

STAY WELL, STAY SAFE AND STAY OUT OF TROUBLE WITH THE LABOUR INSPECTORS

We are now well into Phase 4 of the lockdown and it looks unlikely that Cape Town will be relaxed into phase 3 for some time yet given the epicentre of the pandemic is right here amongst us.

With this in mind, I want to ALERT YOU all of some of the multiple requirements for your surgery to be open in phase 4. Be warned that Labour Inspectors are doing rounds of the practices to check compliance with the Occupational Health and Safety Act and to ensure that both staff and patients who enter your premises are assured of a safe and healthy working environment.

I shall only deal with practices with up to 10 persons maximum in the business and requirements for more than 10 employees are far more onerous and few of our practitioners have a staff large enough to warrant the extra recommendations. Should your practice however need this information, please do not hesitate to contact our office line which is manned during office hours.

Regarding Employees:

- 1) The owner of the practice must conduct a risk assessment of the premises and set out to mitigate those risks.
- 2) Employees MUST be placed with a minimum distance of 1.5 metres between work- stations, unless there is a full partition or dry wall between individual employees. The work areas should be marked out on the floor with masking tape.
- 3) Employers must provide all workers with at masks, either cloth or preferably 3 ply polypropylene masks. Other relevant PPE (Aprons, gloves, Face Shields etc) must be supplied to workers in the practice undertaking more risky tasks like taking of swabs, being exposed to coughing patients, front line staff facing a new incoming patient etc.
- 4) Employees and patients must have soap and water washing stations readily available with running water or stored water. Throw away towels and not cloth re-useable towel should be provided at washing stations
- 5) 70% alcohol sanitiser sprays must be available, and the work surfaces, equipment and workstations must be sanitised regularly.
- 6) Employees with C19 symptoms should not be permitted access to the premises and must be sent home. If they contracted the virus at work, the employer must open a COIDA case. It is up to the Commissioner to decide where the virus was contracted and not up to the employer. Strict Time and attendance records must be kept to validate a worker's presence or absence from work in case of a claim which may need to be substantiated and in case contacts need to be traced.
- 7) Special attention must be paid to the ability to provide cross ventilation either via air-conditioning with HEPA filters, or open windows which will allow fresh air to circulate readily.

Regarding patients:

- 8) Telemedicine should ideally be utilised wherever possible and practical as first choice to screen patients for C19 symptoms, and patients should NOT enter the premises if they display any of the classic symptoms or are suspected of having been in contact with a C 19 case. If C 19 is suspected on symptomatology on Telecon, the patient should rather be directed to a C19 reception centre and told not to enter you practice.

- 9) Patients should be instructed to wait in their cars if possible and only enter the premises when called in. Clearly this is not always practical in densely populated areas
- 10) If cars are not available, then the waiting rooms should be demarked with spaces 1.5 meter apart. Wherever possible patients should stand and not sit. Chairs should only be used for the elderly and others who are too weak to stand. Chairs must be wiped down with sanitiser between every patient. The number of patients in a waiting room must be curtailed to the absolute minimum and must be 1.5 meters apart.
- 11) All surfaces must be sanitised regularly at least twice daily as well as in between each patient.
- 12) Special attention must be paid to the ability to provide cross ventilation either via air-conditioning with HEPA filters, or open windows which will allow fresh air to circulate readily.
- 13) This should be a living document and be readily accessible to Labour Inspectors who are doing rounds of the practices at present to check compliance with the Occupational Health and Safety Act.

The above is not an exhaustive list, but we have compiled it from numerous advisories. It should stand you in good stead if you observe these points.

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Tony Behrman and the Qualicare Team