

Dear Minister Mkhize

26 May 2020

Health workers commend the actions taken by the National Department of Health to flatten the curve during the COVID-19 pandemic. Your science-based decisions helped to protect our country against this infectious disease.

The National Department of Health [COVID19 Occupational Health and Safety Resources](#) and [the notice released on 20 March 2020](#) on compensation for occupationally-acquired novel coronavirus disease (COVID-19) under compensation for Occupational Injuries and Diseases Act, 130 of 1993, are welcomed by health workers. However, as health workers, we are dismayed that the Policy on Occupational Health for Health Workers in respect of HIV and TB developed in 2016 has still not been released or implemented, leaving our health workers unprotected during health emergencies.

We realise that you are fully aware of the devastating impact of TB on our health workforce, including many of us who endured suffering due to occupational TB. Health workers are six times more likely to be hospitalised for drug-resistant TB than the general public. TB infections and disease could be prevented by the implementation of adequate infection prevention and control measures, appropriate screening and the provision of TB preventive therapy for those at increased risk. Without provision of adequate personal protective equipment (PPE), health workers' risk of contracting infectious diseases is even higher, as they are now also called on to manage COVID-19. As health workers, we take pride in our jobs and are committed to serving the public and supporting the Department of Health to deliver on commitments made at the United Nations High-Level Meeting on TB and to respond to emerging public health crises. Yet, more must be done to ensure that we are safe in our workplaces. The preparedness of our health system to respond to the COVID-19 pandemic largely rests on health workers, but without adequate training, PPE and other necessary support, our health workers in direct patient care are already becoming sick and some have even lost their lives.

It is therefore with urgency that we call on the National Department of Health to:

1. Expedite the finalisation and release of the policy on Occupational Health for Health Workers In respect of HIV and TB that was submitted by the National Policy Steering Group at the end of 2016 already. Fast-track a similar policy regarding COVID-19, or incorporate relevant provisions in the above policy. COVID-19 additions should not delay the urgent release of the TB and HIV policy.
2. Fast-track the development and distribution of communication and education initiatives aimed at preventing nosocomial and occupational TB, HIV and COVID-19.
3. Create community agency through engagement with affected communities, patients, health worker and union representatives and civil society organisations regarding content and distribution.
4. Ensure adequate training for all CHWs involved in COVID-19 care, including information regarding transmission, safe use of PPE, testing and the process for contact tracing.

5. Empower and capacitate CHWs to teach their communities about appropriate preventive measures, including the safe use of cloth masks, and care seeking when ill. COVID-19 is an urgent priority, but TB and HIV should always be incorporated in all infectious disease activities.
6. Implement measures to ensure that all health workers, including historically marginalised CHWs, know their rights as contained in the above policy and related documents, specifically the Occupational Health and Safety Act and the Compensation for Occupational Injuries and Diseases Act.
7. In many health facilities, medical, allied health and nursing students assist with frontline patient care. Please provide clarification through the office of the Compensation Commissioner on whether students fall under the definition of 'employees' by the COID Act, and would be eligible for compensation should they fall ill.
8. Monitor compliance by employers to ensure these rights are protected, and that health workers have ready access to the required protective measures, screening, treatment and income security, and if applicable, compensation.
9. Provide adequate PPE for all health workers as mandated by the Occupational Health and Safety (OHS) Act of 1993. Specifically, all health workers require surgical masks for COVID-19 screening and N95 respirators for direct COVID-19 management and where health workers are exposed to TB or possible TB.
10. Ensure that health facilities meet standards for infection prevention including implementation of managerial, administrative and environmental controls, in addition to PPE.

We thank you for your courageous leadership and look forward to continuing the battle against these dreadful pandemic infections together, safely!

Signed:

Organisations - updated as of 27 May

Cancer Alliance

Desmond Tutu TB Centre (DTTC)

Democratic Nursing Organisation of South Africa (DENOSA)

Free of TB

Masinedane

Médecins Sans Frontières (MSF) South Africa

People's Health Movement South Africa (PHM-SA)

Public Health Action Team (PHACT)

Public Service Accountability Monitor (PSAM)

Rural Health Advocacy Project (RHAP)

SECTION 27

Sexual Reproductive Justice Coalition (SRJC)

Studies in Poverty and Inequality Institute (SPII)

TB HIV Care

TB Proof

The South African National Tuberculosis Association (SANTA)

The South African Care Workers Forum

Treatment Action Campaign (TAC)

Wote Youth Development Projects

WACI Health

**Abbreviated references:**

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5. Health Systems Trust. The National Healthcare Facilities Baseline Audit, 2012. <https://www.health-e.org.za/wp-content/uploads/2013/09/National-Health-Facilities-Audit.pdf> (accessed 20 February 2018).
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For more information about this position statement contact TB Proof at [ingrid.tbproof@gmail.com](mailto:ingrid.tbproof@gmail.com). To view videos of healthcare workers who had occupational TB and also share information on how others can protect themselves, visit <http://www.tbproof.org/areyoutbproof/>.