



# TOP COMPLIANCE (Pty) Ltd

Your Business' Safety Is Our Concern

QSE B-BBEE - Level Four

[www.topcompliance.co.za](http://www.topcompliance.co.za)

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## Diabetes in the workplace complicated by COVID-19

Even before the COVID-19 pandemic diabetes was recognised to be one of the leading causes of illness and death worldwide. According to a recent article penned by leading experts in internal medicine, endocrinology and metabolism and published in the South African Medical Journal (SAMJ), diabetes and obesity globally accounted for “43.4% of all deaths in 2012, compared with 33.6% of deaths from HIV/AIDS and TB combined”.

“In SA, high body mass indexes and diabetes are the second and third leading risk factors for early death and disability, respectively, and the increasing overlap with infectious diseases is a growing concern,” the authors wrote.

Now, more than ever, we will see a return in the investment of healthy living. A balanced diet high in fresh produce and low in processed foods is key. Regular physical activity will improve weight loss, insulin resistance and psychological well-being.

People living with diabetes have been particularly concerned during this COVID-19 pandemic as they are described as a ‘high-risk or vulnerable’ people.

## Why are people with diabetes at higher risk?

People with diabetes are not at higher risk of contracting COVID-19, but rather that once they do contract the disease they are at higher risk of serious illness or even death. Chronically raised blood glucose levels suppress the immune system and allow invading viruses and bacteria to multiply, including the new coronavirus.

Equally, having an infection causes a stress response from the body which can further increase glucose levels and exacerbate the infection. It is quite clear that good control of diabetes can mitigate this cycle. If COVID-19 is contracted, it is also important to aim for good blood glucose levels while ill.

## Current observations

Doctors treating COVID-19 around the world have observed that patients become particularly resistant to insulin during their disease. It is thought that COVID-19 may cause direct damage to the insulin secreting beta-cells of the pancreas. This means some patients may require insulin for the first time while others need to increase their insulin doses significantly. Vigilant monitoring of blood glucose is essential.

Another concerning observation is the severe inflammation that is seen in COVID-19. This causes tissue damage throughout the body, not only the lungs. It also increases clotting of blood and damages blood vessels which are already compromised with underlying diabetes and hypertension (high blood pressure). All of which is the reason some people become ill.

## Social distancing and hygiene still imperative

Prevention of infection, especially in high-risk groups of people, remains a vital strategy. The evidence strongly advocates social distancing and good personal hygiene.

A study published, in *The Lancet*, reported that when people kept a meter or more apart, the chance of infection or transmission dropped from 12,8% to 2,8%. Wearing masks or respirators decreased transmission from 17,4% to 3,1%. Adding strict cleaning of surfaces further reduces the risk.

COVID-19 has changed our world and created hardship for many. We need to turn this into a challenge to improve the way we live and work and manage our health. It is strongly advised that all people with chronic medical conditions are to keep all their scheduled check-ups at this time, even if it is done as a virtual consultation. Stay informed, stay home and stay well.

## Diabetes in the Workplace

### What is diabetes?

Diabetes is a medical condition where people cannot produce enough insulin, or their body cannot adequately use the insulin it has produced. Insulin is the hormone that controls the level of glucose, which is a form of sugar, in the bloodstream by regulating its movement into your cells. Insulin is necessary because glucose is the main source of energy for the body's cells. The human body can produce glucose or get it from food. Should you not maybe start with this to give an introduction to the condition before speaking about it?

### There are three types of diabetes:

- **Type 1 diabetes** is an autoimmune disease where the pancreas does not produce insulin. Type 1 diabetes is not preventable. Persons living with type 1 diabetes require insulin.
- **Type 2 diabetes** develops when the pancreas stops producing enough insulin or when the body stops effectively using the insulin that is produced. Many people with type 2 diabetes can manage the condition with diet and exercise, while others may also need to take medications.
- **Gestational diabetes** develops when a woman's body stops adequately producing or using insulin while she is pregnant. Affecting 2-4% of all pregnancies, this form of diabetes usually goes away once the baby is born.

### What are the complications or effects of diabetes?

When the pancreas does not produce insulin, glucose builds up in your blood. This condition is known as hyperglycaemia. Fluctuations of blood glucose levels outside of the target range can lead to serious health problems involving the blood vessels and nerves, including heart disease, stroke, kidney failure, heart attack, and blindness.

When the body does not have glucose for fuel, it starts to use fat. As a result of that process, the cells produce ketones that are then released into the blood. Some of these ketones will pass out of the body through the urine. However, high levels of ketones in the blood can cause the blood to become acidic. In people with diabetes, this is called diabetic ketoacidosis or DKA. DKA can lead to coma or death if not treated. DKA is more common in those with type 1 diabetes but can also happen to those with type 2 diabetes.

Hypoglycaemia is too little glucose in the blood. It can occur when insulin removes too much glucose from the blood as a result of increased physical activity, too much medication, too little food (or a missed or delayed snack or meal), and the effects of drinking alcohol.

### What are the symptoms of diabetes?

Symptoms or signs linked to the development of diabetes include:

- Unusual or increased thirst
- Frequent need to urinate
- Blurry vision

- Extreme hunger
- Frequent or recurring infections
- Unexplained weight loss or weight gain
- Fatigue or lack of energy
- Irritability
- Disorientation
- Slow-healing cuts or sores
- Tingling or numbness in the hands or feet

Note that not all people will show signs and symptoms.

### **Should diabetes be an occupational concern?**

Most often, diabetes has little or no impact on an employee's ability to do their job and employers may not even know the employee has diabetes. The impact of diabetes varies among individuals. Many people manage their diabetes through their diet, regular exercise and maintaining a healthy body weight. Individuals using medications may take the medication orally, or they may self-administer insulin by syringe, pen or have an implanted insulin pump.

It is important to determine if any concerns are reasonable given the individuals expected duties and the facts of each individual's symptoms and treatment plan. In most workplace environments, such as offices or retail spaces, an employee's diabetes will not put themselves or others at risk. Disorientation and fainting episodes are uncommon but may be caused by hypoglycaemia (low blood glucose levels). However, if an employee could become suddenly disoriented while operating, for example, heavy machinery, the risk of injury is higher.

Employers must accommodate employees with diabetes (unless it can be shown to cause undue hardship to the organisation). Employers and employees should work together to address concerns around diabetes courteously. These accommodations may include time or a private place to administer any medications or to conduct blood sugar tests, the ability to keep food nearby, or a schedule of regular breaks to maintain a prescribed diet. Time off to attend medical appointments would be another example.

### **What else can workplaces do?**

Be aware of the risk factors that can be controlled. Workplaces can help by:

- Including diabetes prevention and management information in any workplace health or wellness program.
- Educating management and supervisors about diabetes so that they are aware of the needs of employees with diabetes and how best to accommodate them.
- Asking employees with diabetes what accommodations they think would best suit them. Not all people with diabetes will need the same accommodations. Some may need a private area to test their blood sugar levels or to administer insulin injections while others may not.
- Changing an employee's work schedule, if necessary.
- Employees with diabetic retinopathy, which is a vision disorder caused by diabetes, may need to use assistive technology to help them see.
- Employees with diabetic neuropathy, which is a nerve disorder caused by diabetes, may need to use a chair or stool while they work.
- Making sure first aiders are trained to recognize common acute symptoms of hypoglycaemia, and related issues so they can provide help as required.
- Providing employees a place to rest until their blood sugar levels become normal.
- Providing "sharps" disposal if insulin is administered with needles.
- Allowing employees to keep food and testing supplies near their workstation or break area.
- Allowing time for medical treatment and recuperation, as well as any educational sessions necessary to learn about their condition and how to manage it.
- Providing employees with breaks to eat or drink, take medication, or test blood sugar levels.
- Encouraging physical activity (e.g., time, equipment, walking paths, etc.).
- Providing healthy food choices in cafeterias, vending machines, meetings, etc.
- Providing access to smoking termination programmes.

- Addressing both organisational factors and mental health factors to help reduce stress.
- Providing access to employee assistance programs and support groups.

### What should a workplace do if a person has hypoglycaemia?

If you know the person is diabetic and suspect they may have hypoglycaemia it should be treated by first aiders. Symptoms of hypoglycaemia include cold, clammy or sweaty skin, blurred vision, dizziness, shakiness/lack of coordination, headache, irritability or hostility, stomach-ache, or nausea.

If you have been taught, check the person's blood glucose level. If a glucose meter is not available, treat the symptoms. It is better to be safe. If in doubt treat for low. First aid steps for a conscious individual include to:

- Have the individual drink or eat a fast-releasing carbohydrate such as sugar dissolved in water, jam, honey, 2 Super Cs etc. ONLY if they are fully conscious and can swallow safely.
- Wait 10 to 15 minutes and recheck their blood glucose if possible.
- If still low, treat again. Call the emergency services for further help – 084-124 or 082-911 or 112.
- Provide a slow-releasing carbohydrate such as 1 glass of milk, a fruit or half a whole-wheat sandwich if the next meal is more than 1 hour away. Providing a slow-releasing carbohydrate after the fast-releasing carbohydrate will prevent a second hypoglycaemic episode.

If the treatment does not work, or if the person becomes confused or disoriented, loses consciousness, or has a seizure, call the emergency services for further help – 084-124 or 082-911 or 112 immediately.

<https://www.diabetessa.org.za/covid-19-and-diabetes/>

<https://www.spotlightnsp.co.za/2020/08/17/covid-19-understanding-the-increased-risk-in-people-with-diabetes/>

<https://www.ccohs.ca/oshanswers/diseases/diabetes.html>

*Some of our training courses can be done through our virtual classroom.*

*Certain types of Risk Assessments and audits will be done by means of virtual site visits using various means of technology to virtually visit the site.*

*For more information please contact – [info@topcompliance.co.za](mailto:info@topcompliance.co.za)*

<https://www.topcompliance.co.za/index.php/products>



**Courses offered by Top Compliance (Pty) Ltd**<https://www.topcompliance.co.za/index.php/skills-development-head/training-calendar>

<b>SKILLS PROGRAMS - ONSITE TRAINING – HEALTH AND WELFARE SETA</b>		<b>Course duration</b>
<b>First Aid Level 1,2 &amp; 3 - HW/SP/1601190</b>		
US 119567	Perform basic life support and first aid procedures	5 days
US 120496	Provide risk-based primary emergency care/first aid in the workplace	
US 376480	Provide first aid as an advanced first responder	
<b>First Aider - HW/SP/1202005</b>		
US 119567	Perform basic life support and first aid procedures	5 days
US 120496	Provide risk-based primary emergency care/first aid in the workplace	
US 13915	Demonstrate knowledge and understanding of HIV/AIDS in a workplace, and its effects on a business sub-sector, own organisation and a specific workplace.	
<b>First Aid (Basic) - HW/SP/150795</b>		
US 119567	Perform basic life support and first aid procedures	4 days
US 9964	Apply health and safety to a work area	
<b>Health, Safety and Fire Combination - HW/SP/1510179</b>		
US 9964	Apply health and safety to a work area	5 days
US 119567	Perform basic life support and first aid procedures	
US 120331	Demonstrate knowledge pertaining to fires in working places	
<b>Workplace SHE Rep - HW/SP/1510182</b>		
US 9964	Apply health and safety to a work area	3 days
US 259639	Explain basic health and safety principles in and around the workplace	
<b>First Aid and Safety Representative - HW/SP/1510183</b>		
US 9964	Apply health and safety to a work area	4 days
US 119567	Perform basic life support and first aid procedures	
<b>First Aid and Firefighting - HW/SP/1511239</b>		
US 120496	Provide risk-based primary emergency care/first aid in the workplace	4 days
US 13961	Demonstrate knowledge and use of hand operated firefighting equipment	
<b>Fire and Rescue Skills Programme - HW/SP/1604338</b>		
US 252250	Apply firefighting techniques	4 days
US 119567	Perform basic life support and first aid procedures	
<b>Emergency First Aider - HW/SP/1605377</b>		
US 119567	Perform basic life support and first aid procedures	5 days
US 120496	Provide risk-based primary emergency care/first aid in the workplace	
<b>Safety Management - HW/SP/1601159</b>		
US 9964	Apply health and safety to a work area	3 days
US 259639	Explain basic health and safety principles in and around the workplace	
<b>ONLINE VIRTUAL CLASSROOM</b>		
<b>Occupational Health and Safety Courses</b>		

FREE overview of COVID-19		07h45 – 09h00
Safety representative course specific for COVID-19 in terms of the OHS Act and Regulation for Hazardous Biological Agents		07h45 – 11h00
OHS Act & SHERQ representative – Legal Liability		07h45 – 16h00
The Occupational Health and Safety Act & responsibilities of management – Legal Liability		07h45 – 16h00
Food facility health & safety course in terms of R364		07h45 – 14h00
<b>Fire Fighting and Prevention Courses</b>		
Basic firefighting		07h45 – 13h00
Basic firefighting with emergency action planning		07h45 – 15h00
<b>First aid</b>		
First aiders updated protocols for COVID-19 in terms of the OHS Act and Regulation for Hazardous Biological Agents		07h45 – 10h00
<b>ONSITE TRAINING</b>		
<b>First Aid Courses:</b>		<b>Accreditation</b>
First aid: Level 1	2 days	DoEL
First aid: Level 2	3 days	DoEL
First aid: Level 3	3 days	DoEL
First aid: Level 1 & 2	3 days	DoEL
First aid: Level 2 & 3	3 days	DoEL
First aid: Level 1, 2 & 3	5 days	DoEL
Child and infant CPR & choking	6 hours	
Adult CPR & choking	6 hours	
Adult CPR & choking and AED	1 day	
<b>Occupational Health and Safety Courses</b>		
OHS Act & SHERQ representative – Legal Liability	1 day	
The Occupational Health and Safety Act & responsibilities of management – Legal Liability	1 day	
Safety representative course specific for COVID-19 in terms of the OHS Act and Regulation for Hazardous Biological Agents	6 hours	
Food facility health & safety course in terms of R364	6 hours	
<b>Fire Fighting and Prevention Courses</b>		
Basic firefighting (Fire marshal)	6 hours	
Basic firefighting with emergency action planning (Fire & Evacuation marshal)	1 day	