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delivering freight reliably

# TRANSNET PORT TERMINALS COVID19 BUSINESS READINESS ENGAGEMENT

Presentation to: Industry Customers and Key  
Stakeholders

2020/07/24

# Transnet Port Terminals – COVID 19 Response

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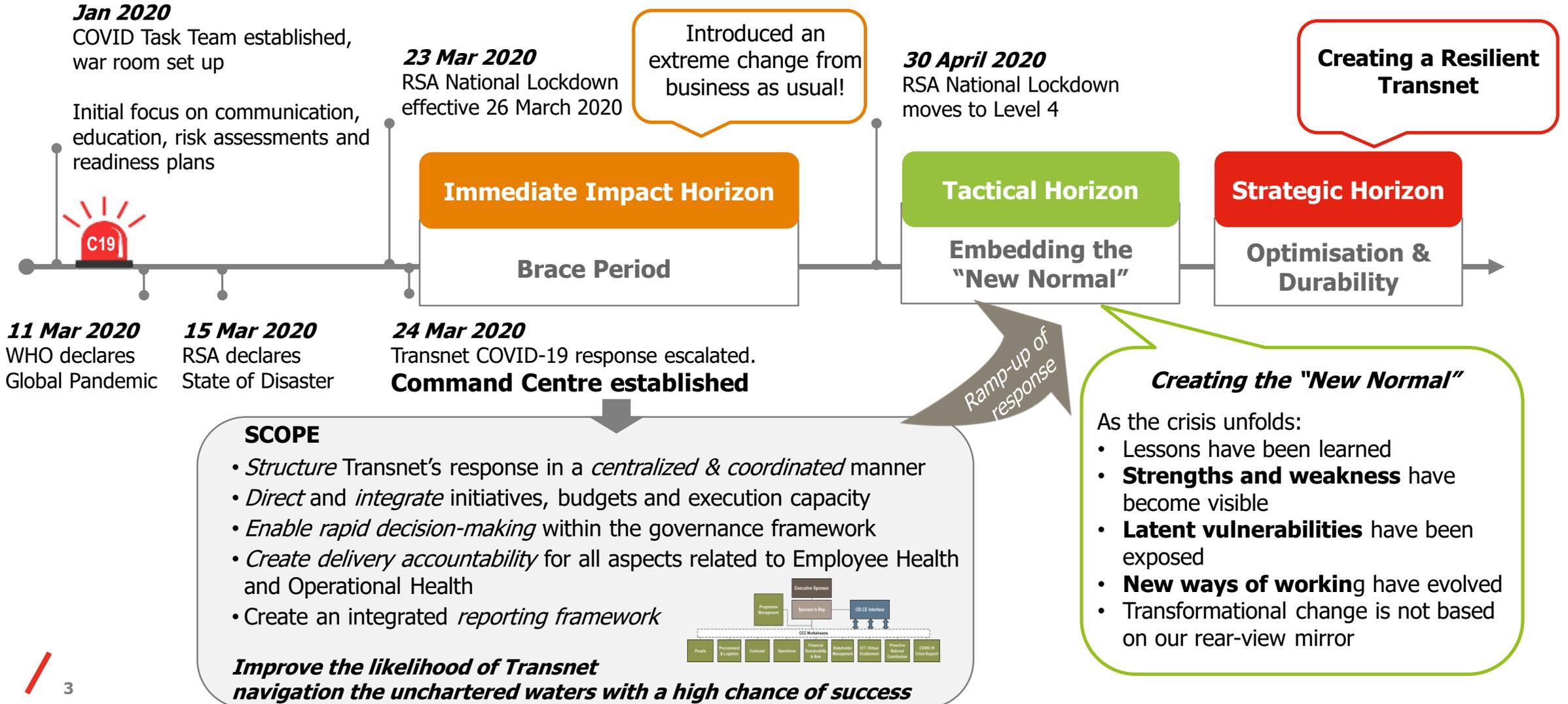
TPT is a labour intensive business where COVID-19 has the potential to undermine its key resource – its human capital. It therefore it has deployed an adaptive and risk adjusted response to conditions arising from the pandemic to ensure safety and business continuity.

TPT's ongoing COVID 19 response is designed and prepared in such a way that it:

- Ensures **effective health protection** for its staff;
- Allows for the **resumption of operations** at all of its terminals;
- Emphasizes a robust **maintenance regime**;
- Facilitates a **dynamic and adaptive** supply chain;
- Enables **remote working and virtual** engagement;
- Maintains a **productive workforce**;
- Provides safe and **COVID-19 compliant** facilities;
- Prioritizes **transparent and effective communication** with employees, customers and stakeholders;
- Ensures **integration of lessons learnt** both internal and from Global counterparts.



# The CoVid-19 Journey



# CoVid-19 Employee Health Approach

## CoVid-19 Employee Health

The pandemic is an evolving threat to employee health, and the global understanding of how to combat the spread of the virus is still considered to be at its infancy.

Due to the unpredictable nature of the virus, a risk-informed, centrally co-ordinated strategy to manage Transnet's response is integral to counteracting the impact on the business.

The approach that has been adopted centrally is based on **three** simple and clear **pillars**:

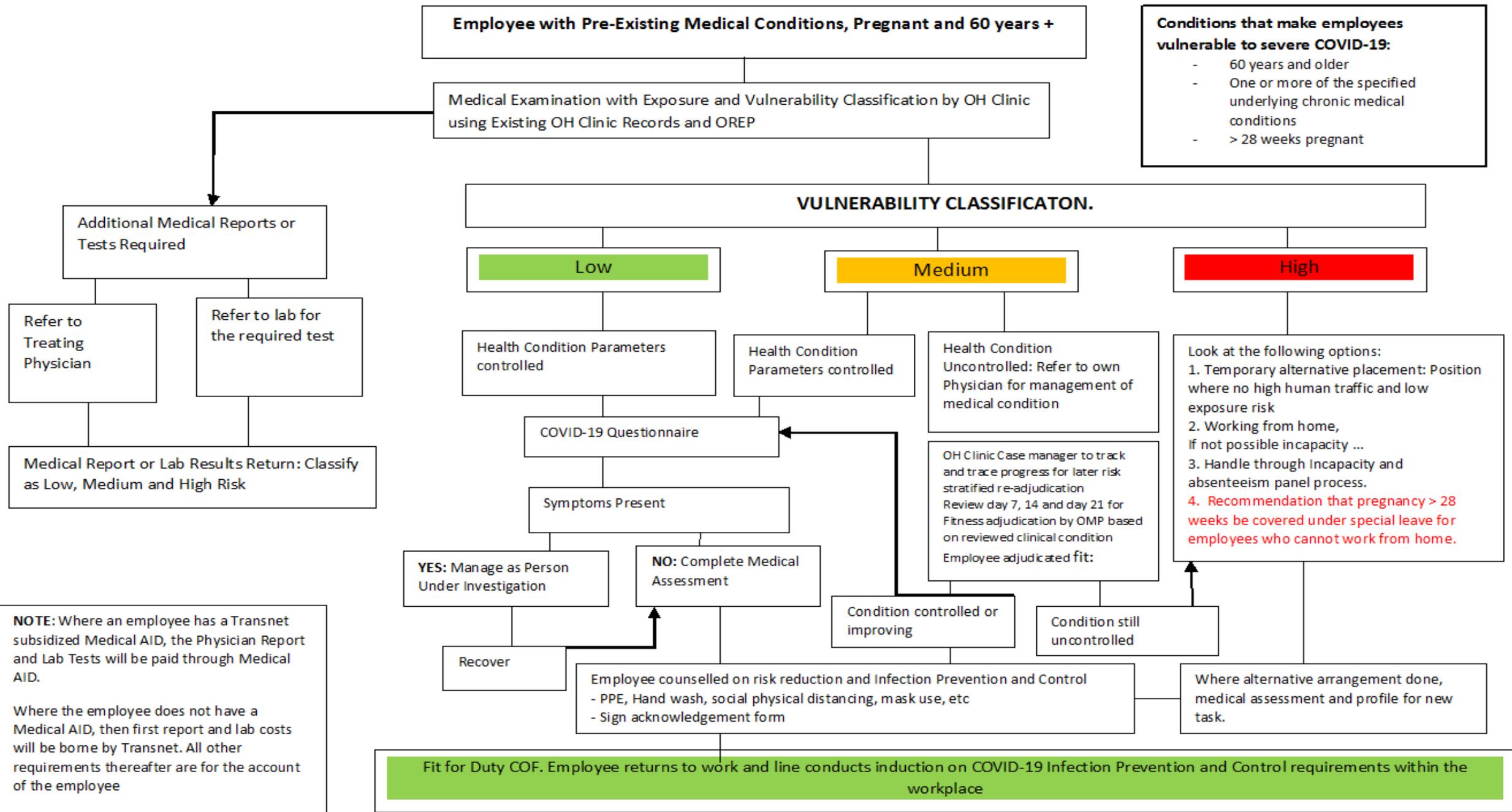


These pillars frame the Transnet C-19 Strategic Response in a "**Lines of Defence**" model:

1. **Employee behaviour change** in the home & community;
2. **Screening** prior to entry to the workplace;
3. Workplace **protocols, guidelines & equipment**
4. Specific targeted interventions informed by **case analytics**, and
5. **Return to Work protocols**

Mitigating strategies underpinning the lines of defence have continuously **evolving solutions** that are being improved upon dynamically as the virus, efficacy of response strategies and the evolution of its impact within the Transnet context is better understood.

# ALGORITHM ON MANAGEMENT OF VULNERABLE EMPLOYEES BASED DURING THE COVID-19 EPIDEMIC



Employee with Pre-Existing Medical Conditions, Pregnant and 60 years +

Medical Examination with Exposure and Vulnerability Classification by OH Clinic using Existing OH Clinic Records and OREP

- Conditions that make employees vulnerable to severe COVID-19:**
- 60 years and older
  - One or more of the specified underlying chronic medical conditions
  - > 28 weeks pregnant

**VULNERABILITY CLASSIFICATION.**

Low

Medium

High

Additional Medical Reports or Tests Required

Refer to Treating Physician

Refer to lab for the required test

Medical Report or Lab Results Return: Classify as Low, Medium and High Risk

Health Condition Parameters controlled

Health Condition Parameters controlled

Health Condition Uncontrolled: Refer to own Physician for management of medical condition

- Look at the following options:
1. Temporary alternative placement: Position where no high human traffic and low exposure risk
  2. Working from home, If not possible incapacity ...
  3. Handle through Incapacity and absenteeism panel process.
  4. Recommendation that pregnancy > 28 weeks be covered under special leave for employees who cannot work from home.

COVID-19 Questionnaire

Symptoms Present

YES: Manage as Person Under Investigation

NO: Complete Medical Assessment

OH Clinic Case manager to track and trace progress for later risk stratified re-adjudication Review day 7, 14 and day 21 for Fitness adjudication by OMP based on reviewed clinical condition Employee adjudicated fit:

Condition controlled or improving

Condition still uncontrolled

Recover

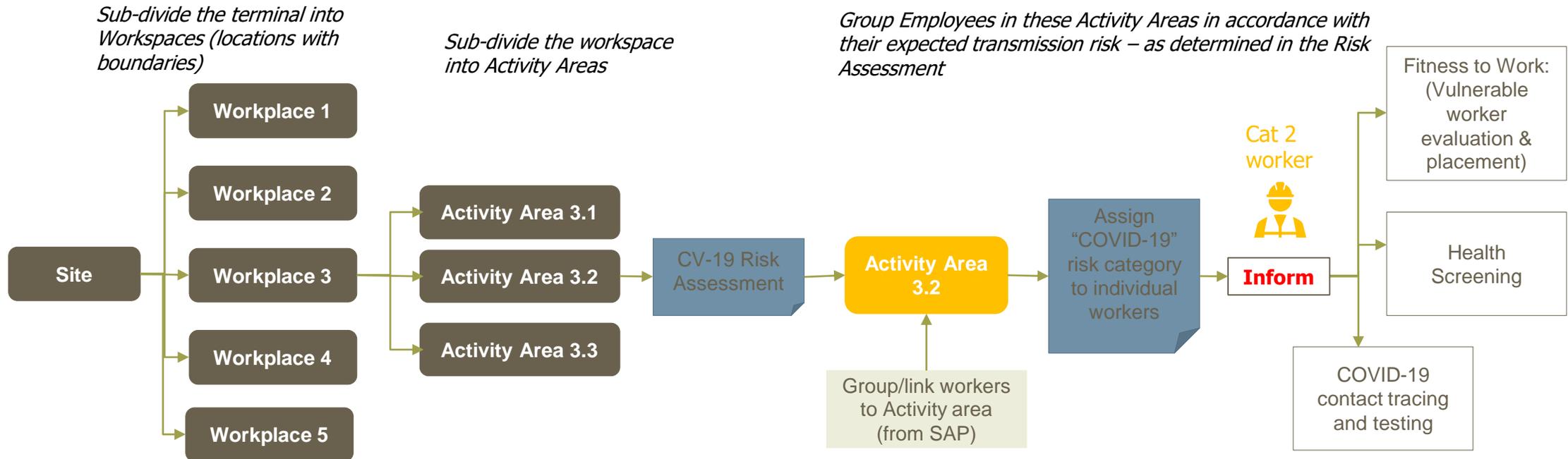
Employee counselled on risk reduction and Infection Prevention and Control  
- PPE, Hand wash, social physical distancing, mask use, etc  
- Sign acknowledgement form

Where alternative arrangement done, medical assessment and profile for new task.

Fit for Duty COF. Employee returns to work and line conducts induction on COVID-19 Infection Prevention and Control requirements within the workplace

**NOTE:** Where an employee has a Transnet subsidized Medical AID, the Physician Report and Lab Tests will be paid through Medical AID. Where the employee does not have a Medical AID, then first report and lab costs will be borne by Transnet. All other requirements thereafter are for the account of the employee

# COVID-19 Risk Categories for biological hazards (droplet transmission) TRANSNET

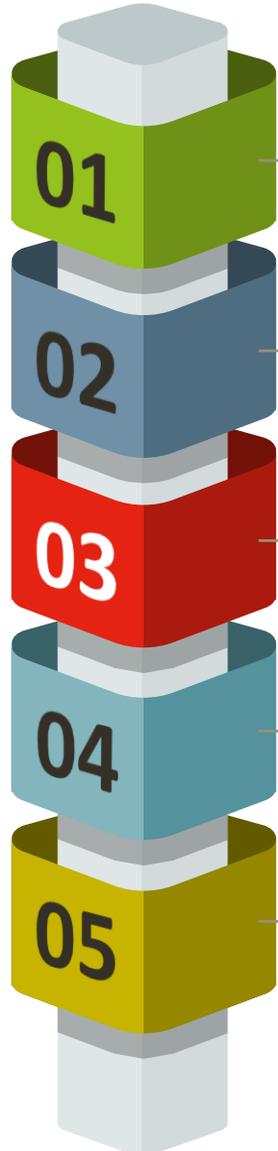


## Covid-19 Risk Category

Category 1 (High risk)	Category 2 (Medium risk)	Category 3 (Low risk)
Healthcare workers and support staff– Doctors and Occupational Health clinic staff. Drivers – transporting symptomatic / infected employees.	Security workers and others doing screening. Reception staff who may be in close contact with somebody possibly infected. Staff who cannot maintain social distance due to physical constraints in the workplace.	Workers who are unlikely to be in close contact or where social distance can be maintained
Source is symptomatic of COVID-19 or known to be infected with COVID-19	Pre-work screening for symptoms. Source is <b>not known</b> at time of exposure to be infected with COVID-19 (either uninfected, infected but asymptomatic or infected but pre-symptomatic).	



# Phase 1: Response – Five (5) key priorities



## Workforce protection

- **Personal and contractors:** Tiering, essential, semi-essential & non essential;
- **Policies:** Portfolio of policies and action, including prevention and incident response;
- **Facilities & on-site norms:** Split workforce, two shift systems, spread prevention, social distancing; sanitisation, temperature reading; reduced face to face meetings.

## Command center

- Establishment of COVID 19 command center;
- Reporting requirements;
- Operational impact;
- Risk assessments;
- Documentation repository (SharePoint)

## Customer engagement

- B@B transparency;
- Customer protection;
- Customer outreach.

## Operations

- Resourcing – terminals servicing essential cargo;
- Six (6) of sixteen (16) operating;
- Reduced capacity due to lockdown;
- Immune compromised employees sent home;
- Reviewed operating model;
- OD integration (TFR, TNPA & TE)

## Supply chain stabilisation

- Supplier engagement;
- Inventory management
- Contractor management
- Cost control;
- Tender management
- Commercial consequences .



# TPT Phase 2: Response – Six (6) key priorities



## Commercial



- Review/adaptation of commercial contracts;
- Volume alignment with TFR;
- Align customer demand to capacity (scenario based);
- Reconciliation of customer exemptions;
- Demand classification with customers;
- Constant customer engagement (virtual).

## Health and hygiene



- Adherence to Covid 19 SOP and continuous training;
- Provision of protective gear;
- Screening, testing and monitoring on site;
- Community outreach (partnerships with civil society);
- Compliance with social distancing (employee transportation, ablution facilities etc);
- Increased hygiene protocols (offices, equipment, ablutions);
- Provide isolation facilities in all sites.

## Workplace re-design



- Smart working (remote working enabled by technology);
- Facilities (ablutions, dining, training, clinics);
- Digital devices and connectivity
- Tracking technology
- Workplace systems accessibility

## Operations



- Resourcing - gang configurations adapted to risk scenario;
- Contingency labour resources (upskilling, contract employees/ VSP);
- Equipment - increase up time/reliability;
- Planning agility (adapt methodology);
- OD integration (TFR, TNPA & TE)
- Virtual customer alignment

## People



- Upskilling / cross training and contracting of experienced critical skills;
- Recovery support to infected employees;
- Introduction of resilience champions;
- Align HR policy and practice to current environment;
- Management of absenteeism and return to work

## Communication



- Covid 19 prevention and awareness programs (internal and external);
- Internal – constant engagement with employees and labour;
- External – platform based engagements with Customers/ Industry/ suppliers;
- Communication of amendments/changes to permissible cargo and goods;

# LESSONS LEARNT AND AREAS FOR IMPROVEMENT



**Lapse in required assessments:** Strengthen the symptom screening process and probe more. Need a high suspension index and act at low thresholds.

**Non-adherence to social distancing requirements making risk of transmission in an entire shift high:** Divide the shifts into smaller teams that do not mix under any circumstance, i.e. not mix in transport, eating areas, sign on, etc.

Pay attention to disinfecting surfaces and also small areas e.g. door knobs, two radios, etc. Our attention is more on the big areas and danger in omitting hygiene in smaller areas.

**Not a cohesive terminal approach – more top down:**

- Engage employees more in developing process of solution implementation. Currently a more top-down approach. Employees also responsible for their own health.
- COVID-19 Ambassadors to support employees to comply with agreed upon IPC measures
- Intensify education on infection prevention and correct use of PPE.

# LESSONS LEARNT AND AREAS FOR IMPROVEMENT



**Inconsistent use of masks.** Specific indication of areas where one can have mask off e.g. only when eating or drinking, 2 meters away from any individual who is eating, and only in a designated eating area.

**Employees seem to think that COVID 19 threat only exists at workspace.** Intensified education on the necessity to implement infection prevention measures taught at work, also at home and in public spaces. Warn about dangers of social gatherings.

**Have to pay attention to legislative compliance and administration processes:** Must make sure that the requisite documentation completed and submitted to relevant authorities e.g. accreditation of disinfecting company, minutes of meetings (command centre and SHE committees), COID

**Stigmatisation of employees returning to work after being away because of being COVID-19 positive:** Educate on period of infectiousness and prospects of re-infection

**High absenteeism due to fear:** Address employee fear as it drives employee absenteeism. EAP through various platforms.

**Collaboration with the Authorities.** Forged a partnership with the University of Cape Town and Western and Eastern Cape Provincial Departments of Health. Guidance and support to outline the correct processes and management of affected employees and their contacts.

**Collaboration with Labour.** Established a team with labour for joint efforts to combat risk and spread of infections in the workspace

# ACKNOWLEDGEMENTS



- 
- **National Department of Health, South Africa**
  - **NICD, Southern Africa**
  - **NIOH, South Africa**
  - **World Health Organisation**
  - **Western Cape Government**
  - **KZN Department of Health**
  - **Western Cape Department of Economic Development and Tourism**
  - **University of Cape Town, Infectious Disease and Occupational Medicine Department**
  - **University of Witwatersrand**
  - **University of KwaZulu-Natal**
  - **PSA**
  - **DBSA**
  - **Customers**
  - **UNTU and SATAWU**

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THANK YOU

