



19th Annual MMPA Congress Report (2-3 September 2016)

INTRODUCTION

The MMPA is pleased to confirm that over 70 attendees signed the attendance register on both days of the conference. The themes for each day of the conference were stimulating and it is with no surprise that the feedback from members was overwhelming. It was described by most as a vibrant conference in both the academic and entertainment spheres. The programme included presentations that covered both technical and ethical topics, and allowed for robust engagements between presenters, panelists and attendees.

The support for the Congress was overwhelming. The collaboration, especially the co-hosting of the Congress with the Mine Health and Safety Council (MHSC), symbolised the new beginning for MMPA congresses into the future. It is worth mentioning that the support from the MHSC, through co-hosting, amounted to more than R137 000. We applaud the CEO of the MHSC, Mr Thabo Dube and his team; the CROO, Ms Nkhensani Masekoa; and the CFO, Mr Karabo Mkhwanazi, for having represented our request for support to the MHSC Board for approval. The support from the chairperson of Mining Industry TB and HIV Advisory Committee (MITHAC), Dr Lindiwe Ndelu, the employer conveners, Dr Thuthula Balfour-Kaipa and Dr Sizwe Phakathi, and the Labour convener, Mr Eric Gcilitshana, is much appreciated. The two other sponsors that came to the party by renting stalls were Aspen Pharmaceutical and Q2 Solutions. The MMPA extends its appreciation to Mr David Henry (Aspen Pharmaceutical) and to Ms Mandira Sewpersadh, Ms Sorika van Niekerk and Dr Ayaskant Pany (Q2 Solutions), for their support and contributions to the congress.

SUMMARY REPORT

Day 1: 2 September 2016

The theme for the 1st day focused on 'The impact of The Test and Treat Campaign' on the South African mining industry, with some discussion on the development of the new National Strategic Plan (NSP) for 2017 – 2022. The conference discussed the potential impact of the campaign and whether the industry was really prepared for its implementation.

Session 1

The presentations provided attendees with information on the current situation with regards to TB/HIV in the South African Mining Industry. The programme covered the following topics:

1. 'Overview on the burden of TB/HIV in SAMI' Department of Mineral Resources (DMR) perspective, by Dr Lindiwe Ndelu
2. 'Masoyise iTB', presented by Dr K Baloyi, represented by the Chamber of Mines member companies, outlined the current TB/HIV situation among employees

The presentations conveyed a common narrative that

there was generally an increase in the number of mines that submitted DMR 164 forms in 2015 compared to 2014 (these are the forms required by the DMR for reporting on HIV and TB in the mining industry). There was also an increase in the number of employees counselled for HIV and screened for TB in 2015 compared to 2014.

Session 2

The presentations were intended to showcase MHSC work on TB/HIV, with special focus on options for better responding to the TB/HIV epidemics.

1. 'TB Leading Practices recommended for the South African Mining Industry', by Dr K Arthur
2. 'Integrated HAT-OLD Policy', by Dr K Fourie
3. 'Public private Partnerships', an example of the South African Business Coalition on Health and AIDS SABCOHA by COO SABCOHA, Ms Susan Preller

The presentations were welcomed by attendees, and stimulated robust engagements. There was overwhelming acceptance by attendees that these initiatives will benefit the industry and provide options to better respond to the twin epidemics.

Session 3: Panel discussion

The discussion revolved around the preparedness of the mining industry for the implementation of the Test and Treat Campaign. There were mixed opinions as to whether the industry is ready or not. The South African National AIDS Council (SANAC) presentation outlined the detailed process involved in the development of the NSP 2017–2022 and the need for inputs to the development of the new NSP from all stakeholders, especially the mining industry as a key population in the NSP. The presentation was given by Reverend Zwo, from SANAC.

Q2 Solutions presented on diagnostic options for TB and HIV, with special focus on the mining industry. Aspen Pharmaceutical outlined treatment options available for HIV/AIDS management. We appreciate that these institutions acknowledge challenges experienced by mining houses in procuring diagnostics and treatment for their employees, especially on prices and access-related challenges.

Discussions

Attendees raised the concern on whether the industry has capacity to handle the increased number of people that will present for testing, and capacity to provide treatment to those who will need it.

Gala Dinner



- After robust engagements the Congress reached consensus that:
- As the sector, we should learn from our experiences from when the CD4 count criterion was increased from 200 and 350, resulting in no drastic increases in either the number of people tested or the number put on treatment
- Attendees acknowledged the reality that there are current challenges with drug stock, out in the health system, that could exacerbate the problem
- The most positive outcome was when consensus was reached that the opportunity costs for implementing Test and Treat campaign override the cost of not implementing it

The Gala Dinner was something to remember for the coming decade. Dr Lindiwe Ndelu delivered the key note address on behalf of Mr Thabo Dube, the CEO of the MHSC, who unfortunately could not attend due to commitments at the Mine Safe Conference. The vibrant entertainment saw people get to bed after midnight to prepare for the next full day programme.

Day 2: 3 September 2016

The theme for the second day focused on 'The future of the health services in the South African Mining Industry'.

Session 1

The session was technical in nature and presentations focused on work done by MHSC on Noise-Induced Hearing Loss. The other presentations focused on the Impala Platinum experience on Incapacity Management, and the Chamber of Mines study on Incapacity Management Challenges.

1. Presentation on NIHL: 'STS Guidance Note', by Dr Mokoboto, provided guidance on implementing Standard Threshold Shift (STS) principle
2. Incapacity Management Challenges: 'CoMSA Study', by Dr T Balfour-Kaipa
3. Incapacity Management: 'The Impala Experience', by Dr Mampa

The STS Guidance Note presentation was well received and attendees acknowledged that the industry compliance with regard to implementation was overwhelming. The

incapacity management presentations outlined the burden of cases referred into the incapacitation process, and challenges experienced in managing the cases.

Session 2

The theme was 'The future of health services in the mining industry'. Presentations were aimed at first painting the future of the mining industry, and then that of the health services.

The session programme director, Mr N Lesufi, the Senior Executive for Health, Environment and Legacies (HEL), made opening remarks and hinted that there was a general feeling that health matters are not prioritised to the same extent as safety ones. He alluded to the experience that health people seem to lack a sense of urgency in that they are not current in how they present health matters. For example, in 2016 we present or discuss 2014 figures or, if lucky, 2015 data and issues. He acknowledged the latency period for most occupational diseases but emphasised the need to make an attempt to be current in matters we discuss.

The presentations provided insight into the future of both the mining industry and the health services thereof.

1. Mr Roger Baxter presented 'The future of the South African Mining Industry'. This was an eye opener for most attendees in the sense that it provided information on the investments made by companies on health services in relation to profits and contribution to the GDP
2. Dr Charles Mbekeni presented 'The future of health services in the mining industry' and touched on the National Health Insurance (NHI). The information was mind-boggling but it clarified the uncertainties with regard to the future of health service provision models in the industry. In his opening remarks, he raised a concern around decentralised medical surveillance services which presents a challenge – worse so for contractor employees. The key message revolved around restructuring to mitigate business or operational risks and paradigm shifts in occupational health.

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