

THE COVID-19 WORKPLACE MEDICAL PASSPORT

Screening workers, clients, contractors and workplace visitors for COVID-19

An initiative of UCT and UKZN



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The **COVID19 Workplace Medical Passport** is a screening tool for workplaces that has been developed by Profs Rajen Naidoo (UKZN) and Mohamed Jeebhay (UCT) – both occupational medicine specialists, currently active at national and provincial levels in addressing workplace impacts of the epidemic. The tool has been pilot tested in one of our institutions. It is designed for both mobile and web-based operation. It has been designed for the workforce or visitors of any workplace in order to screen them prior to entry to the workplace premises. Depending on the responses each day, the application directs the respondent either for confirmatory testing (red code), ongoing health monitoring (orange code) or to proceed to work (green code). These actions are based on the Department of Employment and Labour’s COVID-19 Direction on health and safety in the workplace and the National Health Department guidelines for screening and health monitoring. It can be completed more than once a day and it takes less than a minute to do so. It therefore does not need any paper monitoring system and obviates the individual from having to come to work if they are unwell, and instead directs them to seek further medical assistance. It has a back-end component that generates group reports for the facility manager and individual lists for the OHS manager or OH professional to follow up those flagged and to confirm the reason for absence at work of a particular worker. This is an immediate health care management function, that will allow the designated facility occupational health professional to at once commence surveillance of the “Person Under Investigation” (red code) or those with other symptoms/risk factors (orange code).











It can be freely accessed for testing at <https://covid-19.mobenzi.com/workplace-medical-passport>
You can visit Mobenzi’s blog for more information: <https://blog.mobenzi.com/2020/05/12/introducing-a-free-covid-19-workplace-screening-tool/>

This tool can be easily adapted for any workplace by adding new fields, select lists with the names of facilities, departments etc. by adding the specific names of the facilities and linking it to staff numbers. Additional forms can also be created as needed.

Validation of employee/student numbers can be handled in several ways ranging from simple checking of the format of the employee/student number through to real-time server-side validation of the number against the organisation's internal database.

The app uses the Mobenzi (mobenzi.com) platform. Mobenzi is a South African company with over 12 years of working with public and private sector organisations in South Africa and globally with data collection systems. UKZN has collaborated with Mobenzi over the past eight years on various research projects and is experienced in data collation, processing and storage. Mobenzi is fully compliant with the Protection of Personal Information Act (South Africa), as well as the European Union's General Data Protection Regulation (<https://www.mobenzi.com/privacy.html>). The data are stored initially by Mobenzi on their Virtual Private Cloud environment hosted by Amazon Web Services (<https://www.mobenzi.com/docs/Data-Management.pdf>). This data can then be transferred to other specified servers designated by the organisation for internal storage by manually exporting the data or in real-time via the Mobenzi API.

You are free to use this app for your workplace. Mobenzi has offered the use of their tools at no cost for COVID-19 screening at workplaces for up to 500 daily screening submissions per weekday (up to 10,000 screening submissions per month). To begin using the Workplace Medical Passport, organisations simply need to create a free account at [Mobenzi.com](https://www.mobenzi.com) and activate the free "COVID-19 Response Toolkit". The toolkit includes the Workplace Medical Passport and several other free templates that can be customised by the organisation as needed. We do ask that you retain the first page of the passport form, giving recognition to UCT and UKZN. We would like to engage with your occupational health professional to provide advice on how best to use the incoming information, manage the back-end of the app, review group and individual trends and to act on these trends. This is a once off free one-hour consultation at the time you select to use the app.

Analytics Overview Grid Export Map Charts									
Submissions (Grouped by section) (Ordered by Received Date Descending)									
Previous section «		screening_result		» Next section		Select Columns ▼			
#	View/Edit	Received Date ▼	stakeholder_type	IDNumber	KeySymptoms	GenSymptoms	CESymptoms	Alert	screening_date
1	 	2020-05-12 02:14:27 PM	Student	123456	Yes	Yes	Yes	Red	2020-05-12
2	 	2020-05-12 12:10:26 PM	Visitor	-	No	No	No	Green	2020-05-12
3	 	2020-05-12 12:10:19 PM	Visitor	-	Yes	No	No	Red	2020-05-12
4	 	2020-05-12 09:14:35 AM	Employee	123	No	No	No	Green	2020-05-12
5	 	2020-05-12 08:55:20 AM	Employee	123	No	No	No	Green	2020-05-12

Example report: Daily COVID-19 Medical Passport Output List for Workplace

Should you have larger screening requirements, we advise that you liaise directly with Mobenzi for ongoing support, as we do not have the resources to provide this to you or your company. Mobenzi offers a range of [pricing plans \(https://www.mobenzi.com/pricing_za.html\)](https://www.mobenzi.com/pricing_za.html), with significant discounts available for larger-scale deployments. Subsidies are also available for non-profit and public sector usage. No long-term contracts are required and all paid plans include free support from Mobenzi.

As academics, clinicians and epidemiologists in occupational medicine, our purpose is to:

1. Protect the health of workers in the working environment in relation to COVID-19
2. Better understand the trends among workers, as they move from asymptomatic to suspicious to develop definite COVID-19-related symptoms
3. Understand the individual, behavioural and workplace risk factors that increase the risk of milder to severe forms of the disease and other adverse outcomes, including chronic disease.

We are in the process of a Phase II to address point 3, and we hope that there are workplaces that will be interested in participating with us in this future endeavor. Participation in Phase II is however not dependent on the decision whether the workplace plans to use the Phase I version of the app.

Please feel free to contact Mrs. Kareshma Ramcharan (Ramchar4@ukzn.ac.za) from UKZN and Dr. Itumeleng Ntamatamala (itumeleng.ntamatamala@uct.ac.za) from UCT for further information
