



FOSKOR (PTY) LIMITED

SCOPE OF WORK

for

CLINIC MANAGEMENT SERVICES

Rendering Occupational Health Service on Foskor Sites

DOCUMENT AND SERVICE CONTRACT APPROVAL

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21 May 2025

Date

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Date

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February 2025



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SCOPE OF WORK

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1. INTRODUCTION

Foskor (Pty) Ltd (Foskor) is one of the world's leading phosphate rock and phosphoric acid producers and was established in 1951. Foskor operates two opencast mines for the extraction of pyroxenite ore in order to produce high quality phosphate rock. The process involves crushing, grinding and slurring of the ore, from which the apatite is recovered as a mineral concentrate (referred to in the trade as phosphate rock) by means of froth flotation. About 75% of the annual production of 2.7 million tons of phosphate rock is transported by rail to Foskor's Richards Bay Plant for processing and export as phosphoric acid. The remainder is transported to various domestic fertilizer plants.

The dominating rock type in the Phalaborwa area, older than 3000 million years, is granite-gneiss of the Archaic Complex. Intrusive in this are younger rock types of the Phalaborwa Igneous Complex. Inclusions of serpentine, talc and amphibole schist are found in the granite-gneiss and igneous rock.

2. SCOPE

Foskor (Pty) Limited is in the business of Mining, Beneficiation and Marketing of Phosphate Rock for the production of phosphoric acid and phosphate-based fertilizers at its two divisions, i.e. The Mining Division in Phalaborwa and the Acid Division in Richards Bay. In terms of legal and other requirements with respect to Health and Safety, Foskor is governed by the Mines Health and Safety Act 29 of 1996 at the Mining Division in Phalaborwa and the Occupational Health and Safety Act 85 of 1993 (Facilities Regulations) at its Acids Division in Richards Bay as well as any other relevant acts including South African National Standards (SANS) as the minimum requirement.

3. LEGISLATION, STANDARDS AND CODES OF PRACTICE

Latest revisions or amendments of the listed codes and specification are applicable to this contract:

Number	Title / Description	Revision
LEGAL AND OTHER REQUIREMENTS		
Act 29 of 1996	Mines Health and Safety Act as amended	Latest
Act 85 of 1993	Occupational Health and Safety Act (OHS Act)	Latest
ISO 9001	ISO 9001 – Quality Management System	Latest
ISO 45001	ISO 45001 – Health and Safety Management System	Latest
SABS 1200	SABS 1200 (All relevant specifications)	Latest
Act 57 of 2002	Disaster Management Act	Latest

Number	Title / Description	Revision
	Any other related act or regulations	
CODES OF PRACTICE: MINING DIVISION – PHALABORWA		
	MANDATORY CODE OF PRACTICE ON MINIMUM STANDARD OF FITNESS TO PERFORM WORK AT A MINE	Latest
	CONTRACTOR CONTROL	Latest
	MANDATORY CODE OF PRACTICE FOR AN OCCUPATIONAL HEALTH PROGRAMME ON THERMAL STRESS	Latest
	MANDATORY CODE OF PRACTICE FOR AN OCCUPATIONAL HEALTH PROGRAMME ON PERSONAL EXPOSURE TO AIRBORNE POLLUTANTS	Latest
	MANDATORY CODE OF PRACTICE ON EMERGENCY PREPAREDNESS AND RESPONSE	Latest
	MANDATORY CODE OF PRACTICE FOR AN OCCUPATIONAL HEALTH PROGRAM FOR NOISE	Latest

All work listed in this scope of work shall be completed in accordance with the specifications and codes as listed above. It is the responsibility of the Tenderer to be in possession of the latest standards and codes as listed above in the execution of this project.

4. FOSKOR SPECIFICATIONS

All work listed in this scope of work shall be completed in accordance with the specifications listed below:

Number	Title / Description	Revision
LEGAL AND OTHER REQUIREMENTS		
Act 29 of 1996	Mines Health and Safety Act as amended	Latest
Act 85 of 1993	Occupational Health and Safety Act (OHS Act)	Latest
ISO 9001	ISO 9001 – Quality Management System	Latest
ISO 45001	ISO 45001 – Health and Safety Management System	Latest
SABS 1200	SABS 1200 (All relevant specifications)	Latest
CODES OF PRACTICE: MINING DIVISION – PHALABORWA		
	Foskor PHB COP – MANDATORY CODE OF PRACTICE ON MINIMUM STANDARD OF FITNESS TO PERFORM WORK AT A MINE	Latest
	Foskor PHB COP – CONTRACTOR CONTROL	Latest
	Foskor PHB COP – MANDATORY CODE OF PRACTICE FOR AN OCCUPATIONAL HEALTH PROGRAMME ON THERMAL STRESS	Latest
	Foskor PHB COP – MANDATORY CODE OF PRACTICE FOR AN OCCUPATIONAL HEALTH PROGRAMME ON PERSONAL EXPOSURE TO AIRBORNE POLLUTANTS	Latest
	Foskor PHB COP – MANDATORY CODE OF PRACTICE ON EMERGENCY PREPAREDNESS AND RESPONSE	Latest
	Foskor PHB COP – MANDATORY CODE OF PRACTICE FOR AN OCCUPATIONAL HEALTH PROGRAM FOR NOISE	Latest

It is the responsibility of the Tenderer to be in possession of the latest standards and codes as listed above in the execution of this project.

In the event of contradiction on the specification between Paragraph 5 and 6, the most stringent specification must take precedence.

5. PLANT DATA

All work listed in the document will be conducted at

FOSKOR (PTY) LTD – MINING DIVISION, PHALABORWA
27 SELATI ROAD
PHALABORWA
1390
SOUTH AFRICA

6. SUPPLIED SERVICES

6.1 Foskop Supplied Services

Foskop shall be responsible for:

- 6.1.1 Supply a copy of the Foskop Procedure and Specifications
- 6.1.2 Electricity, Water and suitable area for site establishment as required by the Contractor.
- 6.1.3 Scrap bins where and when required.

6.2 Contractor Responsibilities

The contractor shall be responsible for:

- 6.1.1 The supply of all labour, supervision, specialized manpower and other staff to fulfill the scope of work.
- 6.1.2 The supply of tools and specialized equipment, consumables (including all contagious disease consumables) and site establishment to fulfill the scope of work. Foskop will not be held responsible for any losses or damage to the Contractor's equipment.
- 6.1.3 All equipment, tools, personal protective equipment including contagious disease management PPE (PPE) etc. that the Contractor will bring to Foskop, will be subjected to review and approval by Foskop and shall conform to Foskop procedures.
- 6.1.4 Ensuring that hygiene services are available, maintained and in good at the clinic.

7. WORK METHODOLOGY

The methodology shall contain sufficient detail to assure Foskop that the Contractor has a detailed understanding of the work and has the staff and resources to support the project.

A detailed work methodology shall be submitted upon bid closure to be scored during the technical evaluations.

8. SHREQ EVALUATION

8.1 Health, Safety and Environment

- 8.1.1 The Contractor shall comply with all Foskor Regulations and Safety Standards especially the contractor must be familiar with the requirements of the relevant codes of practice and shall submit a safety file for approval by Foskor Safety Department prior to site access.
- 8.1.2 The Contractor shall fully comply with the requirements of the Mine Health and Safety Act (MHSA, Act 29 of 1996 – at the Mining Division). It is essential to sign relevant agreements as required.
- 8.1.3 The Contractor must submit to Foskor Safety Department a Safety Plan/Risk Assessment as part of the safety file for the tasks to be done, intake form and employees qualifications before commencing with any activity in the Plant.
- 8.1.4 The Contractor entering operational site must wear Foskor minimum required PPE. Should a Contractor be found on site without the above-mentioned safety clothing, he / she will follow the disciplinary process and can be removed from site and will not be allowed to return.
- 8.1.5 The Contractor shall provide appropriate safety procedures and written work instructions to the labour force to minimize the risk of injury.
- 8.1.6 The Contractor shall ensure all his personnel have attended the Safety Induction by Foskor before they enter site and have a valid medical.

9. QUALITY MANAGEMENT

Tenderers are to adhere to Foskor's Quality management system and specifications incorporated in this Tender Document.

9.1 Quality Assurance

- a) It is a requirement of the contract that the Contractor maintains an effective documented system for the control of product quality. Proof of compliance (performed quality initiatives and supporting documentation) with a recognized management standard, such as ISO 9001, ISO 14001, ISO 45001, etc, should be submitted with the Contractor's tender.

10. COMPANY PROFILE

Tenderers are to submit an extensive portfolio indicating their experience and expertise with reference to similar contracts, more especially in the same industry. The Contractor shall include in their tender, references of their previous service performance.

11. KEY PERSONNEL

The Contractor shall submit (as a part of the tender) an organogram identifying key persons and contact numbers for the following functions:

- a) Site Manager / Supervisor – OHNP
- b) Occupational Medical Practitioner
- c) Optometrist
- d) Radiologist
- e) Dietician
- f) ENT Specialist
- g) Health and Safety – Trained Appointed SHE reps.
- h) Employees and responsible areas

i) Biokinetics Specialist

These persons shall not be substituted without prior client (Foskor) consultation and approval. Failure to submit this information at the time of tender could lead to disqualification of the tender.

THE SERVICES – PHALABORWA MINE OPERATION

During the currency of this agreement, the Consultant shall provide the following Services on behalf of Foskor, Phalaborwa, in relation to the plant.

1. Occupational Health

- 1.1 To ensure that a registered Occupational Health Medical Practitioner is available for 8 hours per Day (from Monday to Thursday) and 6 hours on Fridays.
- 1.2 To ensure that the Occupational Health Medical Practitioner is also available for standby duties 24 hours per day, 7 days per week.
- 1.3 A memorandum of understanding can be signed between the supplier and neighbouring mines for support in the event of unavailability of the Occupational Medical Practitioner.

2. Management of Off-Site Referrals

- 2.1 To ensure that employees are referred to the relevant institutions with respect to occupational disease, work-related injuries or emergencies.
- 2.2 The service provider will notify Foskor of all such referrals in writing. Off-site referrals will be paid through compensation and or by Foskor where required.

3. On-Site Clinic Facility and Equipment

- 3.1 The service provider will be responsible to provide, maintain, repair and replace all medical equipment in the on-site clinic.
- 3.2 The service provider will calibrate or ensure that all equipment is calibrated within the allotted/specified timeframe.
- 3.3 The service provider shall ensure the inventory list is updated in the event equipment is replaced so as to clearly differentiate Foskor equipment from the service provider's equipment, should some equipment still belong to Foskor at the time of accepting the service provider as the provider of the service.
- 3.4 In the event of theft or damage, the service provider is responsible for replacing or repairing their equipment at their cost.

4. 24 Hour Emergency Service

- 4.1 The service provider will ensure that its personnel are on site on a 24-hour basis, 7 days per week.
- 4.2 When employees are referred to the on-site clinic after hours, such employees will be treated by the sister onsite, if necessary, the Occupational Medical Practitioner.
- 4.3 When hospitalisation is required, the employee will be referred by the Occupational Medical Practitioner.
- 4.4 The Occupational Medical Practitioner is responsible for classification of all injury on duty incidents as well as the occupational health occurrences.
- 4.5 Airlifting services may be required on emergency basis. This shall be quoted separated and will be dealt with per occurrence/incident. The OMP will make a call when these services are required and will guide management whom will activate implementation.

- 4.6 The service provider should consider value added items like installing boxes for chronic medication similar to those for mail that are digitized so people can collect their medication there.

5. The service provider Occupational Healthcare

- 5.1 The following examinations and procedures will be conducted on all employees in terms of the relevant legal and other requirements:
- 5.1.1 pre-employment medical examinations
 - 5.1.2 fitness-to-work certification
 - 5.1.3 periodical medical examinations
 - 5.1.4 exit medical examinations
 - 5.1.5 periodical chest x-ray screening
 - 5.1.6 audiometry and calculations of hearing loss
 - 5.1.7 lung function testing and work-outs (FEV and FVC)
 - 5.1.8 heat and cold stress exposure
 - 5.1.9 biological monitoring of exposure and effect (including radiation profiles and exposure to hazardous chemicals)
 - 5.1.10 visual screening
 - 5.1.11 food handler screening
 - 5.1.12 Management of Contagious Disease and Contagious Disease Return to Work initiatives in line with Department of Health guidelines.
 - 5.1.13 Management of any other health condition that may have an impact on employee performance and or poses high risk to employee or mine.
 - 5.1.14 The service provider shall review Occupational Risk Exposure Profiles for all occupations at Foskor. The work will be done in conjunction with Foskor Specialists ie HR, Hygiene, Supervisor and SHE.
- 5.2 The service provider will ensure that the aforementioned examinations are Incorporated in an Annual medical surveillance programme:
- 5.2.1 The screening of all contractors will be undertaken as a separate contract between the service provider and the group of such contractors.
 - 5.2.2 Management of Contagious Disease quarantined/isolated employees with regards to daily visit, testing and providing feedback to mine management in line with Department of Health Guidelines.
 - 5.2.3 Foskor approved visitors (excl. contractors) will be treated as Employees and basic medicals conducted.

6. Compensation for Occupational Injuries and Diseases

The service provider will, jointly with Foskor's SHEQ Department complete all necessary documentation and follow up on a regular basis on the status of claims. The compensation claims may relate to:

- 6.1 injuries on duty
- 6.2 hearing loss
- 6.3 occupational lung cancer
- 6.4 occupational asthma
- 6.5 pulmonary tuberculosis
- 6.6 or any other claims as stipulated in the relevant legal and other requirements.

7. Medication

- 7.1 The service provider will provide medication required for minor trauma (IOD'S)
- 7.2 The service provider will ensure that it complies with the legal requirements pertaining to the issuing of medication.
- 7.3 The service provider will assess and keep emergency medication in line with the requirements/ laws regulating the clinics.
- 7.4 Assist employees with chronic conditions and monitor compliance to medication where possible.

8 Health Education and Employee Assistance Programmes

- 8.1 The service provider will adopt the health themes in line with the SHEQ department's annual education programme as well as national health calendar including Contagious Disease, management its vaccination.
- 8.2 The service provider will establish a relationship with a social worker appointed by Foskor. Their interaction will be based on an analytical assessment of the data and trends and not only confined to a referral-based system, which is currently in place. This is aimed at ensuring a more proactive intervention.

9. Information for Foskor's Decision-making

The service provider will contribute to the monthly health and safety report by supplying information relating to:

- 9.1 Consultation and referrals
- 9.2 Injuries on duty
- 9.3 Compensation claims
- 9.4 Medical surveillance
- 9.5 Health education and awareness programmes
- 9.6 Any significant trends, which may impact on the health and productivity of employees.

10. Clinic staff required

- 10.1 x1 Occupational Medical Practitioner – MHSA Section 13.3(a) Appointee
- 10.2 x1 Clinic Manager – Occupational Health Nurse – MHSA Regulation 2.6.1 Appointee

- 10.3 x 2 Occupational Health Nurse – MHSA Reg 2.9.2 Appointees
- 10.4 x4 Enrolled Nurse Technicians – MHSA Reg 2.9.2 Appointees
- 10.5 x1 Cleaner
- 10.6 x1 Radiologist – 2 hours every weekday and then daily standby/call outs including weekends
- 10.7 x1 Optometrist - 4 hours once a week and on request
- 10.8 x1 Dietician – On request
- 10.9 x1 ENT Specialist – On request
- 10.9 x1 Biokinetic Specialist – On request

11. Monitoring and Evaluation

- 11.1 The service provider will prepare an annual occupational health programme, which will be given to Foskor approval.
- 11.2 The service provider will conduct an audit prior to the effective date and, should the agreement be renewed, on an annual basis, the result of which will be made available to Foskor.
- 11.3 The service provider shall assist Foskor in any reasonable manner when the external audit of Foskor is conducted.
- 11.4 The service provider will ensure that a monthly report is made available to Foskor.
- 11.5 The service provider will compile an annual report on health at the plant including the statistics in health that must be kept in terms of the relevant legal and other requirements together with an annual medical report.
- 11.6 The service provider will compile an annual report on health at the plant including the statistics in health that must be kept in terms of the relevant legal and other requirements together with an annual medical report which shall be submitted in accordance with the deadlines set by the relevant authorities.

12. Waste Management

- 12.1 The service provider shall be responsible for the removal of medical waste with respect to the physical removal, the legal requirements pertaining to the removal of medical waste and payment to the waste handler.
- 12.2 The company that is to be used for the removal of Medical Waste from the Clinic has to be registered with the required regulatory body and shall show evidence of a Quality Management and Environmental Management System. Proof of registration of the waste handler shall be provided to Foskor before any waste is removed from the site.
- 12.3 Domestic waste shall be separated from medical waste and disposed of as per the waste management procedures of Foskor.
- 12.4 The service provider shall also be responsible for cost for hygiene services at the clinic including management of SHE Bins etc.

13. Record Keeping

- 13.1 Foskor will provide a legally compliant space for medical files record keeping; however, the service provider shall transit to paperless record keeping system. The system will be handed over and owned by Foskor at the end of the contract.
- 13.2 Service provider to provide a paperless legally compliant record keeping system which will be managed by them for the duration of the contract. The records will remain Foskor Property, and the system will be handed to Foskor at the end/termination of the contract.

14. General

- 14.1 The Occupational Health Practitioner and the Supervisor shall participate in investigations into hearing loss cases as well as other incidents relating to occupational health incidents.
- 14.2 The supervisor shall attend the monthly Management Health and Safety and supply the management team with the health and safety statistics for the month. The dates, times and venues of the meetings will be provided by Foskor to the successful service provider.
- 14.3 The Occupational Health Practitioner and the Supervisor shall attend the Management review meetings which are held at least once per year. The Occupational Health Practitioner and the Supervisor shall supply the management team with an overview of the health and safety statistics for the year and possible areas of concern, possibilities, and recommendations for improvement.
- 14.4 The service provider shall maintain a high degree of good housekeeping in the clinic at all times.
- 14.5 The service provider shall maintain the required health records of employees and contractors for the period prescribed by legal and other requirements, in a safe manner which shall be easily retrievable.
- 14.6 The Occupational Health Practitioner and the Supervisor shall visit the employees in their workplace frequently to ensure that they understand the health issues employees are exposed to and to discuss the issues with the manager of that employee should the need arise.
- 14.7 The service provider shall be prepared for health and safety visits, inspections and audits by internal and external parties, for e.g. the Department of Mineral Resources, Department of Labour, etc.
- 14.8 The service provider to make a helicopter service provision available on an emergency basis should the need arise as advised by local Medical or Occupational Medical Practitioner. This service will be paid per occurrence and outside the main contract.

15. EVALUATION CRITERIA AND BID ASSESSMENT

As part of the process to assist with the evaluation of the bidder's proposal/quotation and to make an informed decision in the awarding of this contract, the following information is required:

Technical Evaluation

	MEASUREMENT CRITERIA	Criteria scoring (%)	Score (%)	Type of proof to be submitted.
1	Company Experience	Qualifications with five or more years' experience in Occupational health within the mining environment = 20% Qualifications with 3-4 years' experience in Occupational health within mining environment = 5% Qualifications with no experience in Occupational health within mining environment = 0%	20%	Submit a company Profile that indicates the years of industry experience in servicing a Mine the same size (more than 500 people) as Foskor Mining Division and signed reference letters.
2	Work Methodology/Approach The methodology shall contain sufficient detail to assure Foskor that the Bidder has a detailed understanding of the work and has the staff and resources to support the project. [Annexure A of SOW] The following requirements should be addressed in the submitted Methodology. 1.Implementation Plan 2. Human Resources Plan 3. Organizational structure/organogram indicating all relevant skills and/ or qualifications for resources.	The bidding company has addressed all 3 of the requirements in their methodology - 5% The bidding company has addressed 2 of the requirements in their methodology - 4% The bidding company has addressed only 1 of the requirements in their presentation - 2%	5%	Bidders to submit a COMPREHENSIVE METHOD STATEMENTS for executing aforementioned scope of work Proof / documents to be submitted: Provide a signed work methodology addressing how the key deliverables of the contract will be executed.
3	List of x3 or more contactable references (Relevant current / previous sites of operation and references thereto)	Working on five or more similar sites = 5 Working between 3-4 similar sites = 3 Working on one- two sites = 1 No experience = 0	5%	

4	TEAM Experience <ol style="list-style-type: none"> 1. 1 x Occupational Medical Practitioner – MHSA Section 13.3(a) Appointee 2. 1 x Clinic Manager - Occupational Health Nurse – MHSA Regulation 2.6.1 Appointee 3. 2 x Occupational Health Nurse 4. 4 x Enrolled Nurse Technicians 5. 1 x Cleaner 6. 1x Radiologist – 3 hours every weekday and then daily standby/call outs including weekends 7. 1x Optometrist - 4 hours once a week. 8. X1 Dietician twice a month and on request 9. ENT Specialist on request 10. Biokinetics Specialist on request 	<p>Relevant qualifications & 5 years' experience in mining for all the listed key personnel= 20%</p> <p>Relevant qualifications & experience in mining for 3-4 of the listed key personnel= 10%</p> <p>Relevant qualifications & experience in mining for 1-2 the listed key personnel= 2%</p> <p>Qualification with no experience in mining experience as well as no organogram = 0%</p>	20%	<p>Proof / documents to be submitted:</p> <p>11. Provide key personnel experience and qualifications by submitting CV's, Certificates and Practice licenses of key medical team members dedicated to this project that includes but not limited to OMP, Optometrist, X2OHNP, Registered Radiologist, EN's etc.</p> <p>12. Provide a project organogram showing the relationships and authority of Key Personnel. MHSA legal appointees should be outlined clearly.</p>
6	Dedicated equipment to Foskop	<p>Have all = 5%</p> <p>To purchase or not all equipment included= 0%</p> <p>Foskop to provide = 0%</p>	5%	<p>Provide a list of required equipment with proof of ownership. List shall include but not limited to</p> <p>Automated hearing booth</p> <p>X ray machine</p> <p>Lung function, vision screening equipment and any other related clinic management equipment that will assist effectively manage the clinic ie Computers, printing equipment etc</p>
7	Mobilization plan (lead times)	<p>1 - 2 Weeks = 5%</p> <p>3 – 4 Weeks = 4%</p> <p>5-6 Weeks = 3%</p> <p>7-8 Weeks = 2%</p> <p>No Mobilization Plan submitted = 0%</p>	5%	<p>Bidder to submit a Mobilization Plan that details the lead times as per SOW.</p>

8	Record Keeping and Record Management Bidders should outline a detailed paperless medical record keeping and record management system that will be tied into Foskop system, managed by the contractor for the duration of the project and handed over to Foskop at the end of the contract.	System readily available and detailed proposal submitted – 20% No current system – 0%	20%	
9	Key Procedures, standards and work instructions fully indicating the process to be followed and controlled in line with ISO 45001, 9001 and 14001	Procedures submitted and meets the requirements– 20% Procedures not submitted – 0%	20%	Provide key procedures, work instructions and guidelines that will be implemented to ensure effective management of clinic on a day-to-day basis.
For the bid to be considered for shortlisting, the bidder needs to score 70% and above and comply to all mandatory requirements				

TAKE NOTE:

- 1) Any bidder/service provider that fails to comply or to provide/include/supply requested information and/or copies of all requested supporting certificates and documents will result in a reduced evaluation score that could adversely affect the bidder/service providers chance of being awarded this contract/order.
- 2) Any MANDATORY REQUIREMENT not met will result in immediate rejection of bid/quotation.
- 3) Any bid/quotation with an evaluation score of less than 70% will not be considered.

CONTACT DETAILS:

NAME	TITLE	Tel No
Ms Bulelwa Mpofu	Senior Manager: SSHE	015 789 2204