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Department:
Community Safety and Transport Management
North West Provincial Government
REPUBLIC OF SOUTH AFRICA



HEALTH AND PRODUCTIVITY MANAGEMENT POLICY

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1. PREAMBLE

WHEREAS;

The Department of Community Safety and Transport Management through its broader Employee Health and Wellness Programmes acknowledges the need to provide its employees with integrated policy measures for the provision of management of Health and Productivity Management;

AND WHEREAS;

The policy seeks to make provision for all aspects of workers health, including primary prevention of occupational hazards, promotion and protection of health at work, employment conditions and a better response from health systems to workers health;

NOW THEREFORE.

This policy seeks to operationalize the National Employee Health and Wellness Strategic Framework (EH&WSF) for public service with integrated data from the domains of health promotions, disease prevention , care management, occupational health, disability management and organizational dynamics.

2. PURPOSE AND OBJECTIVES

- 2.1 To promote and protect the health and wellness of all employees in the workplace through effective primary intervention measures and access to health services.
- 2.2 To focus on areas of Disease Management, Mental Health Management, Injury of Duty and Incapacity due to ill-health and Occupational Health Education and Promotion.
- 2.3 Reduce healthcare cost and / or improve quality of life for individual with chronic conditions by preventing or minimizing the effects of disease, or chronic condition.
- 2.4 Help employees manage their lives successfully, and provide them with emotional and spiritual resilience to allow them to enjoy life and deal with distress and disappointment.
- 2.5 Reduce absenteeism from work, abuse of sick leave, injuries on duty, ill-health retirements, incapacity leave, occupational diseases and health risks.

- 2.6 Enhance the knowledge level of individual, help catalyze and reinforce behaviour change while intentionally leading to improve health and productivity.
- 2.7 Ensure that the benefits of this policy are offered in a fair, equitable and consistent manner.
- 2.8 To ensure that the Department has adopted Health and Productivity Management policy.
- 2.9 The Health and Productivity Management policy defines circumstances and conditions under which short / long temporary incapacity leave, ill-health retirement, leave for occupational injuries and disease, is granted, and
- 2.10 As far as possible, how will employee receive emotional and psychological support through Employee Assistant Programme and Chaplaincy?
- 2.11 Give effect to the directives on leave of absence in the Public Service, which authorises the development of special leave policy.
- 2.12 Provide direction as to when certain intervention events may be regarded as part of an employee's official duties that will not require them to apply.

3. SCOPE AND APPLICATION

- 3.1 This policy will apply to all employees appointed in the Department of Community Safety and Transport Management in terms of the Public Service Act, 1994 as amended.
- 3.2 Focus on all levels of employment senior and executive management, middle managers, operational and technical staff as well as employees of the lowest of the organizational occupational ladder.
- 3.3 Respond to the needs of designated groups such as women, older persons, people living with disability and people infected affected by HIV and AIDS, Coronavirus.

4. LEGISLATIVE FRAMEWORK

- 4.1 Constitution of the Republic of South Africa Act, 1996
- 4.2 Public Service Act, 1994 as amended
- 4.3 Public Service Regulation of 1996 as amended
- 4.4 Basic Condition of Employment Act, 1997 (No. 75 of 1997)
- 4.5 Employment Equity Act, 1998 (No. 55 of 1998 and No.4 of 1999)
- 4.6 Labour Relation Act, 1995 (No. 66 of 1995)
- 4.7 Compensation for Occupational Injuries and Diseases Act, 1993 (No.130 of 1993)
- 4.8 Occupational Health and Safety Act, 1993 (No. 85 of 1993)

- 4.9 Mental Health Care Act, 2002 (No. 17 of 2002)
- 4.10 Disaster Management Act, 2002 (No. 57 of 2002)
- 4.11 Promotion of Equality and Prevention of Unfair Discrimination Act, 2000 (No. 4 of 2000)
- 4.12 PSCBC Resolution No.3 of 1999, section (7.1-7.3) which provides for special sick leave due to injury on duty.
- 4.13 PSCBC Resolution 7 of 2000, section (7.6) sub-section (a-c) which provides for Leave for Occupational injuries and diseases.
- 4.14 PSCB Resolution No.5 of 2001, section (7.6) sub-sections (a-c) which provides for Leave for occupational injuries and diseases.

5. ABBREVIATIONS AND DEFINITIONS

DoH	" means Department of Health";
DoEL	" means Department of Employment and Labour";
HOD	"means the Head of Department or his/her delegated authority or his/her designated office responsible for leave related matters and/or investigations
SMS	"means Senior Management Services";
MMS	"means Middle Management Services";
HPM	"means Health and Productivity Management";
EHWSP	"means Employee Health and Wellness Strategic Plan";
EH&W	"means Employee Health and Wellness";
NDP	"means National Development Plan";
HRM	"means Human Resource Management";
HRD	"means Human Resource Development";
OD	"means Organisational Development";

PSCBC	"means Public Service Co-ordinating Bargaining Council";
AU	"means African Union";
COIDA	"means Compensation for Occupational Injuries and Disease Act, no.130 of 1993";
GEMS	"means Government Employees Medical Scheme";
HIV	"means Human Immune Deficiency Virus";
STI	"means Sexual Transmitted Infections";
PILIR	"means Policy on Incapacity Leave and Ill-Health Retirement";
SHERQ	"means Safety, Health, Environment, Risk and Quality

6. DEFINITIONS

- 6.1 **Department** "means Department of Community Safety and Transport Management:"
- 6.2 **Head of Department** "means the incumbent of post mentioned in the second column of schedule 1, 2 and 3 of PSA;"
- 6.3 **Employer** "means the Head of Department or hi/her designated office which will be responsible for handling and investigating of incapacity leave applications and ill-health retirement applications;"
- 6.4 **Employee** "means all employees of the Department employed in terms of the Public Service Act of 1994, the Basic Conditions of Employment Act of 1998, as amended and includes contract workers, interns, volunteers and prospective employees;"
- 6.5 **Employee Health and Wellness** is a programme intended to enhance productivity of the employees and which hinges upon four pillars i.e. HIV, TB and STIs, Health and Productivity Management, Safety, Health, Environment, Risk and Quality, and Wellness Management.
- 6.6 **Health and Productivity Management** "means the integration of data and services related to all aspects of employee health that affect work performance. It includes measuring the impact of targeted interventions on both employee health and productivity;"
- 6.7 **Employee Health and Wellness Coordinator** "means an employee tasked with the responsibility to coordinate the implementation of health and wellness programme;"

- 6.8 **Disease Management** “means a concern with the common chronic illnesses and reduction of future complications associated with diseases. It increase knowledge of diseases, promotes essential attitude change, reduces stigma and discrimination against certain illness and promotes care and support for vulnerable employees”.
- 6.9 **Chronic Illness** “means a group of health conditions that last a long time and can be genetic;”
- 6.10 **Mental Health** “means a basic component of positive health and wellbeing. It is necessary to help management of life successfully, and provides emotional and spiritual resilience to allow enjoyment of life in dealing with distress and disappointment.;
- 6.11 **Incapacity leave** “means that it is not an unlimited number of additional sick leave days at an employee’s disposal. Incapacity leave is additional sick leave granted conditionally at the employer’s discretion, read with the *Policy and Procedure on Incapacity Leave for Ill-health Retirement* determined by the Minister for Public Service and Administration in terms of the Public Service Act, 1994, (hereafter referred to as PILIR);”
- 6.12 Temporary incapacity leave “ means a benefit that can be applied in the event where normal sick leave has been exhausted in the three year sick leave cycle. It is a management process categorized into two types:
- Short temporary incapacity leave- this when the period of incapacity leave that is requested is twenty nine (29) days or less.
 - Long temporary incapacity leave – this is when one applies for thirty (30) or more days of incapacity leave
 - Manage and investigate the employee application, with the assistance of the Health Risk Manager, in terms of Policy and Procedure on Incapacity Leave and Ill-Health Retirement (PILIR)
 - The employer will notify the employee of its findings and take appropriate action according to its findings.
- 6.13 **Ill-Health retirement** “means when an employee becomes permanent unable to work due medical reasons and injuries, and he / she could be terminated from public service on medical grounds. Either the Employer or employee could initiate an ill-health retirement process should be evident that the employee has become permanently unable to perform his/her occupation through Policy and Procedure on Incapacity Leave and Ill-Health Retirement;”

- 6.14 **Leave for Occupational Injuries and Diseases** “means a special leave granted to an employee who meet with an accident and contract diseases arising out of and in the course of his/her employment resulting to a personal injury for which medical treatment is required or death”;
- 6.15 **Occupational Injuries** “means an injury sustained by an employee in the course of his/her employment or job function;”
- 6.16 **Occupational Diseases** “means is a disease contracted by an employee in the course of his / her job function his/her employment;”
- 6.17 **Remuneration** “means the employee’s annual basic salary”;
- 6.18 **Reasonable Accommodation** “means any modification to a job or the work environment that will enable a qualified applicant or employee with a disability (temporary or permanent) to participate in the application process or perform essential job function”.
- 6.19 **Health and Safety Committee** “means a committee that initiates, develops, promotes, maintains and reviews measures to ensure the health and safety of employees at workplace. The employer shall in respect of each workplace where two or more health and safety representatives have been designated, establish on or more health and safety committee (s)”
- 6.20 **Peer Educators** “means an employee who is trained in working with his her peers, sharing information and guiding a discussion using his / her peer experience.

6 PRINCIPLES

This policy is underpinned by the following principles

- 6.9 Confidentiality** , the employer shall in accordance with the constitutional rights to privacy, the Code of Conduct in the Public Service Regulations treat at all times any information regarding the medical condition of an employee with the necessary respect and confidentiality. Such information may therefore not be disclosed to any other person(s) not authorized to receive such information. If an employee discloses such confidential information of one employee to any other unauthorized person, it must be viewed in a serious light and disciplinary steps against the transgressing employee should be taken
- 6.10 Human dignity, autonomy, development and empowerment**
- 6.11 Respond** to the needs of designated groups such as women, older persons, people with disability and people living with HIV.

7 POLICY STATEMENT

The Department of Community Safety and Transport Management in responding to Health and Productivity Management in the Public Service world of work which seeks to strengthen and improve the efficiency of the existing services and infrastructure by mitigating the impact of diseases, ensure that the reduction of barriers to diseases management remains a strategic priority within all level of occupations among the employees, their families, business partners, contractors.

8 The Department will through the appropriate mechanism, ensure that:

- 8.1 Applying forms for incapacity leave and ill-health retirement are submitted for all absences;
- 8.2 Applying forms for occupational injuries and diseases are submitted to the Compensation Commissioner as prescribed in the Act;
- 8.3 All outstanding applying leave forms are followed up and resolved
- 8.4 There will be no backlog in respect of incapacity leave and ill-health retirements transactions for each leave cycle.

9 STATUTORY AUTHORIZATION

- 9.1 The Constitution of the Republic of South Africa 1996, requires that everyone has the right to safe environment.
- 9.2 The Public Service Regulations 2001, as amended in 2006, requires the Head of Department to establish and maintain a safe and healthy work environment for employees of the department.
- 9.3 The Occupational Health and Safety Act, 1993 requires the employer, employees and their clients to take responsible care and maintain a working environment that is healthy, safe and free from hazards and risks.
- 9.4 The Occupational Health and Safety Act, 1993 requires the Head of Department to put measures in place /develop systems that will continuously maintain and reduce occupational health and safety hazards in the workplace.
- 9.5 The Basic Conditions of Employment Act, 1997 prohibits employers from requiring or permitting a pregnant employee or employee who is breast feeding to perform work that is hazardous to the health of the employee or he child.

10 ROLES AND RESPONSIBILITIES

10.1 The Head of Department is responsible to:-

- a) HPM in the workplace which will encompass the prevention and management of chronic diseases, infectious diseases, occupational injuries, disability and occupational diseases so as to reduce the burden of disease by early entry into disease management programs in order to enhance productivity in the Department
- b) Mental health in the workplace is address by
 - i) Providing support options which are confidential and non-stigmatization;
 - ii) A review employment practice to ensure that staff with a history of mental health problems is not excluded.
- c) Injuries on duty, occupational diseases, incapacitated employee and ill-health retirement are managed within the legislative prescripts.
- d) Managers ensure that targeted employees must attend training on Health and Productivity Management training
- e) Systems/procedures/ delegations are adapted to establish a fertile environment for implementation and the management of Health and Productivity Management programmes.
- f) Support should be provided to employees who truly need such support through Health and Wellness programmes i.e. to take action where necessary e.g. to adapt an incapacitated employee's work when so advised.
- g) The management of health programmes is changed to promote both employee's health and to enhance work performance and the Return on Investment.
- h) Appoint a designated senior manager to champion Health and Productivity Management programmes in the workplace.
- i) Allocate human and financial resource to ensure successful implementation of the policy and programmes.
- j) ensure management of health programmes promotes both employees health to enhance

10.2 The Designated Senior Manager (Director: HRM) is responsible to:-

- a) **Develop capacity building programmes**
 - i) Promote competence development of practitioners
 - ii) Improve capacity development of auxiliary functions (Organizational Development, HR, International Relations, Skills Development and Chang Management etc.).
 - iii) Assist with HPM promotion at an organisational level

b) Form organisational support initiative

- i) Establish an appropriate organisational structure for HPM
- ii) Ensure Human Resource planning and management system.
- iii) Develop integrated HPM information management system
- iv) Provide physical resources and facilities.
- v) Ensure financial planning and budgeting
- vi) Mobilize management support.

c) Development Governance and Institutional Initiative

- i) Establish an HPM steering Committee
- iii) Obtain Stakeholder commitment and development.
- iv) Develop and implement an ethical framework for HPM
- v) Develop and maintain an effective communication systems
- vi) Develop and implement management standards for HPM
- vii) Develop and implement a system for monitoring, evaluation, and impact analysis.

d) Develop Economic Growth and Development Initiatives

- i) Mitigate the impact of Diseases on the economy
- ii) Ensure responsiveness to Government's Programme of Action.
- iv) Ensure responsiveness to Millennium Development Goals.
- v) Integrating NEPAD, AU and Global programmes for the economic sector.

10.3 Health and Productivity Management Coordinator is responsible to:-

- a) Coordinate the implementation of HPM Policy, projects and interventions;
- b) Ensure employee's registers early into Diseases Management Programme in order to manage the effects of illness to improve their wellbeing and enhance productivity;
- c) planning, monitoring and manage HPM according to strategies and policies
- d) Analyse and evaluate data and communicate information, statistics and result to relevant stakeholders
- e) Ensure implementation of the allocated budget is utilized within the supply chain management procurement process.
- f) Act as spokesperson for Health and Productivity Management

10.4 Health and Productivity Management Practitioners will be responsible to:-

- a) implement of HPM Policy, projects and interventions

- b) coordinate/ administer COIDA and PILIR applications within the applicable policies and procedures;
- c) coordinate the employees registration to the planned Disease Management Programme

10.5 Employee Health and Wellness Committee is responsible to:-

- a) making inputs regarding Policy matters and implementation procedures;
- b) reviewing the organizational environmental health and safety protocols and make recommendation to the HoD;
- c) Report and make representation of incident , accident report in the workplace

10.6 Supervisor is responsible to:-

- a) ensure that employees adherence to the policy
- b) providing an enabling environment with open communication channels concerning Health and Productivity; and
- c) Attend and encourage employees to participate in the activities related to Health and Productivity in the workplace.

10.7 Employee should

- a) Ensure that he / she register early into disease management programs in order to manage the disease and enhance productivity in the Department.
- b) Participate in care and preventative programmes to minimize the effects of a disease, or chronic condition through integrative care and preventive care.
- c) Take reasonable care for the health and safety of him / herself and of other persons who may be affected by his / her acts or omissions.
- d) If involved in any incident which may affect his/her health or which has caused an injury to him / herself, report such incident to his / her employer or his / her health and safety representative, as soon as practicable.
- e) Comply with standards as set by legislation, regulations, SABS, ISO and DoL.

10.8 Occupational Health and Safety Committee

- a) Review the effectiveness of health and safety measures.
- b) Identify potential causes that influence productivity in the workplace.

- c) In collaboration with employer, examine that cause of accidents at workplace and investigate complaints by an employee relating to employee's health and productivity at work.
- d) Make representations to the employer on general matters affecting the health and productivity of the employees at the workplace.
- e) Inspect the workplace, including any article, substance, plant, machinery or health safety equipment's at the workplace with a view to improve the health and productivity of employees, as such intervals as may be agreed upon with the employer, provided that the employer is notified in advance and may be present during inspection.
- f) Attend meetings of health and safety committee of which they are members, in connection with any of the above functions.
- g) Act as focal point for the distribution of evidence-based and generic health and productivity information in the workplace.
- h) Take initiative to implement awareness activities and communicate health and productivity information in the workplace.
- i) Act as referral agent for employee to relevant internal or external health and productivity support programmes.
- j) Be involved with the identification of health risks in the workplace.
- k) Support the HIV and AIDS and TB Management programmes in distribution of condoms and femidoms in the workplace.
- l) Support staff training with regard to employee health, productivity and wellness
- m) Submit reports of activities to the HPM coordinators

10.9 The Health and Safety Committee

- a) Make recommendation to the employer regarding policy matters and implementation procedures, including any matter affecting the wellness of employees.
- b) Discuss any incidents at the workplace or section thereof in which or in consequences of which any person was injured, became ill or die, and may in writing report on the incident to an inspector
- c) Keep records of any recommendations made to an employer and of any report made to an inspector.
- d) Involves Labour Relations Unit
- e) Serve as vehicle of communication to promote wellness initiatives within the workplace.

10.10 The Labour Union Representative

- a) Represent employees in the workplace.
- b) Ensure that employer fulfil the mandate of health and productivity legislation in order to optimize health and productivity in the workplace.
- c) Sit in on health and productivity steering committee meetings.
- d) Make representation to the employer on agreed issues affecting the Health and Productivity of employees in the workplace.

11 MONITORING AND EVALUATION

The Policy will be monitored and evaluated to assess the appropriateness of the implementation, impact and result-based on the employee's wellbeing, performance and productivity.

12 POLICY REVIEW

Regular review of the progress on Health and Productivity programmes should be conducted. The reviews should be conducted annually through departmental reports. These reviews will inform implementation, monitoring and evaluate and future planning. This policy will be reviewed and amended as an when a need arises to ensure that it is aligned to the prevailing legislations.

13 RELATED POLICIES

Effective implementation of this policy requires that it be read together with other Departmental Policies.

14 COMMENCEMENT OF THE POLICY

This policy shall be implemented by the Department with effect from the date of approval and signed by the Acting Head of Department.

APPROVED / NOT APPROVED



**MR MOLEFI MORULE
ACTING HEAD OF DEPARTMENT**

DATE

15/11/22