



the dr&pw

Department:
Roads and Public Works
NORTHERN CAPE PROVINCE
REPUBLIC OF SOUTH AFRICA

DEPARTMENTAL POLICY ON HEALTH AND WELLNESS

**VERSION 3
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1. DEFINITIONS

Unless otherwise indicated, the following terms shall be defined as follows:

AIDS	Acquired Immune Deficiency Syndrome
CARE	refers to the steps taken to promote a person's well-being through medical, psychosocial, spiritual and other means.
EAPA-SA	Employee Assistance Professionals Association of South Africa
EHWP	Employee Health and Wellness Programme: is defined as a work-based programme designed to assist in the early identification and resolution of productivity problems associated with employees impaired by personal concerns which include, but not limited to, health, marital, drug, alcohol, financial, emotional, stress, work-related and other concerns which may adversely affect the job performance of employees.
EMPLOYEE	An employee refers to any person employed in terms of the Public Service Act, 1994 (as amended) regardless of rank or position.
EXTERNAL SERVICE PROVIDER	"refers to an external person or group that offers services to employees either for free or at an agreed fee. The external service provider may or may not have a working agreement with NCDRPW".
FAMSA	Family and Marriage Association of South Africa
HCM	Human Capital Management
HIV	Human Immunodeficiency Virus
HOD	Head of Department
INDS	Integrated National Disability Strategy
NCDRPW	Northern Cape Department of Roads and Public Works
NGO	Non-governmental Organisation
PILIR	Policy on Incapacity Leave and Ill-health Retirement
PSCBC	Public Service Co-ordinating Bargaining Council
SAMDC	South African Medical and Dental Council
SUPPORT	refers to services and assistance that could be provided to help a person deal with difficult situations and challenges.
TB	<i>Tubercles Bacillus</i> (Tuberculosis)
TREATMENT	is a medical term describing the steps taken to manage an illness or injury.
WHO	World Health Organization

2. REGULATORY FRAMEWORK

- 2.1. The Constitution of the Republic of South Africa (Act No. 108 of 1996), section 215 and 217,
 - 2.2. The Public Finance Management Act no.1 of 1999 (as amended by Act no 29 of 1999):
 - o Section 38 dealing with general responsibilities of accounting officers and specifically subsection 38 (1)(a)(i), 38(1)(b), 38(1)(d), 38(1)(h) and
 - o Section 45 dealing with the responsibilities of other officials.
 - 2.3. The Public Service Act, Act No. 103 of 1994
 - 2.4. The Public Service Amendment Act, Act No. 13 of 1996.
 - 2.5. The Occupational Health and Safety Act, Act No. 85 of 1993.
 - 2.6. The Occupational Health and Safety Act, Act No.29 of 1996.
 - 2.7. The Labour Relations Act, Act No. 66 of 1995.
 - 2.8. The Basic Conditions of Employment Act, Act No. 75 of 1997.
 - 2.9. The Compensation for Occupational Diseases and Injuries Act, Act No. 130 of 1993.
 - 2.10. The Employment Equity Act, Act No. 55 of 1998.
 - 2.11. The Promotion of Equality and Prevention of Unfair Discrimination Act, Act No. 4 of 2000.
 - 2.12. The Skills Development Act, Act No. 97 of 1998.
 - 2.13. The Public Service Act, Act No. 103 of 1994
 - 2.14. The Public Service Amendment Act, Act No. 13 of 1996.
 - 2.15. The Occupational Health and Safety Act, Act No. 85 of 1993.
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- 2.16. The Occupational Health and Safety Act, Act No.29 of 1996.
 - 2.17. The Labour Relations Act, Act No. 66 of 1995.
 - 2.18. The Basic Conditions of Employment Act, Act No. 75 of 1997.
 - 2.19. The Compensation for Occupational Diseases and Injuries Act, Act No. 130 of 1993.
 - 2.20. The Employment Equity Act, Act No. 55 of 1998.
 - 2.21. The Promotion of Equality and Prevention of Unfair Discrimination Act, Act No. 4 of 2000.
 - 2.22. The Skills Development Act, Act No. 97 of 1998.
 - 2.23. The Tobacco Products Control Amendment Act, Act No. 12 of 1999.
 - 2.24. The Code of Good Practice: Working Time.
 - 2.25. The Public Service Regulations, 2001: Part VI of Chapter 1.
 - 2.26. PILIR
 - 2.27. The White Paper on the Transformation of the Public Service, Notice 1459 of 1997.
 - 2.28. The EAPA-SA Code of Ethics and Standards.
 - 2.29. The White Paper on Human Resource Management, Notice 16594 of 1997.
 - 2.30. The Public Service Regulations, 2001 (as amended) (Government Gazette No. 20271).
 - 2.31. The Prevention and Treatment of Drug Dependency Amendment Act, Act No. 14 of 1999.
 - 2.32. The INDS White Paper of 1997
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3. OBJECTIVE AND SCOPE

The success of the EHWP policy depends on the degree to which management, unions and employees uphold, support and promotes the implementation and maintenance of the following policy principles:

- 3.1. **Confidentiality:** Confidentiality underpins consultation processes in the EHWP programme. Personal information of employees utilizing the programme will be dealt with in a confidential manner to ensure that employees have no concerns that participating in the programme will in any way affect their privacy, dignity or standing in the NCDRPW. There will be no victimization or dismissals arising from the information divulged at an EHWP session. Whilst the NCDRPW, Northern Cape Province is committed to upholding the employee's right to confidentiality, this right may be limited by law.
 - 3.2. **Accessibility:** All employees of the NCDRPW will have access to the programme regardless of their position or rank.
 - 3.3. **Neutrality:** The programme will be run in such a way that it remains neutral and provides an equitable service to both employees and employer. The EHWP shall remain outside the conflict areas between management and trade unions, and should not clash with existing administrative procedures and contractual agreements.
 - 3.4. **Professional Standards and Ethics:** Consultations will be created in a professional manner and within the acceptable ethics. To establish principles and guidelines as to what would constitute normal and acceptable behaviour in relation to gifts and entertainment; and as to what would be regarded as unethical, criminal or contrary to good corporate governance and behaviour.
 - 3.5. **Impartiality:** Participation in the EHWP programme will not prejudice an employee's job security or chances of promotion.
 - 3.6. **Voluntarism:** Participation in the EHWP is voluntary without, however, denying management the prerogative of recommending employees for assistance. Employees who voluntarily seek help from the programme are taking
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responsibility for their problems. Voluntarism should therefore be encouraged. Employees cannot be forced to participate in the EHWP, even though the NCDRPW acknowledges that it is a strong motivating lever, as the consequences of not seeking help could ultimately result in more severe action.

- 3.7. **Constructive Coercion:** Managers and supervisors are to formally refer employees whose performance, capacity or conduct requires intervention, for assistance as an alternative to, or in conjunction with, job action, but preferable before any punitive action is taken against any employee.
- 3.8. **Diversity:** The absence of subgroup variability and discrepancy.
- 3.9. **Timely Intervention:** Reasonable efforts will be made to ensure the early identification and treatment of problems thus facilitating a good prognosis.
- 3.10. **Equal and dignified treatment:** Service providers will treat all employees making use of this service equally and with dignity.
- 3.11. **Equity:** The EHWP will make reasonable accommodation for persons from designated groups.
- 3.12. **Employees' preference in terms of language and gender** will be respected when counselling arrangements are made.
- 3.13. **Prevention of abuse:** The programme should not be abused by any employee or participating party.
- 3.14. **A balanced programme:** A healthy balance between rehabilitative and preventative services should be maintained.

4. PRINCIPLES, VALUES AND PHILOSOPHY

This policy is intended to reflect the department's commitment to the principles, goals and ideals described in the department vision and core values.

It shall apply to all employees of the NCDRPW, appointed in terms of the Public Service Act, 1994, as amended and other relevant acts as well as to interns and contract

workers. Assistance to family members will be limited to the extent that the problem experienced by the employee has a direct bearing on the employee's performance.

5. PROCEDURES

The EHWP process involves internal referrals and external referrals.

5.1. Internal Referrals

There are three internal referral systems:

- Voluntary referral.
- Informal referral.
- Formal manager/supervisor referral.

5.1.1. Voluntary Referrals

The employee has the right to seek assistance or information for his/her concern through self-motivation or self-recognition.

Procedure for voluntary referral:

The employee in this category may arrange for the appointment and notification of whereabouts related to the EHWP intervention (which need not disclose confidential information) with her/his immediate supervisor in advance.

5.1.2. Informal Referrals

This is a referral where personal and work-related problems affect job performance. Motivation and referral is by managers/supervisors, and colleagues.

Procedure for informal referral:

When an employee's performance or conduct is unsatisfactory, the supervisor/manager/shop steward will call it to his attention per regular procedure. The client is advised out of concern to utilise the EHWP service. If performance/conduct improves no further, action is required.

5.1.3. Formal / Manager / Supervisor Referrals

This is a referral where a personal/work related problem has affected job performance and disciplinary action is pending. With reference to this form of referral, the EHWP does not aim to replace discipline but it is an alternative method of correcting poor performance at the workplace.

Procedure for formal referral:

- ✓ If poor performance conduct problems continue, the supervisor/manager will constructively discuss the problem privately with the employee and refer the employee to the EHWP. Provided the employee accepts referral and its consequent conditions, no further disciplinary action is necessary.
- ✓ The supervisor should focus on the employee's deficient job performance/ conduct, he / she must not make a diagnosis or give personal opinions and judgment.
- ✓ If it appears that the employee cannot or will not improve her/his job performance/ conduct, he/she will be dealt with by means of the normal disciplinary procedures in terms of poor job performance.
- ✓ The NCDRPW recognises alcohol and drug dependence as a condition, which definitely and repeatedly interferes with the health and job performance of employees suffering from this illness. In such cases, all the above conditions apply. In the event of the first two relapses, management must inform the EHWP immediately. In the event of a third relapse, management must exercise discretion in deciding whether to enforce disciplinary procedures or to allow the employee to continue with treatment.

If the employee accepts the offer of help or completes the treatment satisfactorily and job performance or conduct problems improve, no further action will be taken, nor will he/she be discriminated against in any way because of her/his utilisation of the programme.

5.2. External Referrals

5.2.1. Out-patient treatment of alcohol/drug dependency

A duly appointed service provider may appoint employees experiencing drug and alcohol dependency problems. The EHWP will be responsible for arranging appointments and

giving feedback to managers/supervisors. Employees can be given time-off to attend both medical and social work therapy.

5.2.2. *In-patient treatment*

Where in-patient treatment is required, be it for alcohol/drug dependency or other psychosocial problems, time-off can be treated in terms of sick leave as these are regarded as illnesses.

The employee arranges medical expenses, privately and through the medical aid (where medical aids are prepared to pay for such treatments). The EHWP practitioner's and/or professionals will give appropriate feedback to managers/supervisors.

5.3. Consultations and Referrals

- The EHWP practitioner or professional will see the employee for consultation when approached either voluntarily by members themselves or through referrals by supervisors, colleagues and family.
 - The EHWP practitioner is responsible for the intake of clients, the initial screening of clients and determination of appropriate courses of action. This may include the referral of clients to an external service provider who offers professional services.
 - When a client is referred to the external service provider, the EHWP practitioner and/or professional must inform the client's supervisor.
 - Any cost that may result from the use of an external service provider will be met by the NCDRPW (this may include consultations, hospitalisation and cost of medication).
 - The EHWP practitioner and/or professional shall keep confidential records of all members who were treated by either themselves or by external service providers for a period of three years.
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- A participant will be allowed a maximum of ten (10) sessions at the end of which a report will be sought from the service provider.
 - After each session, participants will be required to complete an evaluation form so that problems between them and the service provider can timeously be brought to the attention of the EHWP practitioner and/or professional to allow for interventions.
 - Allowance should be made for cases where a longer or more extensive treatment is required as it is recognized that people respond differently to treatment.
 - In instances where a client needs to be booked off from work for treatment purposes for a period longer than two (2) months, the EHWP office will have to arrange for a second opinion through another psychiatrist/psychologist/therapist before the client is granted leave.

5.4. EHWP Consultation and Case Supervision

Consultation and supervision will follow a structured approach under the guidance of a well-experienced case manager. Staff from geographically isolated regions should regularly discuss cases.

5.5. Ethics

EHWP service providers, practitioners and/or professionals will be registered with their respective professional boards and adhere to the codes of practice of such bodies.

5.6. Policy Implementation Guidelines

- The EHWP officer will be responsible for the development, implementation and review of policy on the EHWP. This office should also develop/identify and purchase needs-based EHWP programmes.
 - Consultations with the Employee Assistance Practitioner and/or professional, (who must register with the Employee Assistance Association Board of South Africa – EAPA-SA) will be treated in the strictest confidence.
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- The EHWP practitioner and/or professional will be bound by both the Code of Conduct for the Public Service as well as the EAPA-SA code of ethics and standards.
- Every request for service will be met with a prompt and respectful practice.
- The EHWP will seek to facilitate optimal development, but the power to effect beneficial change lies within each individual employee.
- Contact with the EHWP practitioner and / or professional may be therapeutic, however the practitioners and / or professionals will only provide primary therapy.
- The EHWP will focus on prevention, assessment and referral.
- Every client is entitled to a conscientious and efficient assessment.
- Client health education is a fundamental EHWP responsibility.
- The EHWP delivers comprehensive and quality services to four target groups:
 - ✓ The NCDRPW as a whole.
 - ✓ Management.
 - ✓ Supervisors.
 - ✓ Organized labour representatives.
 - ✓ Employees and their family members.

5.7. EHWP Services

The services to be provided by the EHWP practitioners within the NCDRPW are classified into three broad categories, which are the information, prevention and primary therapeutic categories:

- **Information (Resource Centre) Category:** The EHWP office will make use of the Central Departmental Resource Centre that will contain information on various themes such as information on HIV/AIDS, mental, physical and spiritual health, financial management and other matters related to the EHWP.
 - **Preventative (Proactive) Category:** This category deals with the development and conducting of proactive, preventative and needs-based programmes. Such
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programmes will focus on the inculcation of healthy lifestyles by addressing issues such as personal, financial and stress management, suicide prevention, physical health, sexual harassment, depression, substance abuse and conflict management.

- **Primary Therapeutic Programmes Category:** Individual and group consultations will be conducted as therapeutic exercises. The primary therapeutic programmes are aimed at providing coping skills to affected members. This category is crisis intervention, which entails initial screening, referral of employees to professionals and/or practitioners, provision of debriefing and trauma services.

In order to provide the services mentioned above, the NCDRPW will establish and maintain links with other government institutions/departments at national, provincial and local level, non-governmental organisations (NGO's) and service providers like universities, FAMSA and EAPA-SA.

5.8. Limitation

Whilst the NCDRPW takes the utmost care and precautions against liability arising out of any of the services provided as part of the EHWP, it remains the responsibility of the employee to source the access to the appropriate intervention with the EHWP. The NCDRPW may not be liable for any losses that may have been caused by the employee or by the employee's failure to access any of the interventions provided by the EHWP.

5.9. Key Needs of the People Infected and Affected with HIV/AIDS

Target group	Needs
All employees	General life skills and HIV prevention Sexually transmitted infection (STI) prevention and care Promotion of voluntary counselling and testing (VCT) Access to VCT
Infected employees	Access to HIV testing Counselling and psychosocial support Support groups and networks of people living with HIV
Infected employees – early HIV disease	Wellness management (including protecting the immune system, safer sex and harm reduction, and improved lifestyles) Prophylaxis for opportunistic infections
Infected employees – late stage HIV disease or AIDS	Treatment of opportunistic infections Effective pain relief Management of symptoms HAART Support with succession planning
Affected employees and affected families	Assistance with material needs and household tasks Spiritual and emotional support, and bereavement support Advice about wills and inheritance Preparation for death and the funeral Support for children orphaned by AIDS

5.10. Disciplinary Procedure

Should you act in any way that infringes the terms of this policy, you may face disciplinary action. In cases of serious violations involving deception, this may lead to the matter being dealt with through the Department's formal grievance and disputes procedure.

5.11. Grievance Procedure

If you consider that this policy has not been applied fairly or correctly, you should raise the matter initially with your immediate supervisor. If you subsequently remain dissatisfied by any response you receive, you may take up this matter with your employee representative, the human capital management department, or any member of senior management. Serious grievances may also ultimately be handled through the Department's formal grievance and disputes procedure.

6. ROLES AND RESPONSIBILITIES

6.1. The Senior Management

The Senior Management's role will be one of facilitating policy development and review, resource allocation as well as monitoring and evaluation of the EHWP within its planning, performance and reporting cycles. The specific issues include the following:

- Establishing appropriate structures and mechanisms for complying with minimum standards for the EHWP set by EAPA-SA.
- The NCDRPW will utilise an advisory committee or other equivalent structure for this purpose. The structure to be utilised for supporting the EHWP and complying with the minimum standards will have terms of reference covering at least the following:
 - Advising on EHWP design, development, planning and implementation.
 - Supporting EHWP confidentiality safeguards.
 - Provide appropriate training and orientation of supervisors on identifying and referring troubled employees.
 - Promote harmonious and collegial relationships among the different structures and levels within the NCDRPW.
 - Assist directly with the marketing and promotion of the EHWP.
 - Developing ongoing needs assessment.
 - Contribute to programme evaluation procedure.
 - Since the NCDRPW has a vested interest in the well-being of its employees and their development, Senior Management is committed to assist employees in identifying the nature of their problems and providing means or services to resolve them.

The Senior Management will also see to it that the role-players are briefed on/or receive basic training to fulfil their responsibilities and/or exercise their rights. Senior Management shall endorse the programme and give it visible support. The onus is on Senior Management to ensure its implementation in their programmes.

6.2. The Middle Management Services

Middle managers have a key role in the NCDRPW's EHWP. In order to ensure the effective functioning and implementation of the programme, the Manager should therefore:

- Ensure that employees clearly understand what is expected of them in terms of job performance and behaviour.
 - Make sure that they are aware of and understand the services available from the EHWP.
 - Be alert to changes in the work performance and/or behaviour of employees.
 - Recommend appropriate corrective action, which may include an offer of assistance through the EHWP, if problems are thought to be personal. The EHWP is designed to assist managers in addressing employees' personal problems.
 - Recommend the EHWP to employees and stress that all information is treated as confidential.
 - Inform the EHWP office of a referral.
 - Allow the employee reasonable paid time off to attend EHWP intervention and/or therapeutic resources.
 - Arrange for the employee to adjust working arrangements where practicable in order to facilitate the completion of and participation in the appropriate treatment/ counseling programme.
 - Supervisors must refrain from attempting to diagnose the employee's personal problem or pass a judgment.
 - Under no circumstances may an employee be prevented from receiving assistance.
 - Supervisors should fulfill a supportive role towards the employee while treatment/ counseling is continuing. During and after treatment, the supervisor should assist in reintegrating the employee into the work environment.
 - The supervisor should give feedback to the practitioner concerning work performance during treatment/counseling.
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6.3. Employee

- The employee is obliged to maintain satisfactory work performance and conduct on the job. If the employee recognises the need for assistance, she/he should contact the EHWP office prior to his/her work performance being adversely affected.
- Contact with either of the above will be treated confidentially.
- Participation is voluntary.
- The employee need not identify the exact nature of her/his problem to the EHWP practitioner. However, it would be helpful in order to select the most appropriate resource for referral.
- It is requested but not mandatory that the outcome of the referral be discussed briefly with the EHWP practitioner (i.e. it was helpful, satisfactory, poor etc.). This will assist in ensuring that the service is adequate for other employees requiring assistance in the future or to make alternative arrangements.
- If the referral for such a programme was a formal referral, the employee will be requested to sign a release of information form notifying the EHWP Office and Manager that the treatment has been completed satisfactorily or not, and also allowing the therapist to provide periodic progress reports to the EHWP Office/ Supervisor.
- With the exception of the initial assessment interview, it is possible for consultations to be made outside of normal working hours on a date and time agreed between the employee and the service provider.

6.4. EHWP Practitioner

The EHWP practitioner will be a trained and registered social worker or counselor with at least one year's EHWP training and experience. The responsibilities of the practitioner are:

- Management of the EHWP in the most efficient and cost-effective way.
 - Co-ordinate with employees, employee representatives and management and make referrals to the service providers.
 - Publicize the intent and purpose of the EHWP programme.
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- Utilize any other personnel designated by management to accomplish the EHWP goals.
- Monitor referrals and provide assistance to service providers if requested.
- Provide assistance to supervisors and management in the identification of employees with performance and behaviour related problems.
- Act as Chairperson for the EHWP Committee.
- Ensure the confidentiality of information obtained about employees and their dependents.

Also note the following:

- Departmental coordinators may not counsel but must facilitate the most appropriate access to EHWP resources.
- Coordinators should provide support to employees.

6.5. EHWP Professional

The EHWP professional will be a qualified psychologist or an equivalently appropriately qualified Health or Wellbeing professional, with at least one year of experience in the EHWP field.

6.6. The Support Staff

The EHWP needs may be assigned to appropriate levels of administrative support staff who are sensitive to the confidential and ethical issues of the EHWP.

7. RESOURCE IMPLICATIONS

7.1 An Enabling Environment

- In the implementation of the EHWP the NCDRPW shall direct the managed wellness care approach by ensuring performance indicators, fair and transparent monitoring activities, and benchmarked feedback.
- The Director: HCM shall ensure that employee health and well-being is reflected in Departmental strategic and operational plans and as a key performance area of all managers accompanied by specific indicators. The EHWP strategy shall form part of the overall human capital management strategy.
- It is the responsibility of the Director: HCM to ensure that managers are trained in the functional pillars of employee health and wellness, the principles of managed wellness care, and the legal aspects of employee health and wellness.
- The Director: HCM shall ensure that the necessary resources are available for the implementation of the Departmental EHWP.
- The Director: HCM shall ensure that the NCDRPW has all the necessary policies, processes and procedures in place to create an environment which is conducive for all employees to function and perform optimally. This includes, but is not limited to:
 - Managing change and diversity.
 - Ensuring sound labour relations and management practices to reduce stress.

7.2 Human Capital Requirements

- The HOD shall delegate the responsibility for the EHWP to the Director: HCM within the NCDRPW to steer the EHWP including the provisions contained in the Public Service Regulations VI E, and ensure that the member so designated is held accountable by means of his or her performance agreement.
 - The Director: HCM, to whom the responsibility is delegated, shall ensure the establishment of all relevant committees and structures as prescribed in the relevant legal framework.
 - The NCDRPW shall appoint qualified and skilled practitioners to ensure the implementation of all the components of the EHWP.
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- The practitioners shall have performance agreements embracing relevant and specific key performance activities and performance indicators.
 - Where applicable, the Director: HCM responsible for the EHWP shall ensure that all practitioners requiring registration with professional bodies maintain their membership of such bodies to ensure their ethical, professional and legal functioning.
 - Managers/Supervisors shall promote health and wellness and provide support to employees in their immediate environment to ensure the effective implementation of the EHWP.
 - Suitable employees shall be recruited and trained as Peer Educators to support the implementation of the programme. In this regard, a ratio of no less than 1:50 (Peer Educator : Employees) shall be applied.
 - When determining the ideal staffing levels for the EHWP, factors such as the following will be considered:
 - Geographic location of the workforce.
 - Racial, ethnic and cultural mix of the employee population.

7.3 Financial Resources

- The Director: HCM shall ensure that the Departmental EHWP is adequately funded, with a dedicated budget to ensure the sustainability of the programme.
 - The EHWP Manager shall in turn defend this expenditure by demonstrating its contribution to organisational outcomes by means of managed wellness care principles.
 - Department-wide health promotion medical services such as health assessments shall only be procured through Departmental EHWP funds in adherence with all related policies and procedures.
 - Only suitably qualified and registered providers shall be used to provide all aspects of the EHWP as required.
 - All medical aspects of the programme for individual employees shall be financed through the medical aid benefit of employees.
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- If the affected employee has no/inadequate cover for the condition she/he needs to be referred for, the HOD shall, applying the Constitutional principle of equity, retain the discretion regarding the use of the Departmental EHWP funds for such medical services.
- In deciding whether to provide services on-site or through outsourcing arrangements, the EHWP Manager shall conduct a thorough feasibility study to support such a decision.

7.4 EHWP Information Management

- All staff members shall adhere to ethical standards of information management. Confidentiality of records shall be ensured at all times.
- A reliable information management system that links relevant human resource information and other relevant information shall be developed by the NCDRPW.
- The data that shall be collected and analysed periodically to provide the necessary management information.
- The data to be collated at least quarterly includes, but is not limited to:
 - Absenteeism and sick leave data.
 - Injuries on duty data.
 - Incapacity data.
 - Turnover data.
 - Medical aid utilisation data.
 - EHWP data, which includes risk assessment data, disease management data, referral data, utilisation data, and expenses, research etcetera.

7.5 Health Management

- The employer shall provide general health promotion and awareness programmes pertaining to reducing risks related to communicable (e.g. HIV and AIDS, TB) and non-communicable diseases (e.g. coronary heart disease, diabetes, mental health) in the workplace.
 - The actual management of health conditions shall not form part of the EHWP.
 - Sick and incapacity leave, as well as ill health retirement shall be dealt with according to the provisions of PILIR as determined in terms of section 3(3) of the Public Service Act of 1994.
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7.6 Wellness Management

The employer shall develop and implement interventions to promote the following:

- **Physical wellness:** Promote healthy behaviours, awareness, and behavioural regulation towards healthy lifestyles and assisting employees in need through the EHWP infrastructure.
 - **Social wellness:** Promote the ability to interact successfully and to live up to the expectations and demands of personal roles, by learning good communication and financial skill, creating support networks with colleagues, friends and family, and showing respect for others and self.
 - **Emotional wellness:** Promote the emotional intelligence, self-esteem, optimism, sense of coherence, and resilience of employees.
 - **Occupational wellness:** Assist employees in making use of their gifts, skills and talents in order to gain purpose, enrichment and happiness in life. Reasonable accommodation of employees with special needs like employees with disability will be provided for.
 - **Spiritual wellness:** Promote a set of guiding beliefs, principles or values that help give direction to life.
 - **Intellectual wellness:** Promote the ability to make sound decisions, to think critically, to be open to new ideas, to master new skills, and to be creative and curious.
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8. MONITORING AND EVALUATION

Monitoring and evaluation of the programme will be based on the following criteria:

- Feedback and effectiveness;
- Utilisation;
- Quality of interventions;
- Measured improvement of performance, conduct and capacity;
- Standard and ethics;
- Efficiency and cost effectiveness.

EHWP reports will be treated as confidential, with de-identified feedback limited to the relevant managers/supervisors should it be necessary and with the concerned employee's consent to such an agreement. No document will be put on the employee's personal life.

9. POLICY REVIEW

This policy shall be assessed every five (5) years from its effective date to determine its effectiveness and appropriateness. This policy may be assessed before that time as necessary to reflect substantial organisational or other changes at the Department or any changes required by law.

10. APPROVAL

This policy is ☒ Approved / Not Approved
Comments:

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ACCOUNTING OFFICER

05.03.19
DATE

ANNEXURE A: GOVERNING LEGISLATIVE FRAMEWORK

The EHWP is informed by, among others, the following legislation:

- **The Constitution of the Republic of South Africa Act, Act No.108 of 1996.**
The Constitution has certain implications for the health, safety and wellness of employees. In Section 23 (a) it states the following: *"Every worker has the right to fair labour practices."*
 - **The Public Service Act, Act No. 103 of 1994**
The Act provides for the organisation and administration of the public service of the Republic, the regulation of the conditions of employment, in terms of the office, discipline, retirement and discharge of members of the public service, and matters connected therewith.
 - **The Public Service Amendment Act, Act No. 13 of 1996.**
To provide for the removal of unjust differentiation between "officers" and "employees" as defined in the Public Service Act, 1994; to amend the Public Service Act, 1994, so as to further regulate the appointment of heads of department; to protect the existing retirement age of serving employees notwithstanding the removal of such differentiation.
 - **The Occupational Health and Safety Act, Act No. 85 of 1993.**
The Act provides for the health and safety of persons at work and for the health and safety of persons in connection with the use of plant and machinery, the protection of persons other than persons at work against hazards to health and safety arising out of or in connection with the activities of persons at work; and to provide for matters connected herewith.
 - **The Occupational Health and Safety Act, Act No.29 of 1996.**
The Act imposes a general duty on employers to provide a reasonably safe and healthy working environment, to provide information, training and supervision as is necessary to ensure health and safety, and to report to an inspector any incident in which an employee dies or is injured or when dangerous situations arise.
 - **The Labour Relations Act, Act No. 66 of 1995.**
The Act aims to encourage collective bargaining and the settlement of disputes by enhancing the powers of forums designed to facilitate these objectives. The purpose of the Act is to advance economic development, social justice, labour peace and democratisation of the workplace by fulfilling the primary object of this Act.
 - **The Basic Conditions of Employment Act, Act No. 75 of 1997.**
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The Act regulates working conditions, e.g. ensures that working hours do not exceed certain maxima; employees are granted adequate breaks during a working day; they are given prescribed annual and sick leave; and they are remunerated for overtime and work on Sundays and public holidays.

- **The Compensation for Occupational Diseases and Injuries Act, Act No. 130 of 1993.**
The Act ensures that employees or their dependants who have suffered injury, illness or death arising from the performance of work are compensated. It specifies that compensation is payable only if the accident which caused the injury, illness or death occurred within the scope of the employee's employment and was not predictable.
 - **The Employment Equity Act, Act No. 55 of 1998.**
Aims to eliminate discrimination in the workplace and to promote affirmative action.
 - **The Promotion of Equality and Prevention of Unfair Discrimination Act, Act No. 4 of 2000.**
This Act gives effect to the spirit of the Constitution, in particular the equal enjoyment of all rights and freedoms by every person, the promotion of equality and the prevention of unfair discrimination and protection of human dignity.
 - **The Skills Development Act, Act No. 97 of 1998.**
Provides for an institutional framework to devise and implement national, sector and workplace strategies to develop and improve the skills of the South African workforce, to integrate those strategies within the National Qualification Framework contemplated in the South African Qualifications Authority Act No. 58 of 1995.
 - **The Tobacco Products Control Amendment Act, Act No. 12 of 1999.**
The Act prohibits the use of tobacco products in public places, including workplaces. The Act defines "workplaces" and regulates the general use of such products.
 - **The Code of Good Practice: Working Time.**
This Code of Practice concerns the arrangement of working time and the impact of working time on the health, safety and family responsibilities of employees.
 - **The Public Service Regulations, 2001: Part VI of Chapter 1.**
The Public Service Regulations provides for a policy framework on the management of HIV and AIDS in the Public Service work environment. The current EHWP provides for a
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framework for the development and implementation of a comprehensive employee health and well-being programme as outlined in the Public Service Regulations.

- **PILIR.**
The objective of PILIR is to set up structures and processes to ensure the management of incapacity leave to accommodate temporary or permanently incapacitated employees as well as to facilitate rehabilitation, re-skilling, re-alignment and retirement as deemed appropriate.
 - **The White Paper on the Transformation of the Public Service, Notice 1459 of 1997.**
The purpose of the White Paper on Transforming Public Service Delivery (*Batho Pele White Paper*) is to provide a policy framework and a practical implementation strategy for the transformation of Public Service Delivery.
 - **The EAPA-SA Code of Ethics and Standards.**
The purpose of the South African Employee Assistance Professionals Association (EAPA-SA) Code of Ethics and Standards is to promote the highest ethical practice among Employee Assistance Professionals and the EAPA-SA members.
 - **The White Paper on Human Resource Management, Notice 16594 of 1997.**
The White Paper acknowledges that the post-1994 Public Service faces enormous challenges, both in terms of its own transformation, and in terms of the transformation of the services which it provides to the people of South Africa. These challenges are being tackled through a comprehensive programme of policy initiatives underpinned by progressive legislative changes. The initiatives will achieve a fundamental managerial shift from a centrally controlled, process driven Public Service to a service which -
 - is representative of all the people of South Africa;
 - treats all public servants as a valuable resource;
 - is focused on service delivery outcomes;
 - assigns managerial responsibility for results, and for the resources consumed in producing them, to the lowest practicable level;
 - holds public servants accountable for their actions; and
 - conducts its business professionally, transparently and ethically.
 - **The Public Service Regulations, 2001 (as amended) (Government Gazette No. 20271).**
These regulations deal with the following:
 - delegations, authorisations and responsibilities;
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- planning, work organisation and reporting;
- job evaluation;
- compensation for employees;
- working environment;
- procedures for appointment, promotions and termination of service;
- performance management and development;
- training and education;
- labour relations;
- a code of conduct;
- financial disclosure by heads of departments and certain other employees;
- the senior management service;
- recruitment, selection and appointment;
- performance management and development;
- conditions of service;
- mobility and career progression;
- training and development;
- ethics and conduct;
- employer-employee relations;
- exit management.

- **The Prevention and Treatment of Drug Dependency Amendment Act, Act No. 14 of 1999.**

This Act is to amend the Prevention and Treatment of Drug Dependency Act, 1992, so as to delete a definition and define certain expressions; to establish the Central Drug Authority; and to provide for the assistance of the Drug Authority by a secretariat.

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- **The INDS White Paper of 1997.**

The INDS moves from a premise that people with disabilities are excluded from the mainstream of society and experience difficulty in accessing fundamental rights and that there is a strong relationship between disability and poverty.

Due to the broad scope of the EHWP, and its impact on various other aspects of employee management, this policy has been integrated with the following other policies, namely the:

- Code of Conduct for the Public Service.
 - Disciplinary Code and Procedures.
 - Education and Training Policy.
 - HIV/AIDS Policy.
 - Performance Management and Development System Policy.
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- Sexual Harassment Policy.
 - Smoking Policy.
 - Alcohol and Substance Abuse Policy.
 - Exit Interview Policy.
 - Leave Policy.
 - Equity Policy.
 - Disability Policy/PILIR/The Incapacity Code and Procedures for the Public Service in respect of ill health and the PSCBC Resolution 8 of 2001.
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