



# BRIEFING TO THE PORTFOLIO COMMITTEE ON MINERALS RESOURCES AND ENERGY

MINING INDUSTRY RESPONSE TO COVID-19  
19 June 2020



# This briefing

Roger Baxter  
**Minerals Council's  
approach**

Dr Thuthula Balfour  
on the  
**health response**

**Testing and  
Statistics**

Tebello Chabana  
on  
**Mining Industry in  
Communities.**

Motsamai  
Motlhamme  
on  
**Labour Issues**

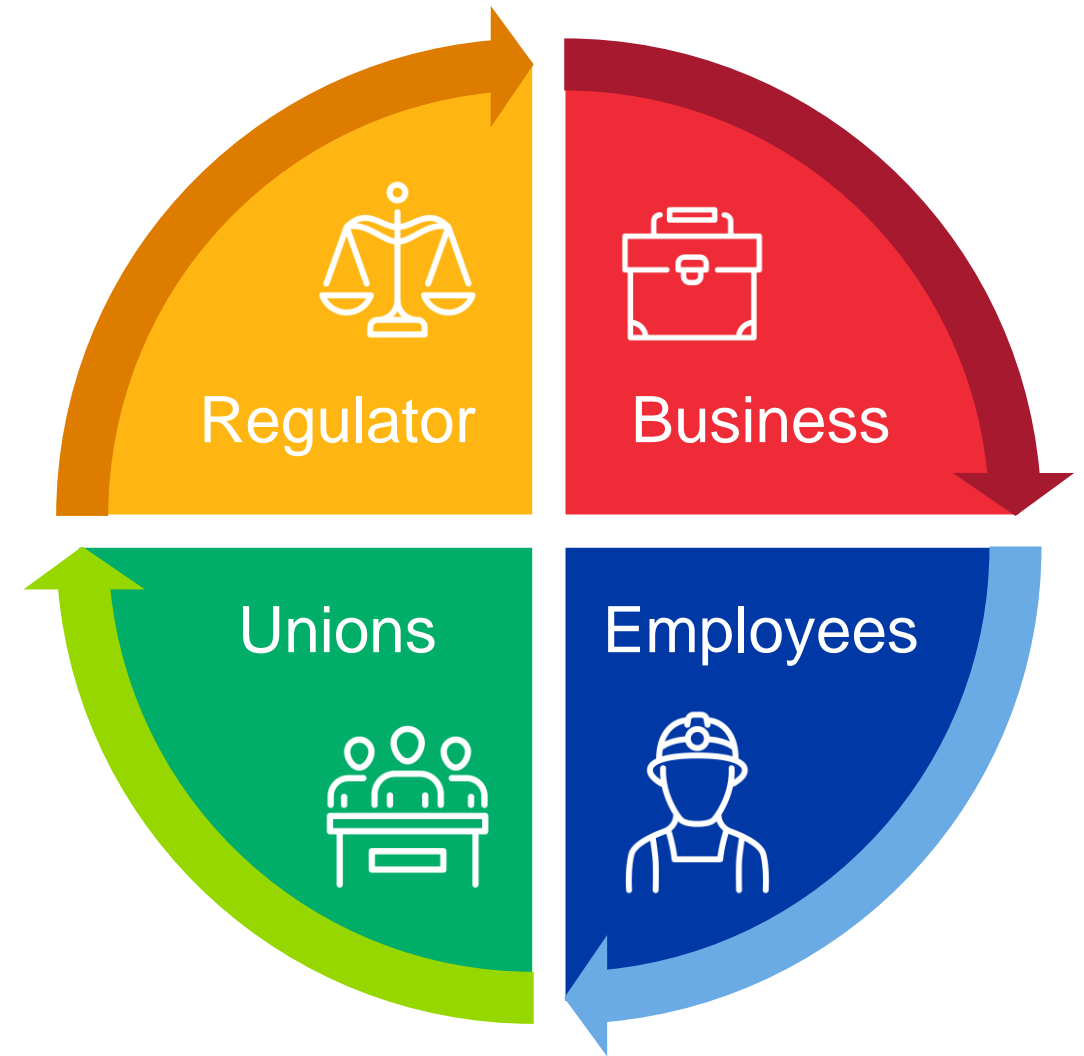


# Shared responsibility

While the prime responsibility for ensuring the effective implementation of measures to ensure healthy and safe working practices rests with management, levels of responsibility rest with all involved, including employees themselves, their elected representatives and the regulator.

## *But it goes beyond the workplace*

People are employees for only a part of their time, and they are also individuals with families and friends. This is why companies, in addition to doing their utmost to ensure health and safety in the workplace, have also made significant contributions to salaries of those who have been unable to work, made donations to the Business for SA Solidarity Fund and other funds, and carried out additional community projects.







# COVID-19

## Minerals Council – health interventions

# COVID-19: a black swan



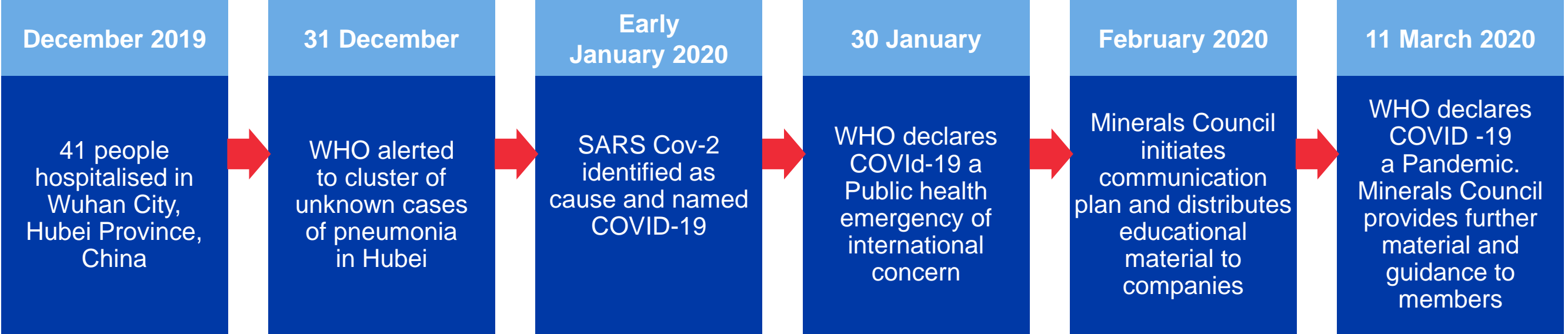
Novel virus

Unprecedented  
socio-economic  
disruption

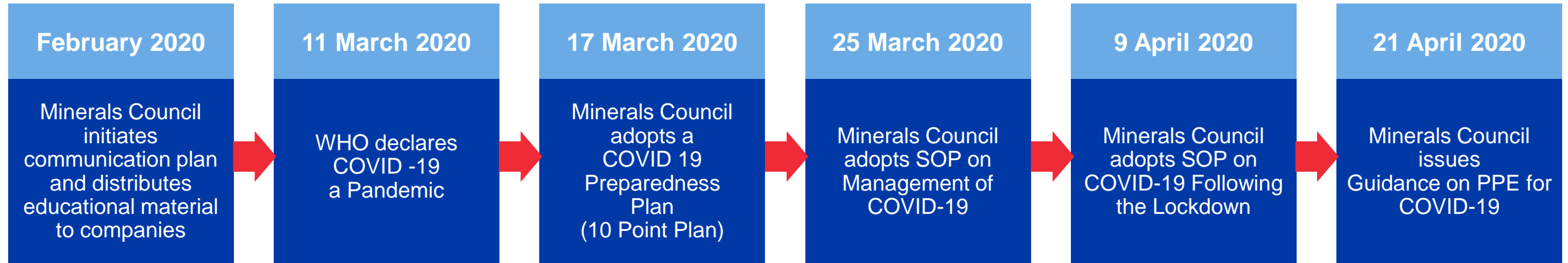
No-one has all the  
answers - we are all  
finding the best way to  
control and mitigate the  
impact of the disease



# Timeline of interventions



# Timeline of interventions



## MINING INDUSTRY ACTION PLAN ON COVID-19

Minerals Council response

**TIMELINE**

January 2020	Early February 2020	Week of 9 March 2020	11 March 2020	11 March 2020	15 March 2020	17 March 2020
Minerals Council initiates communication plan and distributes educational material to companies.	Minerals Council initiates communication plan and distributes educational material to companies.	Minerals Council initiates communication plan and distributes educational material to companies.	Minerals Council initiates communication plan and distributes educational material to companies.	Minerals Council initiates communication plan and distributes educational material to companies.	Minerals Council initiates communication plan and distributes educational material to companies.	Minerals Council initiates communication plan and distributes educational material to companies.

### 10-POINT ACTION PLAN

- Engage with organised labour and government**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
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- Employee education and health promotion for employees, contractors and suppliers**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
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  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Health worker readiness**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
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  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Ensuring access to consumables**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
  - Minerals Council will engage with the Department of Labour and the Department of Health.
  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Proactive influenza vaccination**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
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  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Understanding the potential impact on employees who may be immune-compromised**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
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  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Case definition and management of suspected cases or contacts of cases**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
  - Minerals Council will engage with the Department of Labour and the Department of Health.
  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Isolation of employees should the need arise**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
  - Minerals Council will engage with the Department of Labour and the Department of Health.
  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Travel advice**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
  - Minerals Council will engage with the Department of Labour and the Department of Health.
  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Reporting and communication in the mining industry in the event of a case**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
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  - Minerals Council will engage with the Department of Labour and the Department of Health.
- Monitoring**
  - Minerals Council will engage with the Department of Labour and the Department of Health.
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## STANDARD OPERATING PROCEDURE

The Minerals Council South Africa, on behalf of its members, has developed a Standard Operating Procedure (SOP) to assist in preventing the transmission of COVID-19 in South African mines. This procedure provides guidelines for the management of the employees and healthcare workers returning to work following the COVID-19 South African lockdown. It addresses possible exposure to SARS-CoV-2 the virus responsible for COVID-19 and subsequent illness, isolation and quarantine, and outlines the additional special steps and procedures to be followed in addition to the formal procedure for medical surveillance of any workers returning to work following a significant period of time away from work, based on the Department of Minerals and Energy's (DMRE) standards of fitness to work.

This SOP is aligned with the SOP for Addressing Cases of COVID-19 also prepared by the Minerals Council, and the Guiding Principles on Prevention and Management of COVID-19 in SAM published by the Department of Minerals and Energy (DMRE) on 26 March 2020.

### 1 Before arrival

**Before employees arrive at work,** mining companies should have a return to work procedure in place, including at least:

- Sufficient resources are in place for pre-screening and isolation.
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### 2 After arrival

**After employees arrive at work,** mining companies should apply infection prevention and control measures to all forms of transport of employees, screening areas and working areas.

- Encouraging employees on measures to prevent infection such as social distancing and hygiene.
- Encouraging PPE, particularly for frontline staff.
- Encouraging employees to wear non medical masks.
- Encouraging employees on how to use PPE and masks and reminding to dispose of them.
- Reinforcing the need to take chronic medication.

### 3 Isolation area assessment

**Isolation area assessment**

- Employees should be assessed for COVID-19 signs and symptoms in an isolation area. Employees who meet the NCCD criteria of a person under investigation must be referred to the designated Isolation Centre for testing.
- Employees whose test results are positive for COVID-19 are not very sick and have the capacity to self-isolate may do so at home for 14 days. However, staff must be assessed and continue testing under supervision.
- If the medical centre team must follow up telephonically with the employee or a daily body record progress and refer to hospital if required.
- A register must be kept of employees presenting symptoms and who are referred for isolation (DCH guidelines).

### 4 Follow up

**Follow-up**

Employees must all the medical centre to arrange for an assessment and the taking of a distance letter after the isolation/admission period. Only after the fitness to work assessment may a return to work note be issued and the line manager advised.

### 5 Continuous measures

**Continuous measures to be applied at work** include testing of staff and employees, continuously re-evaluating universal hygiene protocols, enforcing physical distancing in the workplace, continuous use of face masks, and promotion of good hygiene practices.

### 6 Reporting

**Case reporting** should be done through the DMRE surveillance programme. Details should also be submitted to the Minerals Council and DMRE, CCMA, report applied to local health workers who become infected from a known source in the workplace.

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The full SOP may be downloaded from: <https://www.mineralscouncil.org.za/minerals-council-position-on-covid-19>


# Most recent guidance on vulnerable populations

## GUIDANCE


### ON COVID-19 AND VULNERABLE POPULATIONS

The Minerals Council has developed a Guidance on COVID-19 and Vulnerable Populations to guide members in taking informed decisions in managing employees who are vulnerable to COVID-19. The Guidance is based on legislative and scientific information and provides advice on how mining companies can make use of risk-based methods to protect the health of their employees.


The Guidance should be read in conjunction with the Minerals Council Standard Operating Procedure (SOP) for Addressing Cases of COVID-19 while taking into account the Guiding Principles on Prevention and Management of COVID-19 in SAM and the Guideline for the Compilation of a Mandatory Code of Practice for the Mitigation and Management of COVID-19 Outbreak, both published by the Department of Mineral Resources and Energy.



#### WHO ARE VULNERABLE GROUPS?



- People who are 60 years and over
- People of all ages with underlying medical conditions such as:
  - Chronic lung disease or moderate to severe asthma
  - Serious heart conditions
  - Hypertension
  - Immunocompromised individuals as a result of:
    - cancer treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, prolonged use of corticosteroid and other immune weakening medications
  - Severe obesity
  - Diabetes
  - Chronic kidney disease
  - Liver disease




#### CHRONIC DISEASES IN THE MINING INDUSTRY

Chronic lifestyle diseases have increased in South Africa over the past decade. Hypertension is particularly prevalent, with rates in men in 2008 of 60% in 45-54 year olds and 70% in 55-64 year olds. Similarly, these co-morbidities are prevalent in the mining industry and increase with age.

A 2015 study on chronic diseases prevalent amongst Minerals Council members showed that the most common chronic diseases in the mining industry are diabetes, hypertension, HIV and TB.


#### GUIDANCE



The occupational medical practitioner (OMP) will decide who is fit for work in the COVID-19 environment following a risk assessment of each employee's individual occupational and clinical circumstances on a case-by-case basis.

Special measures need to be taken to protect vulnerable employees and to mitigate the risk of those employees contracting COVID-19. These measures need to be based on a proper risk assessment on a case-by-case basis.


##### Workplace risk and COVID-19 assessments



A consistent formal approach for workplace risk and COVID-19 risk assessments to allow for employee exemptions to return to work includes:


- 1 Risk assessment per job category, indicating how well the transmission risk can be mitigated through PPE and operating protocols.
- 2 If the risk can be mitigated, the employee will get an exemption, and be permitted to return to work.
- 3 If the assessment outcome shows that the risk cannot be mitigated, then the existing PPE and/or operating protocols will be amended to allow mitigation. This will lead to an exemption so that the employee is permitted to return to work. If these amendments do not ensure that the risk can be mitigated then no exemption can be attained.
- 4 Assessments to include consideration of other COVID-19 risk factors, including travel-related risks and living condition risks.
- 5 Assessments to support exemptions to be substantiated by auditable evidence.

##### Employees with comorbidities



- Express and informed consent to be obtained from employees for confidential medical information to be disclosed.
- Record of vulnerable employees and relevant risk categories to be compiled.
- Educate employees about importance of disclosing medical conditions.
- Provide at-risk employees with additional education and protection.
- Assess level of control of chronic diseases and assist employees with treatment and control of chronic diseases.
- Prioritise vulnerable employees for prophylactic interventions.
- If possible, offer vulnerable employees jobs working from home or with minimal contact with other people.
- If possible, re-design workplace to accommodate vulnerable employees and/or assign vulnerable employees to temporary alternative functions.
- Identify additional workplace control measures appropriate for vulnerable employees; develop approved individual medical management plan.
- Supplement and enhance control measures identified as critical for workplace to protect health and safety of vulnerable employees.
- Issue vulnerable employees with additional PPE and additional hygiene enablement tools.
- Consider if external risks can be reduced further, e.g. reducing interaction with visitors or use of public transport.
- Monitor vulnerable employees regularly.
- Exercise greater vigilance and early treatment and hospitalisation for employees with comorbidities.


##### Employees aged 60 years and older



Disaster Management Act regulations do not automatically exclude employees aged 60 years and older from returning to work. But, employers must put special measures in place to protect their health and safety.

These criteria apply conditional on the following case-by-case considerations:

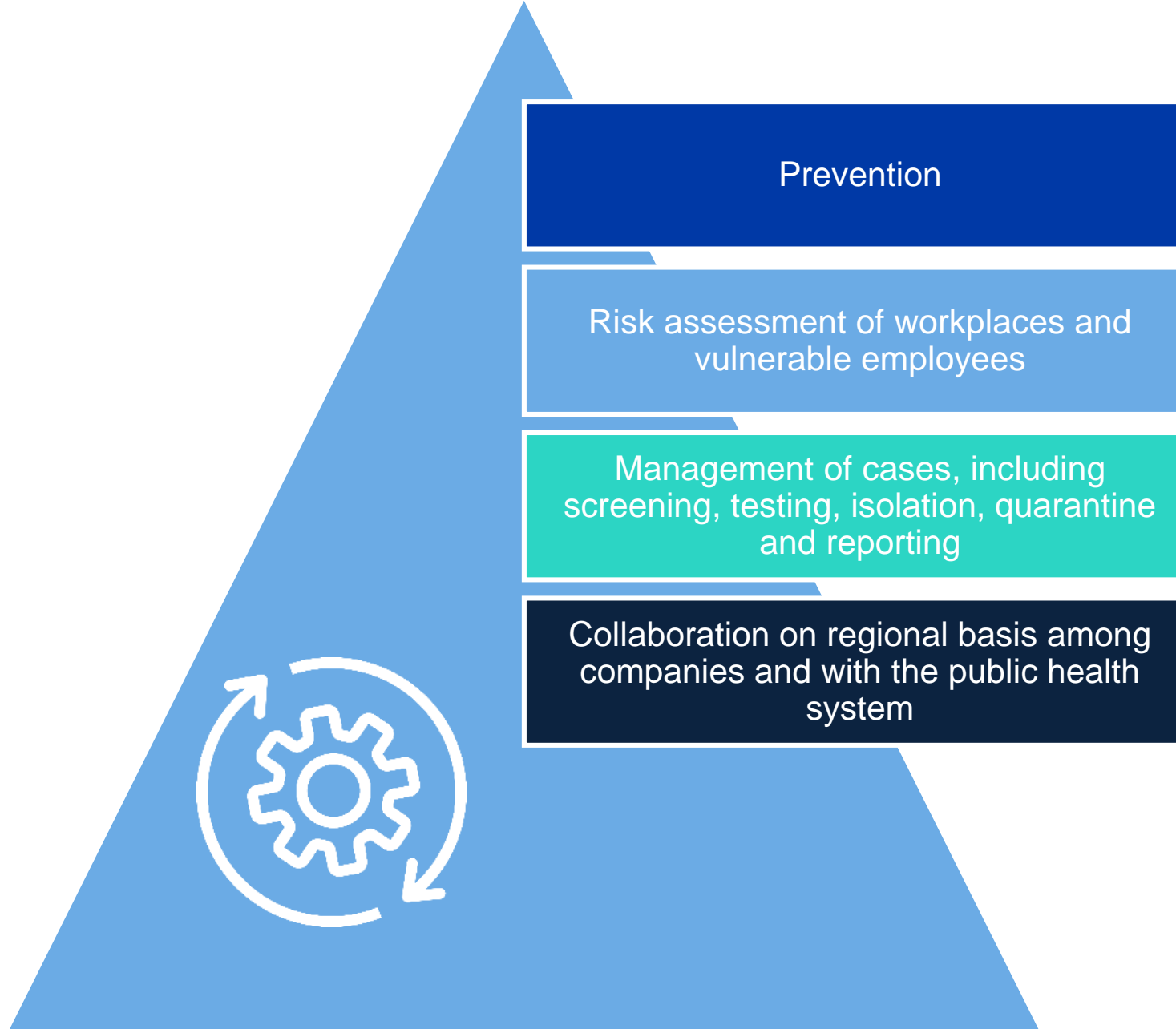
- If employee's job or function can be performed remotely, they should do so.
- If employee's job or function is low risk, the employee will be permitted on site for work.
- If the employee's job or function is high risk, the employee will not be permitted on site for work.



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# Key elements of interventions





# Khumbul'ekhaya

- CEO-led initiative to reduce mortality in the industry under CEO Zero Harm Forum
- Additional funding allocated for:
  - Behavioural training
  - Disease mapping
  - Fundamental research





# CURRENT STATS

June 2020





# COVID-19 DASHBOARD



## Mining industry statistics

Number of mines	385
Total screening	261,710
Total tests	12,131
Tests pending	803
Total positive cases	1,133
Active cases	741
Deaths	2
Recovered	390

## Global statistics

Global cases  
8,274,596

Global deaths  
446,390

Global recovered  
4,333,422

## RSA statistics

RSA cases  
76,334

RSA deaths  
1,625

RSA recovered  
42,063

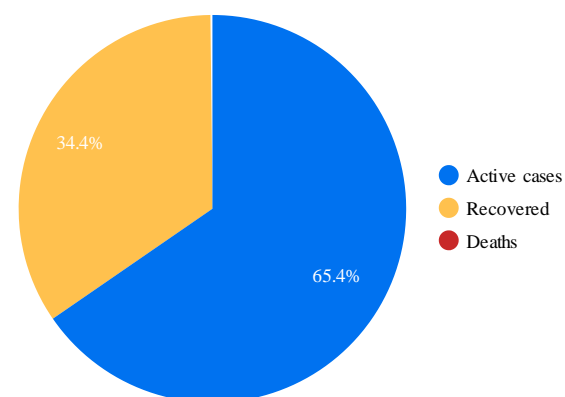
## Testing rates by population

Global test rate  
1.50%

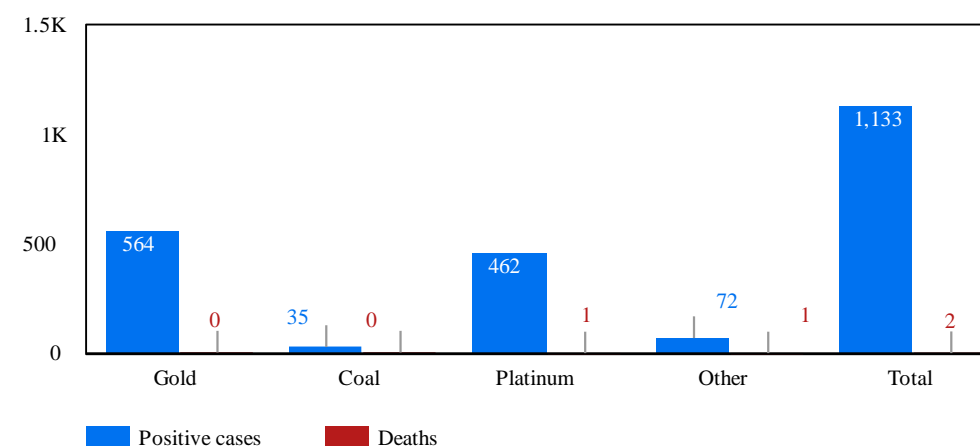
RSA test rate  
1.98%

Mining test rate  
2.70%

## Status of mining cases



## Cases and deaths per commodity



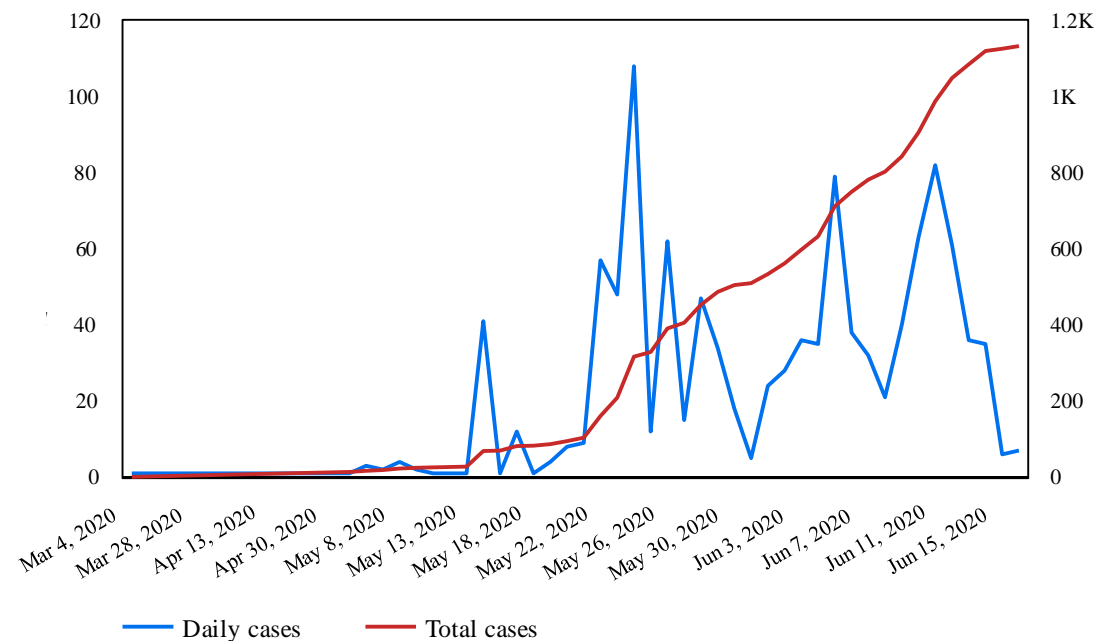




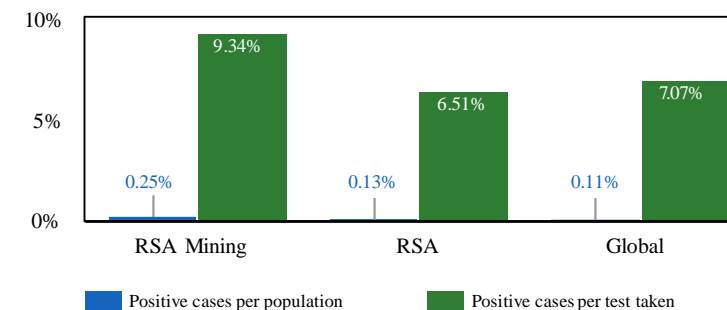
# COVID-19 DASHBOARD



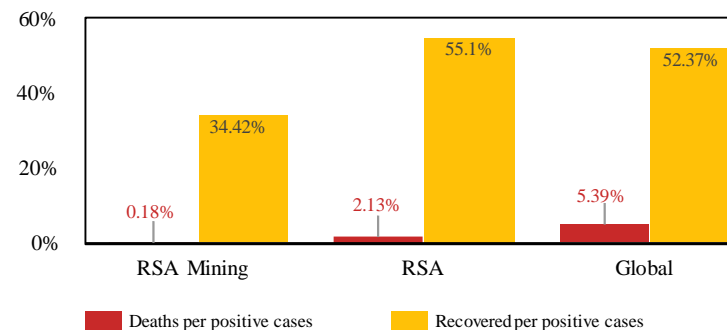
Daily and total cases diagnosed over time



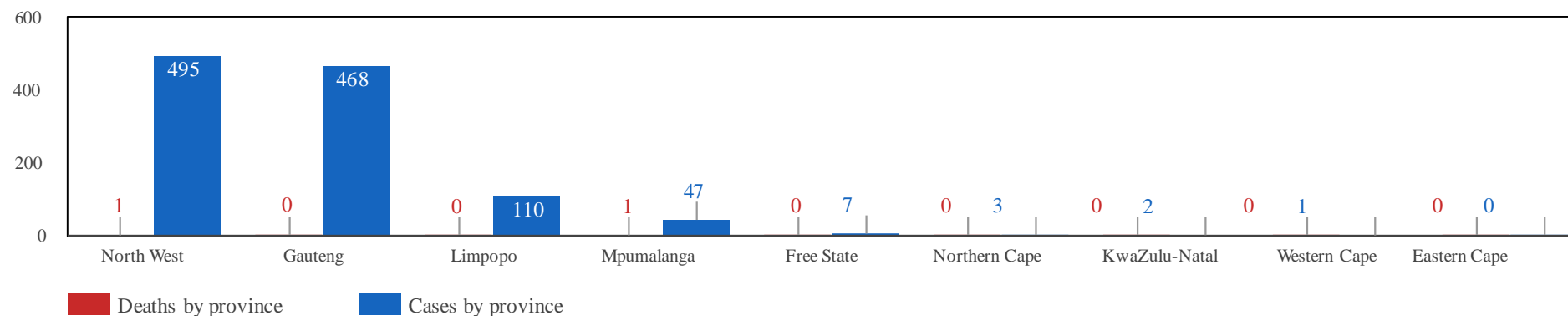
Positive cases per population and per tests taken



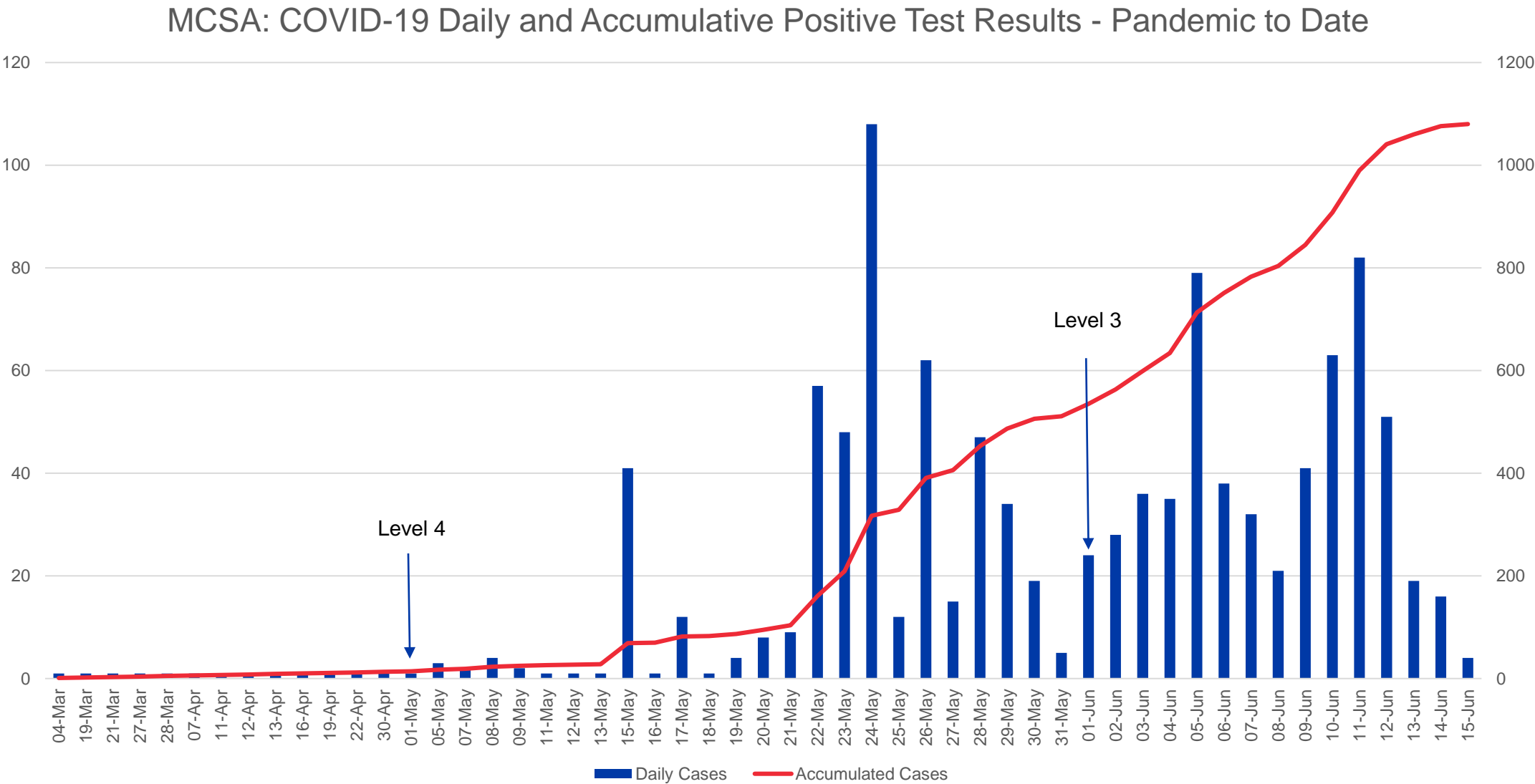
Recovered cases and deaths per positive cases



Cases and deaths per region to date



# Industry statistics in context





# Context for reported high numbers of COVID-19 cases

Given the high level of preparedness of the mining sector, the industry is doing more screening and testing than any other sector. If other sectors of the economy were doing the same level of screening and testing, they would also be detecting the real case numbers in society.

1. More COVID-19 infections diagnosed in mining as proportion of workforce than positive diagnoses as proportion of population as a whole - mistaken to assume that mining is more prone to spread of virus than population as a whole
2. Clusters have contributed to high incidences in particular areas
3. Mining companies conscious of risk of employees returning to work from different locations can potentially transport the virus - industry committed to strict routines for employees returning from other countries or regional “hotspots”
4. Industry COVID-19 death rate of miners far lower than for similar age groups in country as a whole - industry taken very cautious approach to taking extra measures for individuals who may be at greater risk

Intensive daily screening, thorough contact tracing and testing of contacts means that the overall incidence is NO HIGHER THAN THE POPULATION AS A WHOLE, and is MORE LIKELY LOWER, given especially the intensive hygiene and social distancing measures required at every workplace

# Issue of testing

- Testing done on any person displaying any symptoms
- Screening and testing undertaken in line with protocols determined by NICD
- In South Africa, as in most of the rest of the world, testing resources are limited. It would be unfair to everyone else if a big share of total testing capacity was allocated to one industry
- Number of mining companies have been seeking to boost testing capacity within companies and regions in which they operate
- Testing not panacea – it is at a point of time with infection happening only minutes after a test has been done

Biggest defence is prevention through hygiene and social distancing practices, combined with exclusion of those who may be infected from workplace, and the care and isolation of those who may become ill





# Labour interventions



# Labour interventions

The Minerals Council has been part of broader business engagements on labour issues pertaining to Covid-19 and the lock-down (B4SA)

Part of Nedlac engagements on labour market aspects

Provision of information and guidance to members on various labour issues



BUSINESS FOR SA | COVID-19

[WWW.BUSINESSFORSA.ORG](http://WWW.BUSINESSFORSA.ORG)



# Labour issues

## Issues at roadblocks

- With our partner TEBA managed to facilitate passage of employees from the Labour Sending Areas
- Created a standard format for the essential services permit for members

## Issues affecting transport

- Through TEBA and engagement with the relevant government departments – resolved transportation issues with the Taxi Associations
- Health and safety issues such as sanitisation, social distancing, de-densification etc

## Progress with return to work

- Around 60% of recalled employees have return to mines to date. Constraints at Teba offices (screening and fitness tests) a reason for delays

## Payment of salaries

- Employees who have been at work during the lock-down have been paid their normal salaries by companies
- Most members decided to pay employees who were not working for the first 21 days of lock-down
- Some of the companies could not afford to pay salaries for the first 21 days and for extended lock-down and claimed from UIF TERS benefit on behalf of employees
- Initial issues experienced with the UIF application portal resulted in delays in the payment for April. Some of the issues sorted out but foreign nationals remained a major challenge until mid-May
- Delays in the processing and payment of May applications.

# Return of mineworkers

Foreign national mineworkers have played important role in mining industry for decades, and employment in SA is critical component of GDPs of these countries - number of foreign national employees estimated around 10% of national mining workforce.

Some employees remained in South Africa during lockdown period

- Out of more than 20, 000 employees located outside of country around 9,500 are currently scheduled for return to work
  - Return of foreign employees will take place under strict agreed conditions
1. Minerals Council will have responsibility for facilitating coordination of screening, testing, border logistics, transportation, and quarantining of all returning foreign mine workers for 14 days
  2. Initial quarantine facilities will be located near mines. Employees will need to be kept isolated during the trip from border post to quarantine facilities
  3. Minerals Council commissioned TEBA to manage logistics of returning workers. TEBA will carry out screening of individuals in country of origin, transport and, where necessary, overnight accommodation
  4. Screening and testing of employees in quarantine carried out according to NICD guidelines
  5. Returning foreign employees will be advised that they will not be able to return to their home countries for duration of pandemic to avoid dangers presented by continual cross-border travel
  6. Those who fail testing will be diverted to local district health system. Mining companies will have duty of care, including through facilitating testing and providing medication and car



# Mining Industry Support of Communities

In addition to fulfilling Social and Labour Plan commitments, mining have committed to supporting communities in the fight against COVID-19

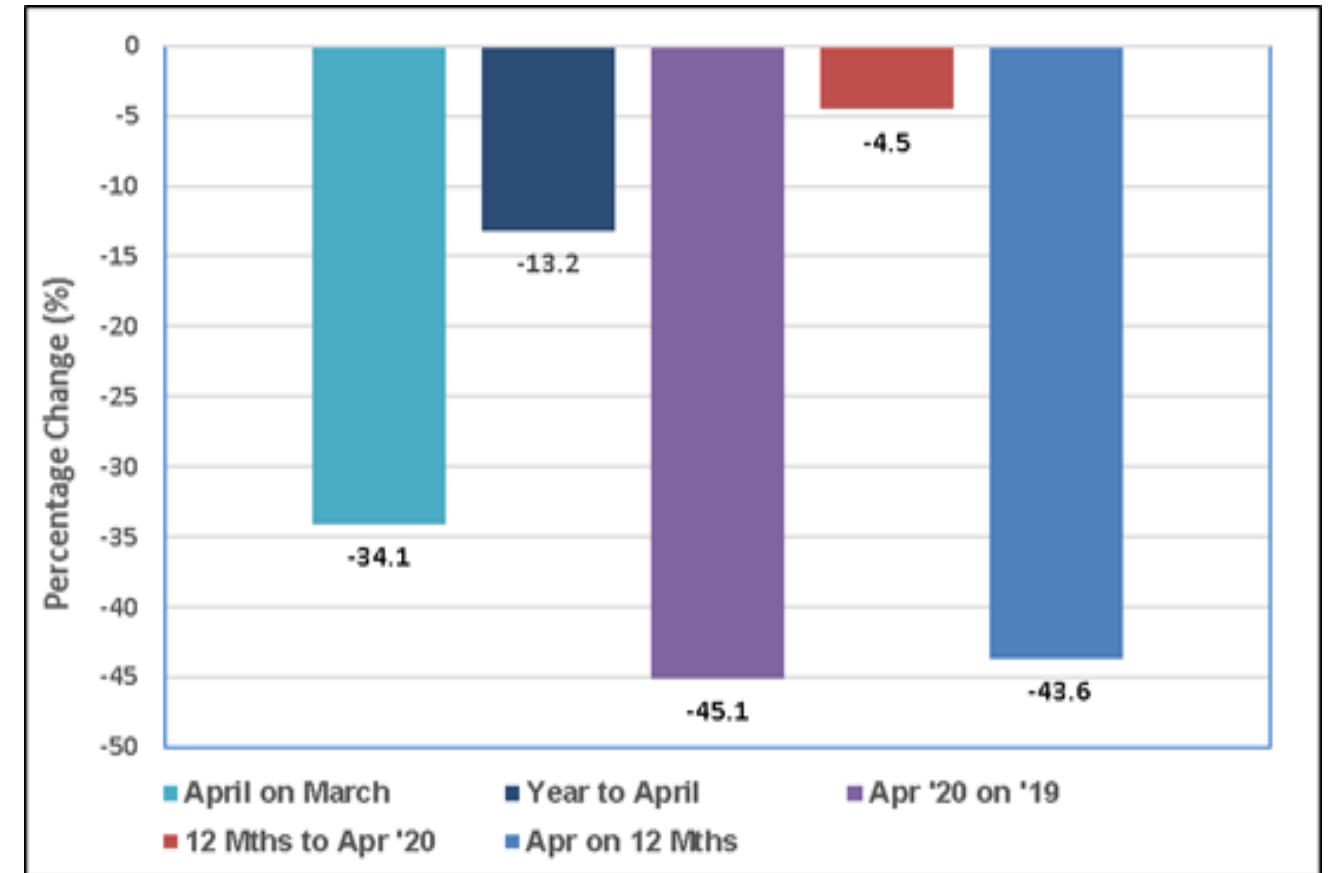
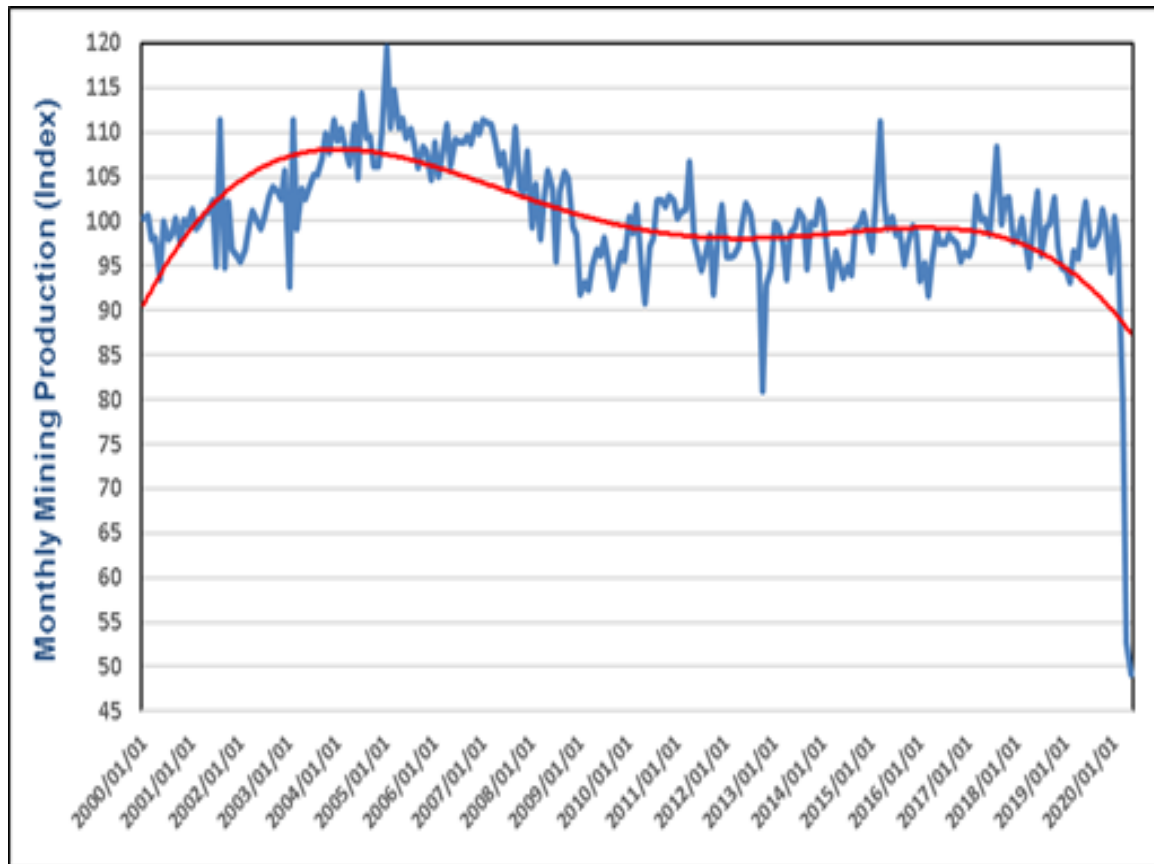
Financial assistance that has thus far been provided or pledged includes the following:

- Provision of equipment and consumables for testing facilities
- Provision and/or purchasing of PPE and critical medical equipment for health and social development personnel in the field and in hospitals and clinics
- Purchase of water tanks to public facilities and communities
- Provision of food parcels to vulnerable families in host of communities
- Contribution to Solidarity Fund and other non-governmental organisations (NGOs); and
- Increase awareness through radio and print and social media

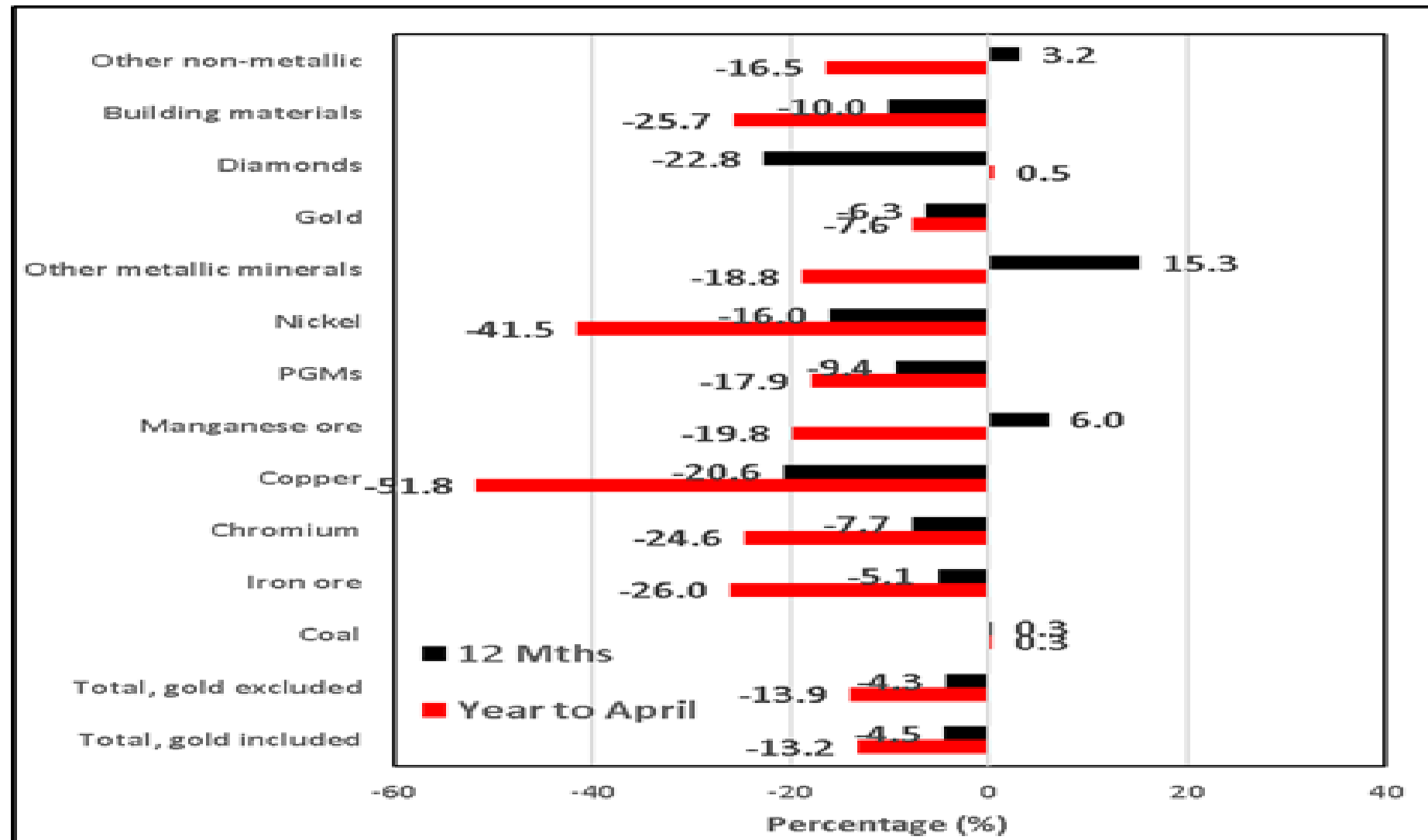
## Non Financial Support

- Provision of tracers in priority municipalities
- Access to mine ambulances and paramedics
- Provision of access to tap stations, underutilised water tanks, mine water and tankers to refill water at various locations; and
- Provision of facilities that could be used for self-isolation by mine workers and other community members who test positive
- Currently engaging with schools to explore different ways of providing support

# Production and trend, and Changes/declines over different time periods

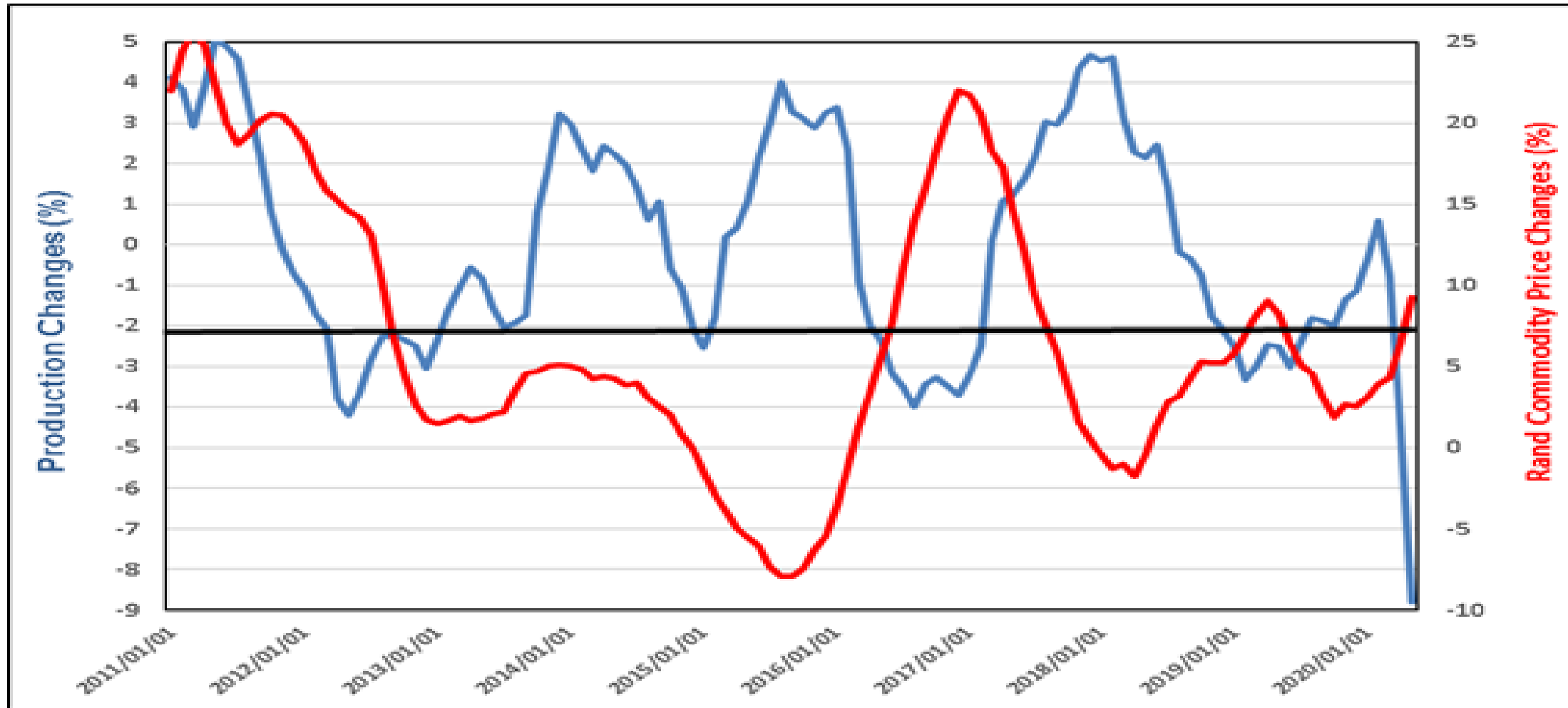


# Production performance by Commodity



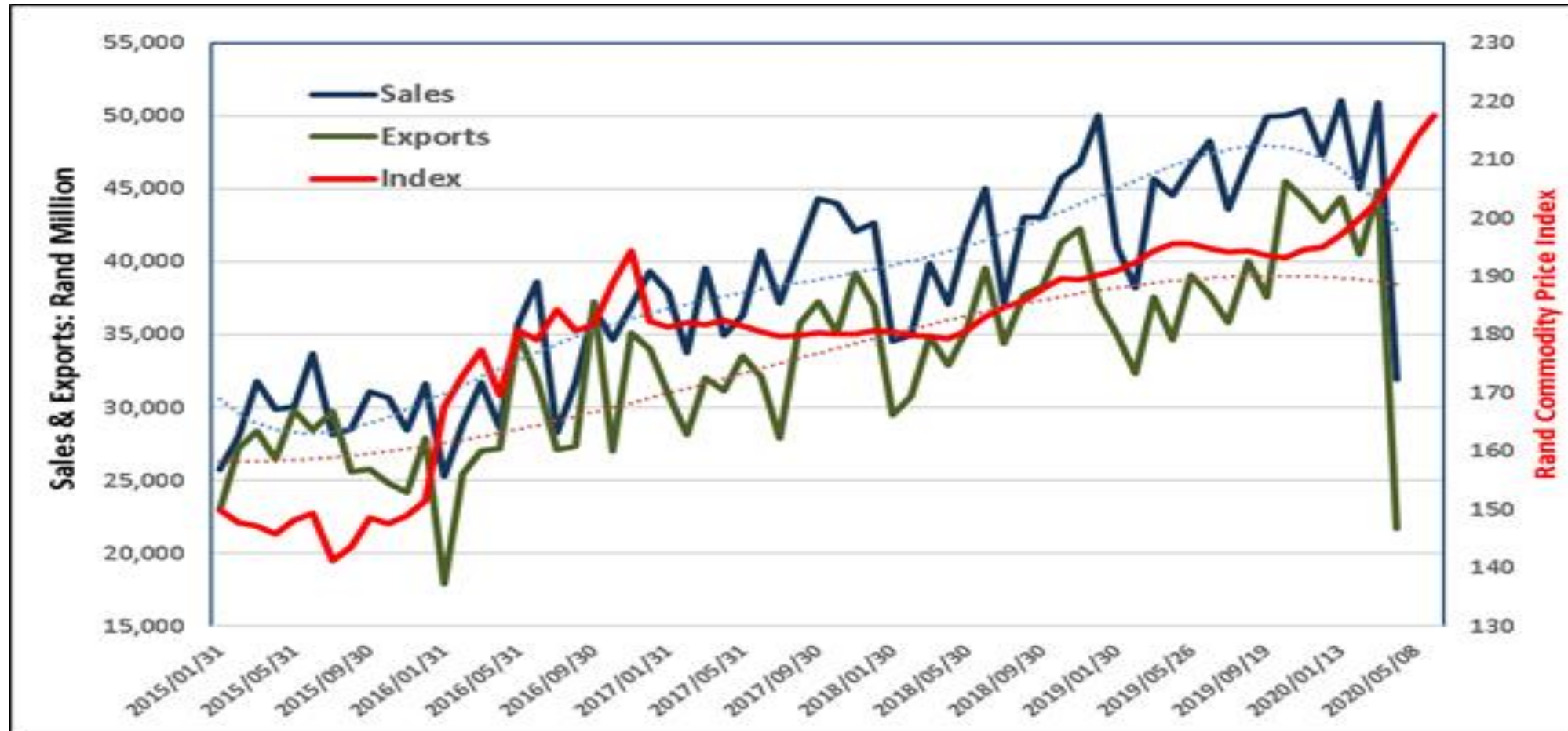


# Decline in Production versus Commodity prices holding up (mainly due to gold and PGM's)



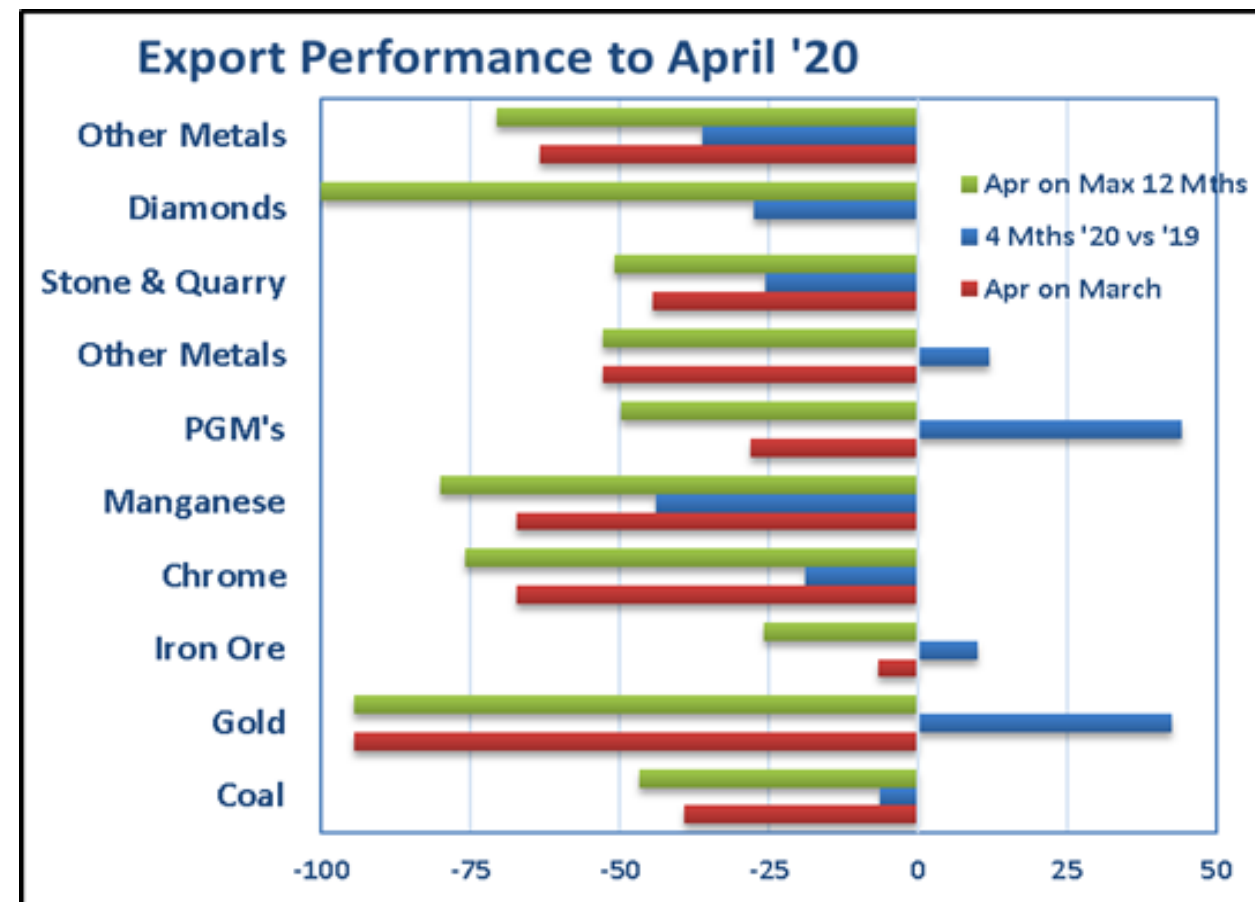
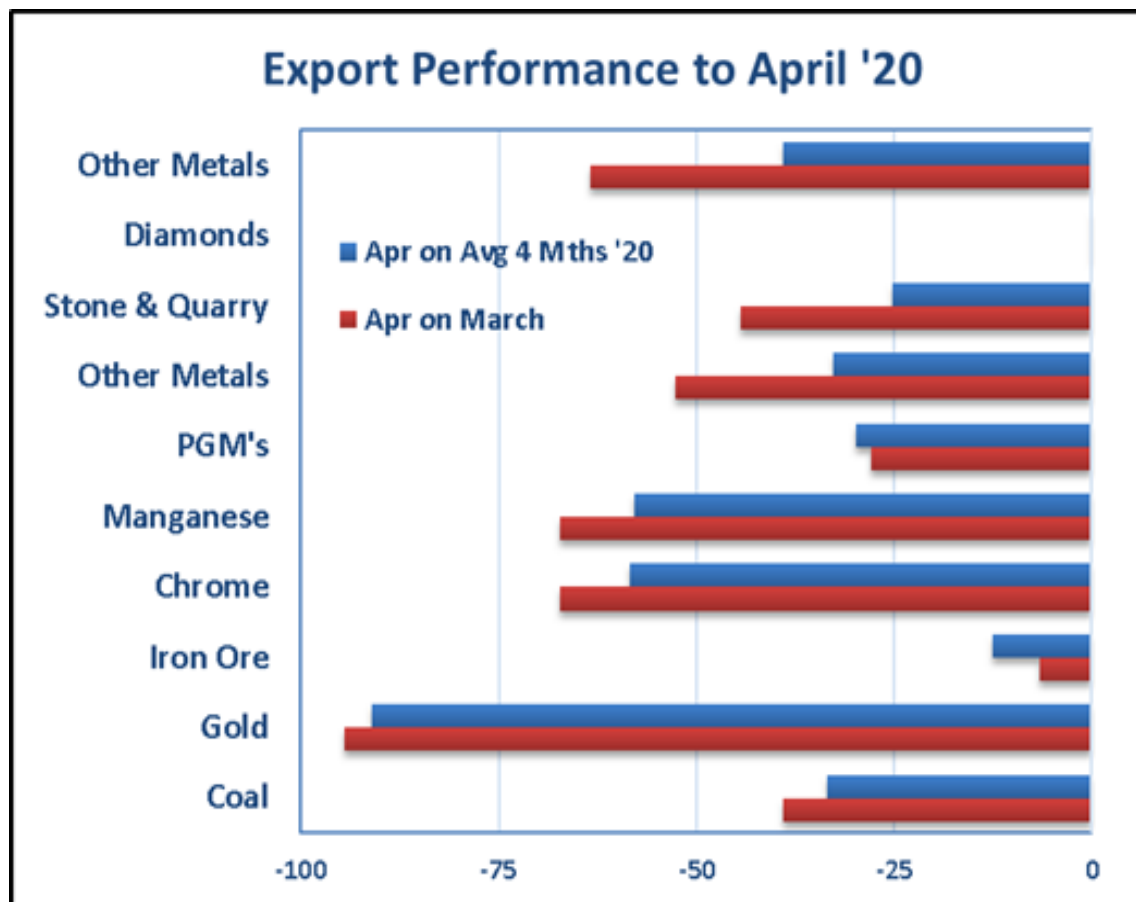
# Sales Performance

Sales performance has been as dismal; if you take into account that this is the effect of March and April production, a similar performance could be expected in May and even June, due to weaker commodity demand



# Export Data

We have export data for April (from SARS) which shows the combined impact of lower sales and lower demand for commodities





# Documents attached to provide detailed information

**The following documents have been provided to the Committee to give more information on some of the issues being discussed**

- Minerals Council FAQ host communities
- Minerals Council FAQ foreign nationals
- Minerals Council getting back to work under COVID-19
- Economic Impact of COVID-19