

SASOHN Newsletter

August 2025



SASOHN
SOUTH AFRICAN SOCIETY
OF OCCUPATIONAL HEALTH
NURSING PRACTITIONERS

From the desk of the President
Joan Visser 1

Mental Health for Workers in South Africa and
the Role of the Occupational Health Practitioner 2
Joan Visser

Guidance Note for the Prevention and
Management of Non-Communicable Diseases
and Mental Health Disorders in the South 3
African Mining Industry
Joan Visser

Difference Between a Medical and a Health
Assessment - *Johanet Uys* 4

New Noise Exposure Regulation, 2024 – What
is STS? - *Lindie Jansen van Rensburg* 5

Physical Agents Regulations, 2024 - what is
new? 6

Fatigue Management in Occupational Health
Settings: A Literature Review - *N. Ndlovu* 7

SASOHN Mpumalanga Regional Meeting 2025:
Thriving Together in Occupational Health 8
Joyce Mabuza

Feedback from survey in Newsletter #1/2025 9

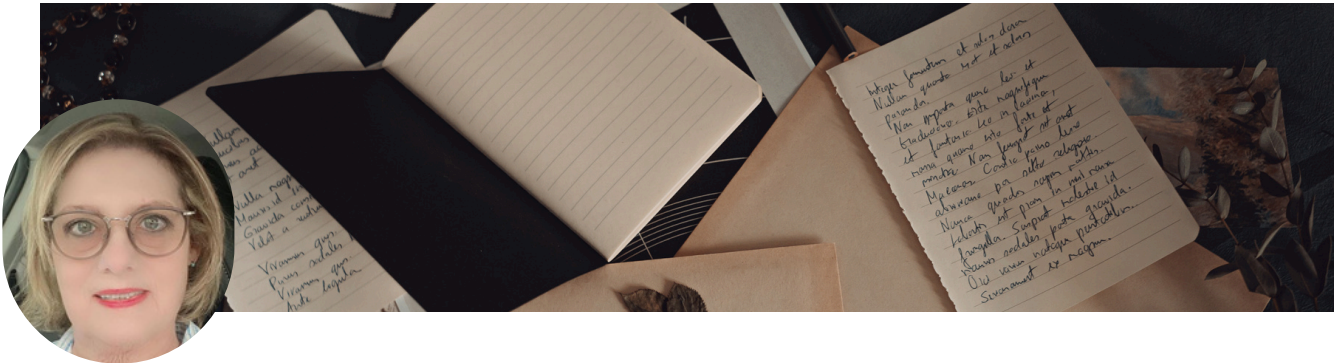
Fun^{ny} Page 10



FROM THE DESK OF THE PRESIDENT



SASOHN
SOUTH AFRICAN SOCIETY
OF OCCUPATIONAL HEALTH
NURSING PRACTITIONERS



Dear SASOHN Members,

As we navigate the evolving landscape of occupational health, I am excited to share some significant updates and opportunities with you. The introduction of the new Noise Exposure Regulation and the Physical Agents Regulation marks a pivotal moment in our field. These regulations will play a crucial role in enhancing workplace safety and health standards.

The Noise Exposure Regulation (Regulation No. 1234/2025) is designed to protect workers from the harmful effects of excessive noise in the workplace. Prolonged exposure to high noise levels can lead to permanent hearing loss and other health issues. This regulation sets clear guidelines for employers to monitor and control noise levels, ensuring a safer and healthier work environment for all employees. It is essential for us to understand the implications of this regulation and how we can effectively implement it in our respective workplaces.

Similarly, the Physical Agents Regulation (Regulation No. 5678/2025) addresses the risks associated with exposure to physical agents such as vibration, radiation, and extreme temperatures. These agents can have serious health consequences if not properly managed.

The regulation provides a framework for identifying, assessing, and controlling these risks, thereby safeguarding the well-being of our workforce. As occupational health professionals, it is our responsibility to stay informed about these regulations and ensure their successful implementation.

To support you in this endeavor, we have organized two exciting webinars. The first webinar, "Noise Exposure Regulation Workshop," will provide valuable insights into the key aspects of the regulation, including compliance requirements and best practices for implementation. This session will be an excellent opportunity to learn from experts in the field and gain practical knowledge that can be applied in your workplace.

The second webinar, "Auditors Training for Existing Auditors," aims to clearly outline the process to be followed by both the auditor and the auditee during an audit. This workshop is designed to:

- Promote alignment and consistency in audit practices.
- Ensure accurate interpretation of the audit tool.
- Support a common understanding of roles and responsibilities throughout the auditing process.

As we embrace these advancements, let's also remember

to take care of ourselves and our loved ones. The cold and wet weather has set in, and some areas are experiencing flooding. It is important to stay safe and prioritise our well-being during this time. Make sure to take necessary precautions, stay informed about weather conditions, and support each other in any way we can.

Thank you for your continued dedication to occupational health and safety.

Together, we can make a positive impact on the well-being of our workforce and contribute to a safer and healthier future.

Warm regards

Joan Visser



Mental Health for Workers in South Africa and the Role of the Occupational Health Practitioner

Report by: Joan Visser

In South Africa, mental health in the workplace is becoming increasingly important. The pressures of modern work environments, combined with socio-economic challenges, have led to a rise in mental health concerns among workers. Addressing these issues is crucial for the well-being of employees and the overall productivity of organizations.

Mental health is a vital component of overall health. It affects how individuals think, feel, and act, influencing their ability to handle stress, relate to others, and make decisions. In the workplace, poor mental health can lead to decreased productivity, increased absenteeism, and higher turnover rates. It can also contribute to physical health problems, creating a cycle of poor health and reduced work performance.

Workers in South Africa face unique challenges that can impact their mental health. High levels of unemployment, economic instability, and social inequality can create significant stress. Additionally, workplace issues such as job insecurity, long hours, and high demands can exacerbate mental health problems. These factors highlight the need for effective mental health support systems within organizations.

Occupational Health Practitioners (OHPs) play a critical role in promoting mental health in the workplace. They are responsible for identifying and addressing health risks, including mental health issues, within the work environment.

OHPs can implement various strategies to support workers' mental health, such as:

- **Risk Assessment and Management:** OHPs conduct assessments to identify potential mental health risks in the workplace. They develop and implement management plans to mitigate these risks, ensuring a safer and healthier work environment.
- **Health Promotion and Education:** OHPs provide education and training to employees and management on mental health issues. This includes raising awareness about the importance of mental health, recognizing signs of mental health problems, and promoting healthy coping strategies.
- **Support and Counselling Services:** OHPs offer support and counselling services to employees experiencing mental health issues. They provide a confidential space for workers to discuss their concerns and receive professional guidance.

- **Policy Development:** OHPs assist in the development and implementation of workplace policies that promote mental health. This includes creating policies on stress management, work-life balance, and anti-bullying.
- **Collaboration with Other Professionals:** OHPs work closely with other health professionals, such as psychologists and counsellors, to provide comprehensive mental health support. They also collaborate with management to ensure that mental health initiatives are integrated into the overall organizational strategy.

Mental health is a critical aspect of overall well-being and addressing it in the workplace is essential for the health and productivity of employees. In South Africa, the role of the Occupational Health Practitioner is vital in promoting mental health and creating supportive work environments. By implementing effective strategies and providing necessary support, OHPs can help workers manage their mental health, leading to a healthier, more productive workforce.

1. **Mental Health Importance:** Mental health is crucial for overall well-being and affects productivity, absenteeism, and turnover rates in the workplace.
2. **Challenges in South Africa:** Workers face unique challenges such as unemployment, economic instability, and social inequality, which can impact their mental health.
3. **Role of OHPs:** Occupational Health Practitioners (OHPs) are essential in promoting mental health by identifying and addressing health risks in the workplace.
4. **Support Strategies:** OHPs implement strategies like risk assessment, health promotion, support services, policy development, and collaboration with other professionals to support workers' mental health.
5. **Positive Impact:** Addressing mental health in the workplace leads to a healthier, more productive workforce and overall organizational success.





Guidance Note for the Prevention and Management of Non-Communicable Diseases and Mental Health Disorders in the South African Mining Industry

NO. 6443 | 18 JULY 2025 - REPORT BY: JOAN VISSER

This guidance note, issued as OHP - NO. 6443 on 18 July 2025, addresses the critical need for comprehensive strategies to prevent and manage non-communicable diseases (NCDs) and mental health disorders in the region known as "the South." It serves as an essential resource for Occupational Health Practitioners (OHPs), policymakers, and healthcare providers, offering structured recommendations to strengthen workplace and community health outcomes.

Background and Rationale

Non-communicable diseases—including cardiovascular diseases, diabetes, cancers, and chronic respiratory illnesses—constitute a growing public health burden, responsible for significant morbidity and mortality globally. Mental health disorders, such as depression, anxiety, and substance use disorders, further exacerbate overall disease burden and reduce quality of life. The South faces unique challenges due to socioeconomic disparities, limited healthcare access, and stigma associated with both NCDs and mental health.

Key Recommendations

- **Prevention Strategies:** Encourage healthy lifestyle choices through nutrition, exercise, and tobacco/alcohol cessation programs. Promote early detection and screening, especially in high-risk workplace populations.
- **Management Approaches:** Integrate NCD and mental health management into primary healthcare and occupational health services. Foster multidisciplinary teams for holistic care, including medical, psychological, and social support.
- **Policy Integration:** Align workplace health policies with national and regional strategies.

- Ensure that OHPs are trained in both NCD and mental health screening, intervention, and referral pathways.
- **Monitoring and Evaluation:** Establish robust data collection and reporting systems to track progress on NCD and mental health indicators at the workplace and community levels.
- **Reducing Stigma:** Implement education and awareness campaigns to address misconceptions and reduce barriers to care for mental health and chronic diseases.

Importance for the OHP

This guidance note emphasizes the central role of Occupational Health Practitioners in both the prevention and management of NCDs and mental health disorders. OHPs are positioned to:

- Identify early risk factors among employees and facilitate timely intervention.
- Promote supportive environments for health and well-being in the workplace.
- Act as liaisons between employees, employers, and the wider healthcare system to ensure continuity of care.
- Lead education efforts to destigmatize mental and chronic health conditions.

Conclusion

OHP - NO. 6443 provides a framework for addressing the intertwined challenges of non-communicable diseases and mental health disorders. Its adoption can lead to healthier workforces, reduced absenteeism, and improved productivity, while also advancing public health goals in the South. The guidance note calls for a coordinated, proactive response, empowering OHPs as agents of change in both prevention and comprehensive management.





DIFFERENCE BETWEEN A MEDICAL AND A HEALTH ASSESSMENT

Johanet Uys

In occupational and public health, the terms *medical assessment* (or “*medical*”) and *health assessment* are often used interchangeably. However, they refer to distinct approaches with different purposes, scopes, and outcomes. Understanding the difference is essential for healthcare practitioners, employers, and individuals alike.

Medical Assessment

A **medical assessment** is a focused, clinical evaluation conducted by a qualified healthcare professional—typically a doctor or specialist. Its primary purpose is to **diagnose, monitor, or treat a specific medical condition**. It often includes:

- Review of medical history
- Physical examination, focussed on a specific problem or body system
- Diagnostic tests (e.g., blood tests, imaging)
- Evaluation of symptoms
- Formulation of a medical opinion or treatment plan

Medical assessments are problem-driven and reactive (not preventative). They are usually initiated in response to symptoms, injury, or a clinical referral. In occupational settings, a medical assessment may be required to determine fitness for duty following illness or injury, during primary healthcare consultations or other examinations focussed on a specific health problem.

Health Assessment

In contrast, a health assessment is broader and more proactive (preventative). It aims to evaluate an individual's overall well-being and identify potential risk factors that could affect future health. Health assessments often include:

- Lifestyle evaluation (diet, exercise, smoking, alcohol use)
- Health, work, social and family history
- Basic biometric measures (e.g., height, weight, BMI, blood pressure, urinalysis)
- Preventive screening (e.g., cholesterol, HGT)
- Screening examinations e.g. audiometric tests, lung function tests, biological monitoring etc.
- Occupational and environmental exposure review

Health assessments are typically conducted as part of medical surveillance, preventive care, workplace wellness programs, or routine check-ups. The goal is to support early intervention, promote healthy behaviours, and reduce the risk of developing chronic diseases.

In conclusion, while both assessments contribute to better health outcomes, they serve different functions. Medical assessments address existing problems, while health assessments aim to prevent them. In workplace settings, combining both can lead to more comprehensive care—supporting employees not only in managing illness but also in maintaining long-term health and resilience.

<u>Feature</u>	<u>Medical Assessment</u>	<u>Health Assessment</u>
Purpose	<i>Diagnose/treat illness</i>	Promote wellness/prevention
Trigger	<i>Symptoms or referral</i>	Routine or risk-based
Focus	<i>Specific condition</i>	Overall well-being
Practitioner	<i>Doctor, professional nurse, specialist</i>	Doctor or OHP
Outcome	<i>Diagnosis/treatment plan</i>	Risk identification/health plan



What are your thoughts?

What do you do more of in your clinic: Medical or Health assessments?



New Noise Exposure Regulation, 2024 – What is STS?

Lindie Jansen van Rensburg – OHP Consultant



The Department of Employment and Labour published the Noise Exposure Regulation (NER), R5953 of 2024 on the 6th of March 2025, under section 43 (1)(a) and (b) of the Occupational Health and Safety Act, 1993.

While the shift in the Standard Threshold Shift (STS) has caught attention, it is just one part of a broader, more detailed regulatory update designed to enhance hearing protection for employees.

Let us take a closer look at STS. STS is defined as an average change in hearing of 10 dB or more at the frequencies of 2 000, 3 000 and 4 000 Hz in one or both ears, as compared to an employee's Audiometric Zero (AZ). But what exactly is the AZ? Although definitions vary between regulations, the NER defines AZ as the average hearing threshold at 2 000, 3 000 and 4 000 Hz for each ear, calculated from the **Baseline**.

The 'shift' in STS is the difference between the current audiogram and the Baseline Audiogram. Let us look at an example:

Test Date	Test Type	Left							Right						
		500	1K	2K	3K	4K	6K	8K	500	1K	2K	3K	4K	6K	8K
2023/10/02 10:27	Baseline	0	0	0	0	10	0	10	0	0	0	5	0	20	0
2023/10/02 15:03	Baseline C	0	0	0	5	10	0	5	10	0	0	0	5	15	5
2023/10/02 15:20	Entry	0	0	0	0	10	0	5	0	0	0	0	0	15	0
2024/12/17 09:38	Exit Screening	0	10	0	10	15	5	15	15	15	10	5	15	20	5
2023/09/19 12:25	Periodic	0	0	0	0	15	0	5	30	5	5	0	0	0	20
2023/09/19 12:16	Periodic	0	0	0	0	10	5	0	30	30	25	10	15	25	10
2023/09/12 09:18	Periodic	0	0	0	5	0	0	0	5	25	15	10	10	20	5
2023/09/12 09:11	Periodic	10	35	0	10	5	10	15	50	35	30	10	20	25	20
2023/09/12 09:02	Periodic	10	5	5	5	10	5	15	50	35	15	15	20	20	15

ST Left Ear	ST Right Ear	AZ Left Ear	AZ Right Ear
For each ear: Frequencies 2 000 , 3 000 and 4 000 Hz one ear at a time			
$(0 + 10 + 15)/3$	$(10 + 5 + 15)/3$	$(0 + 0 + 10) / 3$	$(0 + 5 + 0)/3$
8.33 dB	10 dB	3.33 dB	1.67 dB

STS = ST – Audiometric Zero

- STS left ear= 8.33 – 3.33 = 5 dB
- STS right ear = 10 – 1.67 = 8.33 dB



Please note that if there is no Baseline the AZ is '0'.

Now that you have your STS values—why does it matter?

- If the STS is ≥ 10 dB but < 25 dB, the Occupational Health Practitioner (OHP) must implement specific hearing conservation interventions.
- If the STS is ≥ 25 dB, referral for a diagnostic audiogram is required. If the diagnostic audiogram confirms the shift, the Occupational Medical Practitioner (OMP) must issue a medical certificate of fitness and notify the Chief Inspector at the Department of Employment and Labour.

According to the DEL, industry should begin implementing the NER but have until 5 September 2026 to become fully compliant with this new regulation.



Physical Agents Regulations, 2024 - what is new?

Johanet Uys - OHNP







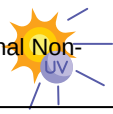

The Physical Agents Regulations 2024 will repeal the Environmental Regulations for Workplaces, 1987, effective 6 September 2026, 18 months after their promulgation. Employers are urged to start implementing the new regulations as soon as reasonably practicable to ensure compliance by the effective date. These regulations apply to employers, self-employed individuals, and those involved in designing, manufacturing, importing, or supplying workplace plant and machinery that may expose workers to Physical Agents. A Physical Agent is defined as a source of energy that can cause injury or disease after exposure, including cold stress, heat stress, vibration, non-ionising radiation, and illumination. The regulations also identify Vulnerable Employees, who face higher risks from such exposures.

A competent person must conduct a documented risk assessment at least every two years or sooner if conditions change, control measures fail, new technology emerges, or incidents occur. If workers are exposed to Physical Agents at or above occupational exposure limits (OELs) or guideline values, the employer must implement a surveillance program by a competent person.

Medical screening, determined and overseen by an Occupational Medicine Practitioner (OMP), done by an OHP, is required before employment begins and at intervals not exceeding two years. The OMP reports health evaluation outcomes to employers. Exit screening is also required unless done within six months prior to employment termination.

Employers must maintain a documented medical surveillance system with employee consent. If hazards cannot be eliminated or controlled, PPE and a medical surveillance program must be provided. Time-weighted average (TWA) refers to average exposure over an 8-hour workday or 40-hour workweek, with limits defining maximum exposure durations. Please consult the Physical Agents Regulations, 2024 (with explanatory notes) for detailed information on each hazard.

Please read the table together with the Explanatory Notes published with the Physical Agents Regulations, 2024.

Physical Agent	Action Level	OEL (TWA) & Duration
 Cold stress (or chill temperature) See Explanatory Notes: p. 83	-	10° Celcius (4 hours)
 Heat stress (wet-bulb globe temp) See Explanatory Notes: p. 84	27° C	30°C (1 hour)
 Hand-arm vibration See Explanatory Notes: p. 86	2.5 metres / second (m/s ²)	5 metres / second (m/s ²) (8 hours)
 Whole-body vibration See Explanatory Notes: p. 86	0.5 metres / second (m/s ²)	1.15 metres / second (m/s ²) (8 hours)
Ultraviolet radiation See Explanatory Notes: p. 88 - Occupational Non-ionising Radiation) 	-	0.1 microwatt/cm ² (8 hours)
 Infrared radiation	-	10 microwatt/cm ² (8 hours)



Fatigue Management in Occupational Health Settings: A Literature Review

Written by N. Ndlovu

ABSTRACT

Fatigue is a pervasive occupational health concern associated with increased accidents, reduced productivity, and absenteeism. This review synthesizes current literature on the causes, consequences, assessment methods, and mitigation strategies for occupational fatigue, emphasizing evidence-based management practices.

INTRODUCTION

In demanding work environments, fatigue undermines cognitive function, coordination, and safety. The World Health Organization (WHO, 2010) identifies fatigue as a key occupational hazard. Addressing fatigue effectively requires integration of health-focused interventions into workplace policies and culture.

LITERATURE OVERVIEW

Occupational fatigue refers to a physical and mental state of exhaustion that impairs work performance (Phillips, 2015). Contributing factors include long hours, lack of rest, shift work, and repetitive tasks. Fatigue is a major contributor to workplace incidents. Uehli et al. (2014) found a 60% increase in accident risk among fatigued workers. Sectors like healthcare and transportation are especially vulnerable (Gander et al., 2011).

Fatigue measurement combines subjective and objective tools. Common scales include the Fatigue Severity Scale (Krupp et al., 1989) and the Epworth Sleepiness Scale (Johns, 1991), complemented by wearable devices

like actigraphs (Karstadt et al., 2014). Fatigue Risk Management Systems (FRMS) have gained traction as adaptable solutions combining real-time monitoring, worker education, and predictive modeling (Rosekind et al., 2010). Effective FRMS are tailored to specific organizational needs.

Regulations such as the EU Working Time Directive (EU, 2003) and U.S. Hours of Service rules (FMCSA, 2020) define working and rest periods. However, compliance must be supported by a proactive safety culture (Dawson & McCulloch, 2005).

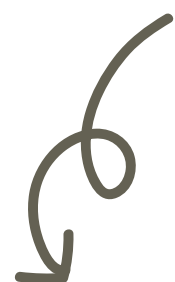
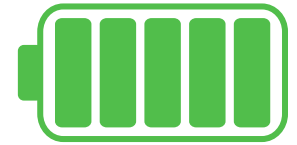
DISCUSSION

Managing fatigue effectively requires a multi-faceted approach, including leadership engagement, employee involvement, targeted education, and robust policy enforcement. Adaptable strategies that consider individual variability further strengthen outcomes.

In conclusion, fatigue poses substantial risks in occupational settings but can be managed through comprehensive strategies that integrate monitoring tools, regulatory compliance, and cultural change. Investing in fatigue mitigation enhances worker well-being and operational performance.

REFERENCES

Åkerstedt et al. (2014); Dawson & McCulloch (2005); EU (2003); FMCSA (2020); Gander et al. (2011); Johns (1991); Krupp et al. (1989); Phillips (2015); Rosekind et al. (2010); Uehli et al. (2014); WHO (2010).



SASOHN Mpumalanga Regional Meeting 2025: Thriving Together in Occupational Health

Written by Joyce Mabuza

Growing Membership & Engagement

The SASOHN Mpumalanga Region hosted its vibrant regional meeting on 23 May 2025 at the Lowveld Botanical Garden, proudly sponsored by Ampath. Under the inspiring theme “LET’S THRIVE in 2025,” members gathered to strengthen collaboration and enhance professional practice.

Regional Chairlady Tania Vos opened the session with a warm welcome, emphasizing the importance of active membership participation. Attendance has been steadily increasing, and she issued a renewed call for all 118 paid-up members to join the updated WhatsApp communication group. Currently, only 80 members are part of the group, largely due to outdated personal details on the website, which makes it difficult to reach the remaining members.

Social Responsibility & Fundraising Initiatives

The region continues to support the Millennium Home of Hope through the collection of toiletries, nappies, clothing, and formula milk. Additional initiatives include the sale of SASOHN-branded T-shirts to members as a fundraising effort.

A Mini Workshop is planned for 22 October 2025 as another fundraising initiative, while the Golf Day Fundraiser remains in the

planning phase and may be postponed until the new year.

Professional & Knowledge Empowerment

Highlights of the knowledge-sharing sessions included:

- Tuberculosis Management – Reinforcing early testing and public awareness.
- Obesity & Biokinetics – Dr. Sharsef Abrahams presented strategies for exercise-based chronic disease management.
- Toxic Exposure Risks – Dr. Muller Rossouw emphasized vigilance against arsenic and cyanide in occupational settings.
- Communicable Diseases & Vaccination – Mr. Mandia Zwane reminded members of their legal duty to report diseases promptly.
- Notifiable Medical Conditions – Leslie Ingle reminded members of their duty to report these conditions.

Looking Ahead

The next Regional General Meeting will take place on 12th of September 2025 – Regional AGM. The meeting concluded on a high note, leaving attendees motivated to thrive in their practices and make a meaningful community impact.



PHC? We don't have time for that!



"I whole heartedly agree with the writer of the PHC article vs Occ Health. A comprehensive history taking with the added advantage of building a relationship with the employee over time & Occ health is invaluable in the caring, well being & health of our work force. One must never forget the medical history & looking at Occupational exposure all the time."



Thank you
for participating!



Fun Page

FOR THOSE WHO LIKE A CHALLENGE



Find the word in the puzzle!

Words can go in any direction.

Words can share letters as they cross over each other.

```

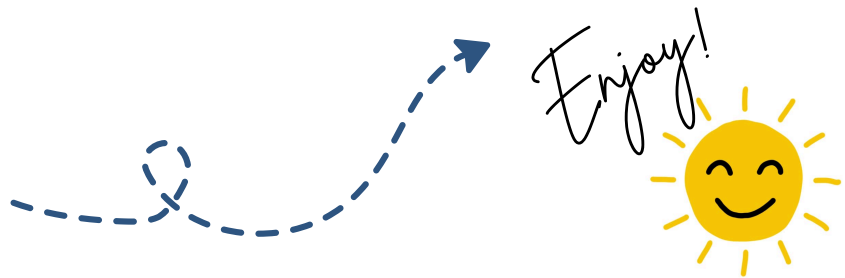
e o w k q b g l x u p i l d a
v n r b e n j a p e b i r b c
d p e v j e q n w z f a e d c
m d b i l y h o n e z q j k i
q h g r g x r i v a z w k j d
a j r r u y s t h d a e u e e
n s z j d e h a q l p p e l n
u w s x g q s p d r l t t k t
o q s e g i x u y k m u e j s
q y i b s e p c c o p o j c l
i a k d t s q c p e z w o i s
e z z u x z m o w l o n g t n
d f u m x u a e t m u t p r l
r j c q p v u i n z u s y z h
g t e r a c f o y t u d y r p
    
```

1. Occupational _____ is the science of anticipating, recognizing, evaluating, and controlling workplace hazards.
2. _____ disease caused or made worse by work conditions or exposure.
3. A harmful substance workers might inhale, touch, or be exposed to.
4. Protective gear worn to reduce exposure to hazards (abbreviation).
5. Regular medical check-ups to detect early signs of work-related illness (2 words 6/10).
6. A sudden and unexpected event that causes injury at work.
7. Legal duty of employers to ensure a safe and healthy workplace (3 words 4/2/4)

Accident, Assessment, Duty of care, Hazard, Hygiene, Occupational, PPE



Why did the cat go to the hospital?
Because it needed a purr-scription after its CAT scan!



Answers on word puzzle: Newsletter #1/2025

Across:

4. Injury caused by repetitive motion at work: **strain/sprain**
5. Physical factor like repetitive movement of vibration that can harm health: **ergonomics**
7. A contagious illness that spreads in workplaces: **infection**
8. Protective clothing or equipment worn on the job: **PPE**

Down:

1. Respiratory illness caused over a long time by inhaling hazardous fibres: **asbestosis**
2. Stress that occurs over a long period in the workplace: **burnout**
3. Type of assessment done before a person starts a job: **baseline**
6. _ Assessment: Legal document outlining workplace risks and controls: **risk**

