



Circular Instruction 180 on compensation of work-related upper limb disorders

Dr Annamarè van der Merwe,
M.B., Ch.B. (UOVS)
(1985),
Diploma in
Occupational Health
(UOVS) (1996),
Medical Officer:
Compensation Fund,
Pretoria
P.O. Box 955,
Pretoria
0001

Tel: 012 321 0245
Fax: 012 321 2929
e-mail:

annamarie.vandermerwe
@labour.gov.za

Medical Officers of the Compensation Fund, assisted by various stakeholders in the field, who also provided inputs, compiled a Circular Instruction on compensation of work-related upper limb disorders (WRULDs). Circular Instruction 180 was signed by the Director-General of the Department of Labour on 9 March 2004¹.

The Compensation Fund is of opinion that WRULDs are currently under-diagnosed and under-reported, and that many employees are never afforded the opportunity to report their claims and receive professional treatment for specific conditions from which they may suffer. These conditions can be eliminated effectively if diagnosed early and treated by a knowledgeable medical practitioner, in conjunction with a multi-disciplinary team comprising of a physiotherapist, occupational therapist and a person with basic ergonomic skills.

Section 65 (1) (a) of the Compensation for Occupational Injuries and Diseases Act (No. 130 of 1993), states that an employee will be entitled to compensation if it is proven to the satisfaction of the Director-General that the employee has contracted a disease mentioned in Schedule 3 and that such a disease has arisen out of and in the course of his or her employment². Schedule 3 states that musculo-skeletal diseases caused by specific work activities or work environment where particular risk factors are present will be regarded as occupational diseases. Examples of such activities or environment include: (a) rapid or repetitive motion, (b) forceful exertion, (c) excessive mechanical force concentration, (d) awkward or non-neutral postures and (e) vibration³.

WRULDs are thus scheduled occupational diseases. This means that these conditions will be presumed to be work-related if the employee is exposed to the relevant risk factors in the work-place for the development of the specific condition he/she suffers from.

After the medical practitioner has diagnosed the specific condition on the strength of the history, physical examination, and where necessary, special investigations, the functional capacity of the employee should be determined and an ergonomic assessment of the specific work-station of the employee be performed. These assessments can be conducted by the

doctor personally if the case is straightforward and simple, but in more complicated cases a formal assessment by an experienced occupational therapist, physiotherapist or ergonomist is advised.

Armed with the medical diagnosis, functional capacity assessment and the job analysis, the medical practitioner should prepare an integrated treatment plan that should include the necessary medical treatment, acute rehabilitation (work hardening, work conditioning) and work adaptation (tool and equipment adaptation, work-station re-design, task modification, etc.).

Benefits payable to the employee are in line with those generally allowed in accordance with the Compensation for Occupational Injuries and Diseases Act, 1993, which include Temporary Total/Partial Disablement (the employee's salary) for a period of up to 24 months, medical treatment for up to 24 months and a percentage of Permanent Disablement that can be awarded if any impairment persists when treatment has been finalised.

The doctor should use specially designed forms to report WRULDs. These forms will make it easy for the doctor to provide all the information needed to speedily adjudicate such a claim:

- W. Cl. 301 replaces the ordinary First Medical Report in respect of an Occupational Disease (W. Cl. 22).
- W. Cl. 302 should be used in place of the ordinary Progress/Final Medical Report in respect of an Occupational Disease (W. Cl. 26).

The Compensation Commissioner's comprehensive 'Guidelines for Health Practitioners and Employers to Manage Work-Related Upper Limb Disorders' is available to interested stakeholders. These guidelines, as well as Circular Instruction 180 and the medical report forms mentioned, can be sourced from the Department of Labour's website (www.labour.gov.za). (*It is also available on the SASOM website, www.sasom.org.za – Ed.*)

REFERENCES

1. South Africa. Circular Instruction 180 regarding the Compensation of Work-Related Upper Limb Disorders (WRULDs). *Government Gazette*. 2004; 26270:3–7.
2. South Africa. The Compensation for Occupational Injuries and Diseases Act, 130 of 1993. Available from: www.labour.gov.za/programmes/programme_display.jsp?programme_id=2668 (last accessed on 14 July 2005).
3. South Africa. Amendment of Schedule 3 of Act No. 130 of 1993. *Government Gazette*. 2003; 25700:3–7.