in consultation with Risk Benefit ("Risk Pool"). Be prominent participant and advisor in health-related absenteeism management issues.
- 2.7.7. Participate in a seamless integration with internal and external stakeholders as advisor in health-related matters.
- 2.7.8. Identify health risks and make appropriate improvement recommendations to Transnet Occupational Health and Wellness in order address the risks.
- 2.7.9. Conduct surveillance programme appropriate for employees exposed to physical, biological and chemical stress factors.
- 2.7.10. Be responsive, agile and sensitive to organisational changes and provide expert consultation in relation to any Occupational Health matters.

3. Audits

- 3.1 Clinical audits shall be conducted by clinically skilled auditors / professionals so that they can access the confidential files.
- 3.2 Conducting annual health compliance audits for each Transnet SOC Limited clinic with suitable recommendations and remedial actions / measures.

4. MEDICAL MALPRACTICE AND INDEMNITY INSURANCE

The Service Provider shall ensure that all Medical, Nursing Professionals and all Allied health Professionals rendering services to Transnet employees are professionally indemnified and insured against medical malpractice. Proof of such cover shall be made available to Transnet Group annually as specified in the contract with Transnet Group Risk Management.

5. STATUTORY REGISTRATIONS

All Occupational Medical Practitioners, Occupational Health Nurses and all Allied health Professionals rendering services at Transnet sites shall be registered with relevant statutory bodies. Proof of such registration shall be kept on sites, certified copies kept in file by Transnet local Divisional Occupational Health Manager, and be made available as and when requested by authorities.

6. SCOPE OF WORK

6.1. APPROACH TO OCCUPATIONAL HEALTH

- 6.1.1. Transnet Group uses a multidisciplinary approach in the management of Health and Safety of employees. The following shall constitute the services to be rendered:
- 6.1.1.1. Occupational Health
- 6.1.1.2. Risk-based Primary Health Care and Treatment
- 6.1.1.3. Chronic Conditions Monitoring and Management

- 6.1.1.4. Injury-on-duty Medical and Administrative management
- 6.1.1.5. Psychological assessments
- 6.1.1.6. Biokineticist assessments
- 6.1.1.7. Occupational Diseases and management of such in accordance with COIDA
- 6.1.1.8. Medical and Administrative Management of Occupational injuries and diseases claims
- 6.1.1.9. Pre-authorisation required by the Service Provider for sourcing of Specialists, These will form part of variable costs incurred by Transnet.
- 6.1.1.10. Referrals to specialised services
- 6.1.1.11. Travel vaccines / medicine
- 6.1.1.12. Case management of employees declared temporarily unfit for work. Rehabilitation and Incapacity Management in consultation with Wellness department
- 6.1.1.13. Representation of Health Department within Transnet (not government) in Safety meetings and Boards of Inquiries as and when required.
- 6.1.2. The multidisciplinary team members at a clinic level shall consist of Occupational Health and Wellness Managers/ Practitioners, Risk Practitioners/Specialists, OMP, OHNP, Occupational Hygienist, and Adhoc-team shall include a Hearing Conservation Specialist, an Ergonomist and Occupational Therapist. Members of the multidisciplinary team shall form part of the local Safety, Health and Environment (SHE) forum as well as the Absenteeism and Incapacity Forum and shall engage in meetings as determined by Transnet. The service provider will be expected to work closely with other service providers that are appointed by Transnet.

6.2. **OCCUPATIONAL HYGIENE**

- 6.2.1 Transnet Operating Divisions shall remain responsible for the provision of Occupational Hygiene Survey services to all its terminals, depots and sub-depots across the country. Occupational Hygiene Survey Reports shall be made available to the Occupational Health Service Provider on a two-yearly basis to enable the planning of an efficient, effective, high quality standard Occupational Health Service.

6.3. **OCCUPATIONAL HEALTH**

6.3.1. **Health Risk Assessment**

- 6.3.1.1. The aim of Occupational Health Risk Assessment (HRA) is to systematically and proactively identify health hazards in the workplace, assess their potential risks to health and determine appropriate control measures to protect the health and wellbeing of workers. The HRA process is a partnership between occupational health specialist, industrial hygienists, risk practitioners, managers and operational staff with each using their knowledge, experience and skills to support the HRA process.

- 6.3.1.2. This involves identifying, anticipating, examining, and evaluating the workplace environment for any hazards that may arise from work operations and processes, materials and equipment used, products, by-products and effluents.
- 6.3.1.3. The hazards include chemical, physical, biological, ergonomics and psycho-social hazards.
- 6.3.1.4. Review of workplace designs, work systems and practices as well as partaking in projects to identify health risks associated with these activities.
- 6.3.1.5. Identify workplace health hazards and understand their effects on people and their well-being.
- 6.3.1.6. Assess human exposures to hazards through a combination of qualitative and quantitative methods to determine level of risks.
- 6.3.1.7. Determining the need for biological monitoring in risk assessment.
- 6.3.1.8. Conduct Health Risk Assessments for pregnant women to ensure proper placing for the duration of pregnancy and post-partum / post-delivery evaluation after birth as stipulated in Transnet Group's Pregnancy in the workplace Standard Operating Procedure.
- 6.3.1.9. Perform Health Risk Assessments using Transnet Group approved methodology
- 6.3.1.10. Participate in the development of programmes for the improvement of working practices, as well as testing and evaluation of health aspects of new equipment.
- 6.3.1.11. The service provider shall perform Health Risk Assessment as a minimum on an annual basis up to a period not exceeding two-year intervals.
- 6.3.1.12. Regular update of the Health Risk Assessment as and when changes occur, or as per the applicable legislative requirements, Transnet Group operational requirements and be reviewed on an annual basis as a minimum.
- 6.3.1.13. Health Risk Assessments shall be conducted by a team which consist of an Occupational Medical Practitioner, Occupational Health Nursing Practitioner, Occupational Hygienist, Risk Practitioner, Technicians and any other expertise that may be required based on the kind of Health Risk Assessment at hand.

6.3.2. **Structure for implementation of Health Risks Assessments**

6.3.2.1. **Health Risk Assessments at Operating Divisions**

- 6.3.2.1.1. The service provider shall carry out Health Risk Assessments at all the Transnet's sites and depots per business requirements. (List of Transnet Group Operating Divisions shall be provided by Transnet Group whereas Operating Divisions shall in turn provide list of Terminals, Depots and sub-depots.).
- 6.3.2.1.2. Occupational Health Nurses and OMP shall carry walkthroughs as stipulated in the contract /when required. The visits to the plants shall be arranged with and approved by the applicable Risk Practitioner.

6.3.2.2. Health Risk Assessment at sub depots

- 6.3.2.2.1. Transnet Operating Divisions shall sample operating areas, depots and sub-depots where HRA shall be done. HRA shall be rotated on an annual basis and Transnet Operating Divisions reserves the right to alter the list annually.
- 6.3.2.2.2. In Operating Divisions depots where the HRA was not performed Transnet Group shall sample the HRA from a depot performing similar activities and it shall be applied to other depots. The same HRA shall be utilized by the service provider to plan and execute medicals.

6.4. MEDICAL SURVEILLANCE

- 6.4.1. Develop Occupational Health Programmes per Operating Division, Sector or Sub-sector in line with Occupational Hygiene Measurements and Health Risk Assessments to facilitate legislative compliance.
- 6.4.2. Conduct risk based occupational medical surveillance program to Transnet's employees across all Operating Divisions, in line with the Health Risk Assessment.
- 6.4.3. Occupational risk exposure profile shall be conducted by a team which consist of an Occupational Medical Practitioner, Occupational Health Nursing Practitioner, Occupational Hygienist, Risk Practitioner, Technicians and any other expertise that may be required based on the kind of Health Risk Assessment at hand
- 6.4.4. Occupational Health Practitioners / Managers to structure surveillance in line with Occupational Risk Exposure Profiles (OREPs) provided by Human resources as the custodian of the recruitment process
- 6.4.5. Occupational Health Practitioners / Managers to structure surveillance in line with Occupational Risk Exposure Profiles (OREPs) provided by Occupational Hygienist as per Health Risk Assessment.
- 6.4.6. The Medical Surveillance Programme aims to protect the health of individual employees by detecting as early as possible, adverse effects that may be caused by exposure to substances and agents hazardous to health.
- 6.4.7. The Medical Surveillance Programmes shall provide Operating Divisions with the information that can be used to identify and minimize the health risks or hazards to which employees may be exposed to.
- 6.4.8. As a minimum the Programme shall address the following components:
 - 6.4.8.1. Risk categorization of all workers (Safety critical and safety related, low, medium or high risk)
 - 6.4.8.2. Specify medical assessments (medical surveillance matrix) to be done on employees including screening questionnaires and clinical examinations designed to match the risk categories.
 - 6.4.8.3. Specify medical conditions that are likely to impact on safety. Criteria for various medical conditions are defined to ensure consistency of application.

- 6.4.8.4. Defined frequency of health assessments to support long-term fitness for duty.
- 6.4.8.5. Record keeping and medical information management in accordance with POPI, COIDA and other relevant health statutory requirements.

6.4.9. The medical surveillance shall include:

6.4.9.1. Pre-employment medical examination

6.4.9.1.1. This is a compulsory medical examination that is aligned to Transnet's recruitment processes and is also for prospective employees before an offer of employment is made, and therefore it shall be done before resumption of employment. This examination should be conducted to assess whether prospective employees are fit to perform work applied.

6.4.9.2. Periodic medical surveillance

6.4.9.2.1. Medical examination and investigations necessary for general health evaluations, to detect exposure levels and early biological effects and responses including biological monitoring, biological effect monitoring, examination on symptoms of occupational adverse effects or occupational disease and review of records and occupational history. Provide vaccinations for employees who are occupationally at risk of contracting communicable diseases.

6.4.9.3. Transfer Medical

6.4.9.3.1. Medical Examination performed to record the health status at the time an employee leaves a given department or one of the Transnet's sites to another within Transnet, to record the health status at the departure time and ensure medical suitability for work in the department to which he is being transferred.

6.4.9.4. Out-of-cycle/Return to Work/Triggered Medical

6.4.9.4.1. Compulsory Medical examinations performed after an episode of disease (10-days or more of the prolonged sick leave), post-injury. This medical examination is to assist the employee in returning to work and remaining effective in their jobs.

6.4.9.5. Exit Medical

6.4.9.5.1. All Transnet employees shall be subjected to exit medicals before termination of service irrespective of how termination came about. These exit medicals shall be valid if conducted at least three months before termination of services and these will be included as part of the exit checklist conducted by Human Resources Department.

6.5.9.2 Employees terminating their employment at Transnet due to various reasons, including disciplinary action outcome and self-resignation, to undergo Exit Medical as per statutory requirements and Transnet Policy.

6.5.9.6 Post Exit Medical

6.4.9.5.2. Transnet acknowledges its responsibility of ensuring that exposures causing occupational diseases that have a long latency period are monitored and managed in line with Regulatory Provisions of the country.

Post exit medical examination is a term used to describe medical examination that will be done to employees after they have left the organization due to retirement. The purpose of the post exit medical is to provide monitoring so that occupational diseases with long latency periods are diagnosed earlier and managed to minimize complications arising from such occupational diseases. To ensure proper controls around this process, Transnet shall keep a register of all employees who are exposed to commodities causing such diseases. The register shall be used to inform/advise employees, who qualifies for such benefit, on retirement, that at certain intervals Transnet, they shall be subjected to a risk based medical examination. Post exit medicals shall be done in accordance with Transnet protocols.

6.5. Medical Examinations shall be conducted as per legislated requirements and shall consist of the following but not limited to in line with OREP

- 6.5.1. An evaluation of the individual's history of general health and previous occupational health, occupational history
- 6.5.2. A general health interview and the completion of a questionnaire to be signed by the prospective employee,
- 6.5.3. Blood Pressure measurements,
- 6.5.4. Weight, Height and Body Mass Index,
- 6.5.5. Urine analysis,
- 6.5.6. Drug Testing,
- 6.5.7. Cholesterol testing ,
- 6.5.8. Audiometric screening,
- 6.5.9. Lung Function Test where applicable,
- 6.5.10. Visual screening,
- 6.5.11. Physical examination,
- 6.5.12. Chest x-ray screening were applicable ,
- 6.5.13. Glucose Screening,
- 6.5.14. ECG only if applicable and recommended by OMP
- 6.5.15. Biological and target organ monitoring where legislated and applicable,

- 6.5.16. An evaluation of employee's personal health status and applicable counselling and life style management education,
- 6.5.17. Safety Behavioural Risk Assessments (Psychological Assessments) using the available tools at the clinic
- 6.5.18. Risk-based Functional Capacity Assessments conducted routinely where applicable for specified safety critical positions, or as triggered by specified events, or request by Occupational Medical Practitioner (OMP)
- 6.5.19. An evaluation of the employees personal promotive health education requirements,
- 6.5.20. Counselling of the employee as required,
- 6.5.21. Education on health and safety issues to motivate the employee towards compliance with the use of personal protective equipment and adherence to the Client's safety practices.
- 6.5.22. Assessment of vulnerable and chronic employee's re-Covid guidelines and directives by OMP to ascertain fitness for duty.

6.6. SPECIALISED MEDICAL SURVEILLANCE PROTOCOLS

- 6.6.1. The service provider shall compile programs for conducting specialised health surveillance programs. The following, shall form part of, but not limited to, specialized health surveillances.
 - 6.6.1.1. Diving medicals to be conducted onsite facilities
 - 6.6.1.2. Occupational Therapists
 - 6.6.1.3. Physiotherapist
 - 6.6.1.4. ENT Specialist
 - 6.6.1.5. Audiologist
 - 6.6.1.6. Pulmonologist
 - 6.6.1.7. Psychiatrist
 - 6.6.1.8. Aviation medicals to be conducted onsite facilities
- 6.6.2. The service provider shall present compiled programs to the respective Operating Divisions within three months of the commencement of the contract.
- 6.6.3. Health surveillance programme will be reviewed, modified or discontinued as appropriate depending on work conditions and exposures concerned.

7. FITNESS TO WORK

- 7.1. Medical certificate of fitness shall be signed by the Occupational Medical Practitioner in the employment of the service provider or contracted to the service provider.
- 7.2. Certificates of Fitness issued by any other medical practitioner, outside the employment of the service provider shall be reviewed by the appointed / contracted Transnet Occupational Medical Practitioner.

7.3. Provide the Line Manager, HR and Occupational Health and Wellness with a copy of the Certificate of Fitness.

8. PRIMARY HEALTH CARE

- 8.1. Diagnosis and treatment of employees with minor ailments shall be done in accordance with the Department of Health Protocols-*Primary Health Care Standard Treatment Guidelines-Essential Drug List*; with the exclusion of maternity care services (antenatal & postnatal). Occupational Medical Practitioner approved protocols and the South African Nursing Council *Scope of Practice of a Registered Nurse*.
- 8.2. Medications shall be managed and dispensed in accordance with the Medicines and Related Substances Act No 101 of 1965, as Amended.
- 8.3. Only nurses registered with the South African Nursing Council and in possession of a valid dispensing certificate shall be allowed to diagnose, prescribe and dispense medications as per protocols.
- 8.4. The licensing of Health Professionals for the purpose of dispensing medications shall remain the sole responsibility of the service provider.
- 8.5. Minimum list of Primary Health Care medications to be at sites with clinic facilities is risk-based and to be determined by the respective Operating Divisions as informed by the clinical profiles.
- 8.6. Keep on site a copy of the latest edition of Primary Health Care Standard Treatment Guidelines and Essential Drug List. Keep a reference copy of Primary Health Care textbook.
- 8.7. Permission shall be granted by filling **Annexure A** (Medical Request Form for clinic visits.) Employees will be released with permission of the supervisor.
- 8.8. The service provider shall provide expert advice to Operating Division in cases of communicable diseases outbreak to manage the disease and prevent spread. This shall be done in line with Department of Health protocols/guidelines.
- 8.9. The service provider shall facilitate the obtaining of Family Planning medications available free of charge from Department of Health.
- 8.10. The service provider shall facilitate the process of getting the condoms from the Department of Health and ensure that they are available at all Transnet Operating Division sites.
- 8.11. Provide advice concerning vaccinations for Transnet Operating Division travelling employees.
- 8.12. Service provider must provide vaccinations for Transnet Operating Division as and when required

9. CHRONIC CONDITION TREATMENT AND MONITORING

- 9.1. All employees with chronic conditions shall be monitored at Transnet's clinics. The service provider shall ensure monthly monitoring and follow-up on the following conditions:

- 9.1.1. Hypertension;
 - 9.1.2. Diabetes Mellitus;
 - 9.1.3. Asthma;
 - 9.1.4. Epilepsy;
 - 9.1.5. Chronic Cardiac Conditions;
 - 9.1.6. Chronic Manageable Mental / Psychiatric conditions;
 - 9.1.7. Tuberculosis; and
 - 9.1.8. Immunosuppressed conditions such as Cancer & HIV/AIDS etc.
 - 9.1.9. Any other manageable chronic conditions
- 9.2. Case management of chronic conditions- Employees with chronic conditions should be managed individually and jointly by the members of the team to ensure compliance and fitness to work. In Operating Divisions with no Case Managers, the Primary Health Care Nurses shall act as facilitators for Case Management.
- 9.3. Each employee's medical condition should be interpreted individually in accordance with his job requirements.
- 9.4. HIV/AIDS pre-counselling shall be done at all sites in accordance with Transnet protocols and HIV policy. The service provider shall obtain testing kits from the government or shall alternatively make arrangements with Department of Health to provide HIV/AIDS pre-counselling and testing at all Transnet's clinics.
- 9.5. HIV/AIDS pre-counselling shall be compulsory for all employees coming for medical surveillance and employees may opt out of the tests.
- 9.6. Chronic conditions register shall be kept on all sites.

10. IOD /OCCUPATIONAL DISEASES MANAGEMENT AND ADMINISTRATION

The service provider shall:

- 10.1. Ensure adequate treatment of all injury on duty cases on areas where clinics exist. The service provider must familiarise him /herself with the possible injuries that are most likely to occur at different Operating Division sites and should be able to respond appropriately and render first aid treatment whilst awaiting paramedics or an ambulance. At areas where Transnet Operating Divisions does not have its own clinic facilities, the Service Provider shall have a Service Level Agreement (SLA) with the nearest emergency service provider for all emergency cases and Injury on Duty (IODs) cases. A list of such service providers shall be made available to Transnet Group.
- 10.2. Inform Transnet relevant Operating Division when an injured employee reports at the clinic for IOD treatment.

- 10.3. Ensure suturing of minor wounds /injuries and removal of sutures on minor wounds in a sterile environment using the right sterile tools Clinics shall be staffed with Medical Professionals competent of performing the procedure.
- 10.4. Referral of all the cases that needs further medical treatment / management. The service provider shall facilitate the obtaining of first, progress and final medical reports to ensure efficient administration of COIDA cases.
- 10.5. In areas where Operating Divisions designated IOD management resources do not exist, the service provider shall familiarize itself with internal Transnet Group claim processes and shall facilitate the submission of claims to the regional IOD administrator.
- 10.6. Participate in Occupational Diseases or Injury-on-Duty investigations as and when initiated by Operating Division.
- 10.7. Refilling of all the first aid boxes at all Transnet Group sites according to the minimum requirements stipulated in the OHS Act.
- 10.8. Ensure appropriate referral of all occupational diseases for further investigation and adequate reporting of all confirmed cases.
- 10.9. Participate in the analysis of occupational accidents and occupational diseases.
- 10.10. Arrange and conduct refresher trainings for all the trained Transnet Group first aiders.
- 10.11. Provide emergency response services which is equipped with paramedic personnel and a response car in identified areas to man clinic emergency services during office hours and after hours

11. EQUIPMENT

- 11.1. The Service Provider shall ensure that all Transnet's clinics are equipped to deliver quality Occupational Health, Primary Health care and First Aid Care to all its employees.
- 11.2. The minimum clinical equipment required for all the Transnet's clinics shall be provided by the service provider
- 11.3. The Service Provider shall have a clear maintenance plan and the depreciation program for all equipment provided.
- 11.4. Provision of office furniture for the clinics shall remain Transnet Operating Division's responsibility.

12. DISABILITY MANAGEMENT AND REHABILITATION

The Service Provider shall:

- 12.1. Arrange appropriate rehabilitation for all Injury on Duty and Occupational Disease cases in line with the Transnet's policies.
- 12.2. Use a multi-disciplinary approach in dealing with Disability Management and Rehabilitation.

- 12.3. Work collaboratively with Transnet Group's EAP and other service providers in managing disability and rehabilitation.
- 12.4. Advise Transnet in properly placing employee's post severe injuries and rehabilitation.

13. HEALTH PROMOTION / SELF-CARE PROGRAMS

- 13.1. Health promotion is organised to provide the employees and employers with information about the hazards at the workplace as well as empowering them to take responsibility for their health. The service provider shall initiate workplace health promotion activities.
- 13.2. Draw Health Promotion Programmes that address identified health profiles and areas of health concerns. Health Promotion programmes has to be in line with the Department of Health Calendar.
- 13.3. Provide Health education to employees on work related hazards and the effects on their health, in the form of pamphlets and posters display at strategic and conspicuous locations. Transnet shall approve the content of such pamphlets and posters.
- 13.4. Work collaboratively on health programmes initiated by Transnet Group's EAP.
- 13.5. Provision of vaccinations (e.g. Flu) on a fee for service as and when required by Transnet.
- 13.6. Counselling of employees on chronic conditions and Pre-test and Post-Test HIV counselling.
- 13.7. Collaborate with Wellness department in referring employees on EAP who might require counselling on any issues of physical, psychological, emotional or financial significance.
- 13.8. Adoption of the National Health Calendar awareness program with view to promote Occupational health.

14. SOURCING OF SPECIALISTS AND REFERRALS

- 14.1. It will remain the responsibility of the Service Provider to source in specialists when an employee's medical status warrants medical services outside the Service Provider's competency. Approval shall be sought from a pre-identified Transnet representative department the Local Risk Manager through the filling of the form –**Annexure C**-Referral protocols and policies are to be drawn by the Service Provider or revision of existing protocols.

15. RECORD KEEPING AND REPORTING

- 15.1. The Service Provider shall ensure that medical record keeping is done in line with the National Health Act, any other relevant legislation and POPI.
- 15.2. The service provider shall provide a health management system which is vital for health data storage, management and reporting. Transnet Group is in the process of sourcing a Health Management System. Until such time that the system is fully procured and functional, health data

will be managed and stored by the service provider. All the data shall remain the property of Transnet and shall be handed over to Transnet on request.

15.3. Storage of medical records and file shall comply with National Building Regulations, SANS 0400 specifications for strong rooms, which are fire resistant and lockable.

15.4. Two types of reports will be submitted:

15.4.1. Qualitative - a narrative monthly report summarizing all the activities as mentioned below.

15.4.2. Quantitative - A numerical report, with graphical presentation aimed at providing health trends.

15.4.3. Structure of reports - Group Occupational Health and Wellness, Per Health Hub, Operating Divisions and Regional, Depot, Sub-depot and per clinic.

15.4.4. The report will be forwarded to centre's by the 26th of each month and at national office on the 30th of each month, to allow adequate time for monthly reporting.

15.4.5. Statistical reports and trending will be due at the Group Occupational Health and Wellness and Operating Division Head Offices by the 7th of each month.

15.4.6. Meetings between Transnet Group Occupational Health and Wellness, Operating Division and the service provider shall be held on a monthly basis or as required to discuss contractual issues.

15.4.7. Meetings between the clinics and on-site Health and Safety Managers shall be held on a monthly basis.

15.4.8. Produce business intelligence reports on a quarterly and year basis

16. QUALITY ASSURANCE AND INFECTION CONTROL

16.1. Quality assurance is a term for activities and systems for monitoring and improving quality. Quality Assurance involves measuring and evaluating quality but also involves other activities to prevent poor quality and to ensure high quality.

16.2. Transnet Operating Divisions reserves the right to perform audits at its clinical health facilities or to appoint a third party to perform audits.

16.3. The service provider will be responsible for closing findings that are related to service delivery as dictated in the SLA.

16.4. Customer satisfaction surveys shall be done by both Transnet Operating Divisions, Transnet Group and the Service Provider. Surveys done by Transnet Group shall be at its own discretion and findings shall be shared with the service provider.

16.5. The service provider shall provide policies and procedure promote infection control within Transnet Group clinics.

16.6. Post exposure prophylaxis should be available for all health care professionals.

17. CLINIC OPERATIONS, STAFFING AND STRUCTURES

- 17.1. The Service Provider shall appoint Key Accounts Manager who shall act as a contact person between the client and the service provider.
- 17.2. The number of Occupational Health Nurses shall be as per the schedule provided by the respective Operating Divisions and per Health Hub.
- 17.3. There will be dedicated Primary Health Care Nurses, with license to dispense as per the scope of practice, and these would be deployed on a risk base once a proper analysis has been conducted
- 17.4. Operating Divisions shall submit details of their requests for inclusion on the detailed scope of work or request for proposals. These would be captured separately in a spreadsheet for costing purposes.
- 17.5. Similarly scheduled for Clinic administrator will be presented for the respective Operating Divisional clinics.
- 17.6. The Service Provider shall provide appropriately qualified Nurses and Doctors experienced in Occupational Health and Primary Health Management, including locums within 6-hours of any type of assistance.
- 17.7. All locums shall be equally competent, qualified and experienced in Occupational Health, particularly Medical surveillance and Primary Health Management.
- 17.8. The clinic operating hours are risk based and included in the spreadsheet for costing purposes.

18. LIST OF CONSUMABLES PROVIDED BY EACH CLINIC

- 18.1. Basic primary health medication – appropriate for occupational health environment
- 18.2. HIV testing kits
- 18.3. Cholesterol testing kits
- 18.4. Glucose testing kits
- 18.5. Applicable bacterial filters
- 18.6. Multi drug screening kits as recommended by the University of Pretoria Drug Screening Guidelines (immunoassay integrated test cup kits) – testing 5 drug categories
- 18.7. Onsite x-ray services for Richards Bay (for the whole year) and PE for 4 months over the two year contract period
- 18.8. Suturing kits
- 18.9. Hepatitis injections
- 18.10. Replenish first aid boxes
- 18.11. Multivitamins and flu vaccines
- 18.12. Including any other consumable not mentioned above

19. OCCUPATIONAL MEDICAL PRACTITIONERS

- 19.1. Occupational Medical Practitioners shall have an MBCHB qualification, with the minimum specialisation in Occupational Health being the Post Graduate Diploma in Occupational Health and Medicine.
- 19.2. Shall be registered with Health Professions Council of South Africa as Specialist Occupational Medical practitioner.
- 19.3. Basic Life Support course for Healthcare Providers.

- 19.4. Registered with SASOM (recommended).
- 19.5. Basic computer literacy.
- 19.6. Proof of insurance for malpractice kept for Inspection purposes
- 19.6.1.1. SAMSA and Aviation – Doctor to send proof of SAMSA (South African Maritime Services Agency and Civil Aviation Authority approvals)

20. OCCUPATIONAL HEALTH NURSES

- 20.1. A degree /diploma in General Nursing.
- 20.2. A diploma in Midwifery.
- 20.3. Licensed to dispense medication as per legislation.
- 20.4. A degree or diploma in Occupational Health.
- 20.5. Registered with the South African Nursing Council as a general nurse and Occupational health nurse specialist.
- 20.6. Basic computer literacy.
- 20.7. Presentation skills
- 20.8. Registered with SASOHN (as an audiologist)
- 20.9. Basic Life Support course for Healthcare Providers.
- 20.10. HIV/AIDS counseling certificate.

Primary Health Care Nurses

- 20.11. A degree /diploma in General Nursing.
- 20.12. A diploma in Midwifery.
- 20.13. A diploma/certificate in Primary Health Care (recommended)
- 20.14. Registered with the South African Nursing Council as a general nurse and primary health-care nurse specialist (recommended).
- 20.15. Basic computer literacy.
- 20.16. Presentation skills
- 20.17. Basic Life Support course for Healthcare Providers.
- 20.18. HIV/AIDS counseling certificate.

20.19. Time and attendance system shall be provided by the service provider at all clinics

20.20. The service provider should submit a contingency plan to mitigate high staff turnover within health professionals.

21. STAFF DEVELOPMENT AND TRAINING

21.1. Occupational health professionals must be committed to continuing competence, development and seek to achieve best standard of quality in organizing and carrying out their tasks.

21.2. The service provider shall be responsible for the development of staff.

21.3. The service provider shall submit a staff development-training plan to Transnet Group on a six monthly basis. The plan shall seek to improve Occupational Health Practice, seek best practice and address identified performance deficiencies within Transnet OD clinics.

21.4. Copies of medical professionals' job descriptions must be kept on site.

21.5. OMP's development shall be done in accordance with the Health Professions Council of South Africa's CPD policy/protocol.

21.6. The service provider must ensure that staff appraisals are performed as a minimum on a six-monthly basis and will make outputs available to Transnet Group and Operating Divisions.

22. REVIEW OF SLA CONTENTS

Meetings that are aimed at reviewing/amending the contents of the Service Level Agreement may be held with the consent of both the Service Provider and the Client.

23. SUB-CONTRACTS

23.1. The Service Provider remains responsible for ensuring that the services are provided to the Client within agreed levels of quality, even if it were to choose to sub-contract the provision of some of the services covered within this SLA.

23.2. Sub-contractors appointed by the Service Provider should have demonstrated relevant knowledge and understanding of Transnet Group's operational environment, the associated risks and the requirements of this SLA.

23.3. Transnet Group may propose services to be sub-contracted to the Service Provider.

Part B: Executive Medical Surveillance

Executive Medical surveillance to be conducted annually for all Executive of Transnet. The following assessment are required:

- General medical;
- Vitals Assessment
- Physical examination
- Stress ECG
- Lung function test
- Psychological screening
- Vision and Glaucoma screen
- Pathology:
 - FCB, Urea and Electrolytes
 - Lipogram, Triglycerides
 - Liver Functions
 - HbA1C
 - Fasting glucose
 - Ultra-sensitive CRP
 - Prostate
 - Thyroid Functions
- Age/ gender appropriate Cancer Screening
- Occult Blood
- Behavioural analysis for optimal performance e.g. Neurozone
- Cardiac, metabolic and Central Nervous System Assessment or any tool that will assess appropriate type of physical exercise and intensity thereof.
- Body Composition Assessment
- Nutritional assessment by dietician
- Stress and burnout levels and tolerance test

Post Medicals Assessment

- Referral consultation for at Risk individual
- Comprehensive individualised feedback session and report collated by a Medical Officer or Physician where appropriate with recommendations for health improvement measures

24. PRICING SCHEDULE (refer to RFP)

TABLE 2: CLINIC EQUIPMENT

EQUIPMENT
Alma Man Lamp and Stand
Blanket-Acryl Burgun
Ccsc Plain Burgun (Bedset for examination couch)
Dress Bowl S/S 36cm
Drip Stand (Mobile)#
Exam Couch Gray
Forcep Ads Pl 15cm
Forcep Adson Fine1:2
Gallipot S/S 90ml
Gallipot S/S 180ml
Kidney Dish Ss 20cm
Maatband (Wall Mount) (tape measure)
Oxygen Erie Trv 424l (oxygen cylinder)
Pillow Slips Plastic#
Poison Cabinet Fm2.4
Resuscitator Sil Ad
Spray Bottle Set Sf
Spray Bottle Trigger
Spray Bottle+Pump #
Thermometer Digital

EQUIPMENT

Thermometer Fridge

Thermometer Ear with disposable ear pieces

Thermometer Wall

Torch Penlight Varta

Tourniquet Velcro#

Welch Allen Diagnostic Set

Acu Check Glucometer

Table Mercury Bauman meter

Electronic Digital Scale

Patella Hammer

Stethoscope

Lounge Depressors Wood (Tongue Depressors)

Drug Registers

Snellen Charts

Transnet Files

Daily Clinic Visit Forms

Spirometry Wall Charts

Audiometers

Tape Measure

Trolley Dress Fm81/1

Steel Filing Cabinets (should belong to Transnet)

Drip Sets

Needles (Per 100)

I.V. Fluids (One Litre)

Steel Filing Cabinet For Medicine

Suturing Material

Suturing Packs

EQUIPMENT
Acu Check Cholesterol meter
Audio computer(Screen/ Keyboard)
Audio booth
Digital - Vision Screener (Key Stone)
Barometer
Laser Printer
Spirometer
Dressing Scissors
Nebuliser
Multiplug Point
Computer/ Screen/ Keyboard
Oxygen Cylinder Regulator
Bauman meter Non-Mercury (is it the electric one?)
Welch Allyn Electronic Hospital grade Vital Signs Devise (BP, Pulse and MAP on a mobile stand) with large, medium and small cuff
Calibration Syringe For Spirometer
Backboard, Spider Harness And Head Immobiliser
Scoop Stretcher

Additional equipment: 10 x Oxi-pulse meter; 10 x Automated External Defibrillator; 10 x ECG machine; 10 x suction machine; 10 x Wheel chairs; 10X heavy duty scales.

TABLE 3: ADDITIONAL MEDICAL SERVICES

LIST OF CONSUMABLES - FEE FOR SERVICE
Referrals for Different Blood Tests
Pathology tests LFT
Chromium
Lead
Full blood count
Nickel
Hepatitis A
Hepatitis B
Xylene and Toluene (Methylhippuric acid)
Urine Creatinine
Manganese
Chrome
Copper
Hexane Dione
Others - as per business requirement
*specify urine or bloods where applicable (provide both test prices)
Referral to National Institute of Occupational Health
Referrals for further diagnostic tests (specialist services)
Chest x-ray
Audiology test

Optometry eye test
Pulmonologist
Dermatologist
ENT specialist
Ophthalmologist – individual price – especially driver/operators special eye care programme
Confirmation GCMS Drug Test
Specialised Services (special shoe)
Specialised Services (wheelchair)
Occupational Health Risk Based Tests
Functional Capacity assessment
Glucose Screening
Cholesterol Screening
Primary Health Care
TB Screening Test
HIV Screening Test
Confirmation AFB (TB)Test
Confirmation HIV Tests
Medication budget estimate for clinics in main centres
Specialists depending on requirement (stipulate flat rate)
Hand swaps - analysis and reporting
Medical surveillance at external facilities
Locum Nurse Rates
Locum Doctor Rates - Occupational Health Medical Practitioner
HIV Testing
Multidrug Testing
Drug Confirmation Testing
Training - Spirometry ; Audiometry

- The **Occupational Hygienist must** have valid registration with SAIOH.

ANNEXURE A-REQUEST FORM FOR PERIODICAL MEDICALS OF NEW EMPLOYEES

REQUEST FORM FOR PERIODICAL MEDICALS/ NEW AND EXIT EMPLOYEES AND OUTSKIRTS DEPOTS			
Date required	At least 14 days' notice is required		
Please perform the following medical evaluation on this person:	• Replacement	• Periodical	• Exit
Surname: _____	Full names: _____		
ID Number: _____	Employee No: _____		
Transnet _____	Department: _____		
Group Site _____	Type of employment: _____		
Occupation _____	• Permanent		
Proposed job description: _____	• Temporary		
Known Risks associated with the proposed job:			
Other relevant information:			
AUTHORISATION			
I hereby authorise the above mentioned medical examination to be conducted on the above mentioned employee. Should the employee require any risk-based biological monitoring/ X-rays or additional tests to be conducted, I understand that this will be billed separately and that Transnet Group remains responsible for the payment thereof.			
Supervisor/ Referring official's name: _____			
Phone number: _____			
Signature _____			
PLEASE NOTE THAT A COMPLETED OREP MUST ACCOMPANY THIS FORM. NO OREP = NO MEDICAL			
BILLING INFORMATION			
Company: _____			
Contact Person: _____			
Billing address: _____			
Contact Telephone number: _____			

ANNEXURE B-MEDICAL REQUEST FORM FOR PRIMARY HEALTH CARE

SAMPLE

MEDICAL REQUEST FORM FOR PRIMARY HEALTH CARE

Name of employee: _____

Department: _____

SAP number: _____

Date: _____

Time left department: _____

Arrival at clinic: _____

Supervisor's signature: _____

Advice by clinic

Comments _____

Nurse/Medical Practitioner's signature: _____

Date: _____

ANNEXURE C APPROVAL FOR REFERRAL FORMS

ANNEXURE E									
REQUEST FORM									
Date requested					Referring clinic/ depot				
Surname:					Full names:				
ID Number:					Employee No:				
Transnet Group Site					Department:				
Occupation					Type of employment:		...Permanent		
							...Temporary		
Referral to:	.	Specialist	.	Audiologist/ ENT	.	Optometrist	...Specify Other:		
Surname:					Full names:				
ID Number:					Employee No:				
Transnet Group Site					Department:				
Occupation					Type of employment:		..Permanent		
							..Temporary		
Referral to:	.	Specialist	.	Audiologist/ ENT	.	Optometrist	..Specify Other:		
Surname:					Full names:				
ID Number:					Employee No:				
Transnet Group Site					Department:				
Occupation					Type of employment:		...Permanent		
							...Temporary		

Referral to:	·	Specialist	·	Audiologist/ ENT	·	Optometrist	···Specify Other:
AUTHORISATION							
I hereby authorise the above mentioned referral to be conducted on the above mentioned employee/s. I understand that this will be billed separately and that TRE remains responsible for the payment thereof.							
Authorised Person Name:							
Phone number:							
Signature:							
Risk Manager name:							
Phone number:							
Signature:							
BILLING INFORMATION							
Company:							
Contact Person:							
Billing address:							
Contact Telephone number:							

ANNEXURE D-CERTIFICATE OF FITNESS

MEDICAL CERTIFICATE OF FITNESS			
Employee information			
Surname, Initial		SAP / ID No.	
Region		Business / Depot	
Job title		Safety-critical	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proposed Job Description			
Type examination	<input type="checkbox"/> Pre-Employment <input type="checkbox"/> Periodic <input type="checkbox"/> Transfer <input type="checkbox"/> Executive Medical <input type="checkbox"/> Follow up (Occupational disease) <input type="checkbox"/> Follow up (Chronic disease)		
	<input type="checkbox"/> Post illness <input type="checkbox"/> IOD <input type="checkbox"/> Absenteeism <input type="checkbox"/> Incapacity <input type="checkbox"/> On request/ referral		
Fitness for duty recommendation (according to the available information)			
Classification (select one)		Comments	
Fit for duty			

Fit for duty subject to specific conditions		
Temporarily unfit for duty		
Permanently unfit for duty		
Referral		
Employee's healthcare practitioner		State Hospital/Municipal Clinic
Specialist		Social worker/EAP/Psychologist
Optometrist/Ophthalmologist		X-ray/Radiologist
Audiologist (diagnostic audiometry)		Other (Specify)
Referral Type		
Suspected occupational related condition		Non-occupational related (Primary healthcare/ chronic disease)
Exclusions		
Known Risks Associated with the job		
Noise zones- 85 dB and above		Shunting
Respiratory risk zone (Grinding/Welding/Flame cutting/Gauging.)		Safety-critical work- drivers/operators, high voltage testing, working at heights, shunting, working in confined spaces
Heat stress zone (Specify what :)		Driving - road vehicles carrying passengers or dangerous goods
Working at heights- above 2 metres		Driving - forklift truck operators, crane drivers etc.
Working with moving machinery		Heavy manual work

What chemicals are you exposed to?	Working in confined spaces (Where & with what)		
PERMISSION: I herewith give permission that the findings of my occupational medical examination may be forwarded to my supervisor/manager	DECLARATION OMP : I hereby certify that this report embody the finding completely and correctly		
Signature of employee _____	Signature of OHP (witness) _____	Name & qualifications OMP _____	Signature of OMP _____
Date signed _____	Examination Date _____		Certificate Expiry Date _____
If exposed to sound levels above 105 dB, the employee shall return within 6 (six) months from date of signature for audiometry testing			
Retest/Return date			