

# CORPORATE POLICY

## TRAVEL- RELATED ILLNESS PREVENTION

### 1. INTRODUCTION

Occupational Health (OH) is concerned with the health and therefore the productivity of all City of Tshwane (CoT) employees, whether they are in their offices or in a conference room in another country. A delegate falling ill while away on official CoT business has substantial financial implications not only for the delegate, but also for the CoT. As the CoT covers travelling and accommodation costs, it cannot have delegates being unable to attend the specific functions owing to illness.

### 2. OBJECTIVES

The objective of this document is to –

- inform delegates about the travel-related service rendered by Occupational Health (OH) to CoT employees
- inform delegates about the correct procedures to follow before and after going abroad
- ensure that delegates have basic medicines and first-aid stock available in case of an emergency
- ensure that delegates are not refused entry into another country because of having "illegal drugs" in their possession and
- advise on appropriate prophylactic immunisation and medication needed before entering a country where communicable infectious diseases are prevalent.

### 3. SCOPE

This policy (and procedures) apply to any CoT employee or Councillor who is nominated in terms of a Council resolution to travel abroad to attend a seminar, workshop or go on a fact-finding mission etc.

### 4. LEGAL FRAMEWORK

International Health Regulations (1981), World Health Organization, Geneva Occupational Health and Safety Act, 1993 (Act 85 of 1993)

### 5. SUPPLY OF BASIC MEDICATION AND FIRST-AID STOCK

OH will provide basic medication and first-aid stock to all CoT employees and Councillors who have been nominated in accordance with a Council resolution to attend any seminar, workshop, fact-finding mission, etc, abroad.

The supplied medication will be of a basic nature and will not provide for the specific medication needs of individuals.

Individuals taking medication for pre-existing or recurring conditions will be responsible for obtaining their own medication. A prescription (legally required when taking medication into a foreign country) that includes this medication information will be supplied by OH.

Medicine allergies and hypersensitivities of individuals will be taken into account when they are provided with medication.

Provision will be made on the budget of the OH for the cost of medication and first-aid stock it supplies.

### 6. ADVICE AND ASSISTANCE IN OBTAINING PROPHYLACTIC IMMUNISATION AND MEDICATION

- During the planning phase of the visit abroad it must be determined by the compiler of the report/delegates whether compulsory immunisation (e.g. yellow fever), prophylactic medication (e.g. malaria prophylaxis) or recommended immunisation is required. This information can be obtained from the designated OH clinic or any travel clinic.
- Provision must be made in the cost calculation of the trip for the cost of compulsory Immunisation/prophylactic medicine and this must be included in the report submitted to the Council. Note that the CoT will pay only for compulsory (legally required)

immunisation and not for recommended immunisation (see the guidelines for international travel by CoT delegates).

- The necessary immunisation(s) and/or prophylactic medicine must be obtained from a private service provider. The departure date must be kept in mind, e.g. yellow fever vaccine must be administered at least ten days before departure. For the re-imburement of expenses, see point 7 below.
- Ensure that a legal vaccination certificate is completed and provided by the private service provider. This certificate must accompany you on your trip. Do not forget to add the certificate to all your other travel documents.
- Note that the OH subsection will not carry the cost of immunisation or prophylactic medicine.

#### **7. RE-IMBURSEMENT OF IMMUNISATION/MEDICATION COSTS**

Delegates must submit the invoice for their compulsory immunisation/medication to their Manager: management and office administration support for re-imburement.

#### **8. PROVISION OF DOCUMENTS REQUIRED WHEN TAKING MEDICATION INTO A FOREIGN COUNTRY**

- The OH subsection will furnish each individual with a document that meets the legal requirement for taking medication for own use into a foreign country.
- Individuals will be responsible for furnishing the OH subsection with specific information on private medication, including prophylactic medication such as anti-malaria tablets that they plan to take along on their trip.

## OCCUPATIONAL HEALTH PROCEDURE

### PREVENTION OF TRAVEL-RELATED ILLNESS

#### PROCEDURE TO BE FOLLOWED BY DELEGATES WHO TRAVEL ABROAD ON OFFICIAL MUNICIPAL BUSINESS

#### 1. GENERAL

Delegates need proof of prescription of medication that is to be taken on board an aeroplane or into another country to prevent them from being stopped at customs for possession of illegal drugs. Therefore all medicines must be declared. The "prescription" for all medicine is supplied by OH. The destination, accommodation arrangements and environment will determine the health risks to delegates.

#### 2. PROCEDURE FOR OBTAINING A PACKAGE FOR THE PREVENTION OF TRAVEL-RELATED ILLNESS

- Whenever possible, Belle Ombré (BO) OH staff must be informed about a delegate's official overseas visit at least seven working days before departure so that a proper and correct package can be prepared.
- The BO OH clinic can be informed telephonically or via e-mail that a delegate will be going on an officially approved overseas visit.
- A travel-related illness prevention (TRIP) questionnaire (see Annexure 1) will be sent to the delegate or can be downloaded from the website.
- Since the issuing of incorrect medication or prescriptions could be life-threatening and have legal ramifications for the delegate and OH, delegates must adhere strictly to the following instructions when completing the questionnaire:
  - Use block letters to prevent mistakes caused by illegible handwriting.
  - Answer all the questions. Indicate with "N/A" if the question is not applicable.
  - List all medicines taken daily/regularly that you will be using while on the trip. Include the number of tablets or volume of liquid medication that you will be using.
- Delegates must furnish information about medicine taken regularly. The information is included on the TRIP questionnaire (Annexure1). The delegate is responsible for supplying and packaging these medicines.
- The completed TRIP questionnaire must be sent back to the BO OH clinic together with a copy of the Council resolution granting approval for the trip. The forms can be scanned and sent electronically, faxed to 012 358 8751 or hand delivered to the BO OH Clinic, Bosman street extension.
- Delegates will be informed when the TRIP package can be collected at the BO OH clinic.
- The TRIP package, with all unused items, must be returned to the BO OH clinic within one week after returning from the visit abroad, regardless of whether any of the items were used or not.
- For general travel information, see " Guidelines for international travel by CoT delegates" that is attached to this document.

#### 2.1 Package contents

##### Wound care

Crepe bandage 25 mm x 1  
 Crepe bandage 75 mm x 1  
 Crepe bandage 100 mm x 1  
 Cleaning solution ampoule x 2  
 Band-aid strips x 10  
 Gauze swabs 100 mm x 10

##### Medication for:

Infection (antibiotic)  
 Diarrhoea  
 Indigestion  
 Allergy  
 Eye irritation  
 Pain  
 Nausea



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**TRAVEL-RELATED ILLNESS PREVENTION QUESTIONNAIRE**

Sir/Madam

Since the issuing of incorrect medication or prescriptions could be life-threatening and have legal ramifications for you and Occupational Health (OH), you are requested to adhere strictly to the following instructions when completing the questionnaire:

1. Use block letters to prevent mistakes caused by illegible handwriting.
2. Answer all questions. Indicate with "N/A" if the question is not applicable to you.
3. List all the medicines taken daily/regularly that you intend to take along on the trip.

**NAME:** ..... **PAY NUMBER:** .....

**DEPARTMENT:** ..... **CELL NUMBER:** .....

**OFFICE TEL. NUMBER:** .....

COUNTRIES TO BE VISITED	FROM	TO

Are you allergic to penicillin?	Yes	No
Do you have any other medicine allergies:	Yes	No
If so, list them here:		

Do you suffer from any of the conditions listed below?

Medical conditions at present	YES	NO
Heart condition		
High blood pressure		
Diabetes		
Asthma		
Epilepsy		
Porphyry		
Other		

Do you intend to take other medicine, e.g. medication taken daily or regularly along on the trip? Yes/No. If yes, please complete the section below.

* Name, strength and form of medicines taken daily/regularly, e.g. Lanoxin 0,25mg tablets/Bronchiflu syrup	Dosage e.g. 2 tablets	Frequency e.g. 2 times/day	Quantity to be taken e.g. 18 tablets

\* Delegates are personally responsible for obtaining and packing the other medicines listed above.

.....  
SIGNATURE

.....  
TEL NO AT WORK

.....  
DATE

Received by: .....

Date: .....

## TRAVEL RELATED ILLNESS PREVENTION

### GUIDELINES FOR INTERNATIONAL TRAVEL BY CoT DELEGATES

#### VACCINATION REQUIREMENTS AND GENERAL TIPS FOR TRAVELLING

International Health Regulations require compliance with certain regulations of which one pertains to vaccination.

According to destination, vaccination may be compulsory (yellow fever), or recommended (malaria prophylaxis).

Services are rendered by Travel Clinics. Refer to Travel Related Illness Prevention Policy for guidelines on remuneration for vaccinations.

#### SERVICE PROVIDERS

Any travel clinic may be used, but be advised that services rendered are by appointment only. Appointments should be made at least 2 weeks prior to departure.

#### Yellow fever

The vaccination should be administered at least 10 days prior to departure.

Certificate valid for 10 years

Yellow fever certificates must be shown when the applicable country is entered.

#### 1. GENERAL HEALTH TIPS

The safety of food, drink and drinking water depends mainly on the standard of hygiene applied locally in their preparation and handling.

- Avoid consuming potentially contaminated food and drink.
- Avoid food and bottled water sold by street vendors.
- Avoid undercooked and raw fish and shellfish.
- Drink only bottled or decontaminated water.
- Avoid ice.
- Eat only food that has been cooked thoroughly and is still hot.
- Peel fruit and vegetables where possible.
- Avoid dishes containing raw and uncooked eggs, eg salad dressings.
- Wash food with boiled or bottled water.
- Brush your teeth with bottled water.
- Wash hands before meals after using the toilet.

#### 2. PERSONAL CHECK LIST

- Did you pack all the necessary documents? Very important – yellow fever immunisation certificate.
- Chronic medication packed?
- First-aid travel kit?
- Did you obtain and pack malaria prophylaxis - if necessary?
- Will you need insect repellent?

#### 3. DO NOT TRAVEL WITH ANY OF THE FOLLOWING CONDITIONS

- Fever of unknown origin
- Diarrhoea or vomiting
- Sinusitis, middle-ear infections or congestion
- Toothache, sore throat or tonsillitis

#### 4. RISK FACTORS FOR TRAVELLING

- Previous history of venous thrombosis or pulmonary embolism

- Over 40 years of age
- Use of oestrogen therapy
- Recent surgery or trauma, especially to abdomen or lower limbs
- Cancer
- Blood-clotting abnormalities
- Tobacco smoking
- Obesity
- Varicose veins

NB: If you suffer from any of the above, seek medical advice before travelling.

## 5. RISKS OF LONG-HAUL FLYING

- DVT (deep venous thrombosis) and pulmonary embolus. Do not sit still for long periods.
- Avoid tea, coffee and alcoholic beverages during the flight as they cause dehydration, which worsens jet lag.

## 6. JET LAG

### 6.1 General symptoms

- Fatigue
- Disorientation
- Sleep difficulties
- Impaired concentration
- Impaired physical performance
- Anxiety
- Loss of appetite
- Constipation

### 6.2 How to reduce its effects

- Be well rested before departure and rest as much as possible during the flight. Use earplugs to block out noise.
- Drink plenty of water and/or juice before and during the flight – limit alcohol and caffeine intake.
- Do light exercise to stay alert.
- Eat light meals – eat only when hungry.
- Wear comfortable clothes and shoes – take your shoes off during the flight.
- Use light and dark to trigger normal sleep/wake cycles effectively – rest without napping during daylight sectors.

## 7. RETURN HEALTH CHECK

- Report all and any aggressive flu-like symptoms within one month of returning from a malaria area immediately.
- Report any illnesses, especially fever, persistent diarrhoea, vomiting, jaundice, urinary disorders or skin rashes to your physician.
- A post-travel medical examination is also recommended if you suffer from a chronic disease, eg hypertension, diabetes, chronic respiratory disease or cardiovascular disease.

## 8. FOUR PRINCIPLES OF MALARIA PROTECTION

- A – Be Aware of the risk and main symptoms.
- B – Avoid being bitten by mosquitoes, especially between dusk and dawn. Use mosquito nets and insect repellent and wear long-sleeved shirts.
- C – Chemoprophylaxis – take anti-malarial drugs.
- D – Diagnosis and treatment of a fever that develops one week or more after entering an area where there is a malaria risk, and up to three months after return.