

MEDICAL SURVEILLANCE ON BUILDING AND MAINTENANCE SERVICES FOR 2019

PURPOSE

To submit for noting the medical surveillance conducted on the Building and structure for 2019

IDP STRATEGY AND OBJECTIVES

NATIONAL KPA 1 : GOOD GOVERNANCE AND PUBLIC PARTICIPATION		
GOALS	OBJECTIVES	STRATEGIES
1.1 Democratic, Responsible, Transparent, Objective and Equitable Municipal Governance	1.1.1 To ensure effective and efficient administration complying with its Legal Mandates	1.1.1.1 Provide administrative support for all Council Committees
		1.1.1.2 Strengthening Council Oversight through training on Legislation and Policies
		1.1.1.3 Development of a Corporate Strategy
		1.1.1.4 Development and review of policies that will lead to improved service delivery and legislative compliance
		1.1.1.5 Compliance with the Occupational Health and Safety Act and Compensation for occupational injuries and diseases

BACKGROUND

Medical surveillance was re started in 2015 and the building and structure has not completed their medicals for 2015 and 2016. Due to the hazards they are exposed to, medical surveillance should be conducted annually. Employees are exposed to noise, heat and dust. The focus for medical surveillance will be on audiometry, spirometry and eyes. Therefore X rays will be done on all high risk employees bi-annually. In 2017 the medical surveillance for building and structure was schedule for March 2019.

The carpentry shop has a noise level exceeding 85 db therefor hearing protect should be worn when entering the carpentry shop. This was according to the noise surveillance conducted in 2016. The following equipment produces the following noise levels:

Cross Cut Saw – the Cross Cut Saw produced a noise level of **98.4 dB**

Table Saw – the Table Saw produced a noise level of **96.6 dB**

Planer – the Planer produced a noise level of **94.8 dB**

Skill Saw – the Skill Saw produced a noise level of **96.9 dB**

The Occupational Health and Safety ACT No 85 of 1993 state that all employees exposed to noise levels above 85db shall undergo annually medical surveillance.

Table 1 Employees for Building and Maintenance

Pay no.	Surnames	Initials
38638	THELA	GA

42119	NCUBE	MD
45526	NGUBANE	R
58263	DUBE	O
59188	MABUZA	B
90012	ERASMUS	JJF
97078	THWALA	MS
100227	ZULU	EZ
2014155	ZONDI	MD
2003080	MBATHA	MA
2005046	NJAPHA	GN
2006039	NSELE	MJ
2007017	MTHEMBU	TJT
2007104	CELE	SC
2008016	KHUMALO	PJ
2009053	MKHIZE	TH
2010062	SHANDU	ZI
2014064	GEZA	JT
2014129	ZUNGU	WS
2015103	NGONGOMA	M
2016078	MNGOMEZULU	S
2018020	MNQOBOKAZI	SB
2018040	BIYELA	
2018041	DLAMINI	M A
2013069	MAZUBANE	SS
2018071	KHUMALO	MM

Table 2 Medicals conducted

Medical conducted	2017	2019
Total employees	27	26
Completed medical surveillance	27	20

Table 3 Fitness certificates

	2017	2019
Fit for duty	27	20
Unfit	0	6
Fit with limitation	4	

In 2017 four employees were fit with limitation. Three employees should not work in a noisy environment and one employee should not be exposed to dust, fumes or any substance that can affect his lungs.

Table 4 Unfit for duty

90012	ERASMUS	JJF
2014155	ZONDI	MD
2003080	MBATHA	MA
2010062	SHANDU	ZI
2015103	NGONGOMA	M
2013069	MAZUBANE	S

The above mention employees did not come for their medicals for 2019. Therefore they are not fit for duty until medicals has been conducted.

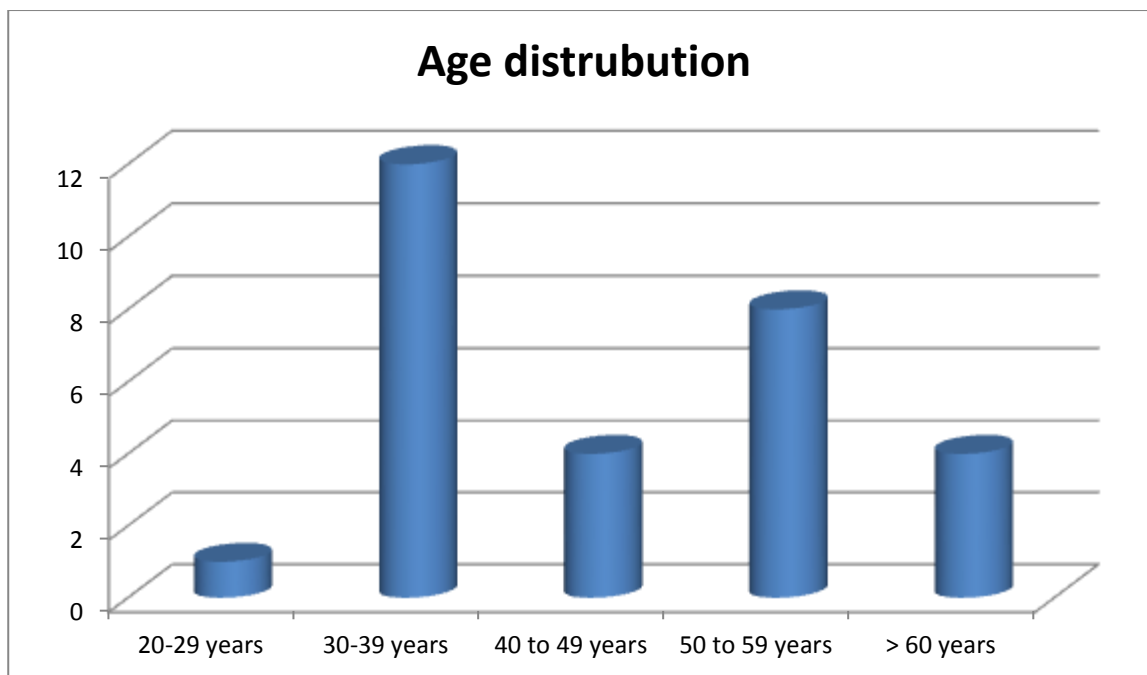
Table 5 Driving test

	2017	2019
DRIVERS	10	10
Fit to drive	9	9
Unfit to drive	1	1

All drivers were seen by the Occupational doctor. A Driver's medicals certificate is valid for one year. In 2017 one driver is not allowed to drive. Driver's certificates were given to the manager. In 2019 one driver did not come for medicals therefore unfit to drive.

Table 6 Age Distribution

> 30 years	1
30 -39 years	11
40 - 49 years	3
50 – 60 years	8
< 60 years	3



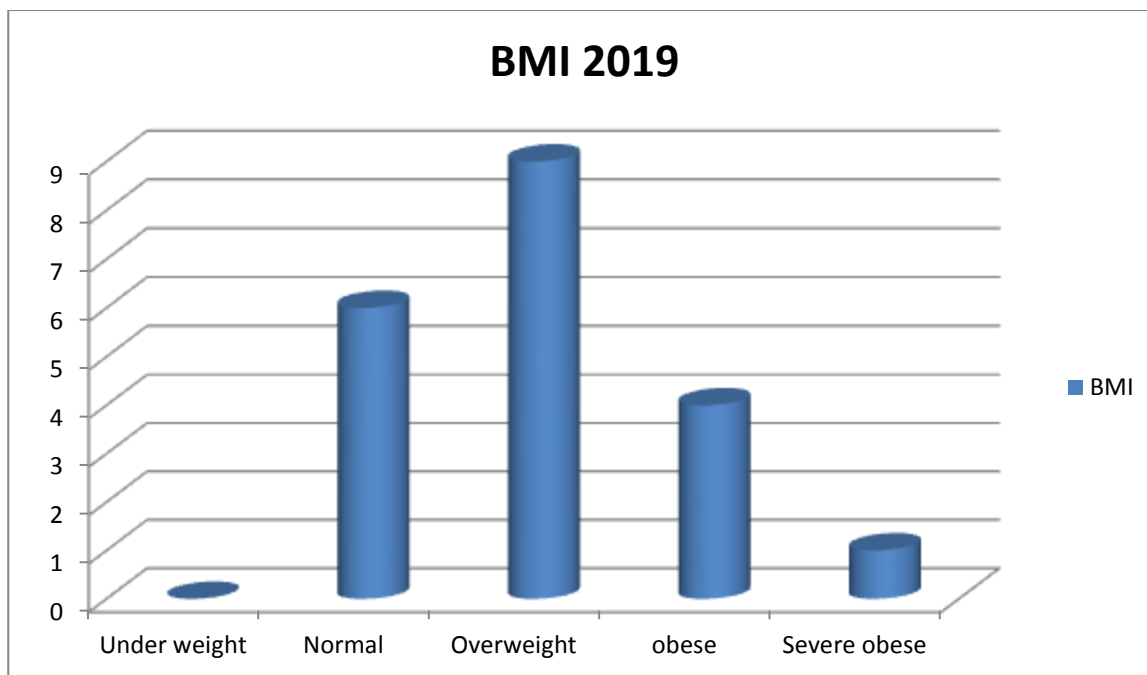
Graph 1 Age distribution

In 2017 the majority of employees were above 50 years. This was a concern with more aging employees in the department, therefore more abnormal medicals and more chronic conditions. However most employees are between 30 -39 years of age.

Table 7 Body Mass Index

BMI	2017	2019
Under weight	0	0
Normal weight	6	6
Over weight	10	9
Obese	9	4
Severe obese	2	1

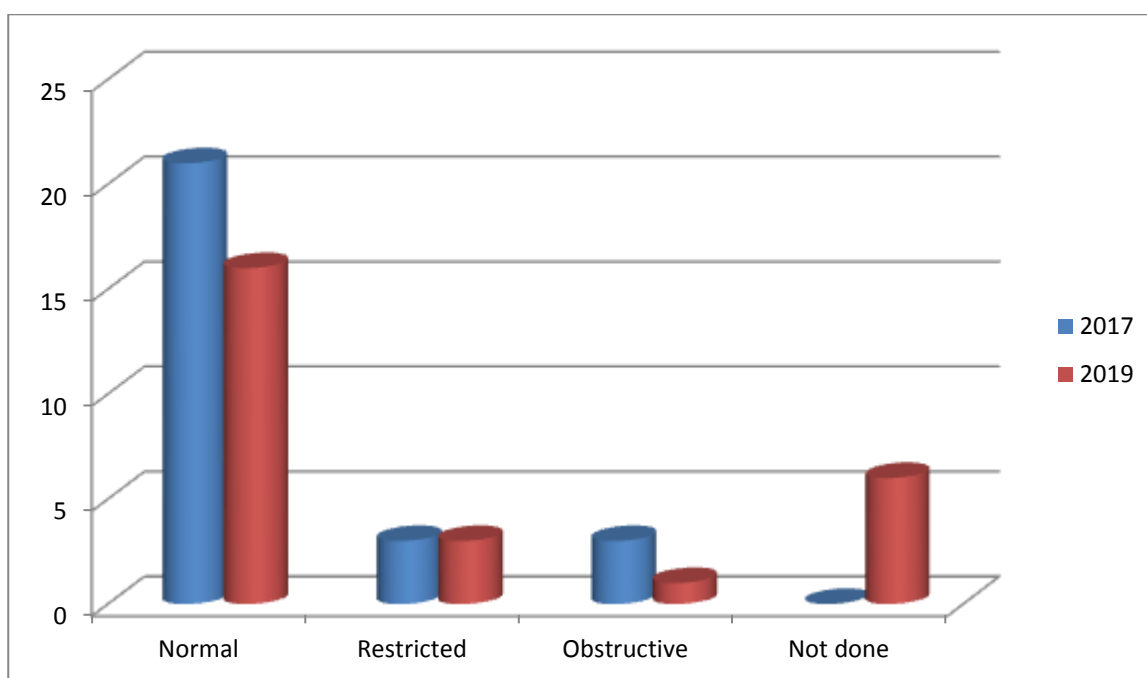
Body Mass index is an indication of what an individual needs to weigh. This is recorded as mass over length. This is an indication of the health of the department and can assist with prevention of chronic diseases. Most of the employees BMI's is falling in the overweight category. The concern is with employees falling in the obese and severe obese categories. These employees are more prone to chronic diseases.



Graph 2 BMI distributions in 2019

Table 8 Spiro grams

Spiro gram	2017	2019
Normal	21	15
Restricted Spiro	3	4
Obstructive Spiro	3	1
Not done	0	6



Graph 4 Spiro gram

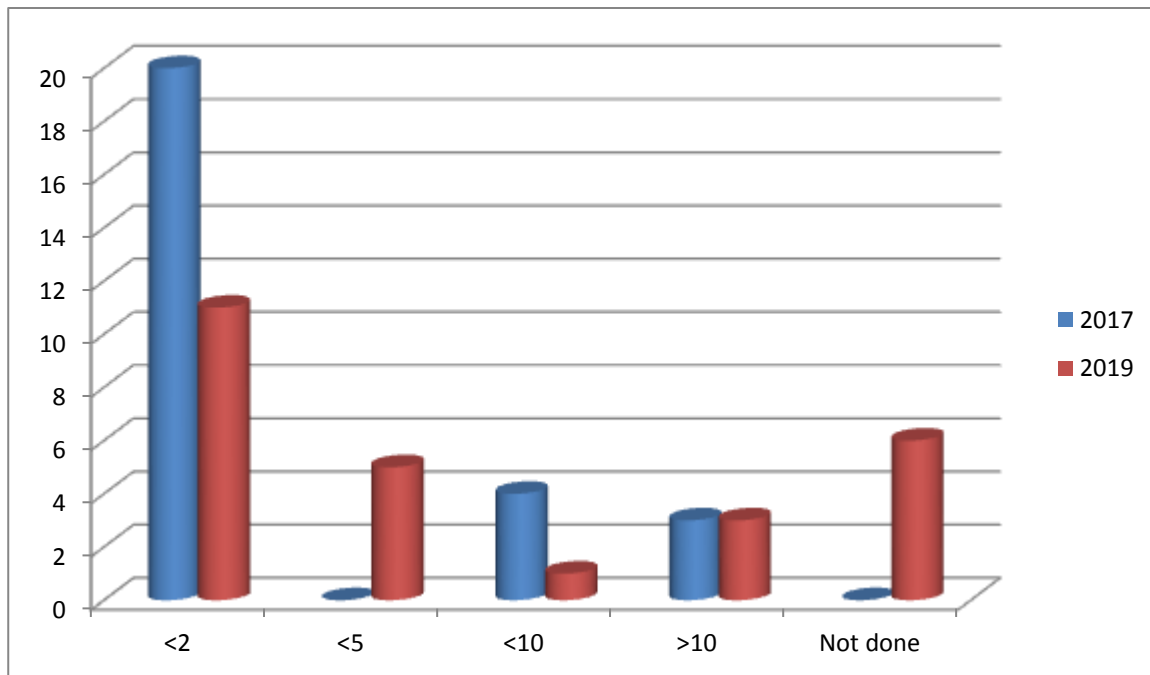
2017 twenty-one Spiro grams conducted was normal. Three were restricted and three were obstructive. Four of the employees had abnormal Spiro with employment. One employee Spiro gram did not changes since 2015 and one employee Spiro gram was done for the first time in 2017. Spiro gram is one method of monitoring the employee's respiratory health. In 2019 15 Spiro grams were normal, 4 restricted and 1 mildly obstructive. While 6 Spiro grams were not done due to employees not coming for medicals.

Table 7 Audiometry

PHL %	2017	2019
<2 %	20	11
<5 %	0	5
<10 %	4	1
> 10%	3	3
Not done	0	6

The audio gram is to assist with hearing conservation. In 2017 20 employees have normal hearing. Four employees have PHL of above 5% but below 10%. Two employees PHL improved from previous audio gram and two deteriorated. Three employees had PHL above 10%. Two employees PHL improved and one deteriorated. **The use of hearing protection is of utmost important and the employee working near noise should always use hearing protection.** Therefor the three employees are fit with limitation, not working in a noisy environment. This should be seen in the context that the employees are aging and this will have an effect on their hearing therefor this high PHL are not due to NIHL (Noise induce hearing loss) therefor not due to the noise levels at work. However to protect their hearing these three employees should not be exposed to noise.

In 2019 16 employees PHL were below 5%. One employee's PHL were under 10% and 3 above 10%. 6 employees did not come for medicals in 2019.



Graph 5 PHL

Table 8 Eye test

Eye test	2017	2019
20/25	26	20
20/40	1	0
Not done	0	6

Normal eye sight is 20/25. One employee was referred in 2017. In 2019 6 employees did not come for medicals.

Table 9 Chest X-rays

Chest X rays	2017
Normal	10
Not done	15
Abnormal X rays	2

Due to the nature of their work and their exposure to chemicals bi annual X rays will be conducted. Employees did not go for X rays. One abnormal X rays was due to previous illness. One employee was referred.

Table 10 chronic conditions

	2017	2019
Hypertension	9	3
Diabetes	4	1
Asthma	2	2
Epilepsy	1	0
Medicals not done	0	6

In 2017 the department where most employees are over 45 and has a high BMI has not a very high incidence of chronic disease. Two employees suffer from Hypertension and Diabetes.

In 2019 there is only 3 employees with Hypertension, however 6 employees did not do their medicals and therefore can alter the numbers.

It is very important that hearing conservation is implemented at all times. Where employees are exposed to fumes and dust face mask should be worn. Exposure should be limited and where possible in well ventilated areas. Employees should be encouraged to do annually medical surveillance and go for X rays when asked to do so.

RECOMMENDED THAT:

that the Medical surveillance for 2019 on the building and structures be noted.