'Making good' – things we can do now, today, without waiting for sophisticated technology

Dr Vanessa Govender, Occupational medicine specialist; Lecturer, Occupational Health Division, Wits School of Public Health
Chair, Certification Committee, Medical Bureau for Occupational Diseases
e-mail: vanessa@masakhanehealth.co.za

Following the settlement agreement reached on 26 July 2019 in the silicosis class action court proceedings, the Tshiamiso Trust was established. Tshiamiso means 'making good'. The Trust agreement is now being operationalised to execute the distribution of claims and to oversee the administrative functions (https://www.silicosissettlement.co.za/).

The silicosis and tuberculosis claims from former mine workers from six mining houses will range from R10 000 to R500 000. Eligible claimants scattered across the subcontinent will require medical examinations according to the Trust deed. These examinations will be aligned to the Occupational Diseases in Mines and Works Act (ODMWA) of 1973, as amended. The dependants of the deceased mine worker will be required to submit health records to the Medical Bureau for Occupational Diseases (MBOD). This calls for robust medical, compensation and governance systems.

Current mine workers will become former mine workers in the next 12 years (the expected lifespan of the Tshiamiso Trust) and beyond. We cannot change what we inherited but we can 'create a legacy'. We can certainly change what we know didn't work. We can empower and restore dignity to mine workers, enabling them to take charge of their own medical information/health records. We cannot, and should not, rely solely on the employer to safely store records that should legally be retained by the Department of Mineral Resources and Energy (DMRE). Can employers and employees find common ground and share this responsibility?

One idea is for current employers to safely store all exit health information, i.e. any history of tuberculosis or occupational lung disease, serial chest X-rays and serial spirometry examinations conducted whilst in service. Spirometry records are critically important in the COVID-19 era where all testing has been suspended until further notice. Health information will be required by the mine worker long after employment ceases, and long after exposure stops, when ill health prevails and compensation is sought. The employer can safely, cheaply and easily store this exit health information electronically, e.g. on a memory stick or a CD, and hand it over to the mine worker with good counselling and education on the importance of safeguarding the contents. Alternatively, the employer or employee can 'hand it over' to the MBOD for safe-keeping and for future use by the Certification Committee. This might sound primitive, perhaps even 'retarded', in this rapidly evolving, technologically advanced world; yet it is doable, right now, right here.

I have made this suggestion on multiple platforms over the years; the response is usually "technology can do that for us". But here we are, in 2020, in the throes of the 4th (maybe 5th?) industrial revolution and the heavily data-driven COVID-19 era. The MBOD rejects or defers many claims due to the submissions' lack of convincing evidence required for the diagnosis of a compensable disease, the assessment of impairment, the award of certification and, ultimately (if fortunate), compensation, for both living and deceased mine workers. I have seen, all too often, mine workers stripped of any chance of compensation, and a paltry one at that, due to incomplete information and sometimes even 'no information' being submitted with a claim.

"The Tshiamiso Trust and the COVID-19 era are giving us a lifeline; another chance to rethink, and realign ourselves and how we work. Let's get it right. Let's 'do good'."