



Preparing the Workplace for Coronavirus

Return to Work Preparedness: Compensation Issues

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Legislation

Downloaded from <http://www.labour.gov.za>



REPUBLIC OF SOUTH AFRICA

No. 85 of 1993: Occupational Health and Safety Act
as amended by
Occupational Health and Safety Amendment Act, No. 181 Of 1993

ACT

To provide for the health and safety of persons at work and for the health and safety of persons in connection with the use of plant and machinery; the protection of persons other than persons at work against hazards to their health and safety arising out of or in connection with the activities of persons at work; to establish an advisory commission on occupational health and safety; and to provide for matters connected therewith.

Depart

GOVERNMENT NOTICE GOEWERMENTSKENNISGEWING

DEPARTMENT OF LABOUR
DEPARTEMENT VAN ARBEID

No. R. 1390

27 December 2001

OCCUPATIONAL HEALTH AND SAFETY ACT, 1993
REGULATIONS FOR HAZARDOUS BIOLOGICAL AGENTS

DEPARTMENT OF LABOUR NOTICE 191 OF 2019

COMPENSATION FOR OCCUPATIONAL INJURIES AND DISEASES ACT, 1993 (ACT NO.130 OF 1993), AS AMENDED

Act,
for

DEPARTMENT OF EMPLOYMENT AND LABOUR

No. R.

2020

**COMPENSATION FOR OCCUPATIONAL INJURIES AND
DISEASES ACT, 1993 (ACT NO 130 OF 1993)**

**NOTICE ON COMPENSATION FOR OCCUPATIONALLY-ACQUIRED NOVEL CORONA
VIRUS DISEASE (COVID-19) UNDER COMPENSATION FOR OCCUPATIONAL INJURIES
AND DISEASES ACT, 130 of 1993 AS AMENDED**



Notice on Compensation for Occupationally-Acquired Novel Corona Virus Disease (COVID-19)

- **Diagnosis for Occupationally-Acquired COVID-19?**
 - ✓ **A reliable Dx of COVID-19**
 - ✓ **Temporal association between exposure and symptoms**
 - A high-risk COVID-19 work environment
 - Occupational exposure to a known source of COVID-19
 - An approved official trip and travel Hx to a high-risk area



Who Is Able to Claim for Occupationally-Acquired COVID-19

- **All workers with a valid contract, except for:**
 - Domestic workers and those in informal trade
 - South African National Defence Force, South African Police Service
 - Military Staff
 - Independent contractors
 - Workers who work outside the country more than 12 months
 - Any act of wilful misconduct leading to the disease



Occupations at Risk for COVID-19 DoEL

- Very high and high exposure risk occupations
 - Very high potential for exposure to COVID-19 pts
 - All frontline HWs, dentists, lab staff, etc.
 - Move from very high risk to high risk if they do AGPs
- Medium exposure risk occupations
 - Frequent and/or close contact within 2m of possible COVID-19 pts e.g. schools, labour centres, retail, construction sites, banks, mines, etc.
- Low exposure risk occupations
 - Jobs that do not require contact with people known to be suspected of being infected with COVID-19



Notice on Compensation for Occupationally-Acquired Novel Corona Virus Disease (COVID-19)

- **What makes COVID-19 occupationally-acquired?**
 - High-risk occupations for COVID-19
 - Travel for work purposes to a high-risk country
 - Proof of close contact exposure within the work environment
 - Other considerations
 - High-density, frequent contact, frequent touch, frequent money exchange
 - Poor ventilation, vulnerable groups,



What Makes COVID-19 Occupationally-Acquired

- **Balance of Probabilities 50/50?**
 - We only need to be 51% sure that the COVID-19 was occupationally-acquired
 - Does not need to be “beyond a reasonable doubt”
 - Thus, a good motivation needs to be supplied by the OMP, with all required documentation
 - Low risk occupations--not occupationally acquired unless proof of contact (remember incubation period and definition of contact)
 - **no comparison, economy, pay-outs affects businesses??**



Assessment of Impairment and Benefits

– Impairment

- Assessment made once MMI reached
- Degree of impairment based on complications from the affected body system

– Benefits

- Temporary total disablement (payment ≤ 24 months)
- Self-quarantine – employer liable for days of leave
- Permanent disablement (> 24 months)
 - $\geq 30\%$ pension, $< 30\%$ lump sum
- Medical aid
- Death benefit



Reporting

The following documentation should be submitted to the Compensation Commissioner

- Employer Report of an Occupational Disease (W.CL.1)
- Notice of an Occupational Disease & Claim for Compensation (W.CL.14)
- Exposure and Medical Questionnaire
- First Medical Report in respect of an Occupational Disease (W.CL.22)
- Exposure history (W.CL.110) and/or any other employment history
- A medical report from Dr and/or Specialist

- Progress medical reports (W.CL.26)
- Final medical report (W.CL.26) once MMI reached



Important Considerations

- First medical Report (W.CL.22)
 - Should list the diagnosis as U 07.1 ICD-10 code for COVID-19
- Appropriate Exposure Hx
 - Ventilation
 - High-crowd settings
 - Frequent money exchange
 - High-touch environment
 - Frequent customer interface
- Medical Report
 - Occ hx, exam, risk factors, Dx, lab results, CXR,
- Affidavit by employee if employer cannot be traced



Online Claims and Processing

- If using online claims – use correct ICD code U07.1
 - Compensation Fund:CompEasy (www.labour.gov.za)
 - Rand Mutual Assurance: CompCare (www.randmutual.co.za)
 - Federated Employers Mutual: IMS (<https://roe.fem.co.za>)
- Submission of manual claims for COVID-19
 - Compensation Fund: covid19claims@labour.gov.za
 - 0860 105 350
 - Rand Mutual Assurance: contactcentre@randmutual.co.za
 - 086 022 2132
 - Federated Employers Mutual: FEM-Registry@fema.co.za
 - 011 359 4300

COVID-19 Exposure Medical Questionnaire



employment & labour

Department
Employment and Labour
REPUBLIC OF SOUTH AFRICA

Compensation Fund, Delta Heights Building 167 Thabo Sehume Street, Pretoria 0001
Tel: 0860 105 350 | Email address: COVID19claims@labour.gov.za www.labour.gov.za

COVID-19 EXPOSURE AND MEDICAL QUESTIONNAIRE (To be completed by employer):

Employee details

Name and Surname	
Contact Number	
Nationality	
ID Number	
Email Address	
Occupation	

Employer details

Name of Employer			
Industry/Sector			
Province			
Contact person			
Contact details	Email		Phone No.

EXPOSURE HISTORY:

Has the Employee travelled to any high risk countries/areas? Yes / No

If Yes

Area Travelled To	
Date Travelled	
Length of Stay	
Reason for Travel	

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Tel: 0860 105 350 | Email address: COVID19claims@labour.gov.za www.labour.gov.za

If No, has the employee been exposed to a confirmed occupationally-exposed case in the workplace Yes / No, if Yes

Date of Contact		
Contact Reported?	Yes	No
Period of Exposure		
Cases on quarantine in area of work		
Total confirmed cases in the workplace		

MEDICAL HISTORY:

Does the employee suffer from any pre-existing medical conditions? Yes/No

Has the employee been diagnosed with any other occupational disease? Yes/No

If Yes to any of the above, please check all that apply or specify in the box below:

Medical Condition	
Pregnancy (trimester: _____)	Post-partum (< 6 weeks)
Cardiovascular disease, including hypertension	Immunodeficiency, including HIV
Diabetes	Renal disease
Liver disease	Chronic lung disease
Chronic neurological or neuromuscular disease	Malignancy
Other(s), please specify:	

Medical Condition	Year of Diagnosis	On Treatment?	
Pre-existing conditions:		Yes	No
Occupational diseases:		Yes	No

Name	Signature	Date

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Acknowledgements

- NIOH Outbreak Response Team
- NICD
- NHLS Management

For more information

Enquiries : info@nioh.ac.za

NIOH WORKPLACE HOTLINE:

0800 2121 75

www.nioh.ac.za | www.nicd.ac.za | info@nioh.ca.za

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All data and statistics referred to were applicable on the date of publication.



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