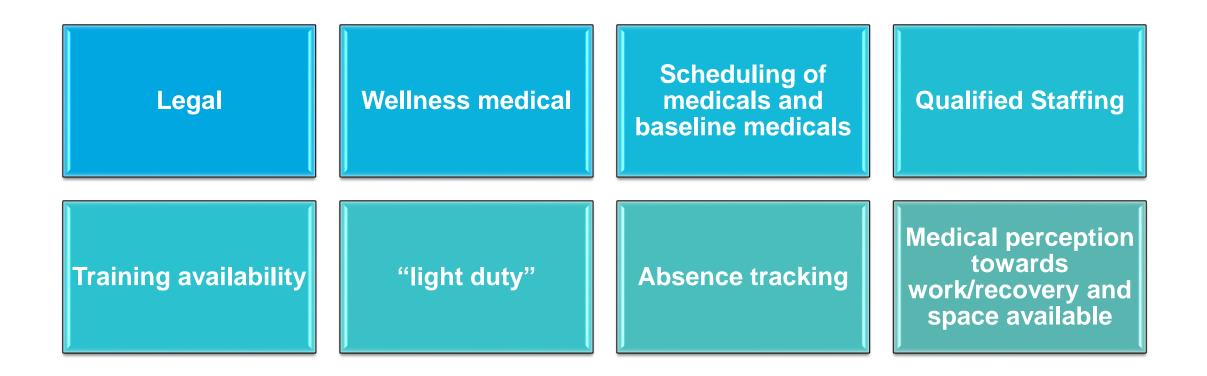
ONGOING JOURNEY TO BEST PRACTICE OF OCCUPATIONAL HEALTH AND RETURN TO WORK MANAGEMENT IN THE MINING SECTOR IN ZAMBIA

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First Quantum Health & Wellness

Challenges at start





Legal OH requirements in Zambia

□ 3 laws relevant to occupational medicine management

- Pneumoconiosis Act -1955 (amended 1996)
- Workers Compensation Act 1999
- The Occupational Health and Safety Act 2010

Employment act

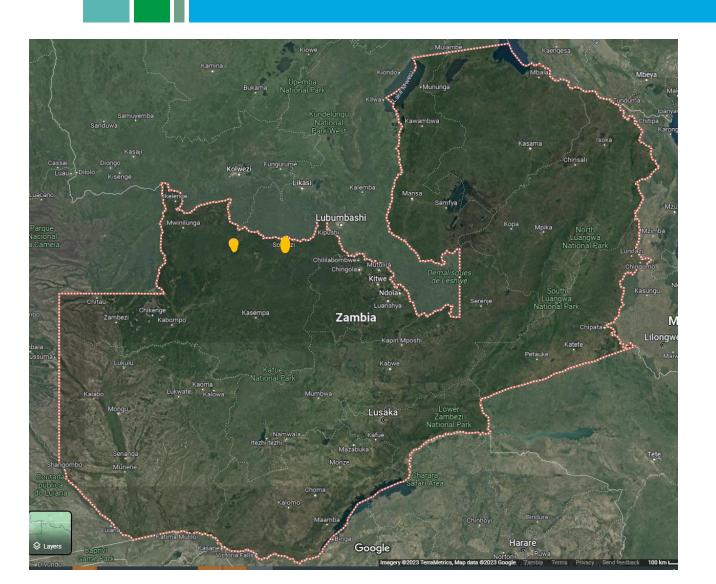
■ 6 months sick leave

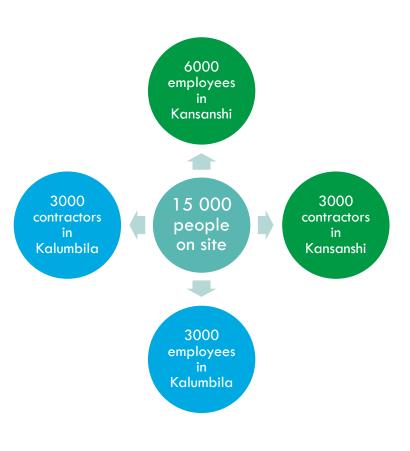


The company

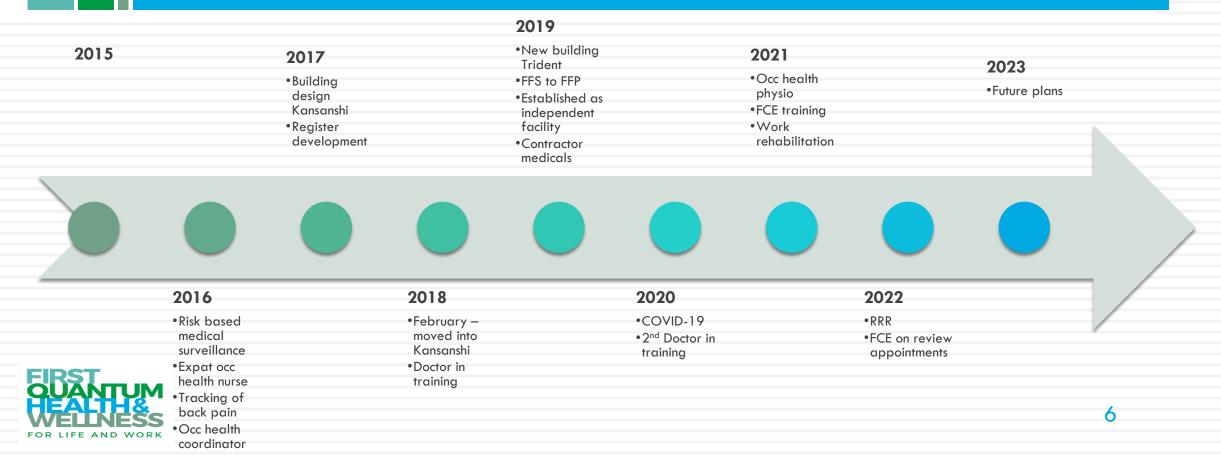


The company



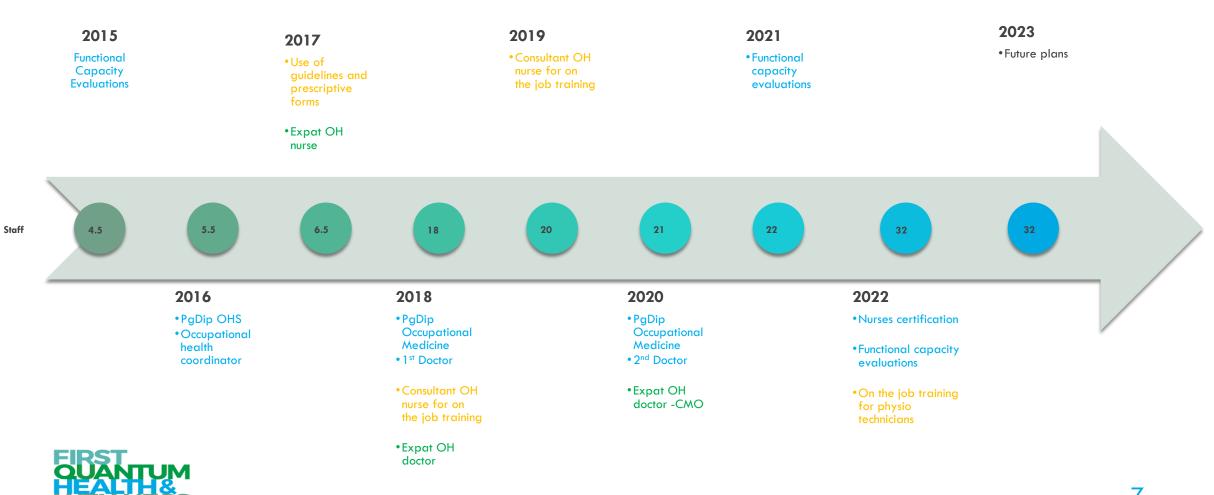


Journey of development

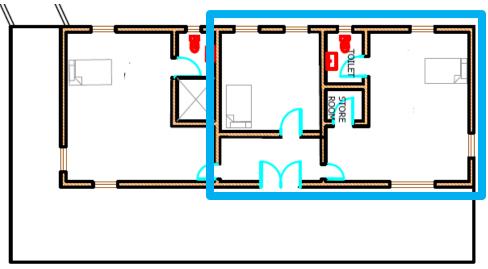


Staff Development

FOR LIFE AND WORK



- \Box Dedicated team = 4.5 people
- \square 2 rooms on each site
- □ Broad gap from clinic to HR
- Sick notes only accepted from accredited facilities







Challenging the concept of bulletproof employees

- □ Key staff training
 - Occupational health coordinator role
- □ Risk based medical surveillance design
 - Guided medicals
- □ Development of SOPs
 - Fitness to work (vision and hearing)
 - Drivers
 - Pregnancy
- □ Return to work assessments (phased approach)
- □ Registers



Sub group 1 = NO spirometry Sub group 2 = every 2 years. (write N/A in every second row)	G3. Spirometry (attach paper print out of spirometry each medical)	
Sub group 2 = every 2 years. (write N/A in every second row)	Sub group 1 = NO spirometry	
	Sub group 2 = every 2 years. (write N/A in every second row)	
Sub group 3 and 4 = yearly	Sub group 3 and 4 = yearly	

Challenging the concept of bulletproof employees

- Key staff training
 - Occupational health coordinator role
- Risk based medical surveillance design
 - Guided medicals
- **Development of SOPs**
 - Fitness to work (vision and hearing)
 - Drivers
 - Pregnancy
- Return to work assessments (phased approach)
- Registers





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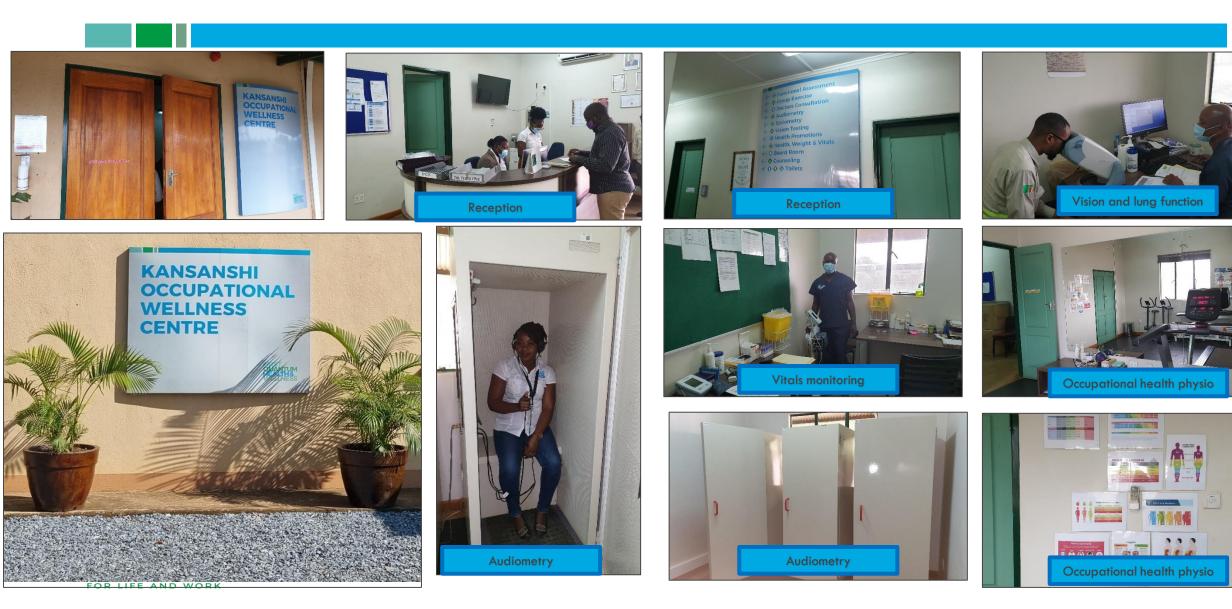


		1400 -	
	Design of new dedicated buildin for Kansanshi		
	Use of expat occupational health nurse) 1000 —	
	2016-2017 meetings with HR, Safety and IH established	800 —	
5000 4500	Graph 1: Breakdown into types of medicals at Kansanshi	600 —	_
4000 3500 3000	2919	400 —	-
2500 2000 1 <i>5</i> 00	1091 1098	2016 2017 200 −	
1000 500 0	641 597 186 172 0 0 Pre-employment peridodical exits reviews contractor	0 —	Back pain

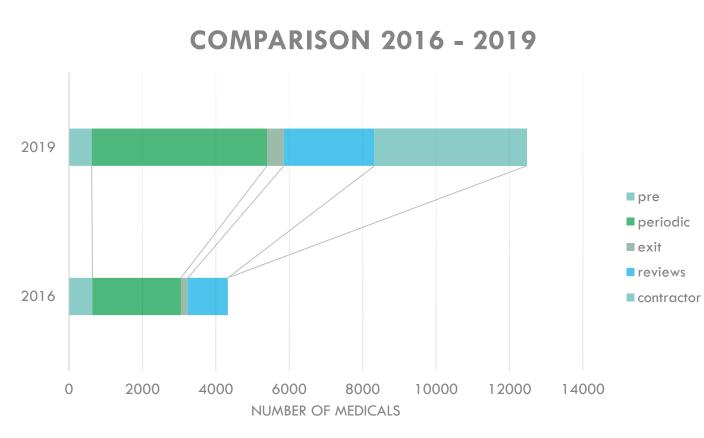






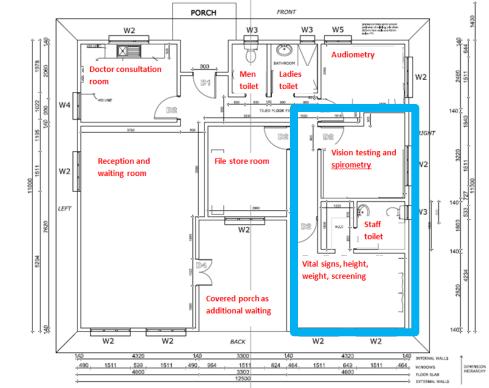












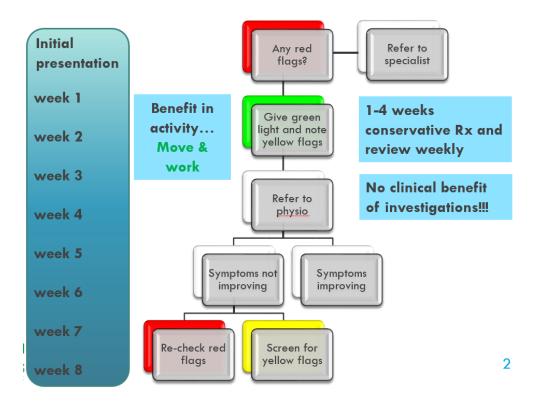


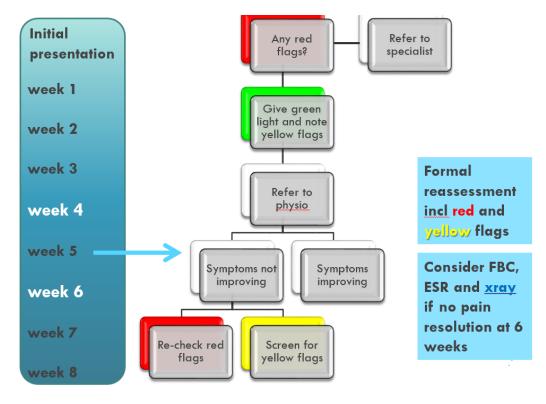
COVID-19 vulnerable employee management





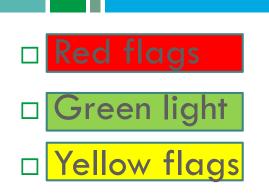
□ Training of doctors in back pain management protocol







Back pain management



- Multidisciplinary management
 - Wellness
 - Group therapy
 - Physio/exercise



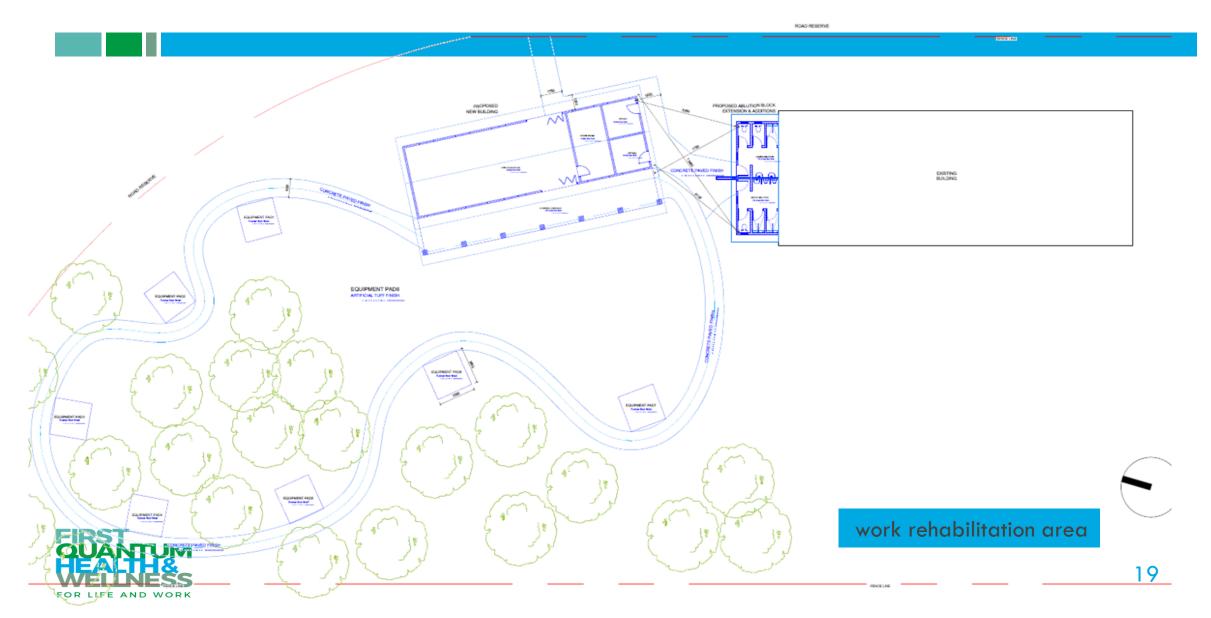


Management of COVID vulnerable employees

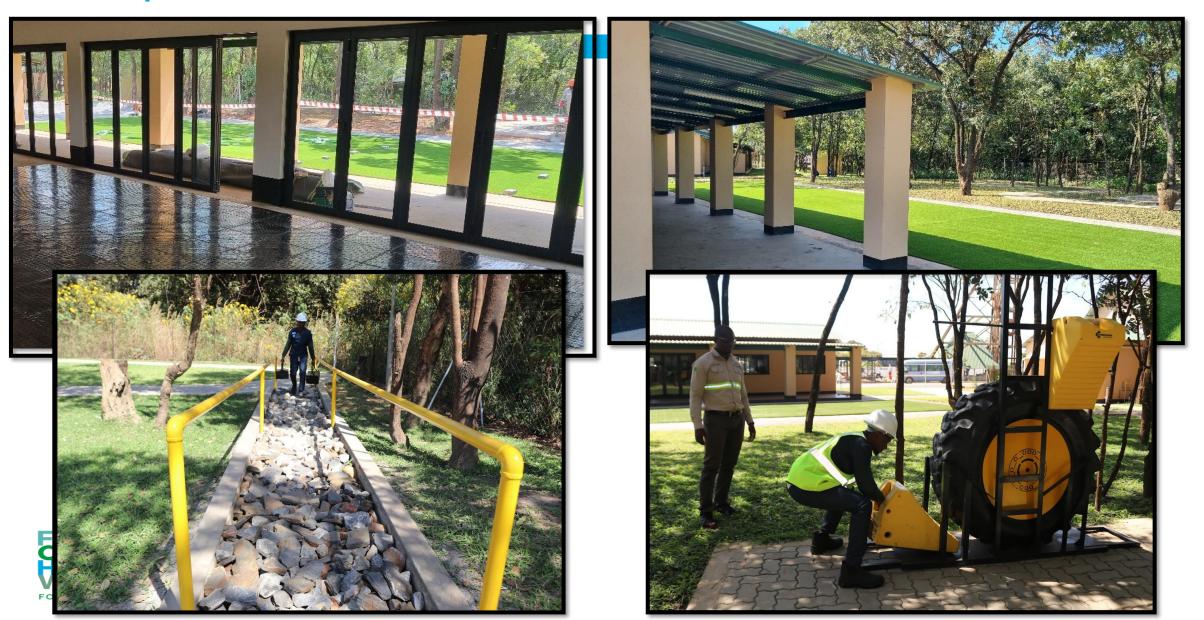
- Multidisciplinary approach
- Systems strengthening of referrals from mine hospitals
- Occupational health Physiotherapist
 - Return to work assessments (next step of phased approach)



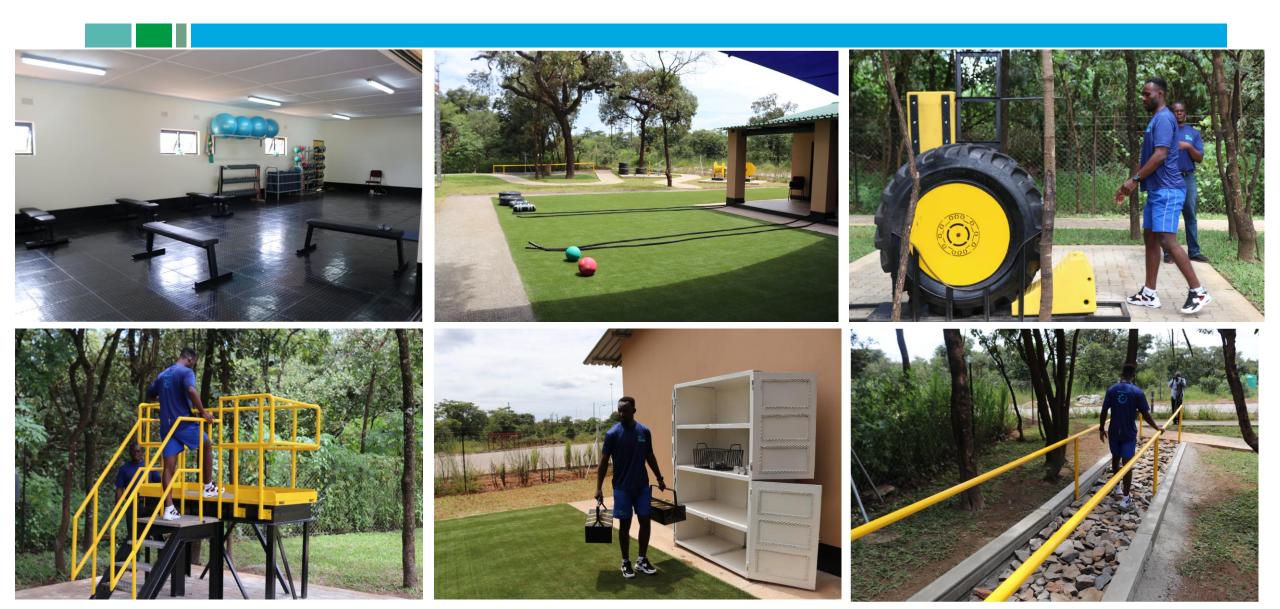




Occupational health –work rehabilitation area



Work Rehabilitation Area



Fitness







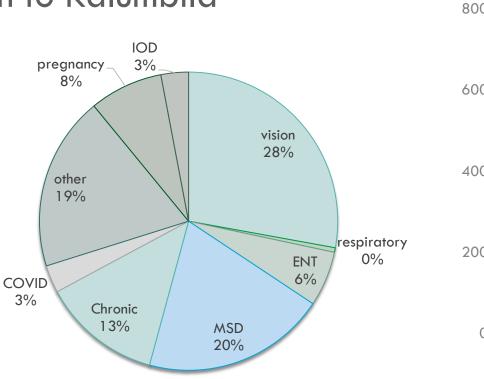
□ Recognise, respond, refer

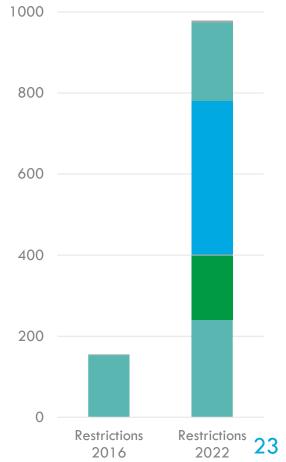
- Onsite training for technical staff
- Planning for expansion to Kalumbila

Temporary

Long term







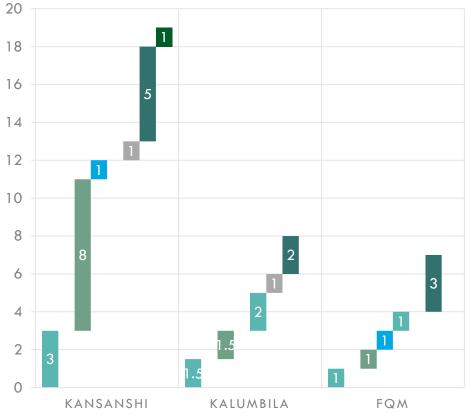
1200

Capacity Development Strategy

• Expat Occ health doctor • Expat Occ health nurse External • Consultant for process flow and training expertise support 20 1 • Occ health coordinator 18 • One doctor every 2 years Key staff 16 • New doctors under mentorship of trained doctor for 2 years members trained first 14 12 • FCE 10 • Site based training for nurses/technicians 8 • Online training Trainings 6 4 • Forms that have guidance 2 • Prescriptive SOP • Awareness of OH and work benefits to clinics, HR and 0 Guidance management KANSANSHI

STAFFING

■ 2016 ■ 2017 ■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022 ■ 2023



Summary of our journey to best practice

- Parallel process with OHSI (government mandated body)
- Support development of OHSI
- Close relationship and referrals
- □ Still remain with legal limitations

