



FACULTY OF HEALTH SCIENCES
UNIVERSITY OF CAPE TOWN

COVID-19 vaccine and the workplace

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NIOH Pertinent vaccines for the workplace webinar : 26 Oct 2023

cutting edge research

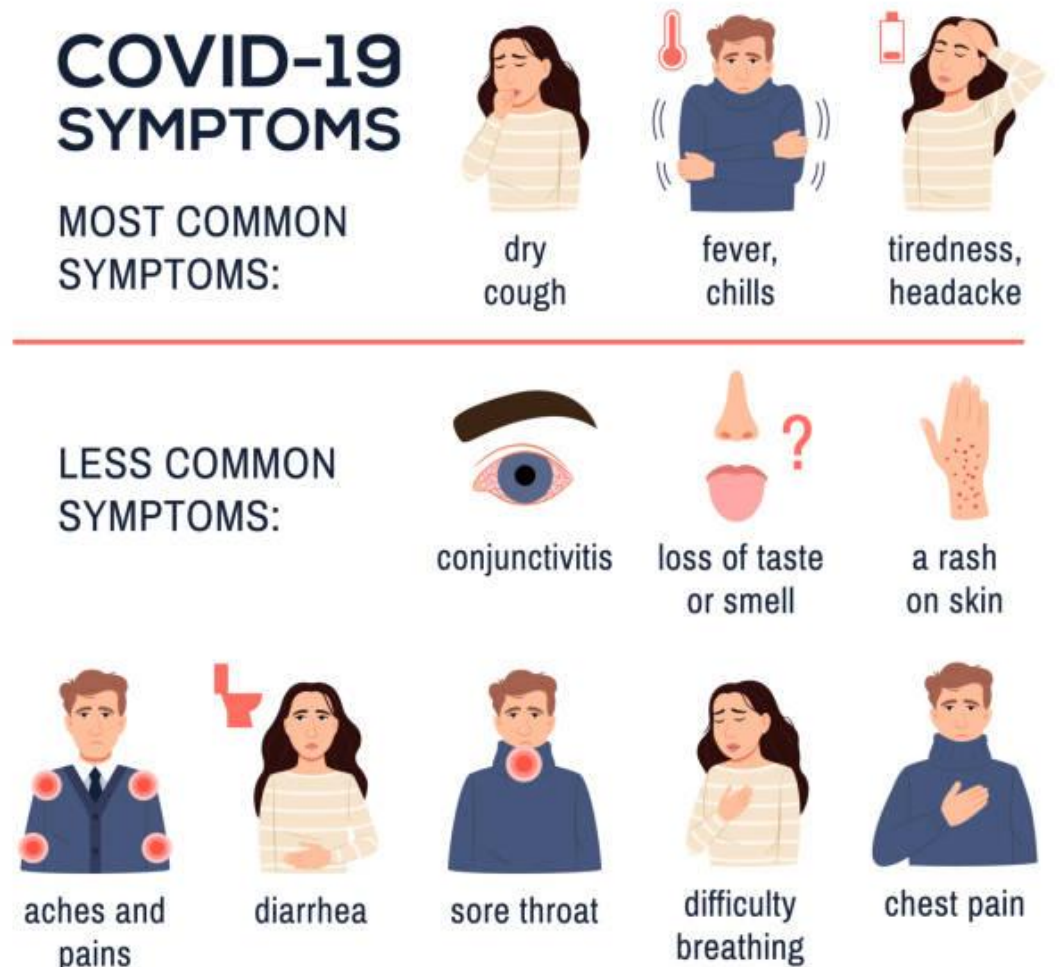
world class training and education

partnering for patient-centred health services

COVID-19: short and long-term effects

- COVID-19 is caused by infection with a coronavirus named **SARS-CoV-2**
- Wide **range of symptoms** reported – mild to severe illness and death.
- Symptoms may appear 2-14 days after exposure to the virus.
- **Long-term symptoms** and other medical complications can present – may last weeks to months after initial recovery.

Source: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>



Source: <https://www.istockphoto.com/photos/covid-symptoms-kids>

COVID-19 vaccinations **were essential** in preventing SARS-CoV-2 infections, severe disease and death during the pandemic.

The combined efficacy of full COVID-19 vaccination was **high**:

44.5% (95% CI 27.8–57.4) for **preventing asymptomatic infections**

76.5% (69.8–81.7) for **preventing symptomatic infections**

95.4% (95% credible interval 88.0–98.7) for **preventing hospitalisation**

90.8% (85.5–95.1) for **preventing severe infection**

85.8% (68.7–94.6) for **preventing death**

Efficacy of SARS-CoV-2 vaccines and the dose–response relationship with three major antibodies: a systematic review and meta-analysis of randomised controlled trials

Zhi-Rong Yang, PhD [†] • Yi-Wen Jiang, PhD [†] • Fu-Xiao Li, PhD • Di Liu, PhD • Teng-Fei Lin, PhD • Zi-Yi Zhao, MPH •

et al. [Show all authors](#) • [Show footnotes](#)

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In the elderly (>60yrs) COVID-19 vaccines were effective in:

1. **Preventing SARS-CoV-2 infection** (OR = 0.38, 95% CI = 0.23-0.65, $p = 0.0004$)
2. **Reducing the number of COVID-19-related deaths** (OR = 0.16, 95% CI = 0.10-0.25, $p < 0.00001$)

Meta-Analysis > [Front Immunol.](https://doi.org/10.3389/fimmu.2023.1113156) 2023 Mar 3;14:1113156. doi: 10.3389/fimmu.2023.1113156. eCollection 2023.

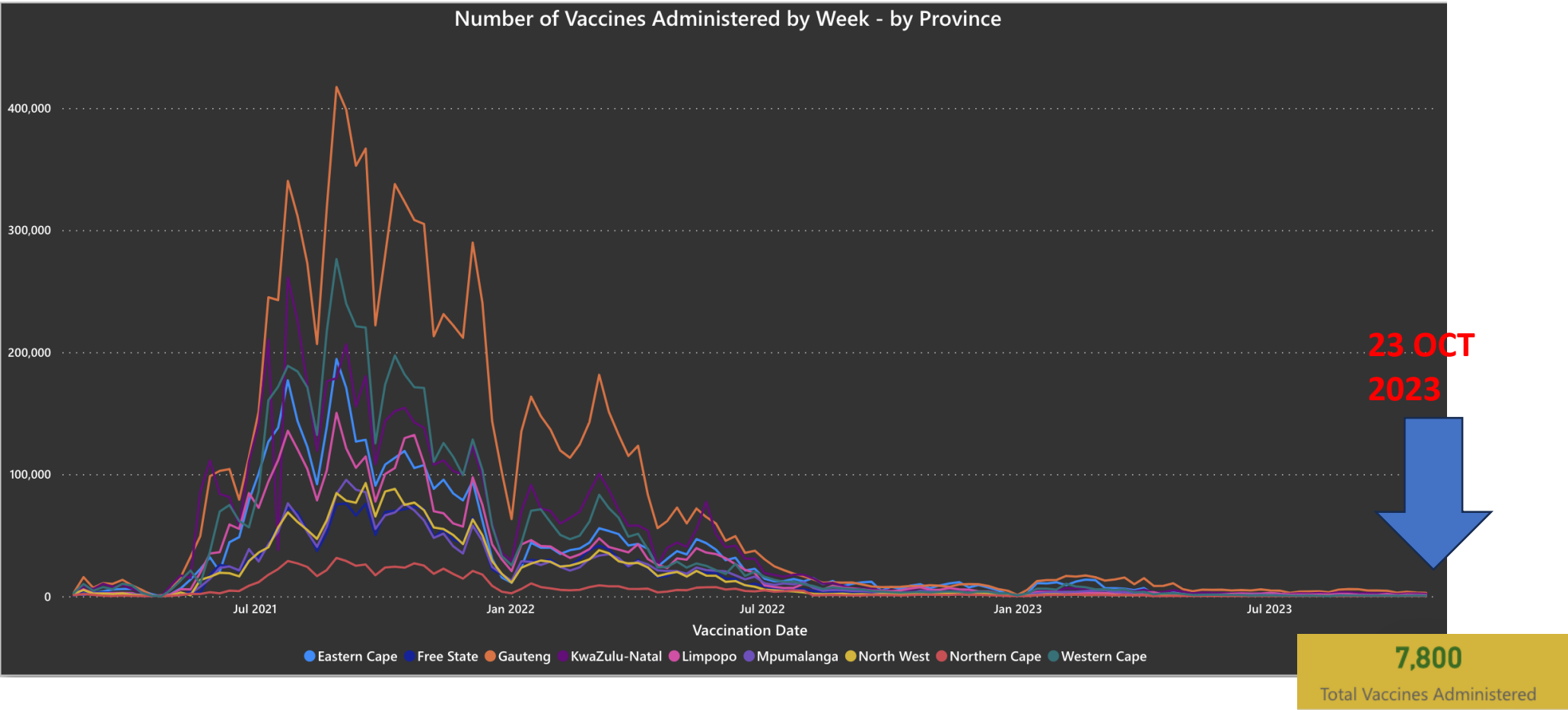
A systematic review and meta-analysis of the effectiveness and safety of COVID-19 vaccination in older adults

Kun Xu ¹, Zihan Wang ², Maorong Qin ¹, Yangyu Gao ¹, Na Luo ¹, Wanting Xie ¹, Yihan Zou ¹, Jie Wang ³, Xingming Ma ^{1 4}



<https://www.who.int/news-room/feature-stories/detail/donors-making-a-difference--the-european-union-teams-up-with-who-to-boost-covid-19-vaccination-coverage-in-africa>


Number of COVID-19 vaccines administered in RSA



Source: <https://sacoronavirus.co.za/latest-vaccine-statistics/>

Number of COVID-19 vaccines administered in RSA

Progress with the Vaccination Rollout



NEEDING YOUR
COVID-19
VACCINATION
CERTIFICATE?

Download your Covid-19 vaccine certificate on this link:
<https://vaccine.certificate.health.gov.za>
or visit the sacoronavirus.co.za website

or call **0800 029 999** and an agent will be able assist you.

Covid-19 vaccines still matter. Don't forget to get yours.

health
Department of Health
REPUBLIC OF SOUTH AFRICA

NATIONAL HEALTH HOTLINE
0800 029 999

www.sacoronavirus.co.za

Progress by 22 October 2023



39,216,844

Covid-19 vaccines have been administered

	At least one dose	%
% eligible pop.	22 853 573	49.64%
60+	3 680 033	66.84%
50-59 yrs	3 175 429	65.92%
35-49 yrs	6 500 574	55.62%
18-34 yrs	7 283 096	40.94%
12-17 yrs	2 209 223	35.39%
Booster doses	4 513 207	

Looking for a vaccination site?

0800 029 999 * sacoronavirus.co.za

39,216,844

Total Vaccines Doses Administered

22,854,994

People Who Had At Least One Dose

19,601,587

People Who Are Fully Vaccinated

4,513,207

Total General Booster Dose

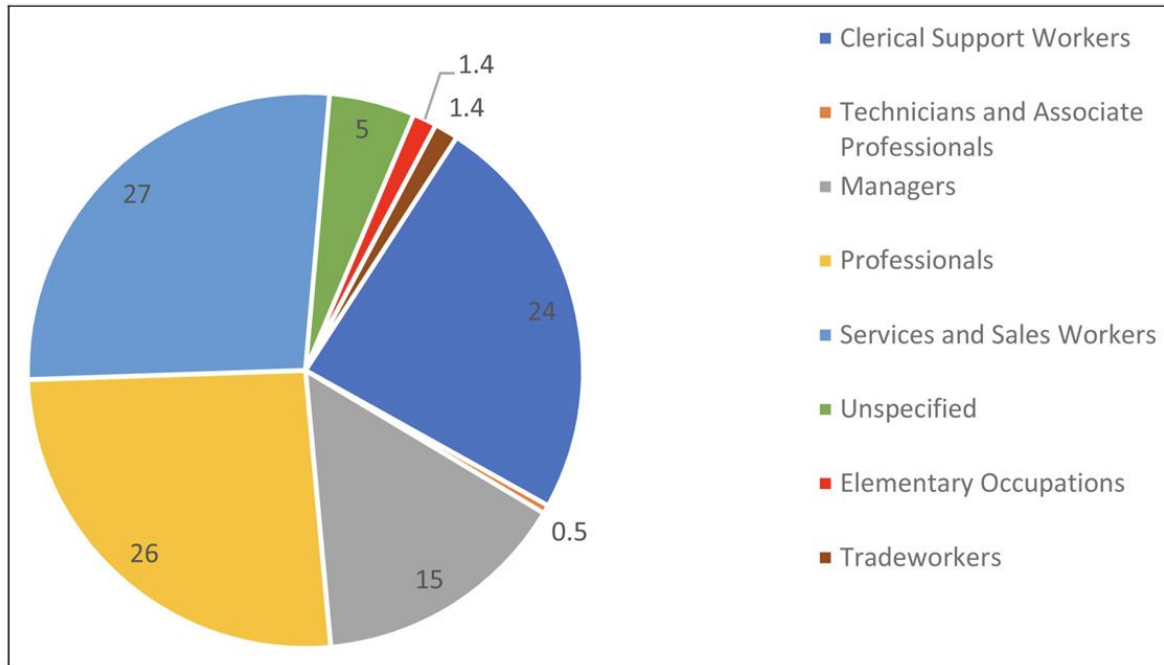
24,208

Total Immunocompromised Booster Dose

79,425

Total Continuous Booster Dose

COVID-19 and workers in RSA



Distribution of COVID-19-positive employees by job category, for the period October 1, 2020, to October 31, 2021.

- Generally **high uptake** of vaccination among **Health Workers** (overall acceptance = 90%)
- **Very high** uptake in **mining industry** (75%)
- **No other industry data available** - vaccination rates likely followed the trends in the general population (51.7% vaccinated).

		Exposure risk group (COVID-19 mortality, disease severity and infection)				
		Low	Medium	High	Very High	
		Accommodation Information & Communication Finance Real Estate Professional Arts, Entertainment Office and administrative support (not client facing) Domestic cleaning	Construction Manufacturing Mining Agriculture, forestry	Wholesale and retail (including food preparation, personal care, sales, and customer services) Electricity Water, waste, and sanitation Maintenance and cleaning*	Public service Protective/safety services Social care Education Transport	
Social and Economic Necessity	Low Construction Real Estate Arts, Entertainment					
	Medium Financial Professional Manufacturing Accommodation and food service Information and communication Admin and support					
	High Wholesale and retail Essential manufacturing Mining and quarrying Water supply; sewerage, waste management					
	Very High Public service and admin Agriculture, forestry, and fishing Electricity Transportation Education					

Figure 5. COVID-19 matrix for exposure risk group versus social and economic necessity. Vaccination priority coding: Red: highest, orange: medium-high, yellow: medium-low, green: low. Note (*): Maintenance and cleaning—is a subcategory of administrative support, but needs to be elevated to a higher category than that of nonclient-facing administrative workers.

Estimates of COVID-19 vaccine uptake in major occupational groups and detailed occupational categories in the United States, April–May 2021

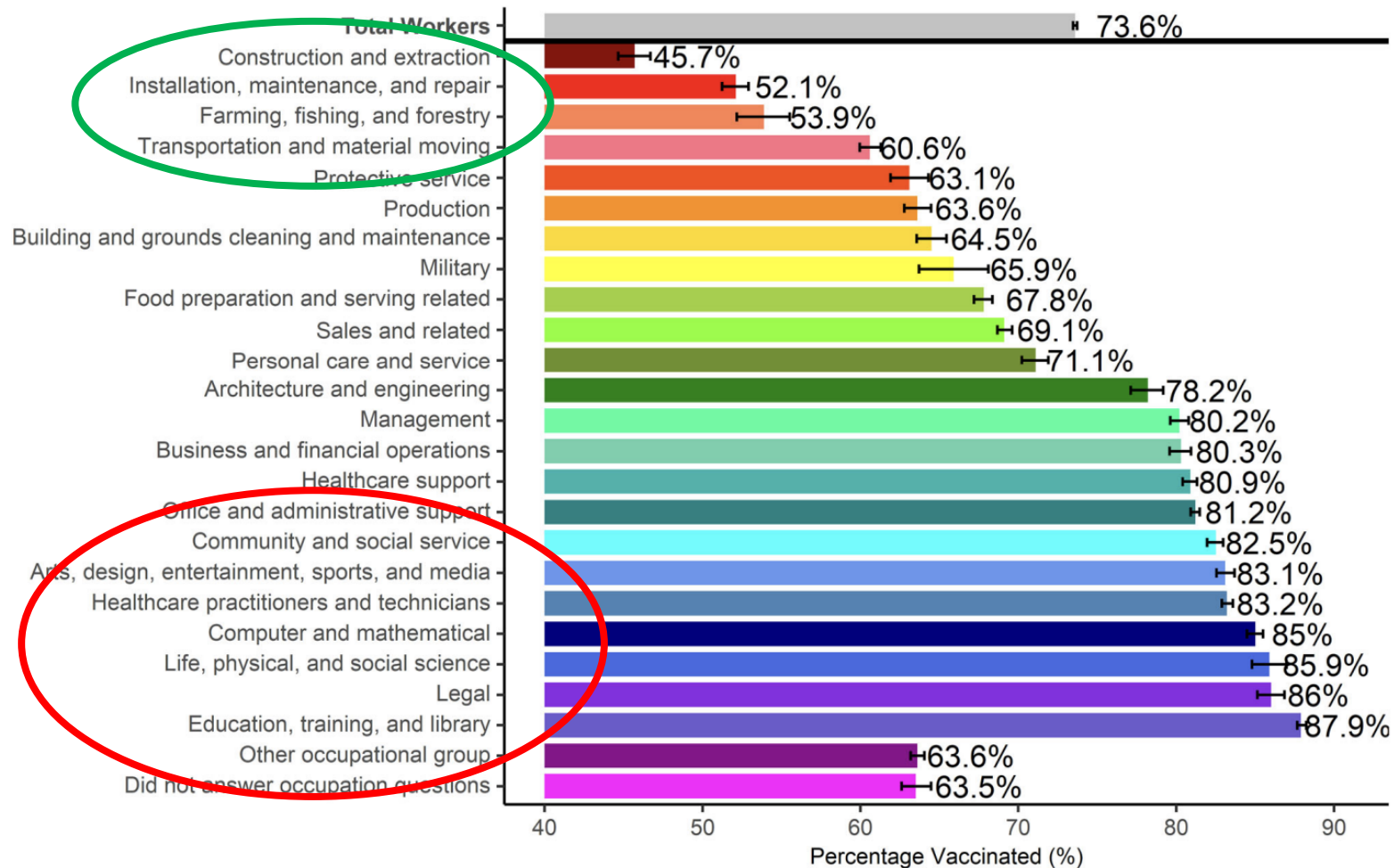


FIGURE 1 Percentage vaccinated for COVID-19 and 95% confidence interval for major occupational groups.

Recommendations – COVID-19 boosters

Circular: 132...../2023

EXPANSION OF COVID-19 BOOSTER SCHEDULING AND CAPTURING ON EVDS

The National Department of Health (NDoH) has announced that individuals eligible for COVID-19 booster doses can now receive a booster every 6 months, following their previous booster. This is particularly important for people at increased risk of severe COVID-19.

The Electronic Vaccination Data System (EVDS) has been updated to accommodate the recording of the administration of additional 6-month COVID-19 booster doses.

Individuals who wish to receive the COMIRNATY® (PFIZER) COVID-19 vaccine as their booster dose must do so before 31 October 2023. Persons older than 18 years will still have access to the COVID-19 vaccine Janssen® from 1 November 2023.

Please note that all booster vaccinations administered from 23 August 2023 onwards must be recorded retrospectively on EVDS.



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**TO:
HEADS OF PROVINCIAL HEALTH DEPARTMENTS
DISTRICT, HOSPITAL AND PHC MANAGERS
COVID-19 VACCINE PROGRAMME MANAGERS
COVID-19 VACCINATION SITE MANAGERS
COVID-19 VACCINATORS**

NATIONAL VACCINATION PROGRAMME CIRCULAR 1 OF 2023

**UPDATE TO COVID-19 VACCINATION SCHEDULE: ADDITIONAL BOOSTER DOSE
FOR PERSONS 18 YEARS AND OLDER**

1. From Monday, 30th January 2023 **persons 18 years and older** will be eligible to receive an **additional booster dose** providing that a period of at least **180 days** has elapsed since they received their last Covid-19 vaccination.
2. This means that **adults 50 years and older** will be eligible to receive a **total of five doses**, and **adults 18 – 49 years** will be eligible to receive a **total of four doses**.
3. Where available, these doses should be administered using the Cominarty® vaccine. However COVID-19 vaccine Janssen® may also be used, if the Cominarty® vaccine is not available or if the person prefers to receive the COVID-19 vaccine Janssen®.

GOVERNMENT NOTICES • GOEWERMENTSKENNISGEWINGS

DEPARTMENT OF EMPLOYMENT AND LABOUR

NO. R. 1876

15 February 2022

**CODE OF PRACTICE: MANAGING EXPOSURE TO SARS-COV-2 IN THE
WORKPLACE, 2022**

Notice is hereby given that the Code of Good Practice: Managing Exposure to SARS-CoV-2 in the Workplace set out in the Schedule is issued by the Minister of Employment and Labour after consideration by NEDLAC in terms of section 203(2A) of the Labour Relations Act, 1995 (Act No. 66 of 1995) to take effect on the date of the lapsing of the Declaration of a National State of Disaster declared under GN313 of 15 March 2020 and extended in terms of section 27(2) of the Disaster Management Act, 2002 (Act No.57 of 2002).



MR TW NXESI, MP
MINISTER OF EMPLOYMENT AND LABOUR
DATE: 15 MARCH 2022

SCHEDULE

**CODE OF PRACTICE: MANAGING EXPOSURE TO SARS-COV-2 IN THE
WORKPLACE, 2022**

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12. Vaccination of employees

- (1) Every employer must in accordance with the measures contemplated in section 5 (1)(b)(i)-
 - (a) notify the employee identified in terms of section 6(1)(a) of the obligation to be vaccinated;
 - (b) counsel the employee on the issues related to vaccines in section 7 (1)(c);
 - (c) permit the employee, at the employee's request, to consult a health and safety representative, a worker representative or a trade union official;
 - (d) give administrative support to the employees to register and to access their COVID-19 vaccination certificates on the EVDS Portal for SARS-CoV-2¹⁵; and
 - (e) give the employee paid time off to be vaccinated and provide transport for the employee to and from the nearest vaccination site.

ACTION: Ensure RA plan prescribed in section 5 (1)(b)(i) of this COP includes measures to be implemented in respect of the vaccination of its employees.

- (2) In giving effect to this Code, an employer may require its employees to disclose their vaccination status and to produce a vaccination certificate.
- (3) Should an employee suffer a vaccine adverse event that renders them unable to work, the employer must –
 - (a) on receipt of a medical certificate, give the employee paid time off to recover if the employee is no longer entitled to paid sick leave in terms of the BCEA or any applicable collective agreement; or
 - (b) subject to any regulations in respect of a COVID-19 Vaccine Injury No-Fault Compensation Scheme¹⁶, lodge a claim for compensation in terms

ACTION: Ensure this notification and counselling happens for each employee identified to be vaccinated.

Align HR processes to give time off.

12. Vaccination of employees

- (4) If an employee refuses to be vaccinated, the employer must-
- (a) counsel the employee and, if requested, allow the employee to seek guidance from a health and safety representative, worker representative or trade union official;
 - (b) take steps to reasonably accommodate the employee in a position that does not require the employee to be vaccinated.



ACTION: Ensure this counselling happens for each employee who refuses to be vaccinated (HR procedure required).

ACTION: Ensure provision is made for this referral (a procedure required).

Ensure an HR procedure is in place to accommodate selected employees.



- (5) If an employee produces a medical certificate attesting that an employee has contra-indications for vaccination, the employer may refer the employee for a medical evaluation for confirmation at the employer's expense.
- (6) If the employer accepts the medical certificate or the employee is referred to medical evaluation and that evaluation confirms that the employee has contra-indications for vaccination, it must accommodate the employee¹ in a position that does not require the employee to be vaccinated.

Take home message

- Impact of COVID-19 on workplaces has been significant
- Need for continued vigilance and prevention in workplace
- COVID-19 shown effective in reducing infection, severity of disease and deaths
- Workers should be informed of option and encouraged to obtain boosters/updated COVID-19 vaccines
- Need to address barriers to access such as lack of occupational health services and vaccine hesitancy