

National Safety



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- The Institute of Safety Management (IOSM)
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- Association of Construction Health and Safety Management (ACHASM)
- Southern African Institute for Occupational Hygiene (SAIOH)
- South African Qualification and Certification Committee (SAQCC Gas)

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National Safety



March/April 2018 - Volume 78 Number 2

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NOSHEBO



Liquefied Petroleum Gas
Safety Association of
Southern Africa





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Editor's Comment

In this issue we introduce OSHAfrica - the newly launched occupational safety and health organisation founded to promote OSH across Africa.

We invited Ehi Iden, one of the driving forces behind this initiative to provide some highlights on this organisation.

We send our congratulations, and wish them all the best of luck. We have no doubt that all of Africa will benefit.

Debbie

THE BIRTH OF OSHAFRICA

by Ehi Iden

We are excited to announce to the world that Africa has come of age in Occupational Safety and Health!

This new achievement in African Occupational Safety and Health is proof that we can achieve anything we put our minds towards.

The reoccurring global statement in international conferences was that "Africa has no data". This was evident at the World Congress in Frankfurt 2014, ICOH conference in Seoul 2015, TIOSH Conference in Istanbul 2016 and again the World Congress in Singapore 2017.

We knew we had to do something. At the ICOH 2015 conference in Seoul we called all African delegates to a side meeting and agreed that we needed to start working together, sharing information and publishing our work in peer review journals.

We all returned to our different countries after the conference and started mobilising other safety officers in our respective countries to follow up on what we discussed in Seoul. This was another herculean task as everyone was busy and had little or no time for this pursuit. We started reaching out. We requested their mobile phone numbers so that we could create a WhatsApp group named OSHAfrica. We started with only 16 members. Today the WhatsApp group has grown to almost 200 members from over 28 African countries. What started as a WhatsApp group, has now given birth to a Pan-African Occupational Safety and Health body known as "OSHAfrica".

OSHAfrica has been registered as a legal entity with a highly experienced Board of Trustees that is gender balanced with equal sub regional representation. This Board provides inspiring leadership while ensuring that our policies and decisions are kept in line with the true realities of OSH and, are capable of improving workplace safety and health across Africa.

We have an eight-member Board of Trustees made up of 4 Occupational Health Physicians, 4 Occupational Safety and Health Professionals with experiences spanning diverse sectors across the global economy.

The vision of OSHAfrica is to create an enabling collaborative environment for OSH professionals to work together, and encourage information sharing. We are also

encouraging research outcomes to be put into practice by using the information to support African regional OSH policies and legislations.

One of the key areas of our vision is to develop OSH competencies within Africa by scaling up existing knowledge and developing new ones. This will be made possible through OSHAfrica's international professional collaborations with other OSH Groups across the world, as well as by working with existing institutions across Africa, by developing and improving OSH departments and training curricula to ensure members have access to affordable quality training and certifications.

Our website came online in January 2018 - www.oshafrica.africa. We encourage every OSH professional to register and become a member of OSHAfrica at no cost. This plan will help us bring together and integrate professionals across all regions in Africa. We will also be able to profile everyone knowing their core areas of expertise.

We have received very positive commitments and interest from African and international occupational safety and health communities.

We received congratulatory messages from ENETOSH, DGUV Germany, PEROSH and many other individual OSH members across different regions of the world.

We are now planning an African Occupational Safety and Health conference for 2019 which will be called OSHAfrica International Conference. We will soon announce which member country will host this inaugural conference. Our conferences will be held every 3 years and will be rotated amongst member countries.

We are extremely excited with all these developments and by the positive responses that we have received. It has not been an easy path - it has taken a lot of hard work, patience and commitment, and we love the outcome.

Africa now has a voice in Occupational Safety and Health globally. This is not about a country, it is about Africa and the World at large.

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2019 Conference and Exhibition



OSHAfrica will be holding their maiden Conference and Exhibition in Johannesburg during 2019.

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VANGUARD
FIRE & SAFETY

How Paul O'Neill and Alcoa proved Wall Street wrong and changed the company's safety culture

In this article, Dr Bill Pomfret looks at one CEO who changed the company's safety culture through demonstrating good communication with his workforce. A great example of a proactive CEO.

When CEOs address investors, stock analysts, board members, and even their own executives and employees, they tend to talk about profit margins or other buzzwords relevant to the company's bottom line.

PUTTING SAFETY ABOVE PROFITS

In 1987 however, the newly appointed CEO of Aluminum of America (Alcoa), Paul O'Neill, took an unconventional stance and used his introductory address to Wall Street to discuss what mattered to him most: safety.

Paul O'Neill certainly discussed his strategy to increase profits but he did so by discussing employee safety.

When questions were asked regarding productivity or earnings per share, he redirected the conversation back to safety.

For Mr O'Neill, his first and foremost priority was to make Alcoa the safest company to work for and reduce workplace incidents to zero.

Investors thought he was crazy because they didn't understand how a CEO



could maintain a profitable business by valuing safety above all else.

THE INCIDENT THAT CEMENTED HIS PHILOSOPHY

Six months into his tenure as CEO, an Alcoa worker was killed in Arizona while performing maintenance work on a piece of equipment. Within 14 hours of the incident, Mr O'Neill ordered all of the plant's executives into an emergency meeting where they watched and analysed a video of the incident to learn how it occurred and more importantly, to figure out how it could be avoided in the future.

O'Neill recognised that he and all of the other executives of Alcoa were responsible for this man's death since it was a failure of leadership that lead to this tragic incident

Instead of blaming the plant supervisor, O'Neill recognised that he and all of the other executives of Alcoa were responsible for this man's death since it was a failure of leadership that lead to this tragic incident.

SAFETY CHANGES IMPLEMENTED

A week later, Mr O'Neill introduced some drastic changes at Alcoa.

- All of the safety railings were repainted bright yellow and new safety policies were written, shared and discussed with all employees.
- O'Neill addressed all of the onsite workers and encouraged them to make suggestions for proactive safety maintenance.
- He engaged every ground worker, gave them all his home phone

number and told them to call him directly if their managers failed to follow up with their safety suggestions.

- Not only did Mr. O'Neill encourage his upper management to think more broadly about safety, he encouraged those onsite workers who were most exposed to risks to participate in workplace safety and in doing so, created an open dialogue between upper management and onsite workers.
- He established accountability within upper management and produced a best-in-class safety culture at Alcoa.

WORKER PARTICIPATION INCREASED PRODUCTIVITY AND PROFIT

The openness Paul O'Neill created between management and workers went far beyond safety.

Since workers were encouraged to make safety improvement suggestions to upper management, they began to feel comfortable making suggestions for how production could be improved as well.

For instance, in an Alcoa plant that manufactured aluminum siding for houses, one ground employee made a suggestion that ended up doubling the plant's profits.

The employee realised that if all of the painting machines were grouped closer together, workers could switch out pigments faster making it easier to switch pigment colours in response to changes that customers were requesting.

The employee had this idea for years but didn't feel comfortable coming forward until his CEO created open communication between workers and upper management.

By creating a safe and open work environment where workers felt valued, employees began to come forward with revolutionary ideas that not only made Alcoa a safer place to work, but also improved the company's productivity.



by Dr Bill Pomfret

Managing Consultant, Safety Projects International, Canada specialises in auditing and evaluating both client and contractor Safety Programmes and in developing with them pro-active preventative systems procedures and programmes to control all incidents.

SAFETY CULTURE ASSISTS LOST WORKDAYS

By demonstrating relentless safety leadership and forcing his executives to not only care about the safety of their employees but about the value of their opinions, Mr O'Neill managed to build a world class safety culture at Alcoa and improve the company's bottom line.

During his 13 years at Alcoa, lost workdays dropped from 1.86 to 0.23 and the company's market value grew 816% from \$3 billion in 1986 to \$27 billion in 2000.

By creating a safe and open work environment workers felt valued, employees came forward with revolutionary ideas that made Alcoa a safer place to work, and improved the company's productivity

His first and foremost priority was to make Alcoa the safest company to work for and reduce workplace incidents to zero

INITIAL INVESTOR RESPONSE

In response to O'Neill's 1987 introductory address, some investors immediately got on their phones and advised their clients to stop investing in Alcoa.

One investor even discussed how he thought the Alcoa board had hired some 'crazy hippy' and that Mr O'Neill was going to 'kill the company'. He said "I ordered my clients to sell their stock immediately, before everyone else in the room started calling their clients and telling them the same thing.

Many others had the same shortsighted view that safety is an aspect of business which takes away from company

profits, not something that is typically value added.

INVESTORS WERE PROVED WRONG

However, Mr O'Neill proved Wall Street wrong and demonstrated that by choosing to invest in a culture of safe operations and continuous improvement while encouraging an open environment between upper management and ground workers, a company will reduce their incident rate, and can drastically increase profits.

Don't be like the narrow sighted, profit focused investors who were unable to see the business value of safety and missed out on a major opportunity.

Take the time to invest in a good safety culture and encourage openness between workers and upper management, and see what creative ideas your employees have to protect and improve your business!

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Finding a career in occupational health and safety

When I was a young man, there was a popular night spot where everybody went to on Friday and Saturday nights.

On these nights, a queue quickly developed outside the place and you had to wait for hours to enter. There was no strategy for entry because whether or not you arrived early or late, entry was never guaranteed. At times, lady luck smiled at you. In most instances however, by the time you eventually got in, you were sweaty, tired and paid 3 times the fee having endured the pushing, shoving and abuse from bouncers. As with most places, there would always be those people who jumped the queue.

Once inside, the place was always crammed with little space to maneuver. It was addictive and guaranteed a great night of fun. When you eventually made the tough decision to leave and go home, you would still find a queue with people desperately waiting to get inside. In all honesty, there were equally great places to have a good night which were less costly and less stressful yet folks thronged to this specific night spot like moths to a light.

FINDING WORK IN OHS

I am reminded of these experiences when I look at recruitment in the OHS sector in South Africa.



Wellington Mudenha is an experienced and qualified professional in the field of Safety, Health, Environmental and Quality Management. He has a wealth of experience in SHEQ legal compliance as well as SHEQ ISO management systems development, implementation, maintenance and audit. Wellington is also a SHEQ trainer / facilitator and SETA registered assessor.

Like many people, after graduating from University, I desperately wanted to be a health and safety officer. It is by far the most popular job title sought after in an industry inundated with so many qualified and experienced people. There are no hard and fast rules for landing a job. I was a graduate with a bachelors degree competing on an equal footing with people who had completed a 3 day OHS course - many of whom would get shortlisted ahead of me.

It took many years to land a job in occupational health and safety (OHS). It required countless job applications, networking, failed interviews, rewritten CVs and gaining lots of short course qualifications. I spent an insurmountable amount of money and time to get a CV comparable with other job seekers.

Today I am saddened whenever I receive messages from young OHS professionals reaching out for assistance to land the elusive health and safety officer job. The messages I receive are very similar to the ones I sent to industry movers and shakers a few years ago.

Many unemployed OHS professionals are willing to work as volunteers and earn nothing after having spent lots of money to gain qualifications, certifications and memberships in the field.

Their airtime, money and time is spent responding to job ads and trying to get a foot into the OHS sector. Hardly a return on investment.

... I receive messages from young OHS professionals reaching out for assistance to land the elusive health and safety officer job.

OHS RELATED CAREER OPPORTUNITIES

It all makes me cringe when I think about my own time out in the cold yet I still encourage all of those who reach out to me to never ever give up. I implore them to be open to enter the profession from multiple angles;

Training

OHS related training courses like first aid, fire fighting and SHE Reps is a big industry in South Africa.

Various SETA registered training providers have job openings for qualified OHS training facilitators, assessors and moderators.

Audit

Many companies undergo annual surveillance and recertification audits on their OHS management systems from certification bodies. Get trained and apply to be an OHS systems auditor

Inspector

The department of labour employs OHS inspectors who ensure that organisations comply with the OHS Act, COIDA and other legislation. Getting employed in this inspectorate division can be a fulfilling and rewarding career

Consulting

Many organisations require consulting services to implement OHS management systems. Consulting in your individual capacity or joining a consultancy firm can be an alternative career

OHS supplies and servicing

Organisations across various sectors require OHS equipment, PPE and other items. Starting up your own company that supplies and or services such materials or equipment may be a gateway into the world of entrepreneurship.

OHS software

Developing OHS IT solutions which simplify hazard identification, risk assessments, internal audits etc. can be another rewarding entrepreneurial journey in the field of OHS.

Occupational health nursing

Many occupational health nursing practitioners conduct audio and visual tests, medicals etc for employees before they are employed or during their term of employment in industries such as construction and mining. With formal training, nursing can be a great career.

OHS journalism

There are many OHS related publications that employ full-time personnel. Journalism in the field gives you access to people, information and provides you with an opportunity to establish contacts in the sector.

It is enjoyable being a health and safety officer only if you are able to land the job

In hindsight, I realised that the OHS profession is much bigger than being a health and safety officer. If I had known this earlier in my career, I would not have spent many years in the OHS wilderness.

This title of health and safety officer seems to draw most job seekers into the field yet fewer and fewer people are getting employed as such.

It is enjoyable being a health and safety officer only if you are able to land the job. Rather than having to put up with the stress and frustrations of failing to land this elusive job, there are so many OHS related career opportunities for young professionals to pursue.

The list above is by no means exhaustive. It may not contain what you want but it provides an insight into alternative career prospects within the OHS field.

Some people will have it easy and others will not, but no one should give up on their OHS dream because they are not a health and safety officer!

Best wishes to all job seekers in 2018!

Asbestos awareness

Although the health implications of asbestos are well-documented, the problems associated with it continue, including asbestosis and mesothelioma.

iMig is an independent international group of scientists and clinicians working to understand, cure and prevent mesothelioma.

Membership is invited to this group to improve the international scientific exchange and knowledge about this malignancy.

Email: imig2018@icsevents.com

Web: www.ICSevents.com

Obituary Barbara Campbell



I was saddened to hear that Barbara Campbell passed away on 17 March, just 25 days short of her 93rd birthday.

Barbara ran the Safety First Association from 1966 until she retired in 2001. She was appointed as administrator of the association in 1966, shortly after moving from Port Elizabeth to Johannesburg where she had worked as a bookkeeper. Barbara couldn't tolerate inefficiency, and what she found on her first day at the association shocked her. The office was in state of chaos - piles of dusty documents and papers lying all around; staff members standing around doing nothing, financial records in disarray, and a badly published, roneoed magazine.

The first thing she did was grab a broom and start cleaning up. Within a few months, she had turned the place into a professionally run organisation.

Next, she set about transforming National Safety into a world-class magazine. Barbara enjoyed writing, and with National Safety put her literary skills into practice.

Barbara ran the office single-handedly. Not only did she keep all accounting records up-to-date, she also edited National Safety magazine, grew the subscription base and encouraged several professional associations to appoint National Safety as their mouthpiece.

Although Barbara had been a polio victim as a teenager, she had a tremendous fighting spirit which lived with her until her final days. Her

disability never stopped her, nor slowed her down, if she wanted to see a client, it was no problem to hop onto a bus to go there.

She put the Safety First Association on the map by participating in and organising several exhibitions as well as submitting regular articles to the daily newspapers - several of her articles were published in the James Clarke column of the Star.

However, for Barbara all this was not enough - she had developed a passion for safety, and the Association became a major focus of her life. She launched the popular cartoon booklets, the safety posters and the annual safety calendar.

Barbara had an excellent memory, she remembered the names of every person she had met as well as when and where. She virtually remembered every article which had been published in National Safety and in which issue it appeared.

To keep healthy, she swam every day - even during the winter when she went to the indoor pools. In her spare time, Barbara enjoyed reading, painting and playing with her dogs.

After Barbara had retired, she continued to be my unofficial sub-editor of National Safety. She anxiously waited for her copies to arrive, read the magazine from cover to cover and would then phone me and give her comments. She was fascinated with modern printing techniques, always comparing the quality to her earlier days.

Barbara has left behind an enormous legacy for the Safety First Association.

"Barbara was a remarkable, highly intelligent woman and she will be missed by us all", said George Browse, Chairman of the Safety First Association.

Barbara is survived by her sons David and John and her daughter-in-law Erica.

Safety First -

Easier said than done

How many times you have heard "Safety First" or "Everything Starts with Safety"? I'm pretty sure that we have all heard some variation of these phrases. As a safety professional myself, it does become challenging at times to know which approach is the best for motivating employees and staff to be more safety conscious in the workplace and at home. You may ask, why at home as well? This is because 70% of all injuries occur at home.

We all need to embrace a culture of safety - whether on the job or at home.

EMBRACE AN CULTURE OF SAFETY

What is it a safety culture? The common definition is a set of common beliefs that are acceptable to a group. I believe this goes to a deeper level.

I decided recently at my workplace to try and increase the safety consciousness of the employees and staff by involving them on a personal basis in our monthly safety meetings.

I started by asking 2 questions: What does safety mean to them and what do they understand safety culture to mean?

I asked each question individually to each employee and staff at the safety meetings.

For the first question, the answers I



Christian Fournier, CHSC has been working in the safety profession for over 10 years. He is a Training Co-ordinator for Fornebu Lumber as well as a First Responder Instructor Trainer for Saint John Ambulance. Christian is a member of CSSE (Canadian Society of Safety Engineering) and a director on the board of the NB chapter.

received were varied and based on their personal beliefs, like not getting hurt.

One of the answers I received really impressed me. The employee said that safety is "a lifestyle". This made me think about the "core values of a person".

As to the second question, I was surprised that most of the employees didn't know what a safety culture was.

After the session, I received a lot of positive feedback. But I also received backlash from some employees who they didn't like to be singled out in front of the group.

I do understand that not everyone is comfortable to speak in front of groups, but I also believe that in order to improve as a person, you must be placed outside of your comfort zone.

So, I have come up my own definition of a safety culture which is "A set of shared core values of a group of individuals who believe that safety is more than work, home or lifestyle: it's part of who we are."

The following month, I decided to pursue the same format in our safety meetings.

The 2 questions I asked this time were: "What are you doing now to contribute to safety" and "what are you willing to do for the next month to improve safety on site?"

Obviously, these questions were more challenging for the employees because they now had to dig deeper within themselves.

For the first question, just like in the

previous month, I received a wide range of answers from picking up objects off the ground, to ensuring that their fellow co-worker locks out properly during cleaning and maintenance.

Safety is a set of shared core values of a group of individuals who believe that safety is more than work, home or lifestyle: it's part of who we are

When it came to the second question, the employees found it difficult to give an answer.

In order to help them, I gave them my 2 personal commitments that I had challenged myself to for the next 2 months. These were to only look for the positive actions around me; to observe one employee per day, and to thank them for working safely and of course to tell them the reason why I was thanking them.

Once I mentioned my own commitments, some of the employee and staff were encouraged to provide their own personal commitments in order to improve safety at our workplace.

As you can see, safety isn't as easy as replacing a bolt or putting on a guard. It is dealing with people.

I wish I could say that all employees / staff were on board with my approach but I at least I did make some headway where some of the employee's eyes were opened to this new approach, that safety comes from within each and every one of us.

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HOWARD LEIGHT
by Howard Leight

Battery of hearing tests, minimises referrals

Hearing is one of our most precious senses and when damaged can affect job performance, health, as well as personal and occupational productivity.

Hearing damage from noise is fully preventable when the right precautions are taken.

Despite all that is known about noise and its effects on health, NIHL remains one of the most commonly reported occupational diseases.

Our hearing should be evaluated holistically to ensure optimal total hearing care. Workers working in high noise areas or who are exposed to noise at or above 85dB(A) must be submitted to medical surveillance for hearing screening.

Effective case history taking has long been identified as a core discipline in treating people that seek health care.

Collecting an inaccurate or incomplete history can affect initial treatment and subsequent decisions for intervention. Prior to audiometric testing, the

worker must undergo an otoscopic examination to ascertain the presence of any abnormalities which could adversely influence the accuracy of the test results.

A screening hearing test should then be performed if the outer ear does not present with abnormalities e.g. impacted wax, foreign bodies, or infections.

To ensure reliable and accurate test results any "abnormal" condition should be referred and/or treated before testing commences.

When abnormal hearing thresholds are identified after the screening test, the client is referred for further diagnostic tests to determine the actual cause of the hearing loss.

A full diagnostic hearing evaluation is performed for the specific purpose of a specialist evaluation of an individual's hearing status, employing immittance measurements, otoacoustic emissions, pure tone audiometry (air conduction,



Figure 1. Otosopic examination



Figure 2. Tympanometry testing

bone conduction, masking), as well as speech audiometry. However, complimentary tests that could be included within the screening test battery are immittance measurements and otoacoustic measurements.

Immittance measurements are conducted to evaluate the middle ear system objectively. It consists of tympanometry and acoustic reflex testing.

With tympanometry, a tone is delivered to the ear while pressure is changed within a sealed ear canal. This test measures the volume, pressure and compliance (motility) of the middle ear system to determine if there are any abnormalities.

Tympanometry has numerous advantages which include:

- it is fast and easy to perform,
- requires no response from the patient,
- is an objective measurement and is portable.

This test is not a stand-alone test but is used as a cross-check against the

audiogram to develop a more complete picture of an individual's hearing.

It also has an important role in differentiating a sensorineural hearing loss from a conductive hearing loss.

Otoacoustic emission (OAE) testing should also be performed as part of the test battery. This test examines the outer hair cell functioning of the inner ear. With this test a stimulus is presented into the ear canal and the response of the outer hair cells to the stimulus are recorded via a probe.

When recording otoacoustic emissions the patient's middle ear functioning should be normal, therefore immittance measurement should be conducted before OAE testing. Performing OAE testing has several advantages:

- it can be incorporated as a screening and diagnostic application,
- does not require behavioural cooperation,
- is ear and frequency specific,
- is portable and is highly sensitive to outer hair cell damage.

OAEs are in addition to the diagnostic

process and not a replacement to previously trusted methods; this is because OAEs are susceptible to the effects of noise, affected by middle ear status, may be absent or abnormal with a normal audiogram, are not detectable with hearing loss $>40\text{dB}$ and, therefore, they are ultimately not a test of hearing.

It is evident that when hearing screening is performed a variety of tests are required.

These screening tests can be done cost effectively and reliably on site reducing the number of incorrect referrals and thereby saving considerable costs.

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Figure 3. Otoacoustic emission (OAE) testing

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Prolonged use of high heel shoes

can cause restless leg syndrome (RLS)

Recently, I have noticed an increased use of shoes with incredibly high heels amongst ladies of all ages - causing me to think about the possible health outcomes. Most alarming is the prolonged use of such high heels in work places ranging from 5 - 8 hours continuous use. This is where the troubles lies.

DEFINITION

According to a publication of the National Institute of Neurological Disorders and Strokes, "Restless legs syndrome (RLS) is a neurological disorder characterized by throbbing, pulling, creeping, or other unpleasant sensations in the legs and an uncontrollable, and sometimes overwhelming, urge to move them". It is classified as a movement disorder, because individuals move their legs in order to gain relief from symptoms.

Amongst the several factors indicative of causing this disorder, is the use of high heel shoes. Although it is predominantly amongst women, studies have shown that men are also in the habit of wearing shoes with heels such as Sanchos Boots.

I struggle to understand why people are happy to get their feet traumatised just to look fashionable, elegant and

perceived glamorous, in an extremely uncomfortable way. Every part of the body has a scientific process of use and management and you cannot afford to violate these processes without suffering the consequences.

Cumulative Trauma Disorder (CTD), this is another symptom applicable to high heel shoes habit.

You will either pay now, or pay later because you have continuously traumatised your feet with unfortunate consequences that await you in future.

You may not realise it immediately, but because this habit persists over a period of time, the possibility of suffering from RLS is high. But remember, this has everything to do with frequency and duration of exposure to such risk, such as how often you wear high heels shoes, when you use them and for how long at a time.

Five days in a week for 8 hour stretches is likely to cause harm in future years. RLS caused by high heels may be avoidable if shoes with low heels are worn more often.

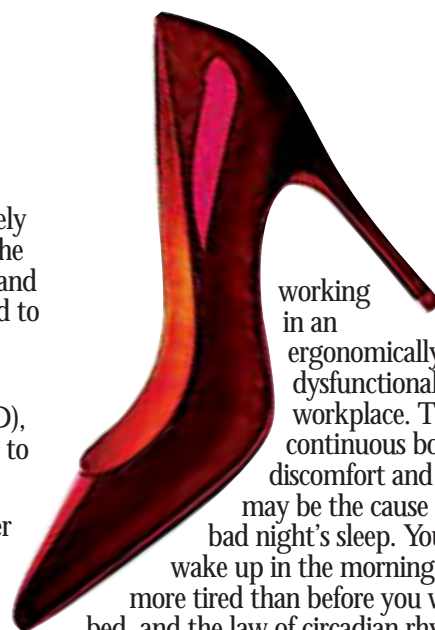
CONSEQUENCES AT THE WORKPLACE

Wearing high heels at work may have other consequences. Slips, trips and falls are more frequent, causing downtime through man-hour loss and RLS induced absenteeism, extra health costs and psychological tension amongst colleagues. And of course, there is the pain and cumulative long-term effects caused to the person who has the accident.

RLS MAY BE A CAUSE OF INSOMNIA

RLS can also be linked to insomnia. During my online course on Behavioural Medicine at Karolinska Institute Sweden, I learned that one of the most predominant causes of loss of sleep is pain. Often, we focus on how to deal with the lack of sleep instead of recognising the root cause.

If you walk on high shoes for longer periods of time, you are bound suffer from the consequences, just like the employee who has spent a full day



working in an ergonomically dysfunctional workplace. The continuous body discomfort and pain may be the cause of a bad night's sleep. You will wake up in the morning feeling more tired than before you went to bed, and the law of circadian rhythm sets in.

Through sleep disruption, you battle with heavy eyes and an urge to sleep. You will therefore not be optimally productive - also known as presenteeism (you are present at work just to be seen but are productively absent).

The negative consequences will be felt by both employee and employer alike. The employer does not get the expected production contribution out of the employee, and the employee's position in the organisation may be jeopardised.

THE NEGATIVE CONSEQUENCES ARE NOT WORTHWHILE

In as much as we love to be fashionable and elegant, we need to consider the consequences of wearing high heel shoes, including problems that may be experienced at the workplace, or what we may suffer in old-age.

The consequences may not be worth the effort, and of course the expense.

Your feet must be able to function well throughout the day without any unnecessary pressure.

I strongly urge those who put fashion before comfort to consider the consequences, and to remember that by discontinuing this habit, you will be able to reverse any problems you may have caused your feet.

In this brief space, I have only focused on RLS, there are other health problems associated with high heels, such as lower back pain that may also set in after prolonged use.



Ehi Iden is Chief Executive Officer at Occupational Health and Safety Managers, Lagos Nigeria. He has over 20 years in practice at hospitals, workplaces and occupational health centres. He holds an MBA and MSc in Workplace Health and Safety. He is currently a PhD by Research student. He holds a number of International Certificates from institutions and universities across the world. Ehi is a prolific Occupational Health and Safety blogger and has presented papers at many international conferences.

All companies should test for alcohol abuse

Alcohol and substance testing forms part of the health and safety policies and procedures in many industries.

Industries that have particularly rigorous and controlled safety standards - such as the petro-chemical, mining, construction and rail sectors - are especially strict when it comes to testing for alcohol. However, there are still a great number of organisations across a variety of verticals that do not employ the same cautionary practice, potentially resulting in significant loss to the business.

The Occupational Health and Safety (OHS) Act General Safety Regulation 2A states that every employer is obligated to stop persons from entering or remaining at work if they appear to be under the influence of intoxicating liquor or drugs.

In some industries, such as those mentioned above, organisations are subjected to annual and spot audits on their health and safety practices. Non-compliance can land these businesses in extremely hot water, so they generally adhere to regulation and ensure that regular, if not daily, testing is done. As a rule, this testing should form a regular part of every business's health and safety policy.

Why are businesses so afraid to test?

Many organisations are fearful of implementing alcohol and drug testing for a number of reasons, albeit many of them misplaced.

There is a general misconception that implementing an alcohol and drug policy in the workplace is difficult and costly. Some companies worry about the potential liability and legal

ramifications should there be any positive testing on site, and for this reason prefer to avoid the process altogether.

This avoidance can be detrimental to the organisation, and the benefits of testing far outweigh any assumed risks or costs.

Not having and enforcing an alcohol and drug policy exposes the business to serious risk. If a company is caught infringing the OHS Act they stand to face severe consequences and potentially even operational shut down.

Over and above this, the safety of an organisation's employees is at risk due to alcohol and drug related accidents.

Why is it so important for businesses to test?

Although a company is not necessarily held liable if an intoxicated person injures themselves while on duty, it could be held accountable should a co-worker be injured and the proper alcohol testing was not conducted.

Furthermore, if a company is aware of the presence of an intoxicated person on site and deliberately turns a blind eye, they could face debilitating legal action in the event of an accident or injury.

The Occupational Health and Safety (OHS) Act General Safety Regulation 2A states that every employer is obligated to stop persons from entering or remaining at work if they appear to be under the influence of intoxicating liquor or drugs

The impacts of allowing an intoxicated person on site, whether knowingly or not, are not only limited to injuries. People under the influence of drugs and alcohol are generally less productive than when sober.

Increased absenteeism is also a common issue linked to alcoholism, as alcohol not only impacts the immune system, but people also commonly take "sick days" to recover from hangovers. Repeatedly absent staff negatively impacts operational efficiency.

Lastly, intoxicated people are more prone to accidents, which could cause damage to company assets.

Unnecessary repairs and replacements of damaged equipment can be expensive, and avoided if the right procedures and protocols are in place to prevent alcohol related incidents from occurring.

How can businesses adopt an alcohol and drug testing policy?

Drafting a policy around substance abuse in the workplace, or adding one to an existing health and safety policy, is not a complex endeavour. In fact, reputable providers of drug and alcohol testing equipment usually offer services to assist organisations with this process, taking them through the regulations laid out in the OHS Act and working them into the company specific policy. Even without this assistance, the process is less complicated than many people think.

...if a company is aware of the presence of an intoxicated person on site and deliberately turns a blind eye, they could face debilitating legal action in the event of an accident or injury

A typical alcohol and drug policy should state the related clauses from the OHS Act around alcohol and drugs at the workplace. It should also list the company's specific stance towards it, whether that be a zero-tolerance policy or a slightly more lenient one which allows alcohol up to the legal limit.

Some companies may choose to allow alcohol under certain circumstances, such as at a work function, however should still ensure that the legal driving limit for alcohol is maintained should any staff be required to drive home afterwards.

The policy should also clearly state what testing measures will be put in place, and the frequency of testing - be it daily, at random or only under certain circumstances such as when an incident occurs.

Testing can be done based on suspicion



Rhys Evans,
Director ALCO-Safe

of alcohol consumption, on entry to the premises, following an incident or accident, or even only on entering high risk areas within the business.

The consequences of positive testing must also be included, outlining what is reasonably expected of both the employee and employer.

Disciplinary action need not be specifically stated, however the procedure for disciplinary action should be advised. For example, if an employee tests positive for alcohol in their system, they may be sent home indefinitely and notified of their disciplinary hearing date with the expectation that they

attend the hearing.

It is advised that businesses also include some educational information around the reason for their policy, and the potential risk of alcohol and substance abuse at the workplace.

Employees who are aware of the risks to themselves and others are less inclined to infringe on policy.

What is the cost and initial capital outlay of purchasing testing equipment?

Well, companies typically recover this within a few months of initiating testing.

The reduction in absenteeism and alcohol related incidents almost immediately brings about a return on investment.

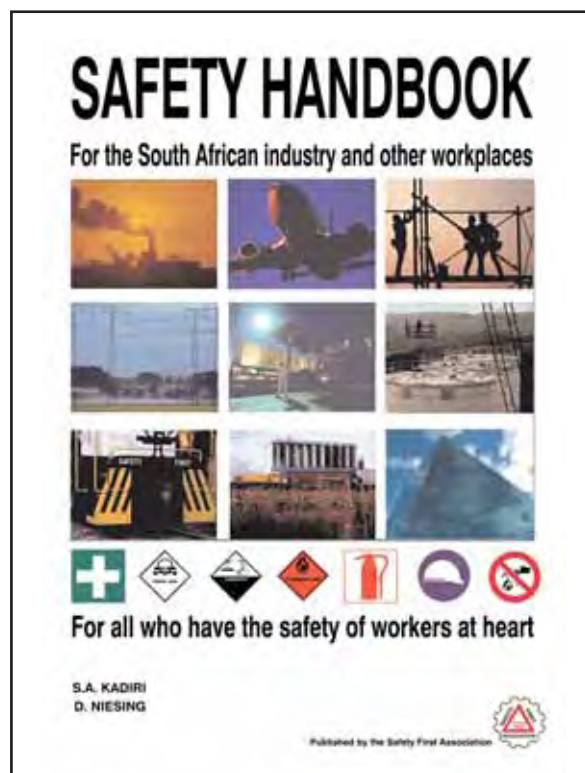
It is our experience that very few organisations, and certainly none with more than a handful of employees, don't have someone within their workforce who functions under the influence of alcohol.

Usually, these numbers reduce dramatically purely on implementation of a policy, and always on implementation of testing.

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Assessing the value of workplace occupational wellness

In big corporates, it is often the Board who is responsible for overseeing and monitoring the execution of the organisation's strategic plan by, inter alia, driving a culture of accountability through appropriate and transparent reporting and disclosure.

In today's increasingly competitive business environment, stakeholders are demanding more information on the social and ethics risks facing the organisation.

Integrated reporting requires greater emphasis being placed on providing feedback on the organisation's use and impact of its capitals, which include the financial, manufacturing, intellectual, human, natural and social and relational capitals. However, some of these capitals are intangible and difficult to quantify, and consequently don't get the focussed reporting that they deserve.



Dr Dicky Els is a Lead Independent Consultant in CGF. He specialises in Workplace Wellness and focuses predominantly on strategy development, programme design and evaluation of outcome-based health promotion programmes.



Jené Palmer is a shareholder and executive director of CGF. Her areas of expertise are business leadership, strategy development, financial management, business optimisation, board evaluations and associated corporate governance matters. She advises boards on turnarounds, corporate governance, risk management, strategy and performance management.

INTEGRATED REPORTS FAILURE ON WORKPLACE WELLNESS

While most integrated reports include information on human capital such as their core competencies, capabilities, experience and skills development initiatives, they generally fail to report on workplace wellness indicators.

Integrated reports normally also include disclosures pertaining to occupational health and safety initiatives, human resources development and traditional HIV/Aids programmes, but very few integrated reports refer to the value of, and risks associated with, workplace wellness and effective disease management.

MEASURING WORKPLACE WELLNESS

The value of workplace wellness programmes can only really be appreciated when the outcomes of these programmes are measured and evaluated in the context of the organisation's strategic objectives.

Identifying and regularly measuring workplace wellness metrics such as group risk insurance claims, onsite health care, presenteeism and absenteeism costs as well as related changes in work performance, functional capacity and quality of life of employees, will better inform health risk mitigation strategies and organisational development processes tailored to add value to the business.

Understanding employee health risks and accurately quantifying their associated costs, is essential to developing workplace wellness objectives which support the organisation's strategic objectives.

HEALTH RISKS OF EMPLOYEES

By measuring the employee health risks (such as inadequate exercise, unhealthy diets, smoking, obesity, poor sleep and substance abuse) and comparing them with the costs of non-communicable diseases (such as cardiovascular diseases, diabetes, cancer, chronic respiratory diseases, mental and muscular skeletal disorders); the organisation can gather management information critical to optimising human capital management.

Where workplace wellness metrics can be accurately monetised, which includes tracking non-financial trends of employees' behaviour, relationships and their performance; these measures all demonstrate the impact of effectual workplace wellness programmes.

RAISING THE STANDARD

The business case for workplace wellness is realised when financial and non-financial management objectives are aligned, integrated and effectively managed. While there is no 'one size fits all' approach to workplace wellness programmes, these management interventions should, as far as possible, be benchmarked to those of industry peers and at the very least, important physical and mental wellness metrics should be measured, tracked and analysed. This benchmarked information can be used to establish organisation-wide transformation initiatives and evaluate the impact and effectiveness of specific workplace wellness programme interventions.

HOLISTIC APPROACH TO WELLNESS

Enlightened organisations adopt a combination of curative (disease management), preventative and health promotion (wellness management) interventions. By embracing a holistic integrated workplace wellness management and reporting approach, organisations can broaden their views on human capital management and the extent to which it preserves, creates and promotes business value.

It is well-known that an integrated workplace wellness strategy creates significant value when management interventions involve several aspects of the business such as occupational health and safety, human capital development, employee benefits and corporate social responsibility. As such, benchmarked workplace wellness programmes should incorporate and capture information pertaining to multi-dimensional aspects of workplace wellness, including the prevalence for communicable and non-communicable diseases, health and safety risks, organisational climate and the physical and mental health status of employees. Such information should be analysed in

the context of the organisation's social and ethics risks and their (potential) impact communicated to material stakeholders.

Importantly, the outcomes and the actions taken to address the potential negative impacts of these risks, should also be disclosed in the organisation's annual integrated report.

DECISIONS MUST BE MONITORED

The organisation's health and wellness metrics also inform organisational change management processes. Leaders in the organisation must consider and monitor the ripple effect of their decisions and how these decisions influence organisational behaviour and employee wellness (and consequently business outcomes).

For example, organisational restructuring and downsizing initiatives often result in job redesigns, re-assignments, retrenchments, different business processes and the

re-distribution of certain managerial duties. These volatile situations typically introduce additional stressors into the workplace environment which may negatively impact employee wellness and ultimately human capital performance.

In these circumstances, well-designed workplace wellness metrics can help provide leaders with the information they need to make informed investment decisions regarding the allocation of resources to workplace wellness programmes specifically aimed at countering work stress and increased job demands.

This management information becomes even more important when organisational change is driven by positive intentions and aimed at increasing efficiency, optimising performance and employee engagement and maximising talent retention.

As the speed of change continues to

increase - and as more industries become more complex with the introduction of the Fourth Industrial Revolution and the advent of "cyber-physical systems" - the requirement to understand the benefits of leveraging workplace wellness programmes to create value for the organisation becomes even more important.

CONCLUSION

Stakeholder communication programmes should therefore ensure that critical workplace wellness information is timeously and transparently disclosed, especially during times of organisational transformation.

Moreover, employers should be able to demonstrate how their workplace wellness programmes promote social cohesion and help the organisation to manage its social and ethics risks by reducing ill health, changing behaviour and developing a culture of wellness.



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AFRIKAANS.



B) Safety is Smart.
Makes the reader aware of safety in and around the home. ENGLISH.



C) Lagplooitjies
Veiligheid vir die jare vorentoe.
AFRIKAANS.



D) Laughter Lines
A special booklet for the safety of senior citizens and those about to retire. ENGLISH.



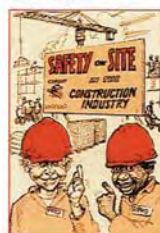
E) Eerste hulp vir Familie en Vriende
AFRIKAANS.



F) First Aid for Family and Friends
Gives advice on how to handle everyday emergencies. ENGLISH.



G) Ukuphepha Esayithini -
Embonini Yezokwakha
ZULU.



H) Safety on Site
Aimed at the construction industry and tells the story of Sipho and Fred who are workers on a construction site. ENGLISH.



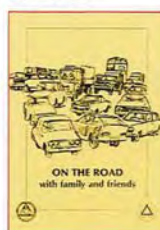
I) Safety is Teamwork
An induction booklet not only for new workers in industry but for all employees. ENGLISH.



J) Office Safety
Makes 9 to 5 office workers aware of hazardous situations which exist in the workplace. ENGLISH.



K) Safety and Health in the Food and Beverage industry
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CARTOON BOOKLETS



Message from the President

Joep Joubert

By the time you read this it will be close to winter again and I believe most of us will be wondering where the weeks have gone! Remember winter has its own challenges in terms of hazards and risks on site. Please make sure your risk assessments reflect the changes in temperature, and to the people in our winter rainfall regions, please consider the wet conditions as well!

RENEWAL OF SAQA RECOGNITION

During the last quarter of 2017 SAQA re-audited the Institute of Safety Management in order to determine whether we still comply with their requirements to be a recognised professional body. We satisfied their requirements and our period of recognition is now extended for the next five years.

Joep and Leighton attended the SAQA Professional Body Forum on 27 of March where new certificates were handed to 47 professional bodies that have also been re-approved and seven new certificates were also issued. Thank you to the team whose dedicated work made this possible!

RE-ELECTION OF IOSM NATIONAL COUNCIL

We have come to the end of another two year cycle and it is again time to re-elect the IOSM National Council. By the time you read this we will most probably be well into the nomination and election process and your new Council and office bearers will be introduced at the AGM that will take place at A-OHSExpo 2018, Gallagher Estate on 16:00 the 22nd of May. Please join us for the AGM. It is always good to see one another face to face!

TRAINING

Our Health and Safety Representative Course is nearing its end and the first batch of learners should be finishing their process soon. The uptake on the upskilling training have been very disappointing, but IOSM will keep on trying initiatives to provide opportunity for growth to members in order to improve the skills of members in the OHS profession.

PROFESSIONAL INPUTS

The IOSM has recently been invited to participate in a number of bodies and initiatives, dealing with various OHS issues.

The IOSM as a Voluntary Association (VA) of the

SACPCMP have now also been invited onto their Qualifications Committee that will be evaluating tertiary qualifications in the Construction Environment. We are also involved in a process to redefine the registration criteria for CHA practitioners.

UNISA has invited a number of IOSM's members to participate in their industry forum again.

We have a member on one of the SABS technical committees for PPE and the IOSM has also been invited to a think tank on CHS issues hosted by the CBE, DoL and SACPCMP to be held on the 25th of May.

We are really looking forward to all the opportunities to promote professionalism in OHS, especially the think tank of 25 May.

We'll give you some feedback later.

With that it is goodbye again, see you at A-OHSExpo 2018 at Gallagher Estate from 22 to 24 May!!

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Risk Assessments - Baseline vs HIRA

There is a general lack of understanding that there is a difference between a Baseline Risk Assessment (BRA) and a Hazard Identification & Risk Assessment (HIRA) and that the OHSAct and the Construction Regulations refer and prescribe requirements related to this difference.

The 1996 MHSAct's section 11(1) states that "*every employer must (a) identify the hazards to health or safety to which employees may be exposed while they are at work and (b) assess the risks to health or safety to which employees may be exposed while they are at work*". This led to the "HIRA" term being invented and so HIRA became the popular reference for a risk assessment.

The 2003 and now the 2014 OHSAct's Construction Regulation 9(1)(a) follows similar risk assessment wording, being "*the identification of the risks and hazards to which persons may be exposed to*", and 9(1)(b), "*an analysis and evaluation of the risks and hazards identified based on a documented method*" ... which is to be a part of a documented Health and Safety Plan.

Both these requirements require the risk assessment to be relative to the employee or person exposed. Even the SIMRAC's Mining Occupational Health Practice Handbook states Baseline HIRAs are geographical area, process or activity, or occupation task based assessments, which are all human hazard focused and as such are not an overall risk based baseline risk assessment.

This means that **HIRAs are Job, Task or Issue Based Risk Assessments** as they do not incorporate all the potential risks that a baseline risk assessment should highlight.

OHSAct's 2014 Construction Regulation 5(1)(a) requires and prescribes a different risk assessment context, namely "*a client must prepare a Baseline Risk Assessment for the intended construction work project*". The term baseline risk assessment is not defined in the legislation, so there is plenty confusion and misunderstanding about what a Baseline Risk Assessment actually is.

The Baseline Risk Assessment description above states that a BRA has to be performed and related to the intended construction work project, which infers that construction project stages or the project management stages apply as

described by the SACPCMP, the statutory registration body for construction OHS people (CHS practitioners).

The 6 SACPCMP project management stages are:

- Stage 1 - Project Initiation and Briefing
- Stage 2 - Concept and Feasibility
- Stage 3 - Design Development
- Stage 4 - Tender Documentation and Procurement
- Stage 5 - Construction Documentation and Management
- Stage 6 - Project Close-Out

(Note: The SACPCMP CHS Agent is professionally registered to cover all 6 project stages where the CHS Managers and Officers are permitted to cover stages 4 to 6 only).

The question is what is a Baseline Risk Assessment? It is not defined in the OHS legislation and the internet worded definitions are confusing and sometimes refer to a Baseline HIRA without any clarity or understanding given. For example look at this internet definition "*Baseline risk assessment: This is the initial assessment of risk in a workplace. It is a broad assessment and includes all activities taking place on site. A baseline HIRA is done to establish a risk profile and is used to prioritise action programmes for issue-based risk assessments*". What they have described is an activities/task based HIRA which is actually a task or issue based risk assessment, and not a Baseline Risk Assessment. (Note that all identified hazards scored in HIRAs can provide a risk profile).

Furthermore a Baseline Risk Assessment is not defined in the SANS 31000 Risk Management Standard nor in the new ISO 45001 OHS Management System Standard, but the described OHS Management Framework in this OHS standard refers to internal and external context risk issues which impacts on the scope of any OHS Management System

This being the case, is the Baseline Risk Assessment to consider or cover the internal context, external context or both contexts? In terms of a client's construction work project, many external aspects will impact on and apply to a project, while all the internal context aspects will apply.

Table 1

INTERNAL CONTEXT	EXTERNAL CONTEXT
o People	o Political
o Equipment	o Economy
o Process/ Practices/ Policies	o Social
o Materials	o Technology
o Environment	o Environment
o Legal	o Legal
o Financial	



By Leighton Bennett, Pr. CHSA,
SHE & Risk Management Consultant,
Benrisk Consulting

What are the aspects which should be considered in relation to the internal and external contexts? As an example PEPMELF* and PESTEL are suggested as baseline risk assessment brainstorming guide words. (See Table 1).

In terms of a client's construction work project, many external aspects will impact on and apply to a project, while all the internal context aspects will apply

Returning to the question of what is a baseline risk assessment, I propose the following Baseline Risk Assessment (BRA) definition to introduce some common understanding:

A Baseline Risk Assessment means a high level comprehensive risk assessment performed to identify, analyse and evaluate a wide range of and the current status of the risks impacting on and associated with the enterprise, company, business, project or process being assessed, in order to establish a Risk Profile,

.... and then extending it to managing risk ... by adding

& then on evaluation permit implementing suitable risk management measures to mitigate the assessed risks to an acceptable or tolerable risk appetite level.

Leighton Bennett, Benrisk Consulting

This definition indicates that a BRA and HIRA are not the same as the BRA process is focused to consider all the

possible and potential risks that are anticipated to impact on a business, a company, a project or on construction work, as required by Construction Regulation 5(1)(a).

Furthermore if we consider the Construction Regulation 5(1)(b) and preparing a site specific Health and Safety Specification incorporated the CR 5(1)(a) risk assessment inputs. This Health and Safety Specification should therefore also cover risk aspects related to the project feasibility and design of the construction project and design risks of the construction work required and also the construction related activities risk, and not just the HIRA related human hazard issues as seen in most of the Health and Safety Plan documentation at construction sites.

CONCLUSION

A Baseline Risk Assessment is a high level "helicopter view" risk assessment of the whole situation's scope of potential risks related to all the likely risks that may impact on a business, a company, a project or construction work being assessed, while a HIRA's focus is on the hazards related to human work and job task OHS issues.

A Baseline Risk Assessment (BRA) and a HIRA are not the same type of risk assessment as their risk assessment focuses are different.

NOTE: The PEPMELF internal context baseline risk assessment method was published in "Risk Assessments - a guide to understanding the basics" by the Safety First Association in 2006.*

A large advertisement for SAFECO featuring a close-up of a firefighter's face wearing a blue helmet, goggles, and a respirator. The background is a gradient of blue and purple. Text is overlaid on the top left and bottom of the image.

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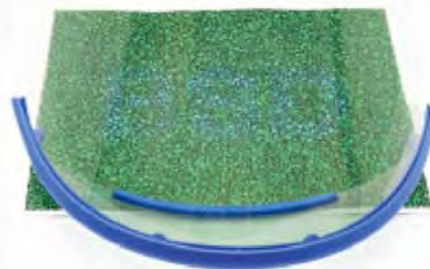
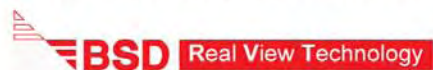
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Stel Stylianou, CEO

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Safety prescription eyewear - are you protected?



Safety spectacles are an essential part of personal protective equipment (PPE) in many workplace environments.

The fundamental requirement is that they meet all the relevant safety regulations, while at the same time being comfortable to wear.

Those who suffer from long-sightedness often have to make do with an uncomfortable compromise, such as wearing safety spectacles over the necessary reading glasses.

UVEX safety, in conjunction with local partners, offers a solution to this problem with its unique prescription safety eyewear range.

Safety spectacle lenses are usually coated to prevent fogging and/or scratching.

An anti-fog coating is especially important for high humidity environments or physically demanding work, such as in the paper or food industries.

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This improves the comfort of the person wearing the safety spectacles, allowing them to concentrate to the best of their ability on the most important thing - their work.

Uvex Prescription Safety Eyewear is now available through local partners across SA

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uvex Safety South Africa, in conjunction with local partners, offer a full range of tailor-made prescription safety spectacles that are certified in accordance with EN166 (both frame and lenses) and the lenses are manufactured in South Africa.

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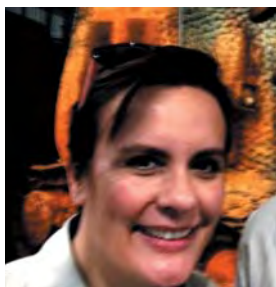


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Chairman's report



*by Deleane Luzzatto,
Chairman SAPEMA*

As they say in the classics, "Time flies when you having fun!" But really, where did 2017 go???

Who would have thought in 2017 that by the beginning of 2018 we would have a new President, and who would have thought that our previous president would be going to court to battle corruption charges!

So in my mind - "If nothing ever changed, there would be no butterflies" rings true to my ears! Change is also an important part of life's evolution.

Here are some of SAPEMA changes that are adding to Association's evolution:

SAPEMA BECOMES AN NPC

During 2015/2016 the SAPEMA EXCO made the decision to pursue the change of the Association becoming an NPC ... to eventually become an NPO. We are proud to confirm that SAPEMA is now a Registered NPC with CIPC and we have now also received our tax exemption certificate.

DISSOLUTION OF REGIONAL BRANCH

In November 2017, the Exco motivated the request for the structure of regional branches to be dissolved. The reason behind this was to have a united face to our industry. While our Inland Region was always active, our KZN Regional Branch battled to replicate what our Inland Region was able to do.

Regional meetings will continue to be held, however, these meetings will be guided and managed by our Exco.

By doing this, we will be able to ensure that all our members are kept up to

date with what we are trying to achieve in the industry as an Association.

It will also allow for a flat and open channel all our regional members to engage directly with the Exco.

SAPEMA WEBSITE

Our webpage is currently undergoing a facelift to maintain the same momentum of our Association's changes.

Keeping up with technology and social media networks is key to the success of keeping our members and industry up to date. This is a fundamental building block for the marketing of SAPEMA.

The new and upgraded webpage will go live early May, before the A-OSH Expo.

PARTICIPATION AT EXHIBITIONS

In order to gain the traction we need in different areas and spheres of our industry, we have signed a mutually beneficial agreement with Specialised Exhibitions who manage a number of popular exhibitions - A-OSH, Electra Mining and Madex to name but a few. By doing this we are able to bring more value to our SAPEMA members when engaging or participating at these events.

SYMPOSIUM AT CITY OF CAPE TOWN

At the end of 2017, SAPEMA held a Standards and Specifications Symposium for the City of Cape Town Council.

We were overwhelmed by the interest and interactive energy that was received from the delegates.

The topics that we presented were:

- Senior Professional Officer: Safety Corporate Services
- SAPEMA Who we are and what we stand for - Deleane Luzzatto (National Sales Manager @ Rebel Safety Gear)
- Hand Protection and Glove Markings - Jarryd Swanepoel (Product Consultant @ UVEX)
- Foot Protection and ISO/SANS 20345 - Derick Els (Technical Training Officer at BBF Group)
- Workwear and Reflective Wear - Andre Eloff (National Sales Manager then @ Marburg)
- Eyewear and Safety Spec Markings - Jarryd Swanepoel (Product Consultant @ UVEX)
- Importance of Buying Local - Lebogang Mokwele (Public Sector Specialist @ BBF Group)

The importance of these key PPE topics and the standards and specifications relevant to these items motivated the delegates to ask relevant and engaging questions to our presenting members.

The delegates consisted of City of Cape Town Procurement Managers, SHEQ Officers and HR to name a few.

The Symposium was organised by SAPEMA, together with the help and



(L to R) Michael Fortune, Imtiyaz Oliver, Clyde Beattie, Deleane Luzzatto, Jarryd Swanepoel, Stephanie Petersen, Lebogang Mokwele, Derick Els, Ahwyn Marais, Denzil Bennet

assistance of Alwyn Marais, Senior Professional Officer: Safety Corporate Services for CCT.

"I wish, to extend a huge thank you to SAPEMA for the high quality papers delivered and for an event that was well organised and successfully executed. I trust that it will become a fixed event on our calendars henceforth", said Alwyn Marais.



Alwyn Marais, Senior Professional Officer: Safety Corporate Services for CCT

Having held this event in the heart of Cape Town, with such a prominent end user, namely the Cape Town City Council, and even considering that

SAPEMA only signed up its very first western Cape member this year; this event has proved just how important it is for us as SAPEMA to educate and share the knowledge that we have, being the specialists in our areas of expertise in PPE.

We need to ensure that our end users get the right product for the right application and ultimately keep them safe while doing their daily jobs.

We would like this initiative to roll out to other regions and other key end-

AGM

We held our Annual General Meeting in March this year which was well attended by both Inland and KZN members.

We are happy to announce our newly appointed 2018 EXCO Team:

Deleane Luzzatto - REBEL Safety Gear - Chairman

Clyde Beattie - UVEX - Vice Chairman

Ravesh Rama - Rama Group

Mike Fremantle - Safeco

Loren Pearson - Du Pont

Andre Eloff - Dromex

Rani Naidoo - 3M

Ruaan Breedts - Quality Safety

Tracy- Ann Killian - SI Quip

As we embark on our exciting, yet ever challenging journey, we welcome any members who wish to join in and offer their expertise to any of our many projects.

We would also like to urge any PPE suppliers or manufacturers, who are not members to join SAPEMA and make the industry a safer place!

So until next time, I will leave you with these fine words " *The Secret of Change is to focus all of your energy not on fighting the old, but building on the new.*" Socrates

Contact SAPEMA: Secretary: Helena van Greunen

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SAIOH Annual Conference -



Source: www.safarinow.com

Planning for the 2018 Conference at Champagne Sports Resort in the Central Drakensberg is forging ahead. The KwaZulu-Natal (KZN) branch of SAIOH will host this year's conference, and the programme is currently being developed under the leadership of the KZN branch committee. The theme of the conference is "Raising the bar in Occupational Hygiene: Informed control reduces worker exposures".

Two excellent Professional Development Courses (PDCs) have been confirmed to date, where international experts in their respective fields of speciality will workshop important topics:

PDC 1- Practical measurement of local exhaust ventilation (LEV) systems, presented by Adrian Sims (UK), Managing Director of VENT-TECH Ltd. and member of the Institute of LEV Engineers (ILEVE); the Institute is accredited for LEV design, and commissioning, testing and installation of LEV systems. Adrian has presented British Occupational Hygiene Society (BOHS) modules on the measurement of LEV systems proficiency training around the world.

PDC 2- Practical noise control, presented by Dennis P Driscoll (USA), President and Principal Consultant of Associates in Acoustics Inc., Past President of the National Hearing Conservation Association (NHCA); and registered Professional Engineer and a Board Certified Noise Control Engineer. Dennis is one of the most popular PDC facilitators in the USA and presents this PDC annually due to the high demand!

SAIOH is considering the possibility of an additional PDC, and repeating the two PDCs which are already confirmed, should there be enough interest from members.

The Conference will run for a day longer than usual, to accommodate the official launch of the SAIOH Mining Forum. This will be a day of acknowledgement for SAIOH's mine-based colleagues and the value they add to the occupational hygieneprofession. The format and content of the launch programme are still under construction, but SAIOH is pleased to announce that Anglo American will be sponsoring Brian Davies, a renowned Australian occupational hygienist working in the mining sector, to be the keynote presenter.

The conference draft programme is under development and will be announced within the next few months. Please save the dates of 23 to 26 October 2018 for the SAIOH flagship event of the year: PDCs (23 October); the launch of the SAIOH Mining Forum and associated activities, in parallel with a second offering of the PDCs (24 October); and the main conference (25 - 26 October).

News from SAIOH

SAIOH STRATEGIC PLANNING SESSION

February 2018

The Southern African Institute for Occupational Hygiene (SAIOH) held a strategic planning session on 8 February 2018, which was well attended by SAIOH Council members, allowing many varied and important projects to be considered.

The session revealed that the Presidents and their respective Councils of the past three years really embraced the strategic goals set in 2015, with between 40 and 90% completion of the past three years' objectives.

Finalising these objectives is ongoing with management, and priorities have been set to attain full delivery.

The first SAIOH Council meeting of the year was held a day later, on 9 January 2018.

There has been a change in Council portfolios and several new projects have been added.

These will enhance SAIOH's organisation and provide more efficient service delivery to SAIOH members and stakeholders alike:

- The formation of a SAIOH Mining Forum will help SAIOH to better understand the mining industry and the challenges faced by its mine-based members.

It also aims to improve support and development for these members.

SAIOH Council considers this initiative to be one of the most important developments in many years, and the official launch of the Mining Forum will take place during the 2018 SAIOH Annual Conference.

- The SAIOH ethics, complaints and investigation procedures are also undergoing major changes.

It is envisaged that the new streamlined system will allow SAIOH to ensure that non-compliances with regard to ethical practice and poor professional service delivery are fairly investigated and, more importantly, that offenders are suitably punished.

- The roll-out of the regional structure to enable SAIOH to better serve members across South Africa, and beyond our borders to neighbouring countries, will begin in earnest.

It was decided that, due to the volume of work related to this and the need to replicate the system in all three regions, SAIOH will trial one region as a pilot.

The learnings and outcomes can then be transferred as a workable system to the other two regions.

Job descriptions for the Regional Coordinators have been drafted and the posts will be advertised soon.

- The introduction of a new portfolio: Policy and Planning - under the ownership of the SAIOH President and Vice President.

This portfolio will ensure that systems are developed and documented to ensure constant and quality management of SAIOH as a business concern, with tracked KPIs and deliverables.

This will also encompass strict financial management to ensure that SAIOH offers value for money to its members.

SAVE THE DATES - A-OSH EXPO 2018

22 to 24 May 2018

SAIOH will once again be participating in and exhibiting at A-OSH Expo 2018, Africa's leading occupational health and safety exhibition, which will take place from 22 to 24 May 2018, at the Gallagher Convention Centre in Johannesburg.

This year's exhibition will highlight three crucial aspects of occupational health and safety:

- attaining legal compliance
- making health and safety part of culture at work
- empowering employees around workplace health and safety issues.

SAIOH extends a warm invitation to all members and non-members with an active interest in the occupational hygiene profession to visit the SAIOH stand during the exhibition.

You will have the opportunity to meet some of the SAIOH Council members and administrative staff and to obtain

more information about SAIOH. We look forward to seeing many of you there!

Report by: Claudina Nogueira, SAIOH Council Member Portfolios: Liaison and Communication & Marketing
e-mail: claudinan@saioh.co.za



Erratum

The editorial on the Safety First Association in the annual Safety Directory failed to mention Ray Strydom as one of its volunteers. Ray had in fact played a large role in the Association. His passion for the Association spanned many years, from his assistance with writing copy for the Safety Cartoon Booklets, to his term as Chairman.

We apologise for this omission.

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The South African Qualification and Certification Committee of Gas (SAQCC Gas) has been officially appointed and mandated by the Department of Labour to oversee the registration of gas practitioners on their behalf, within Natural Gas, Liquefied Petroleum Gas, Air Conditioning & Refrigeration Gas and Compressed Industrial & Medical gases.

SAQCC Gas has four member associations; the Liquefied Petroleum Gas Safety Association of South Africa (LPGSASA), the Southern African Compressed Gases Associations (SACGA), the South African Refrigeration & Air Conditioning Contractors Association (SARACCA), and the Southern African Gas Association (SAGA).

WHY WE WORK TOGETHER

The main objective of the SAQCC Gas is to ensure the safe use of gas in South Africa, by ensuring all gas practitioners are trained, skilled and registered with the pertinent association governing their specific gas type.

LPGSASA governs the use of Liquefied Petroleum Gas (LPG), including installations, distribution, hardware and retailing of LPG and gas appliances. The SACGA is responsible for the medical and industrial gases industry, which includes gas producers, manufacturers of equipment, cylinder test stations, pipeline installers and valve manufacturers. SARACCA, on the other hand, oversees the field of refrigeration and air conditioning gases, encompassing contractors who have jointly and individually agreed to a set of governing standards whilst operating in free competition against each other. SAGA ensures that all industry stakeholders in the methane-based environment provide safe and efficient downstream operations to users in the domestic, commercial and industrial markets. This includes administration of the Safe Gas Equipment Scheme (SGES).

PRESSURE EQUIPMENT REGULATIONS

The four associations tackle various segments, placing attention on various industries within gas to ensure market success and the safety of all gas users in

southern Africa. The four associations adhere to the Pressure Equipment Regulation (PER) which outlines the duties of the different role-players, from manufacturers through to users.

These regulations set out the requirements regarding the design, manufacture, operation, repair, modification, maintenance, inspection and testing of pressure equipment.

The fundamentals of combustion



Combustion takes place when gas, liquid, biomass or fossils react with oxygen in the air and create heat. The process requires three main elements; fuel, oxygen and the source of ignition.

Combustion can be likened to an explosion - a controlled explosion that takes place in a monitored space at a projected time.

"There are three 'T's' for combustion, they are; Temperature, Turbulence and Time" explained the late Dr Tony Biddlestone.

The amount of heat above the ignition temperature must be efficient for impact. By definition, combustion is a reaction in which fuel reacts with oxygen or another oxidant, therefore, for optimum combustion, the precise proportions of fuel and oxygen have to be thoroughly mixed. This mixture has to be given sufficient time for the burning process to be completed. Perfect combustion takes place when the three "T's" have been closely followed.

"To state that oxygen supports combustion is an understatement" said Riaan van der Walt during his presentation at the SADC Combustion Seminar, hosted by SAGA on the 27th - 28th March 2018.

Insufficient oxygen or oxygen that is not properly mixed with the fuel can result in an incomplete combustion process due to inadequately burnt fuel.

However, the mixing and burning of exactly the correct proportions of fuel and oxygen is only theoretical.

In industries, most fuels vary in chemistry, often minute by minute

These regulations also require a Certificate of Conformity (COC) to be issued for all gas installations. In terms of the Occupational Health and Safety Act, 1993, the PER also requires persons handling the installation of any gas systems to undergo specific training and to be registered with SAQCC Gas through one of the four associations.

while the moisture and pressure of the air may also vary, making it impossible to determine the perfect proportions.

THE BURNING FLAME

When the combustion temperature of the flame increases, the average energy of the electromagnetic radiation given off by the flame also increases.

As the primary component, when the supply of oxygen increases, complete combustion takes place and less black-radiating soot is produced, creating enough energy to excite and ionize gas molecules in the flame.

The temperature of the flame varies. A candle flame has at a temperature of 1000° Celsius while a Dicyanoacetylene flame is 4990° Celsius, more than four times that of the candle flame.

Flames can be divided into two types - the laboratory and the industrial flame. The main difference between these two types of flames is that the information acquired from one may not necessarily be precisely the information acquired from the other.

Lab conditions are superior to industrial conditions and the quantity of material being tested differs greatly, this will no doubt give different conclusions.

The complexity of the combustion process and what each type of flame communicates requires great skills and knowledge.

This underlying factor was one of the main discussions amongst the delegates who attended the SADC Combustion Seminar.

Working to expand HVAC compliance



The Department of Labour published the Pressure Equipment Regulations (PER) as part of the Occupational Health and Safety Act. The South African Qualification Certification Committee for Gas (SAQCC Gas) has been accredited by the Department of Labour to register authorized persons. The South African Refrigeration & Air Conditioning Contractors Association (SARACCA), as a member of that committee, is tasked with registering refrigeration and air conditioning practitioners.

According to the Pressure Equipment Regulations (PER), refrigerators and air conditioning units that use refrigerant gas should meet the specified standards to ensure safety. According to these regulations only trained, skilled and registered persons may carry out any work within HVAC.

Recently, it was brought to the attention of SARACCA that a significant number of contractors in the Northern Cape and Free State area were using unregistered workers to undertake installations, maintenance and repairs on major projects for both the public and the private sector. These unregistered installers would not have a Certificate of Conformity (COC) as required by the PER.

Some of the illegally installed facilities in Kimberley include Sol Plaatje University, Diamond Pavilion, North Cape mall, Griep Hospital, Heart Hospital, Kimberley and Narco Day Hospital including a majority of supermarkets and food stores.

Installations undertaken by unskilled persons have proven to be dangerous and hazardous for both the installer and the general public.

LEGAL DOCUMENTATION

A Certificate of Conformity (COC) for Gas installations is a legal document which must be obtained whenever a gas system is installed, modified or repaired and should be retained for possible future requirement. Only Registered Practitioners may issue a COC. When the refrigeration system is a category II or higher, as defined by SANS 347, an Approved Inspection Authority (AIA) is required to examine

and to countersign the certificate of conformity issued by the gas practitioner.

DEPARTMENT OF LABOUR CALLS FOR COMPLIANCE

When the Department of Labour (DOL) Inspectors make their official visit, the end user will be requested to hand over required documents, including the COC. End-users must therefore always remember to request a completed COC upon completion of every installation and modification.

In June 2017, SARACCA conducted a training session with DOL Inspectors to educate and raise competency in their HVAC industry inspections. The inspectors are therefore properly trained to conduct efficient inspections and hold responsible parties liable for any

non-compliance discovered.

ENSURING EMPLOYEE COMPLIANCE

Contracting companies should only use installers who are trained, skilled and registered. Often companies take the responsibility of having their employees trained and registered. This is a great initiative for employee morale and it helps build loyal and dedicated employees. This also means that there is a wider circle of qualified persons within the HVAC industry. However, employers need to note that registering an employee at its own expense does not guarantee that the concerned employee will stay with the company throughout the duration of his/her registration, and should the employee resign, the company cannot strip the employee of their registration.

The vision for future energy



Liquefied Petroleum Gas (LPGas) has played a silent role in energising economies in southern Africa. Largely untapped, LPGas has the potential to power Africa, and more specifically southern Africa as a sustainable, safe energy medium. LPGas could be an affordable, reliable answer to energy shortages.

The Vision in Energy Event (VIE) was created out of the need to drive LPGas awareness. VIE, through its ongoing delivery of world class speakers and panellists, has grown into one of the continent's premier annual gatherings for key LPGas industry players.

VIE 2018 - A PARTICIPATION AND KNOWLEDGE SHARING PLATFORM

VIE, in collaboration with the Liquefied Petroleum Gas Safety Association of South Africa (LPGSASA), will play a crucial role in 2018, shaping the energy development landscape for Sub-Saharan Africa which is represented by government, corporates, NGOs, SMMEs, suppliers, retailers and consumers.

The conference will be held in Sandton, and will focus on shaping the destiny of the industry to trigger solid growth strategies for the greater southern

African region.

"The VIE/LPGSASA Conference aims to disrupt the current status quo in the energy mix and focus talks and discussion on deliverables in making LPGas a considerably bigger role-player." - Kevin Robertson, CEO, LPGSASA

WLPGA - BRINGING THE GLOBAL STAGE TO SOUTHERN AFRICA

The World LPG Association (WLPGA) serves as the authoritative voice for the global LPGas industry. The primary participation goal of the WLPGA, is to drive demand for LPGas while, promoting compliance with good business and safety practices.

The WLPGA in association with the LPGSASA will host various discussion points around women in the LPGas industry, encouraging women to participate in the industry.

Visit www.visionerinenenergy.co.za to secure your participation or contact Penny Seaketso, eventmanager@visionerinenenergy.co.za, for sponsorship opportunities.



The Occupational Safety and Health Africa Foundation, known as OSHAfrica is a Pan-African Occupational Safety and Health organisation. Governed by a board of trustees, it was registered in 2017 to bring together Occupational Safety and Health professionals across the different countries and sub-regions of Africa, creating an atmosphere for collaborative work, sharing of knowledge and OSH data.

The OSHAfrica idea was conceptualised at the 2015 ICOH Conference held in Seoul, South Korea. Twenty three African representatives agreed to create a unified Pan African OSH body. A WhatsApp Group called OSHAfrica was created and has since grown to almost 200 members actively discussing Occupational Safety and Health in Africa. OSHAfrica's website reinforces the aim of bringing occupational health and safety activities closer to each OSHAfrican.

OSHAfrica aspires to be the African information agency on Occupational Safety and Health. OSHAfrica has its Regional Administrative Office in Lagos, Nigeria, and sub-regional offices across all African sub-regions.



Sharing information

In this series of articles in National Safety, we will publish some of the information shared amongst members.

EMIRATES SUICIDE ATTEMPT

Submitted by Ehi Iden, Nigeria

A crew member of an Emirates Airlines aircraft due to depart Uganda's Entebbe International Airport sustained life threatening injuries after jumping off the emergency door. The Emirates Airline Flight had just delivered passengers and was preparing to load others passengers when the incident happened. The crew member, was immediately evacuated and taken to hospital. The exact cause of the incident was not yet clear, but some eye witnesses cited possible suicide.

EPILEPSY INDUCED ACCIDENT

Submitted by Sam Kadiri, Nigeria

Five people died in a vehicle accident in Ilorin, Kwara State capital Nigeria on 16th March when an epileptic driver had a seizure and rammed into an oncoming vehicle. Four of the victims were students. The students had noticed that he was behaving strangely behind the wheel so forced him to stop so that they could get out. Unfortunately, they were encouraged by passers-by to get back into the taxi because the driver said he would go home and take care of himself

immediately he dropped off the students. However, after a few kilometers, the driver suffered a seizure and the cab collided with an oncoming trailer instantly killing all the five occupants. This accident is due to perception of risk by the populace and poor safety awareness - another avoidable accident.

CLEANING PRODUCTS DAMAGE WOMEN'S LUNGS

Submitted by Kibor Keitany, Kenya

A study from Norway's university of Bergen has shown that regular use of cleaning sprays can damage women's lungs as much as a pack of cigarettes a day. The short-term effect on cleaning products is already well known to result in asthma and other breathing problems, the long term effects are not well documented. Scientists advised avoiding the products and using microfibre cloths and water. A study in 2017 found that nurses who used disinfectants to clean surfaces also had increased risk of developing lung disease.

NANOTECHNOLOGY SAFETY

Submitted by Sam Kadiri, Nigeria

NIOSH has posted four new posters offering tips on the design and use of exposure controls for nanomaterial production, post processing, and use.

They list options to reduce exposures to

nanomaterials based on the physical form, and they provide recommendations to minimise exposures which includes, handling and weighing of nanomaterials when scooping, pouring, and dumping; harvesting nanomaterials and cleaning out reactors after materials are produced; processing nanomaterials after production and working with nanomaterials of different forms, including dry powders or liquids

Engineered nanomaterials are intentionally produced to have at least one primary dimension less than 100 nanometers (nm), and they are used in areas that include medicine, electronics, biomaterials, and consumer products.

The workers at sites using or making engineered nanomaterials may inhale nanoparticles on a daily basis, posing a potential respiratory hazard.

NIOSH Director Dr. John Howard said: "The information contained in these new workplace design solution documents provide employers with strategic steps towards making sure their employees stay safe while handling nanomaterials."

GLOBAL ONLINE ACCESS TO LEGAL RESEARCH AND TRAINING

Submitted by Ehi Iden, Nigeria

GOALI - Global Online Access to Legal Information and training for developing countries. This new programme provides free or low-cost online access to legal research and training in the developing world.

OFF-THE-RACK ORTHOTIC STILETTOS

Submitted by Oluwatobi Durowoju, Nigeria

A recent study investigated whether an off-the-rack orthotic stiletto could alter pressure and comfort scores in the forefoot, arch and heel. Twenty-two women participated. Peak pressure and pressure-time integral for orthotic stilettos with built-in metatarsal pad, heel cup and arch support was measured; standard stilettos without inlays; and trainers. Comfort was recorded during 3 × 3 working days.

The orthotic stiletto exhibited lower metatarsal head and heel pressures than the standard stiletto and a long second metatarsal increased pressure.

The comfort in the forefoot and heel was higher in the orthotic stiletto than in the standard one and comfort in the forefoot was correlated to the pressure-time integral and not peak pressure.

Findings: Off-the-rack orthotic stilettos with built-in metatarsal pad, arch support and heel caps can lower the pressure under the heel and forefoot in comparison with a standard stiletto and can improve comfort during everyday use. Having a long second metatarsal is a risk factor for increased forefoot pressure.

ISO 45001 IS PUBLISHED

ISO 45001 which has been published is the world's first international standard for occupational health and safety.

Submitted by Gabriel Mcrighteous, Ghana - a comprehensive document on understanding ISO 45001.

LISTERIOSIS OUTBREAK IN SA

Submitted by Thuthula Balfour, South Africa

At a press conference on the Listeriosis outbreak in South Africa a presentation was given by the Minister of Health Dr Aaron Motsoaledi. He confirmed that as of 02 March a total of 948 cases were confirmed with 180 deaths.

The sources of the outbreak was identified as a meat processing factory. The nature of its spread and prevention issues were discussed.

Comment from Richard Whittaker, South Africa: Because the bacterium can cross contaminate via packaging, supermarket staff should be wearing gloves.

FOOD SAFETY

Submitted by Thamaga Thopola, South Africa

A video was shared showing chickens being handled in an unhygienic environment.

PAY GAP BETWEEN GENDERS

Submitted by Ehi Iden, Nigeria

A survey of health and safety professionals in the UK has revealed that the gender pay gap is double the average of the general workforce.

HELICOPTER PILOTS' VIEWS OF AIR TRAFFIC CONTROLLER RESPONSIBILITIES: A MISMATCH

Submitted by Oluwatobi Durowaju, Nigeria

Controllers and pilots must work together to ensure safe and efficient helicopter flights. Subjective ratings of pilot perception of controller responsibility for five key flight tasks were obtained from thirty helicopter pilots.

Three types of airspace were investigated. Results indicate that there

is variation in pilot understanding of controller responsibility compared to the formal regulations that define controller responsibility.

The responsibility for tasks during flight varies according to the flight rules used and airspace type.

Helicopter pilots may attribute responsibility to controllers for tasks when controllers have no responsibility as defined by regulation. This variation between pilot perceptions of controller responsibility could affect safety.

LAGOS DECLARES ZERO TOLERANCE FOR WORKPLACE TRAGEDIES

Submitted by Ehi Iden, Nigeria

The Lagos State Government recently declared zero tolerance for workplace tragedies in the state. Director General, Lagos State Safety Commission, Hakeem Dickson declared this at a news conference on 'Vision Zero' in Alausa, Ikeja, Lagos, Southwest after a series of incidences, such as the LP gas explosions, fire incidences, building collapse, workplace incidences, among others.

"It is in view of this that the Lagos State Government, through the Lagos State Safety Commission, deemed it urgent to declare Zero Tolerance for workplace incidents through various strategies one of which is 'Lagos Vision Zero' with the theme: "A Mindset Change towards Zero Harm," he said.

Dickson said the Lagos Vision Zero was a transformational approach to prevention that interpreted the Tripod stand of Safety, Health, and Wellbeing at all levels at work, saying it was borne out of the need to reduce to the barest minimum, hazards, and risks in the workplace and ensure zero injury, accident, death and promote wellbeing and health.

"Vision zero was launched globally at the XXI (21st) World Safety Congress held in Singapore 2017 and it focuses on building capacities and raising awareness at all levels of work to cultivate a Positive Change Mindset that all injuries and ill health caused are preventable and a belief that Zero Harm is possible. Vision Zero will not be a destination but an on-going journey.

"Vision Zero is not about showmanship, marksmanship and definitely not about censorship but about leadership, ownership and partnership with all the stakeholders in Lagos State," he said.

Dickson said the proposed conference was a three-day programme scheduled to hold between 26 and 28 June, 2018 at the Landmark Centre, Victoria Island, Lagos, disclosing that Governor Akinwunmi Ambode was expected to declare it open and sign a Safety Policy Document on safety at the workplace.

"Several Plenary sessions will hold with speakers presenting papers on various issues. At the end of the programme, it is expected that a workplace safety template will be developed for the State and by extension guarantee the wellbeing of all workers in Lagos State," he said.

The DG added that the Commission had set up Committees to work on the seven golden rules approach to realize the zero harm in workplaces, which included leadership commitment, identifying hazards and creating mitigative measures, setting health and safety goals, ensuring a safety and health system, using safe and healthy technology, improving qualification and competence and invest in people.

"This is a clarion call for everybody to come on board and support Lagos State Government by keying into the vision so that we can reduce unsafe acts and promote wellbeing in the workplace," he said.

SOLAR FARM CONSTRUCTION

Submitted by Ehi Iden, Nigeria

Morocco is building a \$9 billion solar farm as big as Paris which will quadruple its solar power by the end of 2018. The plant uses giant mirrors to focus the sun's rays which are then reflected onto a high tower in the centre of the array of mirrors. The tower contains an oil solution that is heated by the concentrated solar rays producing steam which powers the power plant's turbines. Solar energy is stored in the form of molten salt allowing electricity to be produced at night.

Sun is one of Africa's greatest untapped resources.

HEALTH HAZARDS OF SITTING

Submitted by Dr Ramat Unuigbo, USA

We know sitting too much is bad. But what exactly goes wrong in our bodies when we park ourselves for nearly eight hours per day? Many things, say four experts, who detailed a chain of problems from head to toe:

Organ damage - such as an overproductive pancreas, heart disease and colon cancer.

Muscle degeneration - resulting in mushy abs, tight hips, limp glutes.

Leg disorders - causing poor circulation in legs, soft bones.

Upper regions of the body also suffer with goggy brain and strained neck and sore shoulders.

The **back** takes a lot of pressure resulting in an inflexible spine with disk damage.

These problems can be countered. Employees should be made aware that there is a right way to sit. Recommendations include sitting with an exercise ball, even a backless stool to force sitting up straight.

Feet should be flat on the floor. Employees should stretch each hip for at least 3 minutes at least once a day as well as other stretch exercises. Walking during breaks is important, and it is a good idea to alternate between sitting and standing at workstations.

Dr Uche Enumah, Nigeria sent a video showing recommended exercises for avoiding ergonomic problems.

HEALTHY WORKFORCE

Submitted by Dr Folusho Alamina, Nigeria

Around a third of adults in England are damaging their health through a lack of physical activity.

1. One in four women and one in five men in England are defined as inactive, doing less than 30 minutes of moderate physical activity each week.
2. The cost of an unhealthy workforce to the UK taxpayer has been estimated at over £60 billion per year.
3. Employees who are in good health are less likely to need time off work and are likely to be more productive.
4. A lack of physical activity and poor eating habits leads to an unhealthy workforce. A healthier workforce can be more productive, take less time off sick and stay in employment for longer.

Greater physical activity, healthy eating and achieving a healthier weight are critical strands of wellbeing and a contributing factor for a healthier and more productive workforce.

Employers have a legal responsibility to support the health and well-being of their staff as part of their health and safety duties. Initiatives designed to encourage physical activity and healthy eating should focus on mental health as well as physical health.

Working in partnership with employees, employers can take a positive, proactive, preventative approach to support weight management and encourage greater physical activity.

Toolkits are available to help employers reverse the national obesity epidemic. They include a checklist of actions for employers to take, under the broad themes of being prepared, encouraging physical exercise and healthy eating, and providing knowledge and training.

ERGONOMICS

Submitted by Oluwatobi Durowaju, Nigeria

From my experience, we fail to see seated postures at workplace (which falls under Display Screen Equipment- DSE Regulations) as an important / integral part of our workplace health, safety and wellness plans. We do not always understand how wide / holistic DSE assessment is. It is not only about buying / recommending ergonomic chairs and tables. Rather, a good DSE assessor, should have specialised training.

We need to be careful what kind of seating we prescribe to individual staff members, as what works for Mr A may not work for Mr B.

Problems range from:

- Finding a balance between sitting and standing at the workplace
- Measuring compliance. Methodology validation and availability of suitable technology enhances compliance
- Leadership commitments to full DSE measures is important
- Unavailability of anthropometric data set in most countries for furniture designs
- Lack of regulations on DSE amongst most African countries.

Comment by Engr. Olusegun Stephen, UK. Good points but I will add that apart from meeting compliance where regulations exist, our ergonomic approach must keep workers from associated risk or else companies may face massive penalties.

Until prosecution is given way in Africa, workers will be subject to untold hardship after long service. "We need to keep our workers better than the way they came to work" is an indication that our risk assessment is working.

OHS Events

PATIENT SAFETY



Oluwatobi Durowaju was invited to give a presentation on patient safety handling. Managing safe patient handling is not as easy as we perceive, it must be managed with multifactorial interventions to be successful. It is unacceptable that patients do not always die because of ill health but often from human factor related issues.

Reply by Ebi Iden: Patient safety is the responsibility of us all. I personally think the need to reassess the model of care in healthcare is urgent. If it is innocent infants and newborns who are being victimised and bruised by caregivers employed and paid to care for them, then we all should get exceedingly worried.

OHS INSPECTOR CONFERENCE

Submitted by Tibor Szana, South Africa



The annual OHS Inspector Conference was held in South Africa from 12 - 13th March.



Day one ended with awards being handed out to those provinces and inspectors who have performed exceptionally.

CANCER AWARENESS

Submitted by Dr Anthony Umunna, Nigeria



Nigeria held a Workplace Cancer Awareness day at Astro Turf National Stadium, Lagos.

Its focus was on Prostate Cancer. It was celebrated with a novelty match between female staff and management staff from the Nigerian Maritime Administration & Safety Agency.

Activities also included free early screening for male staff in collaboration with an assigned diagnostic facility.

2018 WORLD DAY FOR SAFETY AND HEALTH

Ministry of East Africa Community, Labour & Social Protection celebrated 2018 World Day for Safety and Health at Work through the Directorate of Occupational Safety and Health Services (DOSHS) by holding a national annual occupational safety and health awards competition.

A prize giving ceremony will be held on 28th April 2018. www.labour.go.ke

ZAMBIA LAUNCHES SWOT

Submitted by C Kapema, Zambia



On 28 February, Zambia launched the Safe Workers of Tomorrow (SWOT) in Ndola Town.

ANATOMY OF ISO 45001

Submitted by Engr Jamiu Badmus, Nigeria

A 3 hour intensive technical session on the Anatomy of ISO 45001:2018 was held on 7th April in Nigeria.

MINING OCCUPATIONAL HEALTH DIALOGUE

Submitted by Thuthula Balfour, South Africa

The South African Mining Occupational Health Dialogue took place from 12th to 13th March. This has been an Annual event since 2016 to raise the profile of health in the industry.



Above: Dr Lindi Ndelu, Chief Director for Occupational Health in the Department of Mineral Resources giving her presentation.

WORLD CONFERENCE ON TOBACCO

Submitted by Ebi Iden, Nigeria



Ebi Iden attended the World Conference on Tobacco or Health, held in Cape Town where he met the DG WHO, Dr Tedros Ghebreyesus.



After the conference, Ebi was interviewed by South Africa Broadcasting Corporation (SABC), where he also promoted the OSHAfrica organisation.

LEGALISE INDIAN HEMP USE

Submitted by Sam Kadiri Nigeria

During a one-day public hearing on the rising abuse of pharmaceutical drugs among youths, the United Nations urged Nigeria to legalise hemp. The hearing was organised by the Nigerian Denate's Joint Committee on Drugs and Narcotics and Health. Harsheth Kaur Virk, Project Officer, United Nations Office on Drugs and Crime in Nigeria in her presentation explained that Indian Hemp (cannabis) is a miracle drug approved for medical purposes by the United Nations. She however did emphasise that it was not to be approved for recreational purposes. She said, "Nigeria, as a sovereign nation, has its stringent laws against it; but international conventions of the UN have approved it for medical purposes, based on the outcome of researches conducted by globally recognised institutes."

Virk added that apart from cannabis, users of other addictive drugs for recreational purposes, as approved by the UN, should not be criminalised but rehabilitated, emphasising that the global body was against drug trafficking. She charged Nigeria's security agencies to be proactive in their anti-drug trafficking campaign and not reactive.

WORLD CONGRESS ON TOBACCO OR HEALTH

The World Congress on Tobacco or Health 2018 held its annual conference in Cape Town.

According to Ehi Iden who attended, tobacco use in workplaces is an area we Occupational Health and Safety professionals should start looking at quickly, as studies and research work are lacking. We should therefore try and make inroads into this area to find solutions. Global tobacco control is a field that has plenty of funding from donors across the world, due to the notoriety of tobacco and the many diseases that are linked to its exposure and use. One question we need to really ask ourselves is, how come workplace policies have drug and alcohol programmes but they do not have tobacco use programmes?

Comment by Chinonye. I see many people in the workplace with chronic illnesses

yet continue to smoke which has a direct correlation on their high blood pressure, fatigue etc.

Comment by CBO Jakokwiri: Kenya is in the process of banning smoking in the workplace altogether.

WHO INTERNSHIP PROGRAMME

Ehi Iden announced that the global call for registration for the WHO Internship Programme 2018 is now open. Deadline is 30 June. www.opportunitydesk.org



Event Calendar 2018

09 April

The Occupational Health and Safety Bill Public hearing

National Assembly, Abuja. Discussions alongside Bills to amend 1. Labour Act CAP LI LFN 2004, 2. Employees Compensation Act, 2010, 3. National Social Insurance Trust Fund Act CAP N88, LFN, 2004 and two others. Professionals are urged to make presentation at the public hearing.

26 - 27 April

Launch of the African Vision Zero Campaign

Abidjan, Ivory Coast. www.visionzero.global

27 - 28 April

Annual national conference on Occupational Safety and Health at Work

Kenya. www.labour.go.ke

28 April

#SafeDay celebrations - Step up knowledge for young workers

Kenya will be holding an event during this year's which will focus on how stakeholders can ensure safe and healthy working conditions for young workers by dissemination of OSH knowledge to this segment of the workforce

02 May

International launch of OSHAfrica - ICOH (Dublin)

17:00 to 20:00. An aside event during ICOH (Dublin) has been approved for the international launch of OSHAfrica.

03 - 06 May

5th Africa and Middle East Congress on Addiction(AMECA)

Tunisia. www.iameca.org

22 - 24 May

AOSH Africa - Knowledge is the name of the game.

The following members of OSHAfrica will be giving presentations at the annual South African exhibition:

Sam Kadiri, Nigeria

Tibor Szana, South Africa

Joep Joubert, South Africa

www.aosh.co.za

28 - 29 May

Occupational Health and Safety

Impact of globalisation towards occupational health and safety - London UK. email: info@euroscicon.com / occupationalhealth@eurosciconconferences.com

26 - 28 June

Vision Zero

A mindset change towards zero harm. Hosted by the Lagos State Safety Commission in workplace. www.lagosvisionzero.ng

2019

OSHAfrica Conference 2019

The launch conference of OSHAfrica will be held in Johannesburg. www.oshafrica.africa

Anyone interested in joining the OSHAfrica group can register on the website - www.oshafrica.africa

NEW Brand New from IOSM for 2018

DANGER



This practical course is designed for all sectors of industry, all trades and all sizes of organisations.

DANGER



H&S Reps have a valuable role to play in the safety of every organisation. After finishing this practical programme, which will be held at your premises, and tweaked specifically for your organisation, everyone who has participated will know and understand the legal duties and responsibilities of your H&S Reps, and how to put them into practice.

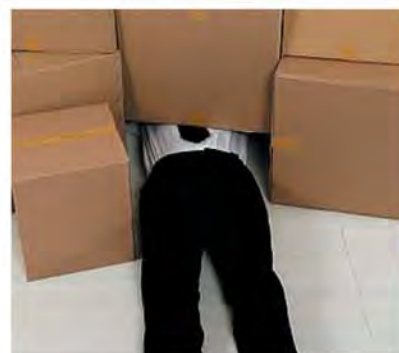
Use your H&S Reps responsibly

Use your H&S Reps as the OSHAct intended

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The Association of Construction Health and Safety Management (ACHASM)

Executive Director Update

Greetings colleagues.

As the current Executive Director, I hope to ensure that critical aspects that affect us all in the industry are addressed on an ongoing basis. I hopefully will be able to contribute substantially and fill the shoes of my predecessors.

ACHASM, established in 2006, is a non-profit organisation that promotes the interest of construction health and safety (H&S) in the built environment.

The role ACHASM has played over the past decade has been instrumental in the growth and development of the professionalisation of H&S in the sector. ACHASM is not about chasing members, however it is positive to see that our numbers are growing. Tables 1 and 2 indicate our current registrations.

Further information is available in the report on educational activities.

The following information details the roles we have contributed to for the betterment of our members, but also the sector:

- ACHASM is a recognised Voluntary Association (VA) with the South African Council for the Project and



Please visit our website www.achasm.co.za for updated information, or contact our Registrar, Ms

Jackie Fort on 0762630549 for further information or assistance. Our office is based at 2 Dale Court, Bain Street, Richmond Hill, Port Elizabeth, and operating hours are weekdays, from 08h30 to 13h30. Follow our Facebook and LinkedIn pages.



*Dr Claire Deacon PhD
(Construction Management)
claire.deacon and associates (cd&a)
PR.CHSA (SACPCMP)*

Table 1. Registrations per province

EC	FS	GP	KZN	LP	MPL	NC	NWP	WC	OTHER	TOTAL
80	10	66	13	19	7	2	2	64	2	265

Table 2. SACPCMP Registered members per Category

Pr.CHSA	Can CHSA	CHSM	Can. CHSM	CHSO	Can. CHSO	OTHER	TOTAL
21	13	24	3	30	10	5	106

Construction Management Professions (SACPCMP);

- o Represented by Ms Carla Botha, who attends the VA meetings at the SACPCMP on a quarterly basis (her report on the last meeting is published hereafter);
- ACHASM is represented by Dr Claire Deacon at the following SACPCMP forums:
 - o Board member of the 4th term Council (2014-2018):
 - Chair of the Human Resources Committee;
 - Chair of the Continuing Professional Development Committee (CPD);
 - Committee member of Programme Accreditation Committee (Construction Management and Construction H&S);
 - Committee member of the Registration Committee (Regcom);
 - Committee member of Construction H&S, and
 - Member of the Executive Committee (EXCO).
 - o Professor Smallwood, one of our Directors has served as a previous Councillor on the 1st and 2nd Council; is a member of the Nominations Panel, Programme Accreditation (CM and CHS) and Construction Management Development Subcommittee;
 - o Mr Anton Krause serves on the Disciplinary Committee;
 - o Other roles required in SACPCMP committees include media interviews, attendance of formal functions arranged by the Council from time to time.
- ACHASM is further represented by myself as Executive Director, at the SACPCMP Presidents Forum - which was requested by the President of the SACPCMP, Mr Tjiamogale Eric Manchidi. Strategic focus areas that are discussed include legislation, skills development, transformation, and sustainability. From our perspective, the issue of H&S in each of the focus areas are being addressed. The essential issues in this forum that affect us further are the identity of work (IDOW), (scope of work), and fees, amongst others. The other recognised VAs who participate are those who represent the project and construction managers, and could have dual registration with other councils, including, amongst others: fellow H&S organisations; architects, engineers, quantity surveyors etc.
- ACHASM further participated in a number of public participation opportunities as key stakeholders:
 - o The construction industry development board (cidb) sessions on proposed standards in Primary Health Care (PHC), and H&S plans. Of note is that Professor John Smallwood and I developed the PHC standard for the Green Building Council, for social development, and
 - o Attendance of the draft Asbestos Abatement Regulations Workshop held by the Department of Labour.

My role on all of the committees I participate in and represent ACHASM, is to change hearts and minds, and I do believe we are slowly making changes even if they appear incredibly slow. H&S is being addressed by each of you in how you work, how you quote, how you portray yourself among colleagues and clients. If we all subscribe to the

value of ethics and professional practice, we will see change. The outcome of what is done is not always visible, but if each of us do something, it will make a difference to the lives of workers.

There are a number of values that are very important to me and by which I am non-negotiable, these include ethical and professional standards, and the development of people. There are many practising construction H&Ss who are not registered, and don't intend to ever register. While there are issues with registration with the SACPCMP, and practising as a professional in all the categories, our duty is to protect the sector, and being a registered person should bring status and recognition. Critical to status and recognition is education and development. I personally experience very little of either of the aforementioned from our fellow built environment professionals, and I believe this is because many practising H&S who purport to be professionals have very little experience and no formal qualifications, or at best two-week training in general H&S. However, how can we expect to receive respect, when programmes, schedules, construction drawings, and other construction activities are not understood? The subject of competent construction H&S persons is a constant topic at Council, on all committees. Currently the Programme Accreditation Committee recently inducted a panel of academics and practitioners to specifically accredit construction H&S programmes offered at tertiary institutions. The accreditation process will allow those entering the industry to follow a career path that will best prepare them for the sector, or bolster experience. Such accreditation further indicates that the sector is maturing. A range of programmes are being developed for candidate H&S Officers, and we all need to actively support these.

In conclusion, Professor Smallwood has drawn up an ACHASM needs questionnaire, that has been sent out by Jackie. All members should have received one, but not many have been returned. Please complete these questionnaires, as this will inform us how we can best serve your needs.

SACPCMP Voluntary Association feedback

6 March 2018

Ms Carla Botha, ACHASM Representative

Several topics were discussed at this meeting where the continuing professional development (CPD) Cycle discussions took up most of the meeting. The current cycle was completed in 2017.

Critical issues relating to CPD:

- Only 35% of the members were compliant with the 2012 - 2017 cycle. Members who have not complied have 2 months to submit all documents, and are likely to receive non-compliance letters;
- There are service providers who claim to have their training CPD accredited, but do not; This was only discovered after attempting to upload certificates. Members were asked to report these instances to the Council;
- VAs have an opportunity to submit 10 courses for CPD validation at no charge, to keep the pricing as low as possible;
- The Shape Shifters Magazine was discussed, and VAs were asked to submit articles for publication. They also want to profile registered persons

to change the misconception in the public domain regarding professionals;

- The Transformation Strategy was discussed and VAs were asked to provide information on any activities that they might have in this regard. The document was approved by the Council and more details will be provided in the implementation plan;
- Youth Activation (a student chapter initiative) and the placement of interns at host companies were discussed as the Council had received funding from Service SETA and the Construction SETA;
- CHS Statistics were discussed. Around 7000 applications have been processed to date. Council is struggling with the continuing high rate of CHSO applications. Of concern are the numbers of applications that have been submitted but have not paid their final fee for registration. Such individuals applications are likely to be archived if no contact is made, and they will have to restart the application from the beginning.

ACHASM Chapter

training and education update

Prof John Smallwood and Dr Claire Deacon

2018 events

It has already been a busy year for ACHASM! CPD points are available for most activities.

WESTERN CAPE CHAPTER

On 5 March 2018, Dévan Venter, Lead Engineer, PERI, based in Durban, presented 'Considerations essential to safe temporary works design and execution' at an ACHASM Western Cape Chapter evening event in Cape Town. The presentation focused on: what temporary works entail; important design considerations - support systems; importance of correct

implementation on site; examples of projects, and examples of dangerous practises on sites, and how to rectify same. The event was sponsored by Peri (primary sponsor), and Federated Employers Mutual Assurance (FEM).

GAUTENG CHAPTER

At an inaugural meeting of the ACHASM Gauteng Chapter, after the One-Day ACHASM Gauteng 2018 Construction H&S Symposium on 12 March, the Chapter committee was elected. The Chair is Mr Pieter Herbst, and the remainder of the committee will be announced on our website.

EASTERN CAPE CHAPTER (PE)

The interim Chair stood down due to

work commitments, and a new committee needs to be appointed. This is likely to happen through April and May.

OTHER ACTIVITIES: SYMPOSIA, SEMINARS AND WORKSHOPS

Symposia

The one-day ACHASM Gauteng 2018 Construction Health and Safety (H&S) Symposium was staged in Midrand on 12 March. Eleven presentations included: building information modelling and H&S, client baseline risk assessments; client contributions to construction H&S; Construction Industry Development Board (cidb) update; FEM update; H&S culture; medical surveillance; motor vehicle accidents (MVAs) during construction; SACPCMP update; SMEs / subcontractors and H&S; support work and formwork, and role of procurement in H&S. The Symposium was followed by an H&S Rant: "What keeps me awake at night"!

The Association of South African Quantity Surveyors (ASAQS), the

South African Council for the Project and Construction Management Professions (SACPCMP), and the South African Institute of Occupational Safety and Health (Saioh) accredited the symposium in terms of continuing professional development (CPD). The event was sponsored by FEM. Copies of the presentations are available on our website.

Seminar

Dr Claire Deacon and Professor John Smallwood presented a 17-module 'Designing for Construction H&S Seminar' in Bloemfontein on 13 March.

This is the first of a series of such seminars that will be presented nationwide. The ASAQS, the SACPCMP, and SAIOSH accredited the seminar in terms of CPD.

Forthcoming events

The premier event of the year in the form of the two-day ACHASM 2018 Construction H&S Summit, will be staged in Cape Town, from 1-2

October.

Day 1 will include: cidb update; contracts and H&S, and contract administration; FEM update; legal liability / precedents; medical surveillance; motor vehicle accidents (MVAs) during construction; SACPCMP update; SMEs / Subcontractors and H&S; support work and formwork; role of procurement in H&S, and traffic and work zone H&S during road construction.

Day 2 will feature workshops, amongst others, ISO 45001, and discussion sessions will address topical issues. The ASAQS, the SACPCMP, and SIOSH will accredit the summit in terms of CPD.

The 17-module 'Designing for Construction H&S Seminar' will be presented in Cape Town, Durban, East London, Johannesburg, and Port Elizabeth in the forthcoming months.

Please monitor the ACHASM Facebook account for upcoming events, as well as the website: www.achasm.co.za



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A close-up photograph of a man with brown hair and a beard, wearing clear UVEX safety glasses. He is looking intently at a lathe machine. The machine's tool bit is visible on the left, cutting a piece of metal, with bright sparks flying off. The background is a blurred industrial setting.

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