



ANNUAL REPORT 2024/2025

MINE HEALTH AND SAFETY INSPECTORATE



mineral &
petroleum resources

Department:
Mineral and Petroleum Resources
REPUBLIC OF SOUTH AFRICA







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PREFACE

This document is a report by the Chief Inspector of Mines (CIOM) on health and safety at mines, and the activities of the Mine Health and Safety Inspectorate (MHSI) compiled as required by Section 49(1)(j) of the Mine Health and Safety Act, 1996 (Act 29 of 1996) as amended (MHSA).

The MHSI, established in terms of the MHSA, has the responsibility of protecting the health and safety of persons working at mines or those affected by mining activities.

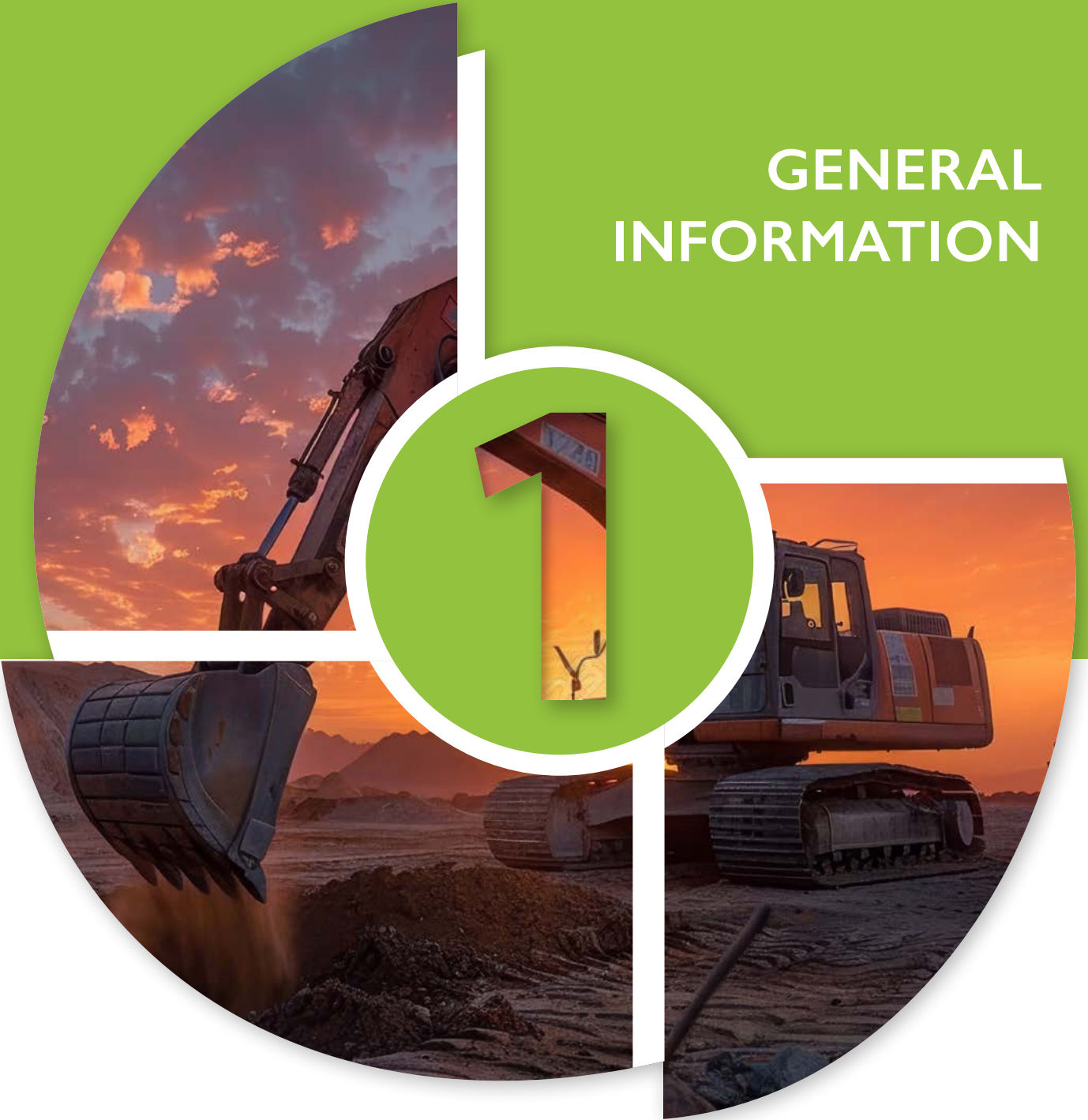
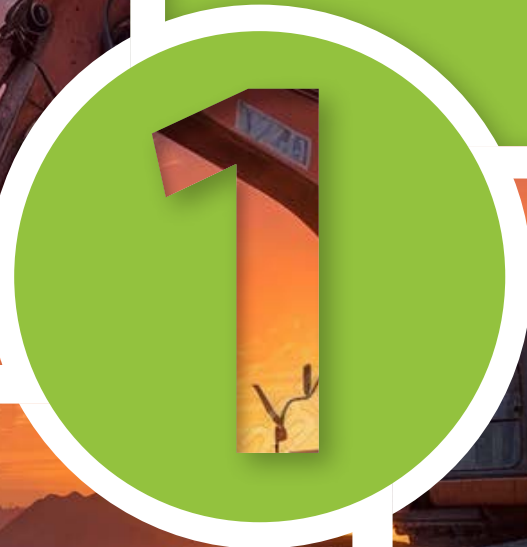
The CIOM also has the responsibility of leading the tripartite structures formed in terms of the MHSA as the Chairperson of the Mine Health and Safety Council (MHSC), and the Mining Qualifications Authority (MQA).

The MHSC consists of representatives of the state, organised labour, and employer organisations. The Council was established to advise the Mineral and Petroleum Resources Minister on health and safety issues, and to promote a healthier and safer culture in the mining industry.

The MQA is the Sector Education and Training Authority (SETA) for the minerals and mining sector and is responsible for the education and training needs of the South African mining industry. The MQA was established under the Skills Development Act, 1998 (Act 97 of 1998).

The activities of the above-mentioned two bodies are intricately linked with those of the MHSI and their accounts are captured in their respective annual reports.

GENERAL INFORMATION



1.1. Mission statement

The MHSI strives towards a safe and healthy mining industry. This is to be achieved by reducing mining-related deaths, injuries and occupational diseases through the formulation of national policy and legislation, the provision of advice and the application of systems that monitor and enforce compliance with the law in the mining sector.



1.2. Legislative mandate

The MHSI was established in terms of the MHSA for the purpose of executing the statutory mandate of the MHSI in safeguarding the health and safety of mine employees, and communities affected by mining operations.



I. GENERAL INFORMATION

I.3 Submission of the annual report to the executing authority

Mr S.G. Mantashe, MP
Minister of Mineral and Petroleum Resources
Republic of South Africa

Dear Minister

I am pleased to present to you the Mine Health and Safety Inspectorate Annual Report for the 2024-2025 financial year.

This report is in accordance with the requirements of Section 49(1)(j) of the Mine Health and Safety Act, 1996 (Act 29 of 1996) as amended.

Yours sincerely



Mr D Msiza
Chief Inspector of Mines
Mine Health and Safety Inspectorate



EXECUTIVE
SUMMARY





2.

EXECUTIVE SUMMARY

It is with great honour and pleasure that I present the report on the state of health and safety in the South African mining industry and the activities of the MHSI for the 2024-2025 financial year.

2.1. Establishment of the Inspectorate

The demographics of the Inspectorate were as follows:

TABLE 2.1: MHSI establishment for the period 1 April 2024 to 31 March 2025

GENDER	AFRICAN	WHITE	ASIAN	COLOURED	TOTAL
Male	121	6	0	0	127
Female	102	4	0	7	113

2.2. Occupational health performance of the South African mining industry

The MHSI requires employers to submit statutory reports to the respective Principal Inspectors of Mines (PIs) detailing information of personal exposure monitoring for occupational hygiene stressors. The South African mining industry continues to face ongoing challenges regarding the exposure of employees to occupational health hazards that exceed the occupational exposure limits (OELs).

2.2.1. Occupational medicine

Sections 2 and 16 of the MHSI call for preparation and submission of annual medical reports (AMRs) by all operating mines in South Africa.

During 2024, the mines submitted 952 AMRs, which was an increase of 2.3% from 931 reports submitted during the previous year and covering a total number of 549 878 employees.

The total number of occupational disease cases reported from the submitted AMRs decreased by 7.6%, from 1 864 in 2023 to 1 723 in 2024. Most occupational diseases reported were as result of noise-induced hearing loss (NIHL) at 705 cases, pulmonary tuberculosis (PTB) at 746 cases, silicosis at 136 cases and other occupational diseases at 111 cases. The other occupational diseases include chronic obstructive airway disease (COAD), occupational asthma, occupational lung cancer, occupational skin disease, platinum salt sensitivity (PSS), musculoskeletal disorders (MSDs), progressive massive fibrosis, extra pulmonary tuberculosis (EPTB), miliary tuberculosis (MTB), sarcoidosis, bronchiectasis, anthracosis, etc.

Coal workers' pneumoconiosis (CWP) dropped to 10 cases in 2024 from 12 cases the previous year, asbestosis remained at two cases, while silico-tuberculosis (Sil+TB) cases decreased from 41 cases in the previous reporting period to 13 cases.

During the 2024 reporting period, occupational disease cases from the Western Cape, North West: Klerksdorp, KwaZulu-Natal, Free State, North West: Rustenburg and Limpopo regions decreased while the number of cases from the Eastern Cape, Northern Cape, Mpumalanga and Gauteng regions increased.

The analysis of these occupational disease cases during the reporting period showed a slight increase from the following commodities mined: coal, chrome, iron ore, manganese, and other mines when compared to cases reported in 2023. Despite the slight increase of occupational disease noted from the above-mentioned mines, cases from the gold, platinum, diamonds and copper sectors decreased year-on-year.

The analysis of medical incapacity due to occupational disease incidence rates increased in 2024 compared to 2023, while the medical incapacity due to non-occupational diseases showed a decrease in 2024 compared to 2023.

Eight deaths due to work-related diseases reported in 2024 represent a significant decrease when compared to 14 deaths in 2024. Respiratory related diseases were noted as major cause of death due to work-related diseases.

The natural deaths showed an increase from 881 cases in 2023 to 968 cases in 2024.

2.2.2. Medical appeals

The mining industry is a hazardous working environment, and it is important to assess employees for fitness to work in different mining environments. Fitness to work is assessed by mine doctors, known as occupational medical practitioners (OMPs). The decisions made regarding fitness may be disputed by the employees and Section 20 of the MHSA gives such employees recourse to dispute the decision of the OMP regarding unfitness status.

The disputes are lodged with the Medical Inspector and during the reporting period a total of 111 appeals were finalised. Coastal regions did not contribute to appeals received and most of the medical appeals were from the Gauteng, Mpumalanga and North West: Rustenburg regions covering gold, coal and platinum commodities. A significant number of the medical appeals received in 2024 was due to non-communicable diseases (NCDs) such as hypertension, diabetes and epilepsy.

Challenges experienced regarding Section 20 medical appeals cover all stakeholders who are involved in the process, ranging from the employees, the employers and the service providers. These challenges are addressed accordingly through workshops and training of new health and safety representatives to ensure continuous knowledge and a better understanding of Section 20 of the MHSA.

2.2.3. Human Immunodeficiency Virus (HIV), Acquired Immune Deficiency Syndrome (AIDS) and tuberculosis (TB) in the mining industry

The South African mining industry submits tuberculosis (TB) and HIV data to the department on DMPR 164 forms in line with the CIOM instruction. The data required covers compliance of mines, TB and HIV performance of mines in South Africa.

During the 2024 reporting period, there were 875 mines that submitted data to the DMPR, a decrease from 881 mines in 2023. Most mines performed well in terms of having an integrated TB and HIV policy at around 92.7%. The associated budgets for addressing challenges of TB and HIV at mines decreased by about 10%, year-on-year and remain a serious concern that needs urgent attention.

HIV counselling and TB screening improved during the reporting period taking into consideration the different commodities that contributed to the data contained in the required forms.

2.2.4. NCDs and mental health disorders (MHDs)

NCDs, also known as chronic diseases, are diseases that are neither spread through infection nor other people. It tends to be of long duration and are the result of a combination of genetic, physiological, environmental behavioural and lifestyle factors. NCDs may be modified through lifestyle interventions or behaviours.

Globally, NCDs are responsible for the majority of deaths, most of which are premature deaths of people under the age of 70, and disability according to the World Health Organization (WHO). Low and middle-income countries are disproportionately affected the most, accounting to 77% of all NCD deaths. There are four groups of NCDs that are the leading cause of morbidity and mortality globally and these are: cardiovascular diseases, followed by cancers, chronic respiratory diseases and diabetes.

In response to dealing with the challenges posed by NCDs the DMPR in consultation with the MHSC approved the Guidance Note on the Prevention and Management of Non-communicable Diseases and Mental Health Disorders and it will be promulgated in July 2025. This guidance note provides the South African mining industry with information to guide the development and implementation of programmes in the prevention and management of NCDs and MHDs. In South Africa, NCDs and MHDs emerged as a significant concern within the mining industry as it not only affects the state of health and safety of mine workers but also their fitness to perform work at a mine.

2.3. Occupational safety performance of the South African mining industry

2.3.1. Fatality and injury accidents trends

The health and safety of mineworkers remains at the centre of the work we do as Government and it remains central to the long-term sustainability of the South African mining industry. Hence, we continue to strengthen the enforcement provisions, reinforce offences, and penalties, and remove ambiguity by amending certain definitions and expressions in the MHSA and thereby empower the South African mining industry to attain the goal of zero harm. Owing to our strategic partnership with our social partners, the Inspectorate improved its performance towards the zero harm goal.

The 2024 safety statistics showed significant strides in improving the state of health and safety at our mines, albeit with challenges and conscious of the fact that these numbers represent the lives of people. It is encouraging to note that the efforts of the Inspectorate continue to show a sustainable downward trend in occupational diseases, injuries and fatalities.

The South African mining industry recorded 42 fatalities in 2024 marking the lowest ever number of fatalities in the history of mining in South Africa. This represents a 25% improvement year-on-year compared to 2023 when 56 fatalities were reported.

The above-mentioned positive safety record is the result of concerted efforts by all parties that are involved in providing and maintaining a working environment that is safe and without risk to the health and safety of employees and all those that may be directly affected by the activities of mining. The continued collaboration and implementation of the necessary measures on health and safety throughout the years have demonstrated that significant improvements can be achieved. The Inspectorate therefore commends the collective efforts by all parties and urges all stakeholders to redouble their efforts to reach the goal of zero harm.

The fatalities per commodity in 2024 were reported as follows: 11 fatalities in the gold sector, 19 fatalities in platinum and six fatalities in the coal and other mines sectors, respectively. From the analysis of the data, it is noted that the classifications with the highest percentage of fatalities were transportation and mining (T&M) with 33%, falls of ground (FOG) with 29% and general-type accidents with 21%.

The fatality frequency rate (FFR) per region improved by 33% from 0,06 in 2023 to 0,04 in 2024. A total of 1 970 occupational injuries were reported in 2024 compared to 2 184 reported during the previous year. This translated to a 10% improvement year-on-year. The concern about injury accidents is that most of it is mainly due to repeat accidents categorised as FOG, T&M and general-type accidents.

It is concerning to note that the number of injuries because of miscellaneous accidents increased from five injuries in 2023 to 33 injuries in 2024. Additionally, injuries resulting from machinery related accidents increased from 149 injuries in 2023 to 169 injuries in 2024. From the analysis of the data, it is noted that the classifications with the highest percentage of injuries are general-type accidents with 53%, T&M with 18% and FOG with 15%.

There were 1 038 injuries classified under general-type accidents in 2024 compared to 1 170 injuries in 2023. This translates to a decrease of 11% year-on-year and includes categories such as fall of material/rolling rock with 128 injuries in 2024 compared to 137 injuries in 2023, manual handling of material with 265 injuries in 2024 compared to 263 injuries in 2023 and slipping and falling with 396 injuries in 2024 compared to 407 injuries in 2023.

During the reporting period the injury frequency rate (IFR) for all mines decreased from 2.20 in 2023 to 2.0 in 2024 which is an improvement of 9.0% in the number of injuries reported year-on-year.

2.3.2. Disaster-type accidents

A disaster-type accident is classified as an accident where five or more employees lose their lives in the same accident. However, all accidents are undesirable and regrettable.

There were no disaster type accidents reported in 2024 compared to one disaster type accident in 2023 where 13 mine employees lost their lives in a conveyance accident in the platinum sector.

2.4. Women in mining (WIM)

The mining sector employs a total of 77 607 female employees representing approximately 17% of the total workforce of the South African mining industry. Approximately 31% of the total female employees are on contract employment at mines.

No women were fatally injured in 2024 compared to one woman in 2023 and translates to a decrease of 100% in fatalities for WIM year-on-year. Although a fatality of any mineworker is regrettable, irrespective of gender, there were no fatalities for WIM reported for 2005, 2010, 2015 and 2024. There has been a decrease of 21% in the number of injuries involving WIM from 234 injuries in 2023 to 185 in 2024. These reported injuries were mostly in the general classification (65%) linked to slipping and falling, material handling and being struck by object.

Also, safety and security challenges impacting women in the South African mining industry requires effective prevention and management of workplace violence and sexual harassment in mines as well as warrants the adoption, implementation and monitoring of robust multi-faceted preventive measures. Prevention strategies should include a combination of workplace policies and procedures based on a sound legislative, regulatory and enforcement framework.

In response to the above-mentioned challenges affecting WIM, the DMPR in consultation with the MHSC approved the *Guidance Note for the Management of Gender-based Violence and Femicide, Safety and Security Challenges for Women in the South African Mining Industry* which was published in August 2024 with the objective to provide guidance in addressing gender-based violence and femicide as a profound and widespread problem identified in the South African mining industry.

2.5. Training and examinations

During the reporting period 37 MHSI officials attended technical and non-technical training courses and conferences, whilst two officials attended an Emerging Management Development Programme (EMDP) and one official attended the Executive Development Programme (EDP).

The Department had five Assistant Inspectors at the commencement of the reporting period whom are in the process of obtaining their respective Government Certificates of Competency (GCC).

There were no MHSI bursary holders during the reporting period.

2.6. Strategies to address occupational mine health and safety challenges

In addressing mine health and mine safety challenges, the MHSI will continue to implement the following strategies to address key focus areas on health and safety matters at all mines.

- Collaboration with organised labour and employers to enhance the concerted efforts in the eradication of mine deaths.
- Implementation of the Mine Health and Safety Tripartite Summit commitments.
- Support for the WIM Health and Safety programmes to ensure improvement in the sector.
- Timely adoption of technology and leading practice to protect the health and safety of mine workers.
- Enhancing health and safety culture to prevent harm to mine workers.
- Support the implementation of the MQA education and skills development programmes.
- Ensure that all mines collaborate with the MHSI and organised labour to have health and safety days and campaigns to raise awareness on the importance of adhering to health and safety protocols.
- Dissemination of information and ensure that Regional Tripartite Forums (RTFs) are held to engage on health and safety matters.



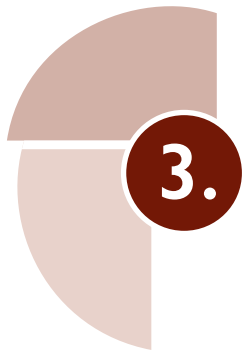
Mr D Msiza
Chief Inspector of Mines



**PROGRAMME
PERFORMANCE**

3





3. PROGRAMME PERFORMANCE

3.1. Aim of the programme

The aim of the programme is to carry out the constitutional mandate of the Department of Mineral and Petroleum Resources (DMPR) to protect the health and safety of persons working at mines and people residing in nearby communities directly affected by mining activities. It consists of two sub-programmes: Governance, Policy and Oversight; as well as Mine Health and Safety (regions).

The MHSI is responsible for statutory inspections and audits, the enforcement of the MHSA and its regulations, as well as conducting investigations and inquiries at South African mines. The programme also administers the GCC for the South African mining sector.

3.2. Purpose of the programme

The purpose of the programmes is to execute the statutory mandate of the DMPR to protect the health and safety of mine employees and people affected by mining activities.

3.3. Service delivery objectives and indicators

The strategic plan and achievements of the Inspectorate are outlined in the table below. This is an account of the progress achieved during the period under review against the annual targets set for achieving the strategic objectives of the MHSI.

TABLE 3.3: Progress achieved against annual targets

OUTPUT INDICATOR	TARGET	ACTUAL INPUT	REASON(S) FOR DEVIATION	CORRECTIVE MEASURES	COMMENTS
Percentage investigations completed (<i>initiated vs completed</i>).	80%	Achieved A total of 613 accident-initiated investigations were completed during the period under review compared to 601 accident-initiated investigations for the previous reporting period. Calculation: $(613/601) * 100 = 102\%$	The reason for the over achievement was due to strict monitoring of accident files allocated to inspectors and ensuring investigations were completed timeously.	N/A	N/A
Percentage inquiries completed (<i>initiated vs completed</i>).	80%	Achieved A total of 35 accident-initiated inquiries were completed during the period under review compared to 36 accident-initiated inquiries for the previous reporting period. Calculation: $(35/36) * 100 = 97\%$	The reason for the over achievement was due to strict monitoring of accident files allocated to inspectors and ensuring inquiries were completed timeously.	N/A	N/A
Number of qualitative inspections conducted (<i>cumulative including individual and group audits</i>).	8 000	Achieved The cumulative inspections and audits conducted during the period under review were 9 489, exceeding the overall target with 1 489 inspections and audits.	The reason for the over achievement was due to more inspections and audits conducted in the fourth quarter.	N/A	N/A
Number of MHSI Annual Reports submitted to Parliament.	1	Achieved A total of one MHSI Annual Report was produced and submitted to Parliament as required. Calculation: $(1/1) * 100 = 100\%$	The MHSI Annual Report was submitted to Parliament during the third quarter.	N/A	N/A
Percentage adherence to prescribed timeframes for the CIOM's appeals.	80%	Achieved A total of eight appeals were received during the fourth quarter of the period under review and were completed within the prescribed timeframe. Calculation $(5/6) * 100 = 83\%$	During the 2024/25 financial year, the CIOM received a total of eight appeals. From the appeals received, six were in terms of Section 57 and two were in terms of Section 58 of the MHSIA. The CIOM can only process appeals lodged in terms of Section 57 while Section 58 appeals are processed by the courts. From the six appeals, the CIOM processed five within 30 days.	N/A	N/A

OUTPUT INDICATOR	TARGET	ACTUAL INPUT	REASON(S) FOR DEVIATION	CORRECTIVE MEASURES	COMMENTS
Percentage adherence to prescribed timeframes for medical appeals.	80%	Achieved A total of 86 medical appeals were completed from the 97 appeals received during the period under review. Calculation: (86/97)*100 = 89%.	The reason for the over achievement was due to the following: 1. More reports were received early from the Occupational Medical Practitioners and that has helped with completing the appeals in a timely manner. 2. Appellants are sending medical records upfront, so the Medical Inspector does not have to wait to compile a response to the appeal report.	N/A	N/A
Percentage adherence to the prescribed timeframes for the Mineral and Petroleum Resources Development Act, 2002 (Act 28 of 2002) (MPRDA) applications.	80%	Achieved A total of 2 313 applications were received and 2 290 were completed during the period under review. Calculation: (2 290/2 313)* 100 = 99%.	The reason for the over achievement is due to more applications that were submitted inclusive of the correct documents to be processed and finalised in a timely manner.	N/A	N/A
Percentage of the administration of the GCC examination policy.	80%	Achieved All five steps for the certificate of competency model have been implemented namely: 1. Set the papers. 2. Write the examination. 3. Mark the examination. 4. Moderate the results. 5. Release the results. Calculation: (5/5)*100 = 100%	N/A	N/A	N/A
Number of occupational health and safety regional tripartite workshops conducted	40	Achieved 72 occupational health and safety regional tripartite workshops were conducted from April 2024 to March 2025 instead of 55 workshops.	The reason for the over achievement was due to the tripartite workshops for surface and underground workings being held with mines to enhance occupational health and safety awareness.	N/A	N/A

3.4. Service delivery improvement plan

TABLE 3.4: Service delivery improvement plan against annual targets

KEY SERVICE	SERVICE BENEFICIARY	DESIRED STANDARDS	PROGRESS AS AT 31 MARCH 2025
<p>Address health and safety risks in mining through:</p> <ul style="list-style-type: none"> Conduct mine accident investigations. Conduct mine fatal accident inquiries. Conduct qualitative inspections conducted (cumulative, including individual and group audits). Contribute to economic development through the provision of health and safety inputs within prescribed timeframes. This service enhances turnaround times for the MPRDA applications (e.g. mining rights, mining permits, prospecting rights, etc.) 	<p>Employees, employers, Government and South African citizens</p>	Quantity	102% of the mine accident investigations were completed and finalised as per capacity
		To complete and finalise 80% of mine accident investigations of the planned inquiries as per capacity	96% of the mine fatal accident inquiries were completed and finalised as per capacity.
		To complete and finalise 80% of mine fatal accident inquiries as per capacity	A total of 9 489 planned inspections and audits were conducted as per capacity
		To maintain 8 000 planned inspections and audits as per capacity	99% of applications received versus completed was achieved.
		To finalise 80% of the MPRDA applications within the prescribed timeframe as per capacity.	Achieved
	Government and South African citizens	Implementation and compliance with standardised policies and procedures.	Achieved
		Quarterly consultation with mining operations.	Achieved
		Policies and procedures are public documents.	Achieved
		Information is shared monthly with mines.	Achieved
		Ensure optimal utilisation of voted funds.	Achieved
		Quality	
		Consultation	
		Open and transparent	
		Information	
		Value for money	



STATE OF OCCUPATIONAL HEALTH

4





4. STATE OF OCCUPATIONAL HEALTH

4.1. Occupational medicine

In 2024, the mining industry recorded a decline in initial medical examinations, while periodic and exit examinations increased compared to 2023.

AMR submissions improved slightly by 2.3%, increasing from 931 in 2023 to 952 in 2024. The coal sector showed an increase, followed by other mines, chrome, platinum, manganese, and copper. However, submissions declined in the diamond and gold sectors, while iron ore maintained the same number of reports across both years.

The total number of employees reported in AMRs declined by 1.9%, from 560 391 in 2023 to 549 878 in 2024.

Occupational diseases decreased by 7.56%, from 1 864 in 2023 to 1 723 in 2024. The incidence rate also declined from 33.3 to 31.3 per 10 000 employees. While most regions reported reductions, increases were observed in Mpumalanga, followed by the Northern Cape, Gauteng, and Eastern Cape. The gold, platinum, diamond, and copper sectors showed a decrease in cases, whilst increases were noted in coal, iron ore, chrome, manganese, and other mines.

There was a notable decline in other occupational lung diseases (OLDs), with cases decreasing from 89 in 2023 to 48 in 2024. In contrast, work-related musculoskeletal disorders (WMSDs) increased from 26 cases in 2023 to 40 in 2024. The occupational skin diseases increased significantly from two to 15 cases, with gold contributing the highest number, followed by the coal sector.

The cases of medical incapacity due to occupational diseases increased from 440 in 2023 to 508 in 2024. In contrast, the cases of medical incapacity due to non-occupational diseases decreased from 3 250 in 2023 to 2 982 in 2024.

The cases of death due to work-related diseases decreased from 14 in 2023 to eight in 2024, with most deaths linked to respiratory conditions.

Finally, cases of natural deaths increased from 881 in 2023 to 968 in 2024, with the incidence rate increasing from 15.7 to 17.6 per 10 000 employees.

NCDs, also known as chronic diseases, are diseases that are neither spread through infection nor other people. It tends to be of long duration and are the result of a combination of genetic, physiological, environmental behavioural and lifestyle factors. NCDs may be modified through lifestyle interventions or behaviours.

Globally, NCDs are responsible for the majority of deaths, most of which are premature deaths of people under the age of 70, and disability according to the World Health Organization (WHO). Low and middle-income countries are disproportionately affected the most, accounting to 77% of all NCD deaths. There are four groups of NCDs that are the leading cause of morbidity and mortality globally and these are: cardiovascular diseases, followed by cancers, chronic respiratory diseases and diabetes.

In response to dealing with the challenges posed by NCDs the DMPR in consultation with the MHSC approved the *Guidance Note on the Prevention and Management of Non-communicable Diseases and Mental Health Disorders* and it will be promulgated in July 2025. This guidance note provides the South African mining industry with information to guide the development and implementation of programmes in the prevention and management of NCDs and MHDs. In South Africa, NCDs and MHDs emerged as a significant concern within the mining industry as it not only affects the state of health and safety of mine workers but also their fitness to perform work at a mine.

4.1.1. Medical surveillance conducted

In 2024, the mining industry recorded a decrease in initial medical examinations, while periodic and exit examinations increased compared to 2023, as shown in the table below.

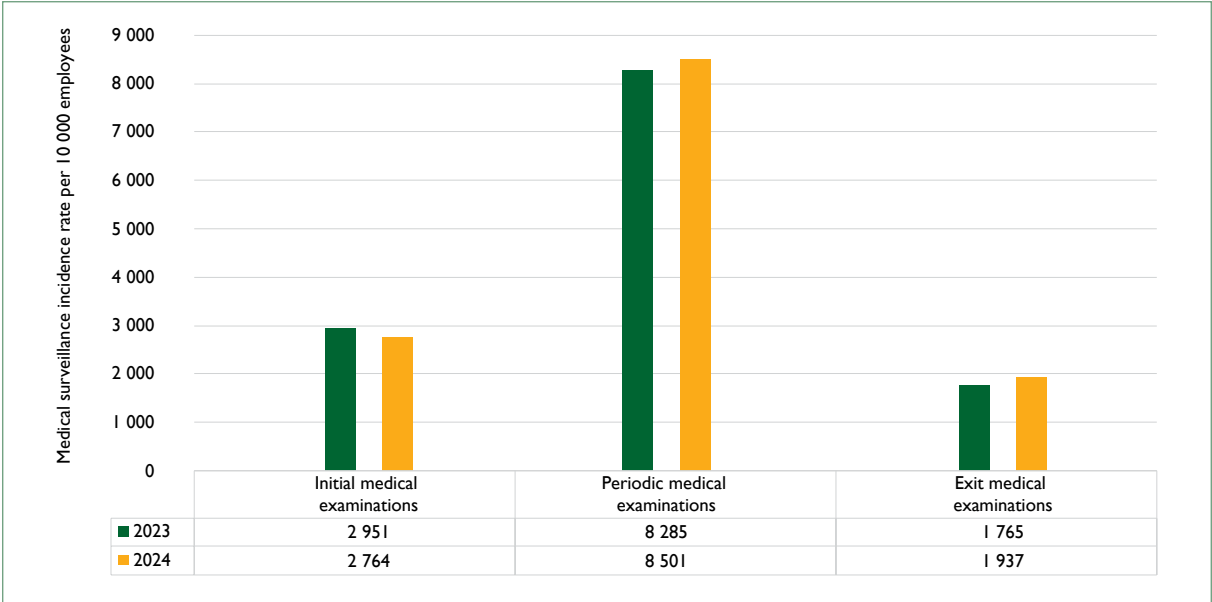
TABLE 4.1.1: Medical surveillance reported

	INITIAL MEDICAL EXAMINATIONS	PERIODIC MEDICAL EXAMINATIONS	EXIT MEDICAL EXAMINATIONS
2023	165 350	464 277	98 917
2024	151 988	467 429	106 487

4.1.2. Medical surveillance incidence rates

In 2024, the incidence rate of medical surveillance per 10 000 employees showed a decrease in initial medical examinations, while periodic and exit examinations increased compared to 2023, as illustrated in the figure below.

FIGURE 4.1.2: Medical surveillance incidence rates



4.1.3. Annual medical reporting

4.1.3.1. AMRs received per region and by commodity

The number of AMRs submitted by mines increased by 2.3%, from 931 reports in 2023 to 952 reports in 2024. The coal sector showed a notable increase, followed by other mines, chrome, platinum, manganese and copper. In contrast, submissions in the gold and diamond sectors decreased, while the iron ore sector maintained the same number of reports across both years, as outlined in the table below.

The commodity specific data shows that underground mining is concentrated in the platinum (70.1%) and gold (56.9%) sectors which are primarily deep-level mining whilst underground chrome mining has a mixed profile of 30.8% underground and 76.9% surface operations with four mines operating both underground and on surface.

A total of 90 mines did not submit AMRs in 2024 despite having submitted in 2023. The primary reasons for non-submission were mine closures (33.0%) and temporary closures (32.0%), predominantly in the diamond sector. Other reasons included non-compliance (17.0%), inactivity during the reporting year (11.0%), mergers (6.0%) and business rescue (1.0%) mainly among the other mines' sectors. Strengthening the MHSA enforcement is key to addressing AMR non-compliance and ensuring comprehensive occupational health reporting across the mining industry.

TABLE 4.1.3.1: AMRs received per region and by commodity

	GOLD		PLATINUM		COAL		DIAMONDS		COPPER		CHROME		IRON ORE		MANGANESE		OTHER MINES*		TOTAL		PERCENTAGE CHANGE
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
Eastern Cape	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	61	62	61	62	1.6
Free State	17	15	0	0	2	2	2	1	0	0	0	0	0	0	0	0	17	19	38	37	-2.6
Gauteng	22	22	0	0	0	1	1	1	0	0	0	0	0	0	0	0	73	74	96	98	2.1
KwaZulu-Natal	0	0	0	0	13	13	0	0	0	0	0	0	0	0	0	0	42	43	55	56	1.8
Limpopo	2	3	11	11	4	3	2	1	1	1	19	20	0	0	0	0	47	45	86	84	-2.3
Mpumalanga	6	7	2	2	130	142	0	0	0	0	0	0	0	0	1	1	21	22	160	174	8.8
Northern Cape	0	0	0	0	0	0	60	50	2	3	0	0	13	13	24	26	27	29	126	121	-4.0
North West: Klerksdorp	13	11	0	0	0	0	51	47	0	0	0	0	0	0	1	1	29	27	94	86	-8.5
North West: Rustenburg	0	0	60	64	0	0	1	1	0	0	27	32	2	2	0	0	29	26	119	125	5.0
Western Cape	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	0	95	108	96	109	13.5
TOTAL	60	58	73	77	149	161	118	102	3	4	46	52	15	15	26	28	441	455	931	952	2.3

* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.3.2. Total number of employees reported from the AMRs per region and by commodity

The total number of employees reported in the AMRs decreased by 1.9%, from 560 391 in 2023 to 549 878 in 2024, as shown in the table below.

TABLE 4.1.3.2: Total employees reported from AMRs per region and by commodity

	GOLD		PLATINUM		COAL		DIAMONDS		COPPER		CHROME		IRON ORE		MANGANESE		OTHER MINES*		TOTAL		PERCENTAGE CHANGE
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
Eastern Cape	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1 279	1 459	1 279	1 459	14.1
Free State	24 661	22 750	0	4 308	3 828	4 308	79	114	0	0	0	0	0	0	0	0	454	477	29 022	27 649	-4.7
Gauteng	52 145	47 312	0	270	0	270	2 028	1 941	0	0	0	0	0	0	0	0	4 872	4 126	59 045	53 649	-9.1
KwaZulu-Natal	0	0	0	4 671	4 397	4 671	0	0	0	0	0	0	0	0	0	0	8 185	10 127	12 582	14 798	17.6
Limpopo	512	626	39 183	36 679	7 217	6 829	6 705	5 543	5 546	8 194	17 453	19 291	0	0	0	0	6 215	6 353	82 831	83 515	0.8
Mpumalanga	8 655	9 809	7 584	7 886	105 504	98 048	0	0	0	0	0	0	0	0	67	71	998	1 256	122 808	117 070	-4.7
Northern Cape	0	0	0	0	0	0	8 359	8 241	74	276	0	0	24 174	21 586	17 627	18 546	7 569	7 579	57 803	56 228	-2.7
North West: Klerksdorp	16 745	16 169	0	0	0	0	835	757	0	0	0	0	0	0	32	22	3 480	3 441	21 092	20 389	-3.3
North West: Rustenburg	0	0	141 808	134 368	0	0	184	179	0	0	18 006	26 372	735	787	0	0	5 957	5 327	166 690	167 033	0.2
Western Cape	0	0	0	0	0	0	120	117	0	0	0	0	0	0	0	0	7 119	7 971	7 239	8 088	11.7
TOTAL	102 718	96 666	188 575	178 933	120 946	114 126	18 310	16 892	5 620	8 470	35 459	45 663	24 909	22 373	17 726	18 639	46 128	48 116	560 391	549 878	-1.9

* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.4. Occupational disease trends

4.1.4.1. Total number of employees reported from the AMRs per region and by commodity

The total number of occupational diseases reported decreased by 7.6%, from 1 864 cases in 2023 to 1 723 in 2024. While most regions reported a decrease in cases, Mpumalanga recorded an increase, followed by the Northern Cape, Gauteng, and Eastern Cape, as shown in the table below.

TABLE 4.1.4.1: Occupational diseases reported per region

	SILICOSIS		SIL+TB		PTB		CWP		ASBESTOSIS		NIHL		OTHER OCCUPATIONAL DISEASES*		TOTAL		PERCENTAGE RATE CHANGE
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
Eastern Cape	0	0	0	0	2	3	0	0	0	0	0	0	0	0	2	3	50.0
Free State	122	49	4	0	125	86	1	0	0	0	61	46	21	7	334	188	-43.7
Gauteng	44	51	2	7	166	175	0	1	1	0	177	172	16	13	406	419	3.2
KwaZulu-Natal	1	0	0	0	8	7	0	0	0	0	2	1	0	0	11	8	-27.3
Limpopo	0	1	0	0	36	28	0	2	0	0	45	48	3	4	84	83	-1.2
Mpumalanga	2	6	0	0	95	112	11	7	1	2	56	101	37	55	202	283	40.1
Northern Cape	0	1	0	0	36	56	0	0	0	0	5	7	3	5	44	69	56.8
North West: Klerksdorp	50	20	18	6	109	66	0	0	0	0	50	41	16	11	243	144	-40.7
North West: Rustenburg	11	8	17	0	175	212	0	0	0	0	297	285	27	16	527	521	-1.1
Western Cape	0	0	0	0	2	1	0	0	0	0	9	4	0	0	11	5	-54.5
TOTAL	230	136	41	13	754	746	12	10	2	2	702	705	123	111	1 864	1 723	-7.6

* Other occupational diseases include COAD, occupational asthma, occupational lung cancer, occupational skin disease, PSS, MSDs, progressive massive fibrosis, EPTB, MTB, sarcoidosis, bronchiectasis, anthracosis, etc.

4.1.4.2. Occupational disease incidence rates per region

The incidence rate of occupational diseases decreased from 33.3 per 10 000 employees in 2023 to 31.3 in 2024, as illustrated in the table below.

TABLE 4.1.4.2: Occupational disease incidence rates per region

	SILICOSIS		SIL+TB		PTB		CWP		ASBESTOSIS		NIHL		OTHER OCCUPATIONAL DISEASES*		TOTAL		PERCENTAGE RATE CHANGE
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
Eastern Cape	0.0	0.0	0.0	0.0	15.6	20.6	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	15.6	20.6	32.1%
Free State	42.0	17.7	1.4	0.0	43.1	31.1	0.3	0.0	0.0	0.0	2.1	1.6	7.2	2.5	115.1	68.0	-40.9%
Gauteng	7.5	9.5	0.3	1.3	28.1	32.6	0.0	0.2	0.2	0.0	3.0	3.2	2.7	2.4	68.8	78.1	13.5%
KwaZulu-Natal	0.8	0.0	0.0	0.0	6.4	4.7	0.0	0.0	0.0	0.0	1.6	0.7	0.0	0.0	8.7	5.4	-37.9%
Limpopo	0.0	0.1	0.0	0.0	4.3	3.4	0.0	0.2	0.0	0.0	5.4	5.7	0.4	0.5	10.1	9.9	-2.0%
Mpumalanga	0.2	0.5	0.0	0.0	7.7	9.6	0.9	0.6	0.1	0.2	4.6	8.6	3.0	4.7	16.4	24.2	47.6%
Northern Cape	0.0	0.2	0.0	0.0	6.2	10.0	0.0	0.0	0.0	0.0	0.9	1.2	0.5	0.9	7.6	12.3	61.8%
North West: Klerksdorp	23.7	9.8	8.5	2.9	51.7	32.4	0.0	0.0	0.0	0.0	23.7	20.1	7.6	5.4	115.2	70.6	-38.7%
North West: Rustenburg	0.7	0.5	1.0	0.0	10.5	12.7	0.0	0.0	0.0	0.0	1.7	1.1	1.6	1.0	31.6	31.2	-1.3%
Western Cape	0.0	0.0	0.0	0.0	2.8	1.2	0.0	0.0	0.0	0.0	1.2	4.9	0.0	0.0	15.2	6.2	-59.3%
TOTAL	4.1	2.5	0.7	0.2	13.5	13.6	0.2	0.2	0.0	0.0	12.5	12.8	2.2	2.0	33.3	31.3	-6.0%

* Other occupational diseases include COAD, occupational asthma, occupational lung cancer, occupational skin disease, PSS, MSDs, progressive massive fibrosis, EPTB, MTB, sarcoidosis, bronchiectasis, anthracosis, etc.

4.1.4.3. Occupational disease trends by commodity

The occupational diseases showed a decrease in the gold, platinum, diamond and copper sectors, while increases were recorded in the coal, iron ore, chrome, manganese sectors and other mines, as shown in the table below.

TABLE 4.1.4.3: Occupational diseases reported by commodity

	SILICOSIS		SIL+TB		PTB		CWP		ASBESTOSIS		NIHL		OTHER OCCUPATIONAL DISEASES*		TOTAL		PERCENTAGE CHANGE
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
Gold	218	120	24	13	406	334	0	1	1	0	291	251	51	30	991	749	-24.4
Platinum	11	10	17	0	197	211	0	2	1	1	313	306	29	18	568	548	-3.5
Coal	1	2	0	0	79	109	12	7	0	1	43	83	37	52	172	254	47.7
Diamonds	0	0	0	0	26	14	0	0	0	0	3	7	2	0	31	21	-32.3
Copper	0	0	0	0	1	1	0	0	0	0	10	4	0	0	11	5	-54.5
Chrome	0	0	0	0	21	27	0	0	0	0	21	28	0	3	42	58	38.1
Iron ore	0	0	0	0	3	20	0	0	0	0	1	2	1	3	5	25	400.0
Manganese	0	0	0	0	7	20	0	0	0	0	1	0	2	1	10	21	110.0
Other mines**	0	4	0	0	14	10	0	0	0	0	19	24	1	4	34	42	23.5
TOTAL	230	136	41	13	754	746	12	10	2	2	702	705	123	111	1 864	1 723	-7.6

* Other occupational diseases include COAD, occupational asthma, occupational lung cancer, occupational skin disease, PSS, MSDs, progressive massive fibrosis, EPTB, MTB, sarcoidosis, bronchiectasis, anthracosis, etc.

** Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.4.4. Occupational disease incidence rates by commodity

The analysis showed a decreased rate from 33.3 in 2023 to 31.3 in 2024 as outlined in the table below.

TABLE 4.1.4.4: Occupational disease incidence rates by commodity

	SILICOSIS		SIL+TB		PTB		CWP		ASBESTOSIS		NIHL		OTHER OCCUPATIONAL DISEASES*		TOTAL		PERCENTAGE RATE CHANGE
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
Gold	21.2	12.4	2.3	1.3	395	346	0.0	0.1	0.1	0.0	28.3	26.0	5.0	3.1	96.5	77.5	-19.7%
Platinum	0.6	0.6	0.9	0.0	104	118	0.0	0.1	0.1	0.1	16.6	17.1	1.5	1.0	30.1	30.6	1.7%
Coal	0.1	0.2	0.0	0.0	65	96	1.0	0.6	0.0	0.1	3.6	7.3	3.1	4.6	14.2	22.3	57.0%
Diamonds	0.0	0.0	0.0	0.0	142	83	0.0	0.0	0.0	0.0	1.6	4.1	1.1	0.0	16.9	12.4	-26.6%
Copper	0.0	0.0	0.0	0.0	1.8	1.2	0.0	0.0	0.0	0.0	17.8	4.7	0.0	0.0	19.6	5.9	-69.9%
Chrome	0.0	0.0	0.0	0.0	5.9	5.9	0.0	0.0	0.0	0.0	5.9	6.1	0.0	0.7	11.8	12.7	7.6%
Iron ore	0.0	0.0	0.0	0.0	1.2	8.9	0.0	0.0	0.0	0.0	0.4	0.9	0.4	1.3	2.0	11.2	460.0%
Manganese	0.0	0.0	0.0	0.0	39	10.7	0.0	0.0	0.0	0.0	0.6	0.0	1.1	0.5	5.6	11.3	101.8%
Other mines**	0.0	0.8	0.0	0.0	30	2.1	0.0	0.0	0.0	0.0	4.1	5.0	0.2	0.8	7.4	8.7	17.6%
TOTAL	4.1	2.5	0.7	0.2	13.5	13.6	0.2	0.2	0.0	0.0	12.5	12.8	2.2	2.0	33.3	31.3	-6.0%

* Other occupational diseases include COAD, occupational asthma, occupational lung cancer, occupational skin disease, PSS, MSDs, progressive massive fibrosis, EPTB, MTB, sarcoidosis, bronchiectasis, anthracosis, etc.

** Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.5. Other occupational diseases

4.1.5.1. Other OLDs by commodity

The total number of other OLDs showed a notable decrease from 89 cases in 2023 to 48 in 2024. The COAD accounted for the largest proportion of cases followed by occupational asthma as shown in the table below.

TABLE 4.1.5.1: Other OLDs by commodity

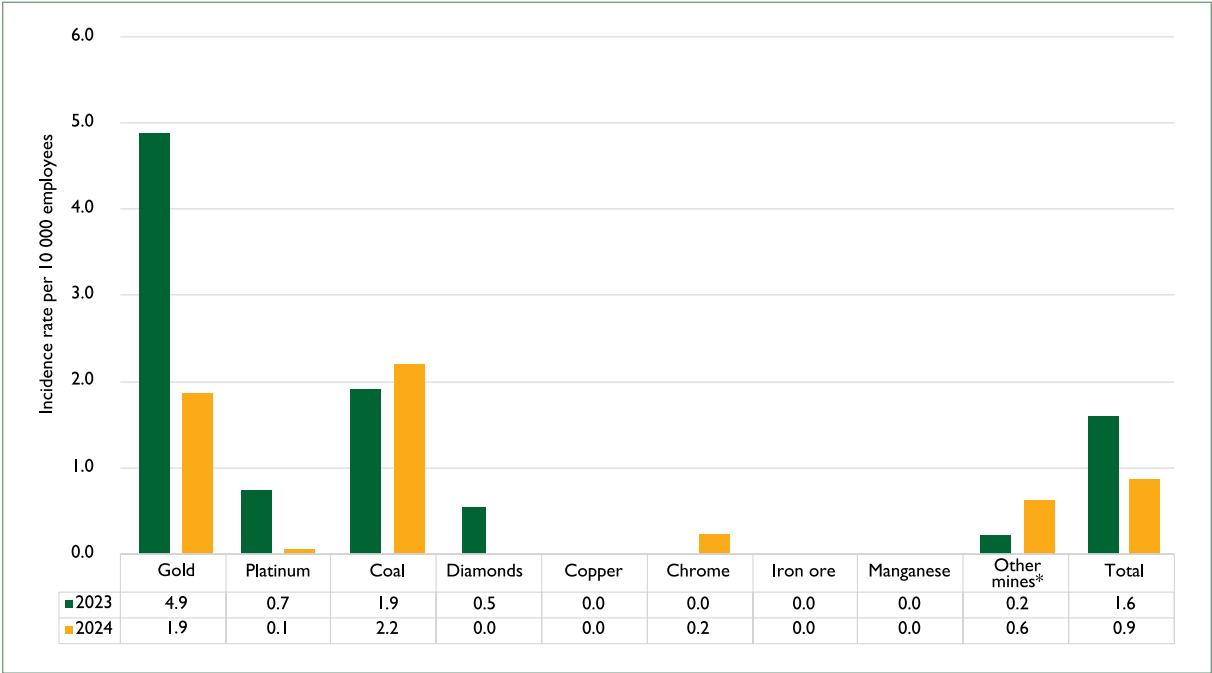
	GOLD		PLATINUM		COAL		DIAMONDS		COPPER		CHROME		IRON ORE		MANGANESE		OTHER MINES*		TOTAL		PERCENTAGE RATE CHANGE
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
COAD	35	15	14	0	18	23	0	0	0	0	0	1	0	0	0	0	1	1	68	40	-41.2%
Fibrosis secondary to other lung disease	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	-100%
Hypersensitivity pneumonitis	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	100%
Occupational lung cancer	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	100%
Occupational asthma	2	2	0	0	3	2	1	0	0	0	0	0	0	0	0	0	1	6	5	-16.7%	
Progressive massive fibrosis	12	0	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0	13	1	-92.3%	
Pulmonary sarcoidosis	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	-100%	
TOTAL	50	0	14	0	23	0	1	0	0	0	0	0	0	0	0	1	0	89	48	-46.1%	

* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.5.2. Other OLD incidence rate by commodity

The incidence rate of other OLDs decreased slightly from 1.6 per 10,000 employees in 2023 to 0.9 in 2024 as outlined in the figure below.

FIGURE 4.1.5.2: Other OLD incidence rates by commodity



* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.5.3. Work-related musculoskeletal disorders (WMSDs)

The cases of WMSDs increased significantly from 26 in 2023 to 40 in 2024 as outlined in the table below.

TABLE 4.1.5.3: WMSD by commodity

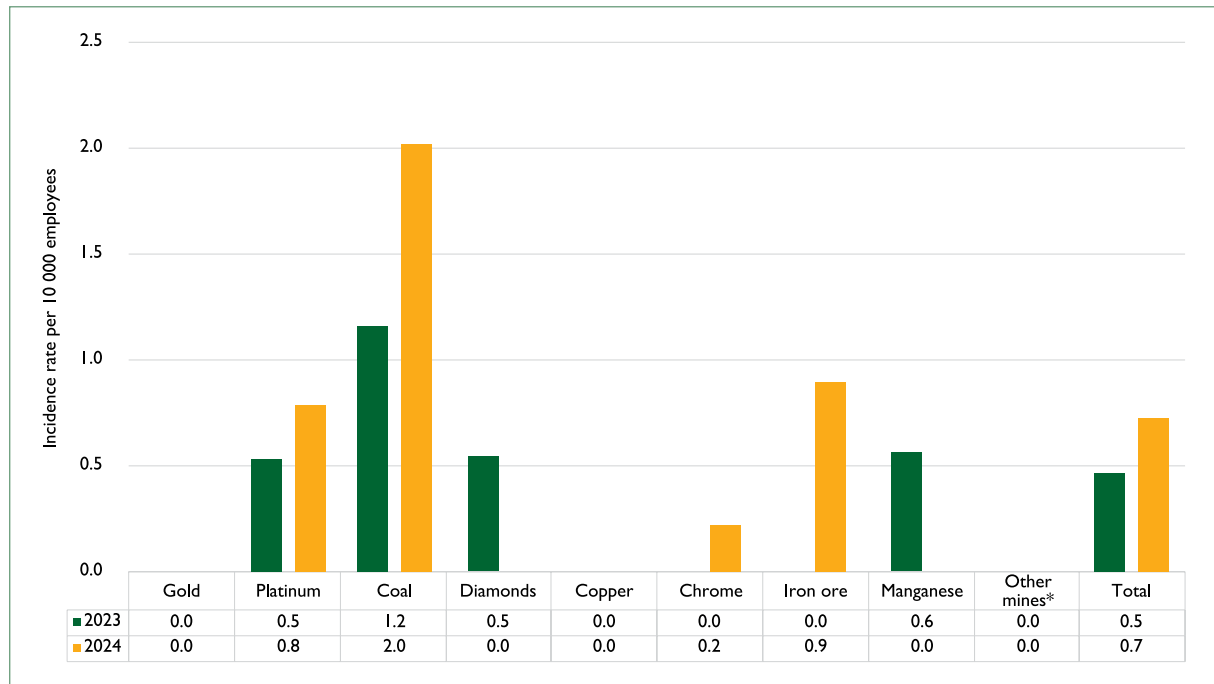
	GOLD		PLATINUM		COAL		DIAMONDS		COPPER		CHROME		IRON ORE		MANGANESE		OTHER MINES*		TOTAL		
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
Shoulder Lesion Grade I M. Suprascapular	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Other specified spondylopathies, lumbar region	0	0	0	7	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	7
Internal derangement of knee	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Low back pain, Discitis Lumbar region	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Rotator cuff syndrome	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Conditions C5-7 Broad based disc herniation	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Intervertebral disc displacement	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Lumbar spondylosis	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Lumber stenosis	0	0	0	0	0	8	0	0	0	0	0	0	0	0	0	0	0	0	0	0	8
Work-related upper-limb disorder (WRULD)	0	0	0	0	2	11	0	0	0	0	0	0	0	0	0	0	0	0	0	2	13
Osteoarthritis both knees	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Carpal tunnel syndrome	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1
Lumbar spondylosis	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Lumbar stenosis	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Carpal tunnel syndrome	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
WMSD	0	0	10	0	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	20	0
WMSD upper-limb (arthritis – right and left shoulder)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0
Whole body vibration	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	0	0	10	14	14	23	1	0	0	0	0	1	0	0	2	1	0	0	0	26	40

* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.5.4. WMSD incidence rates by commodity

The incidence rate of WMSDs increased from 0.5 per 10 000 employees in 2023 to 0.7 in 2024 as shown in the figure below.

FIGURE 4.1.5.4: WMSD incidence rates by commodity



* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.5.5. Occupational skin disease

The incidence of occupational skin diseases increased significantly from two in 2023 to 15 in 2024 with the gold sector accounting for the highest proportion of cases followed by coal as outlined in the table below.

TABLE 4.1.5.5: Occupational skin disease by commodity

	GOLD		PLATINUM		COAL		DIAMONDS		COPPER		CHROME		IRON ORE		MANGANESE		OTHER MINES*		TOTAL		
	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
Allergic dermatitis	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Occupational dermatitis	0	7	0	0	0	3	0	0	0	0	0	1	0	0	0	1	0	0	0	0	12
Occupational skin disease	0	0	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
TOTAL	0	7	2	2	0	3	0	0	0	0	0	1	0	1	0	1	0	0	0	2	15

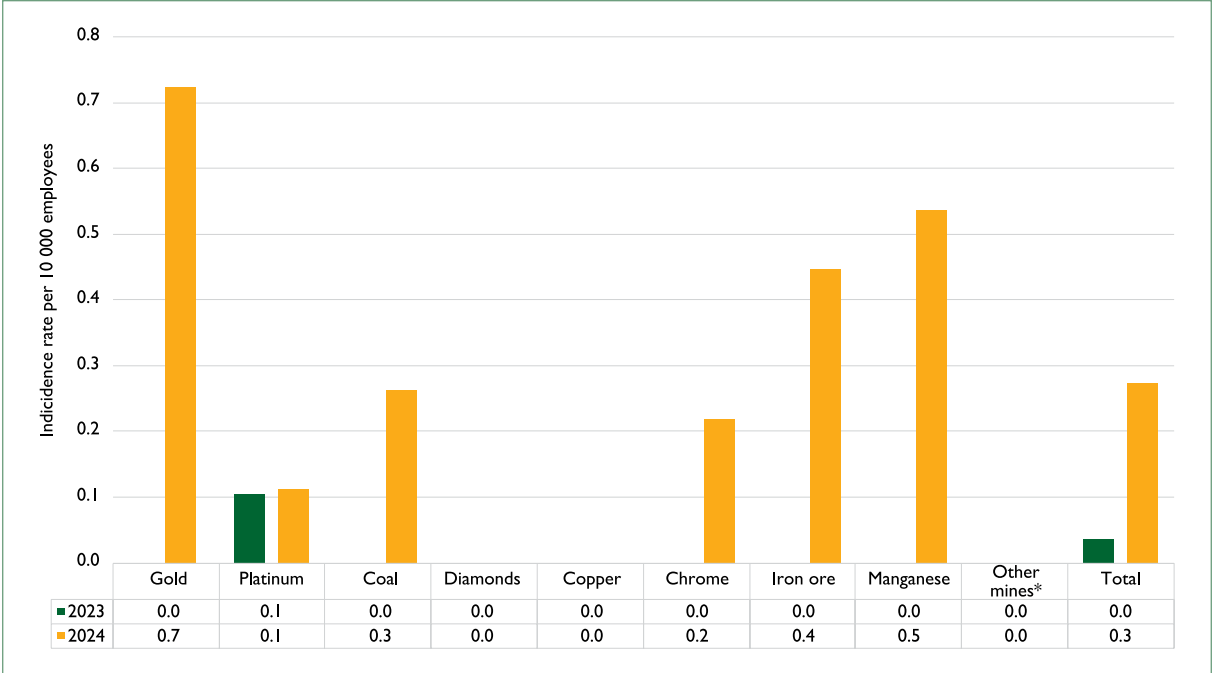
* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.5.6. Occupational skin disease incidence rate by commodity

Occupational skin diseases increased significantly from two in 2023 to 15 in 2024 with the gold sector accounting for the highest proportion of cases followed by coal as outlined in the table below.

The incidence rate of occupational skin diseases increased from 0.0 per 10 000 employees in 2023 to 0.3 in 2024 as shown in the figure below.

FIGURE 4.1.5.6: Occupational skin diseases



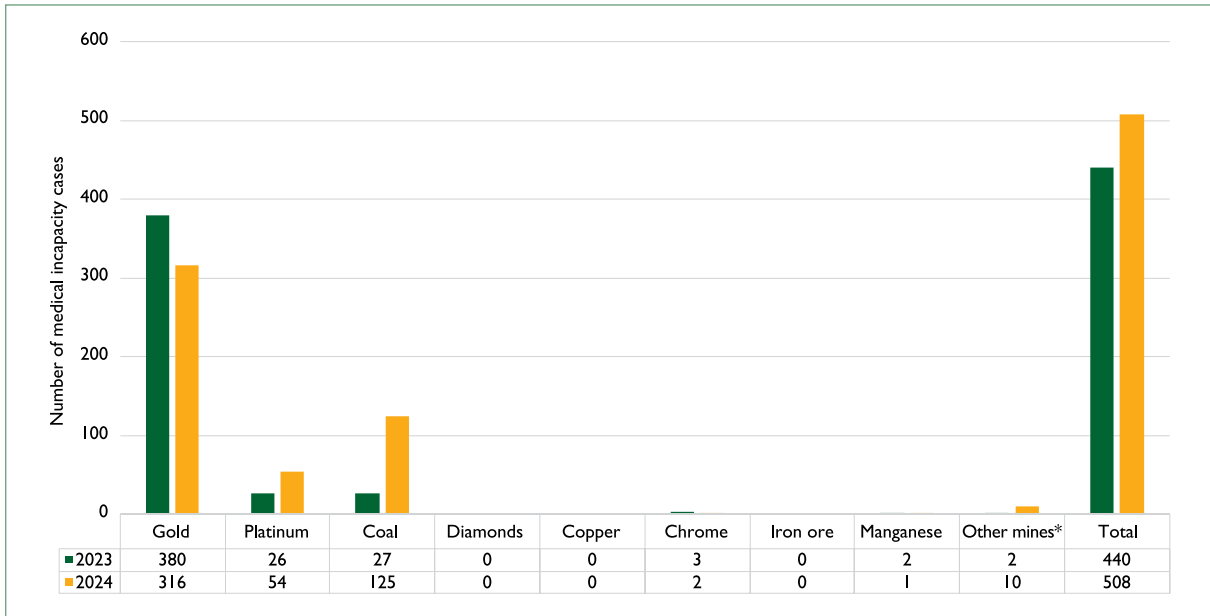
* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.6. Medical incapacity due to occupational and non-occupational diseases

4.1.6.1. Medical incapacity incidence rates due to occupational diseases by commodity

A notable increase of 15.5% is shown in the total cases of medical incapacity cases due to occupational diseases from 440 in 2023 to 508 in 2024 as illustrated in the figure below.

FIGURE 4.1.6.1: Medical incapacity due to occupational diseases by commodity

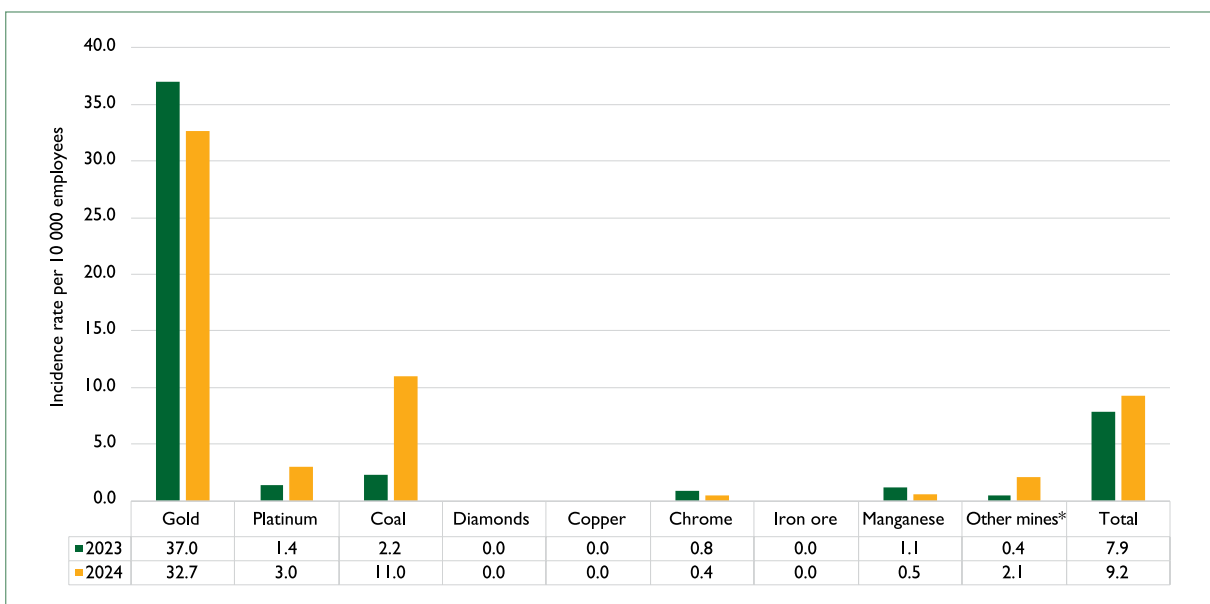


* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.6.2. Medical incapacity due to occupational disease incidence rates

The incidence rate of medical incapacity due to occupational diseases increased from 0.0 per 10 000 employees in 2023 to 0.3 in 2024 as shown in the figure below.

FIGURE 4.1.6.2: Medical incapacity due to occupational disease incidence rates

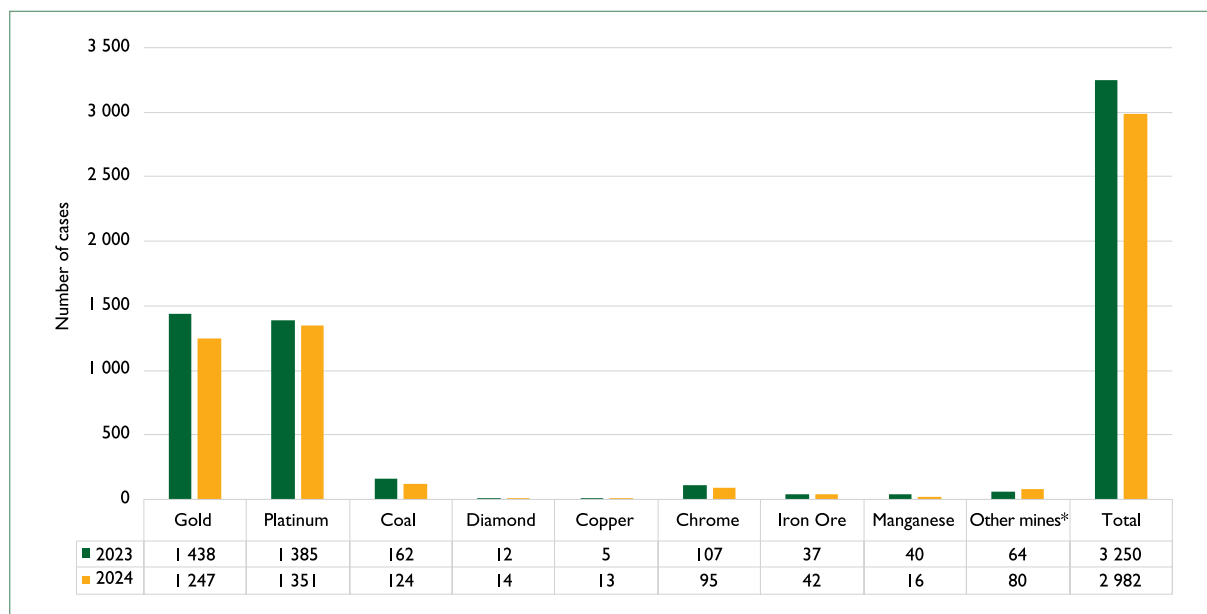


* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.6.3. Medical incapacity due to non-occupational diseases

A decrease of 8.2% is noted in the total cases of medical incapacity due to non-occupational diseases from 3 250 in 2023 to 2 982 in 2024 as outlined in the figure below.

FIGURE 4.1.6.3: Medical incapacity due to non-occupational diseases

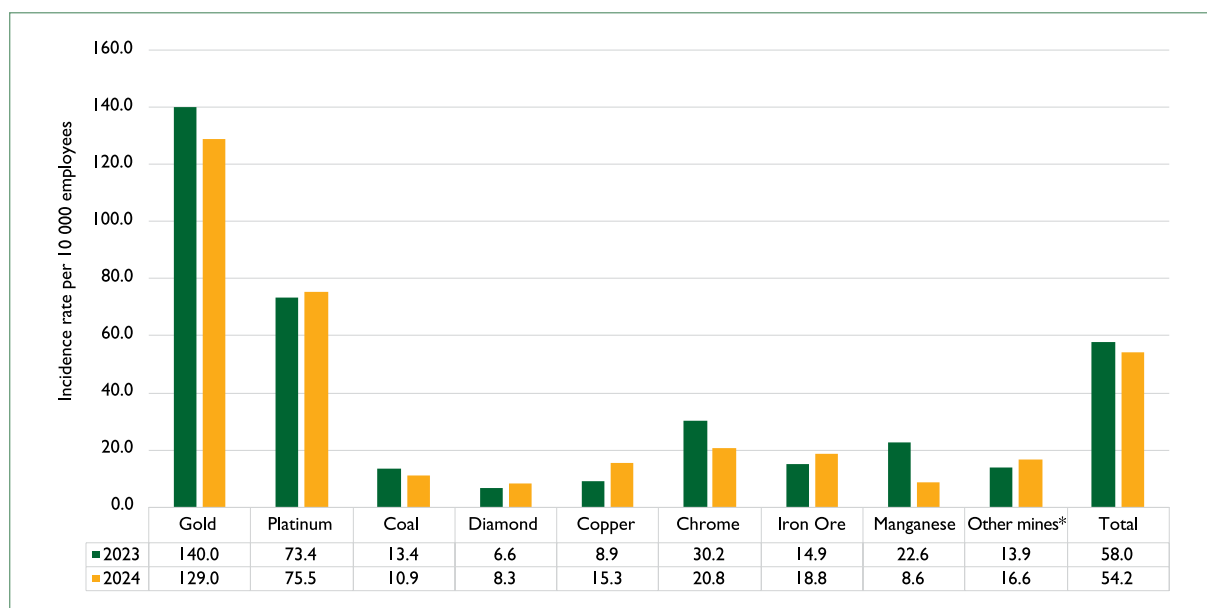


* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.6.4. Medical incapacity due to non-occupational disease incidence rates

The incidence rate of medical incapacity due to non-occupational diseases decreased slightly from 58.0 per 10 000 employees in 2023 to 54.2 in 2024 as shown in the figure below.

FIGURE 4.1.6.4: Medical incapacity incidence rates due to non-occupational diseases



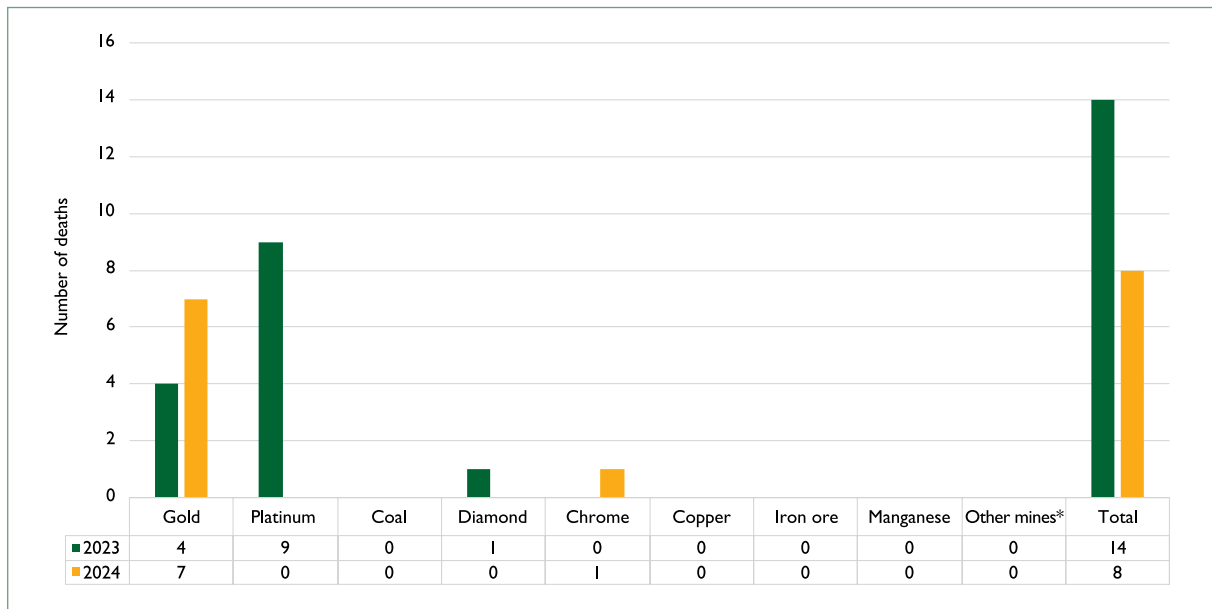
* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.7. Deaths due to work-related diseases

4.1.7.1. Deaths due to work-related diseases by commodity

The cases of deaths due to work-related diseases decreased slightly from 14 in 2023 to eight in 2024 as shown in the figure below.

FIGURE 4.1.7.1: Deaths due to work-related diseases by commodity

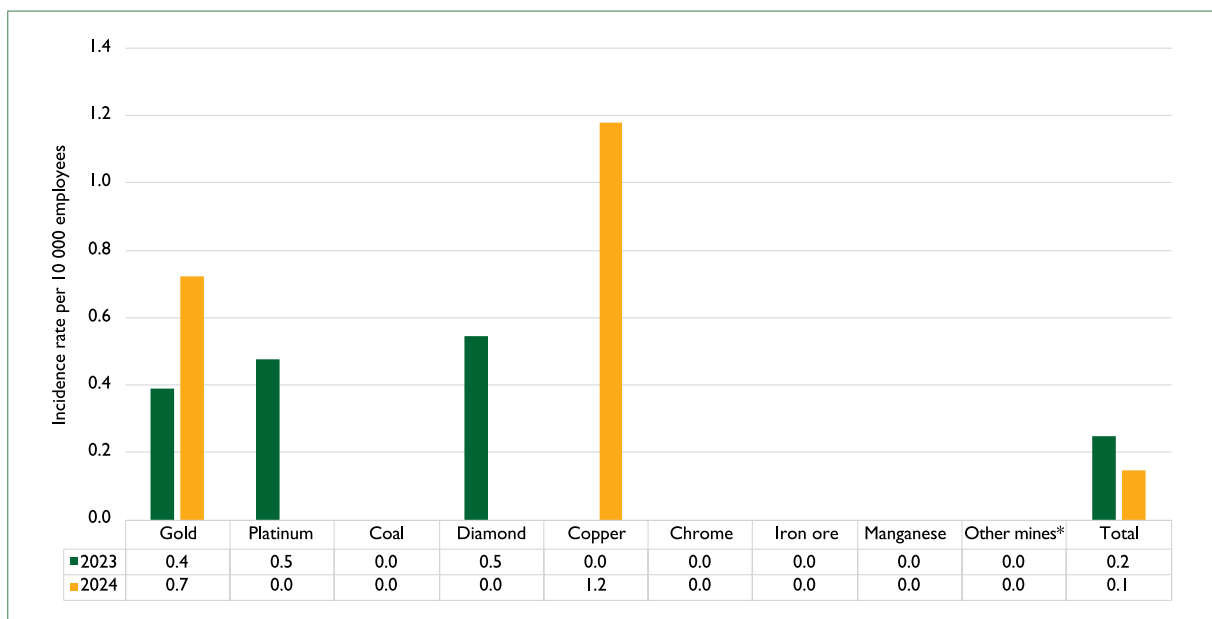


* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.7.2. Deaths due to work-related disease incidence rates by commodity

The incidence rate of death due to work-related diseases decreased slightly from 0.2 per 10 000 employees in 2023 to 0.1 in 2024 as shown in the figure below.

FIGURE 4.1.7.2: Deaths due to work-related disease incidence rates by commodity

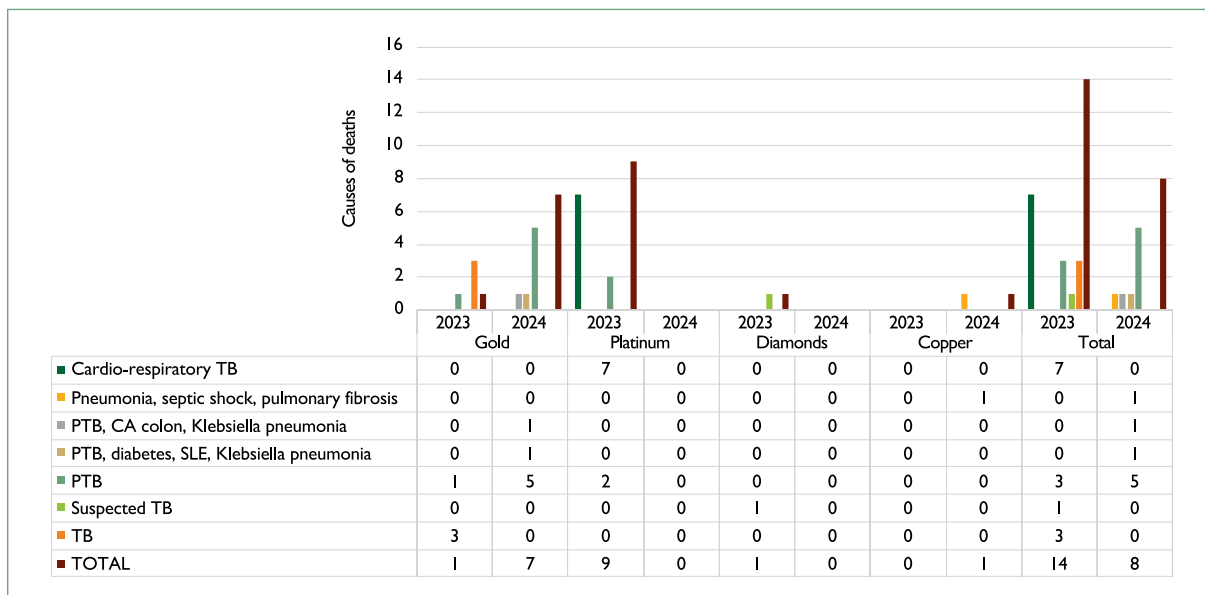


* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.8. Causes of deaths

The gold sector recorded the highest proportion of deaths due to work-related diseases, primarily involving respiratory conditions such as PTB. Some cases presented with multiple co-morbidities such as cancer, diabetes, systemic lupus erythematosus (SLE) and opportunistic infections like Klebsiella pneumonia. Overall, most reported deaths were attributed to respiratory causes as shown in the figure below.

FIGURE 4.1.8: Causes of deaths



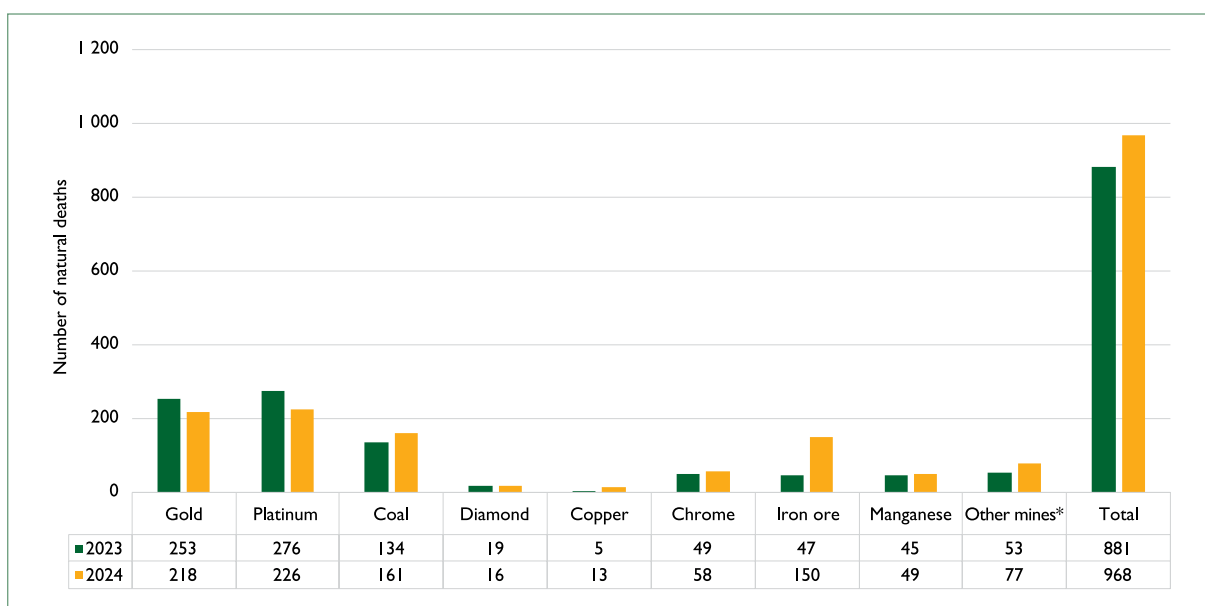
* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.9. Natural deaths

4.1.9.1. Natural deaths by commodity

The cases of natural deaths increased notably from 881 in 2023 to 968 in 2024. All sectors recorded an increase in cases except for the diamond sector which showed a decrease as shown in the figure below.

FIGURE 4.1.9.1: Natural deaths by commodity

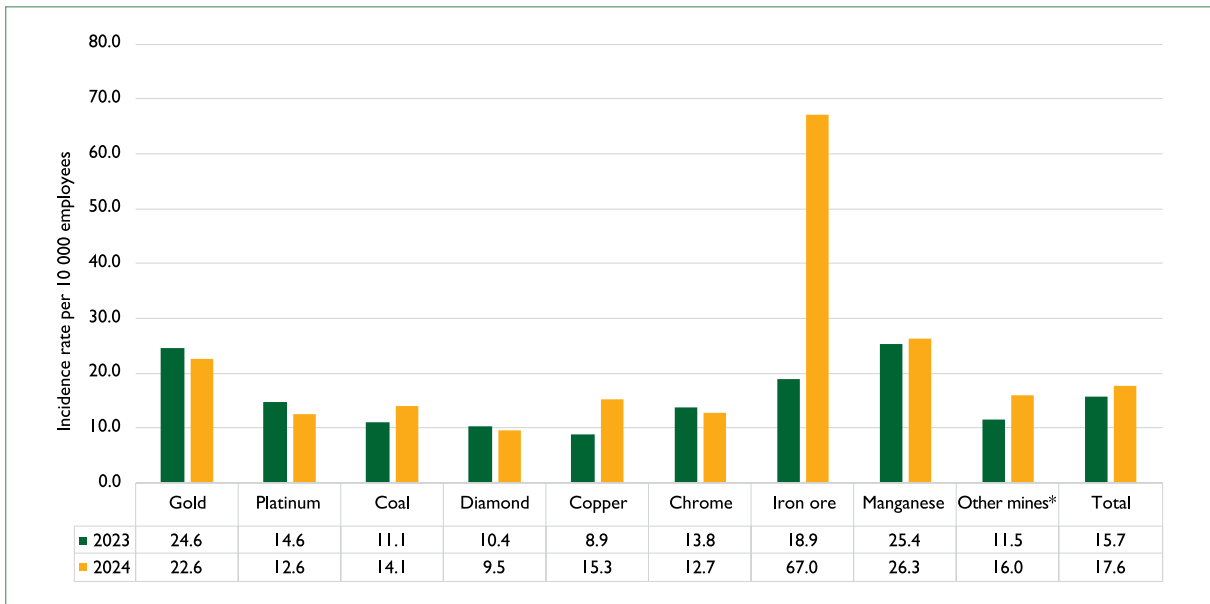


* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.1.9.2. Natural death incidence rates by commodity

The incidence rate of natural deaths increased from 15.7 per 10 000 employees in 2023 to 17.6 in 2024 as shown in the figure below.

FIGURE 4.1.9.2: Natural death incidence rates by commodity



* Other mines include hard rock such as cobalt, dolerite, granite, limestone, magnesite, mica etc. while soft rock includes clay, dolomite, salt, sand, shale, titanium, vanadium, etc.

4.2. Medical appeals

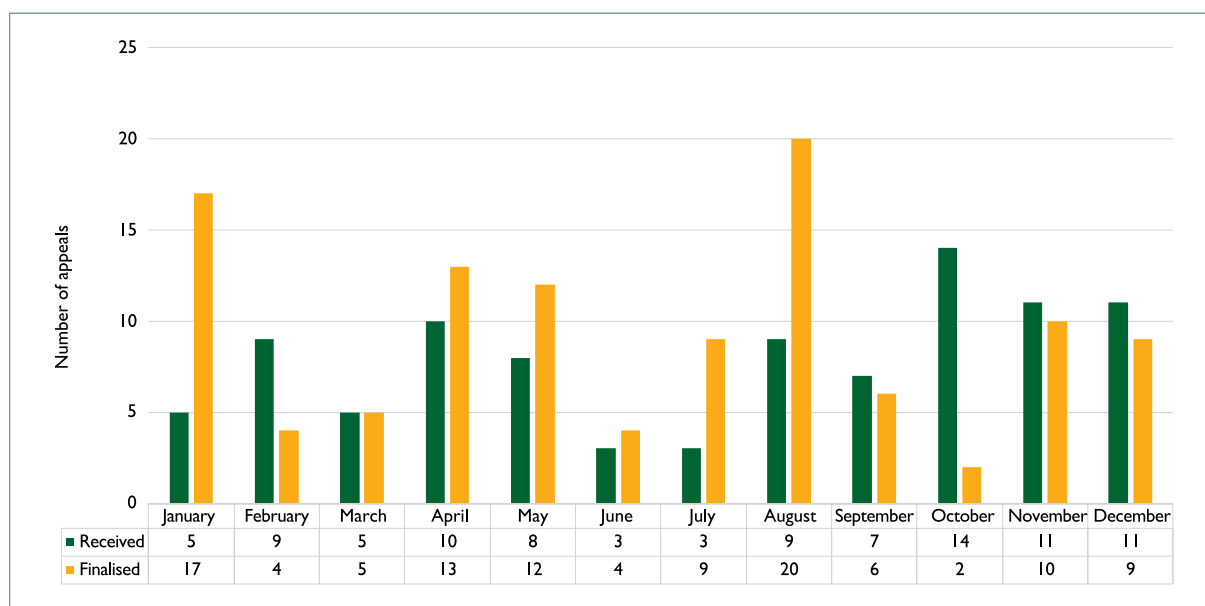
Section 20 of the MHS Act provides for mine employees to dispute the decision of the OMP regarding unfitness. An employee is given an opportunity to lodge a medical appeal to the Medical Inspector, who is legally appointed to deal with the medical disputes raised. Medical appeals are received daily from employees who require intervention in terms of their fitness to work at a mine.

The Medical Inspector then investigates and processes the appeals accordingly, until a decision is made and a report is written to the appellant. Data from appeals received is collected quarterly. The data below gives an overview of appeals captured from January to December 2024. The Medical Inspector strives to inform all relevant stakeholders through presentations at different forums about the medical appeal process and challenges experienced.

4.2.1. Medical appeals received and finalised

For the reporting period, the Medical Inspector completed 111 medical appeal reports in response to appeals lodged. A total of 95 new appeals were received for 2024, however during January more appeals were completed to reduce the backlog from December 2023. This implies that more than 100.0% of the medical appeals received were finalised for the reporting period.

FIGURE 4.2.1: Total number of medical appeals received and finalised

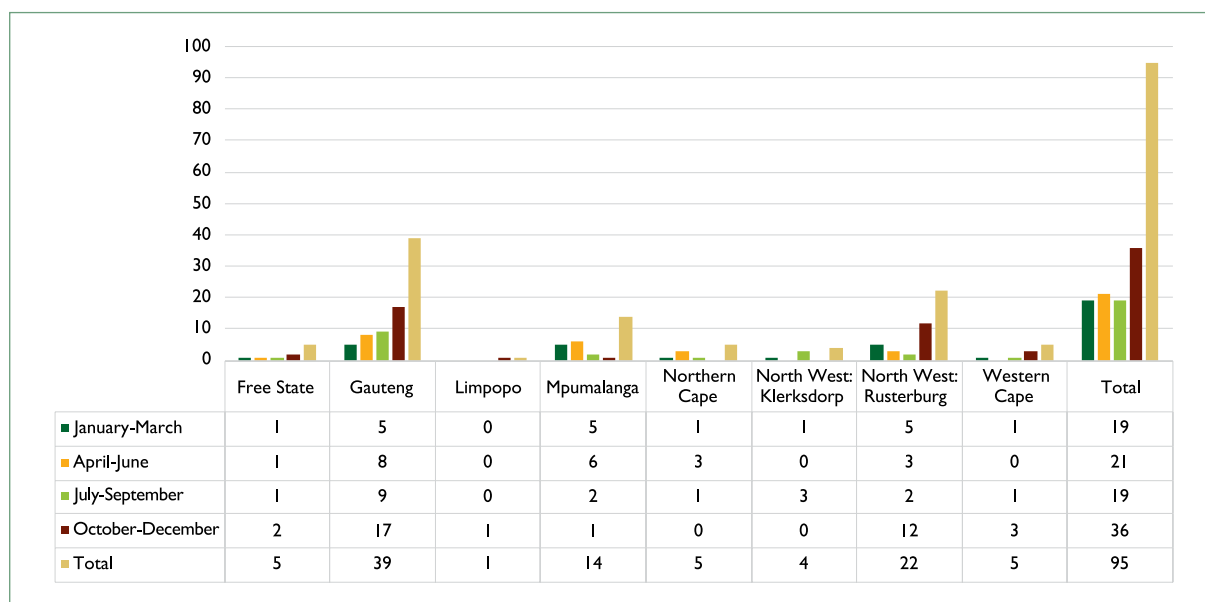


4.2.2. Medical appeals received per region and by commodity

4.2.2.1. Medical appeals received per region

Of the 95 appeals received, many emanated from the Gauteng, North West: Rustenburg and Mpumalanga regions. This differs from the previous reporting period, during which most appeals were lodged from North West and the Free State regions. Most appeals received were from Sibanye Stillwater that is active in both the Gauteng and North West: Rustenburg regions. There were no appeals lodged from Kwazulu-Natal and Eastern Cape.

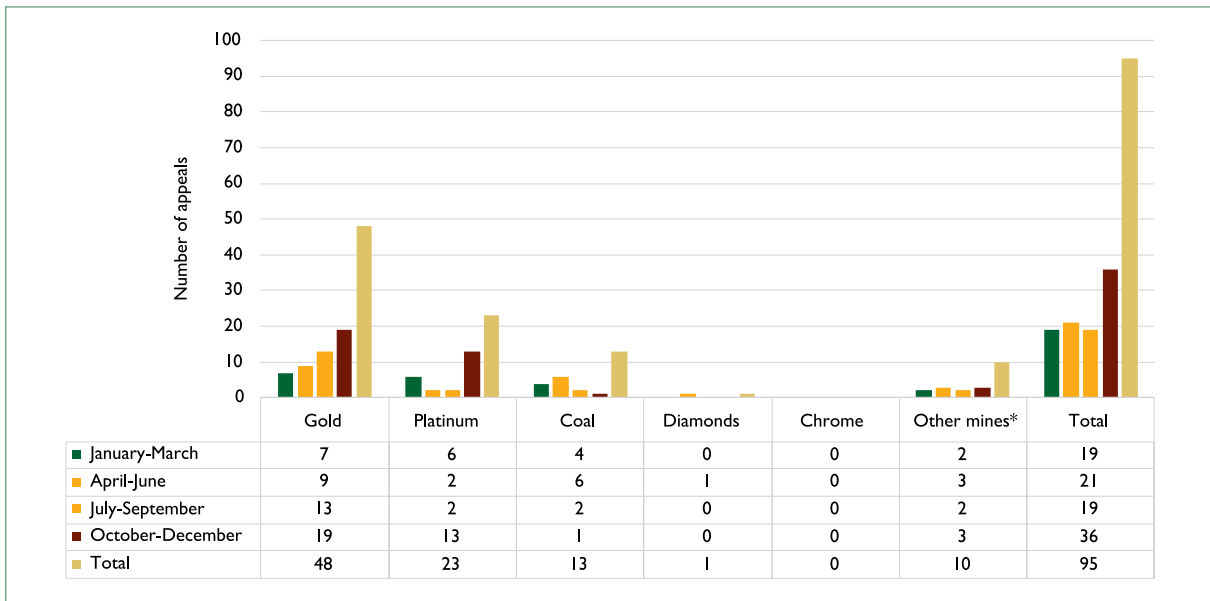
FIGURE 4.2.2.1: Number of medical appeals received per region



4.2.2.2. Medical appeals received by commodity

Most appeals were lodged from the gold, platinum and coal commodities. This corresponds with the gold mines in Gauteng; platinum mines in North West: Rustenburg and Mpumalanga regions.

FIGURE 4.2.2.2: Number of medical appeals received by commodity



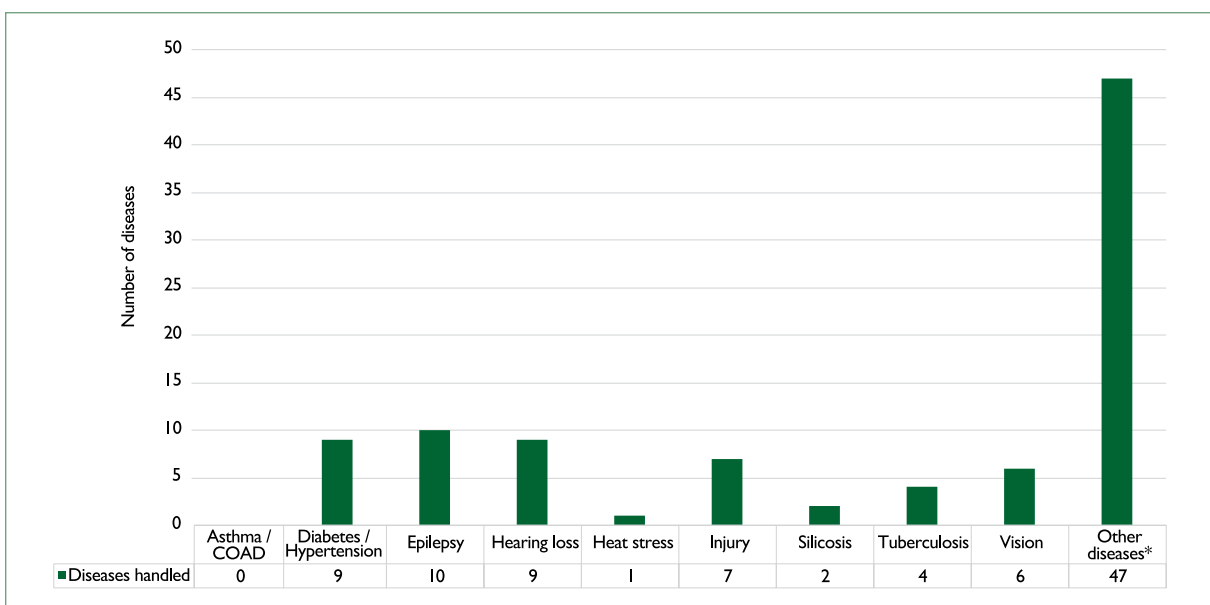
* Other mines include iron ore, manganese and concentrates

4.2.3. Diseases associated with the medical appeals received

Section 20 deals with medical incapacity from different medical conditions. When a medical appeal is lodged, it is important to determine what medical condition is resulting in the medical incapacity and subsequent unfitness of the employee. A significant number of the appeals were due to NCDs like hypertension, diabetes and epilepsy. Many of the appeals were classified under other diseases.

Occupational disease formed a small percentage of appeals received for the reporting period. These conditions included NIHL, TB, heat stress and silicosis.

FIGURE 4.2.3: Diseases associated with medical appeals received



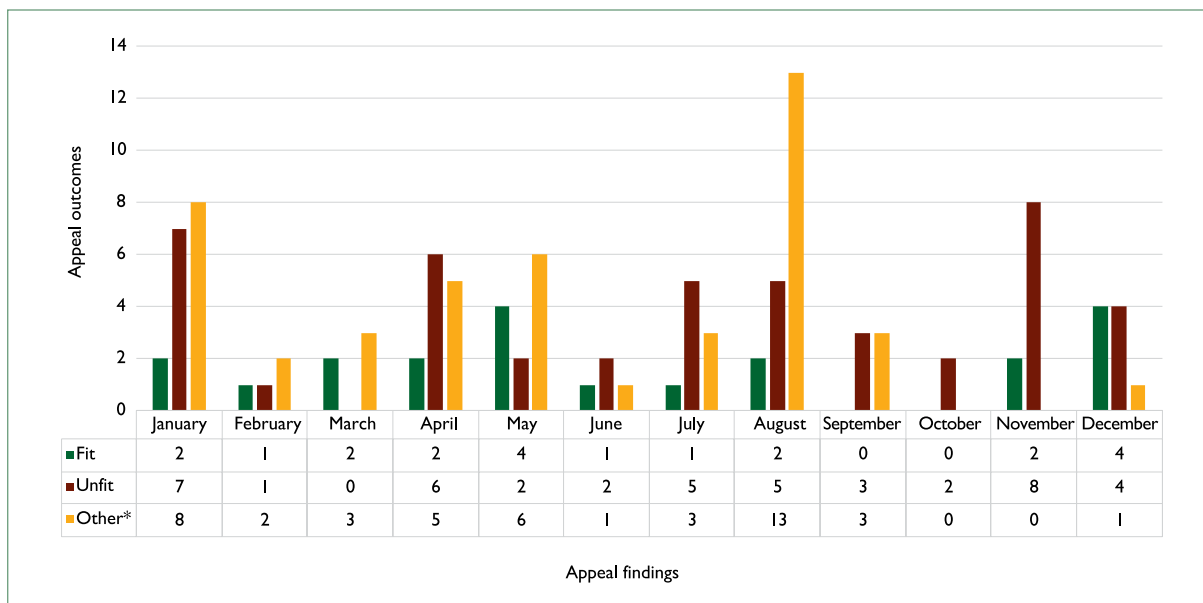
* Other diseases include musculoskeletal conditions, carcinomas, dermatological conditions, cardiopulmonary conditions, osteoarthritis and gastrointestinal conditions

4.2.4. Medical appeal findings

Once an appeal is completed, the Medical Inspector may confirm the decision of the OMP that the employee is unfit as previously stated or set aside the decision of the OMP and declares the employee fit. The Medical Inspector may also vary the decision and provide another decision depending on the case at hand. All decisions made by the Medical Inspector are supported by investigations conducted and medical reports from relevant specialists.

The figure below indicates employees that were found fit or unfit to perform their work. The other appeals had varied decisions with alternative rulings.

FIGURE 4.2.4: Medical appeal findings



* Other findings include complaints; compensation matters and withdrawals.

4.2.5. Challenges to the medical appeal process

The appeal system is a multistakeholder system with different role players. Different challenges may arise from any of the stakeholder groups. Some of the challenges have remained constant despite frequent information sessions with stakeholders annually. The following challenges were identified:

4.2.5.1. Employees

- Employees appeal when failing to get alternative placement after the incapacity committee decision.
- Employees do not provide adequate information as required.
- Employees abuse the appeal system for complaints that should be investigated in the regional offices or even internally at the mines.

4.2.5.2. Employers

- Delays from OMPs in completing the response template provided.
- OMPs depending on only the minimum standards of fitness guideline to support their decisions.
- Interference by human resource officials of the mine in the appeal process.

4.2.5.3. Second opinion doctors

- Unavailability of relevant specialists in certain provinces to render services.
- Specialists were not willing to provide written reports for appellants.
- The specialists were not eager to attend to non-emergency appeal cases.

4.2.5.4. Section 20 of the MHSA

- The Mine Health and Safety Amendment Bill explaining the misinterpretation is still outstanding.
- Failure to recognise that Section 20 has specific conditions for lodging a medical appeal

4.3. Reporting on HIV and TB

The South African mining industry submits TB and HIV data to the department on the required forms as per the Chief Inspector's instruction. The data submitted enables the inspectorate to observe trends in terms TB and HIV performance and compliance in the mining industry.

The data allows the South African mining industry to assess their compliance with the milestones set by the MHSC and national targets by the WHO. The industry also needs to compare favourably with the Joint United Nations Programme on HIV/AIDS (UNAIDS) 95/95/95 targets set for managing HIV which requires 95% of the population to know their status, 95% to be on treatment and 95% to stay virally suppressed. Below are the data sets that are used to provide the necessary information. Similar 95/95/95 targets have been adopted for TB management and control at mines.

4.3.1. Compliance for all mines

A total of 875 mines submitted data for the period under review. All mines performed well in terms of having an integrated TB and HIV policy at 92.7%. HIV and TB budgets at mines are noted to be poor at 52.1% indicating that some employers are not prioritising wellness interventions for their employees. The budgeting has reduced from 64.2% during the previous reporting period to 52.1% in the current reporting period which is more than a 10,0% reduction and is concerning.

The platinum sector remains the overall best performer for the reporting period and has maintained an average performance above 95% for all measures under compliance. The diamond sector has persistently performed poorly, only managing to perform well on the integrated TB and HIV policy but performed poorly under all other measures.

TABLE 4.3.1: Compliance for all mines by commodity

MEASURE	GOLD	PLATINUM	COAL	DIAMONDS	OTHER MINES*	TOTAL
	NUMBER OF MINES					TOTAL MINES
	44	68	160	101	502	875
	NUMBER OF EMPLOYEES					TOTAL EMPLOYEES
	90 513	178 321	118 995	16 536	132 174	536 539
Integrated HIV and TB policy	43 97.7%	68 100.0%	152 95.0%	101 100.0%	447 89.0%	811 92.7%
Integrated HIV and TB programme	40 90.9%	67 98.5%	141 88.1%	18 17.8%	301 60.0%	567 64.8%
HIV and TB programme budget	38 86.4%	66 97.1%	109 68.1%	19 18.8%	224 44.6%	456 52.1%
Monitoring and evaluation system for HIV and TB programmes	43 97.7%	67 98.5%	134 83.8%	9 8.9%	295 58.8%	548 62.6%

* Other mines include hard rock, for example: cobalt, dolerite, granite, limestone, magnesite, mica; and soft rock ,for example: clay, dolomite, salt, shale, titanium, vanadium, etc.

4.3.2. Trends for HIV counselling and testing (HCT) services and TB programmes

HIV counselling has improved from 82.0% to 84.5% in the South African mining industry during the reporting period. The diagnosed TB cases has remained constant at 0.2%. However, multidrug-resistant TB (MDR-TB) cases have decreased to 2.2% in the current reporting period when compared to 3.8% from the previous report. All employees diagnosed with TB were placed on treatment and TB screening is in keeping with the 95:95:95 strategy indicating that the South African mining industry is on track in terms of TB control.

TABLE 4.3.2: Trends for HCT services and TB programmes

MEASURE	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
	TOTAL LABOUR									
Counselled for HIV	476 625 299 566 62.9%	455 681 299 444 65.7%	473 972 329 562 69.5%	493 054 360 994 73.2%	449 246 315 381 70.2%	482 068 354 466 73.5%	480 742 315 716 65.7%	498 765 371 231 74.4%	610 700 500 818 82.0%	536 539 453 109 84.5%
Tested for HIV	191 333 63.9%	192 517 64.3%	206 033 62.5%	205 596 57.0%	210 456 66.7%	209 315 59.1%	229 811 72.8%	236 480 63.7%	331 665 66.2%	288 083 63.6%
HIV positive	21 913 11.5%	16 243 8.4%	16 293 7.9%	15 630 7.6%	13 101 6.2%	10 684 5.1%	10 137 4.4%	11 632 4.9%	13 820 4.2%	7430 2.6%
Co-infected with TB and HIV	3 063 72.7%	2 359 62.1%	1 719 66.6%	1 441 69.7%	895 63.8%	699 40.4%	568 52.4%	636 53.0%	579 47.4%	452 45.2%
Living with HIV and on antiretrovirals (ARV)	27 272	38 804	39 308	42 002	12 858	85 418	51 656	53 415	62 084	54 218
Screened for TB	422 670 88.7%	437 436 96.0%	455 242 96.0%	474 429 96.2%	437 199 97.3%	449 815 93.3%	441 882 91.9%	462 515 92.7%	590 513 96.7%	510 149 95.1%
Diagnosed with TB	4 211 1.0%	3 799 0.9%	2 581 0.6%	2 066 0.4%	1 403 0.3%	1 726 0.4%	1 083 0.2%	1 228 0.3%	1 222 0.2%	1 001 0.2%
On TB treatment	4 367	3 687	2 414	1 899	1 729	1 676	1 084	1 200	1 222	10 010
Diagnosed with MDR- TB	112 2.7%	123 3.2%	114 4.4%	71 3.4%	86 6.1%	46 2.7%	28 2.6%	38 3.2%	46 3.8%	22 2.2%
Diagnosed with extensively drug-resistant TB (XDR-TB)	14 0.3%	13 0.3%	12 0.5%	8 0.4%	8 0.6%	11 0.6%	2 0.2%	7 0.6%	0 0.0%	0 0.0%

4.3.3. HCT services and TB programmes

HIV counselling continues to show an improvement at 84.5% and TB screening has declined slightly but still within the 95% targets set. While the gold sector has shown a decrease in HIV counselling, there has been significant TB screening above 95% with a resultant increase in employees diagnosed with TB and MDR-TB.

TABLE 4.3.3: HCT services and TB programmes by commodity

MEASURE	GOLD		PLATINUM		COAL		DIAMONDS		OTHER MINES*		TOTAL
	NUMBER OF MINES		NUMBER OF MINES		NUMBER OF MINES		NUMBER OF MINES		NUMBER OF MINES		TOTAL
	44	68	160	101	502	875	TOTAL EMPLOYEES		TOTAL EMPLOYEES		
	90.513	178.321	118.995	16.536	132.174	536.539					
Counselled for HIV	72.012	151.039	99.517	16.420	114.121	453.109					
	79.6%	84.7%	83.6%	99.3%	86.3%	84.5%					
Tested for HIV	50.066	113.793	62.825	10.595	50.804	288.083					
	69.5%	75.3%	63.1%	64.5%	44.5%	63.6%					
HIV positive	722	3.935	1.373	233	1.167	7.430					
	1.4%	3.5%	2.2%	2.2%	2.3%	2.6%					
Co-infected with TB and HIV	193	158	44	5	52	452					
	51.5%	54.3%	32.8%	17.2%	30.2%	45.2%					
Living with HIV and on ARV	13.637	23.372	9.604	696	6.909	54.218					
Screened for TB	88.042	172.684	102.181	16.531	130.711	510.149					
	97.3%	96.8%	85.9%	100.0%	98.9%	95.1%					
Diagnosed with TB	375	291	134	29	172	1.001					
	0.4%	0.2%	0.1%	0.2%	0.1%	0.2%					
On TB treatment	375	291	134	29	172	1.001					
	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%					
Diagnosed with MDR-TB	14	4	1	0	3	22					
	3.7%	1.4%	0.7%	0.0%	1.7%	2.2%					
Diagnosed with XDR-TB	0	0	0	0	0	0					
	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%					

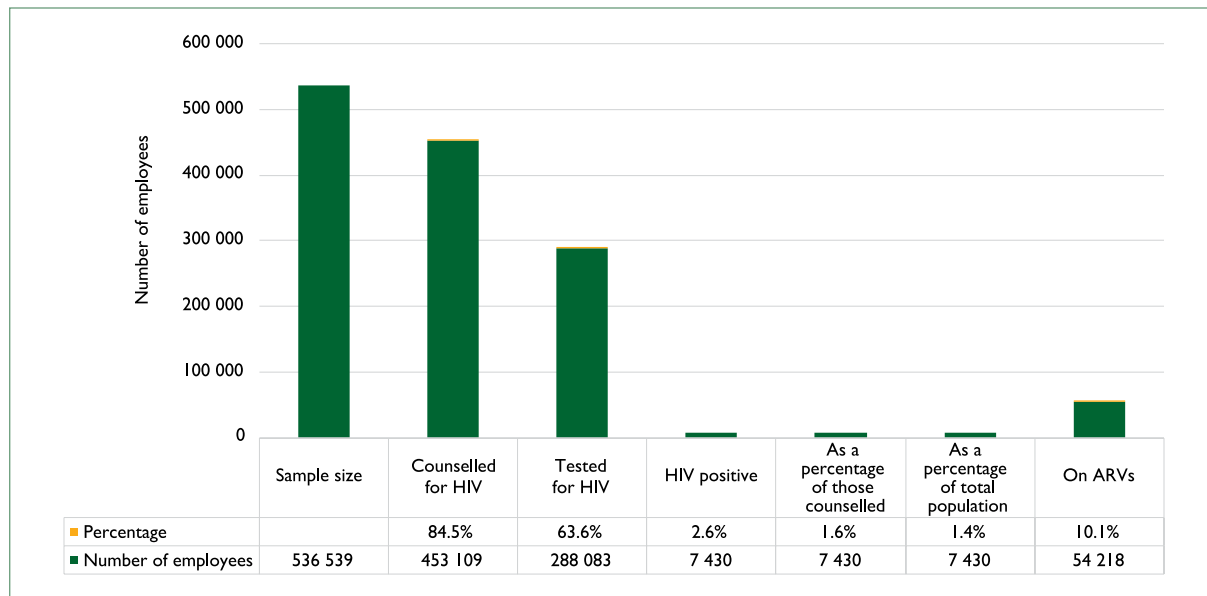
* Other mines include hard rock, for example: cobalt, dolerite, granite, limestone, magnesite, mica; and soft rock, for example: clay, dolomite, salt, shale, titanium, vanadium, etc.

4.3.4. HCT services

4.3.4.1. HCT services for all mines

The South African mining industry aims to counsel and test 95% of employees in line with the 2024 MHSC milestones. HIV data compiled on HIV counselling indicates an increase from 82.0% in 2023 to 84.0% in 2024. Unfortunately, HIV testing has decreased from 66.2% in 2023 to 63.6%. Testing for HIV remains a voluntary action, and employees are encouraged to know their status.

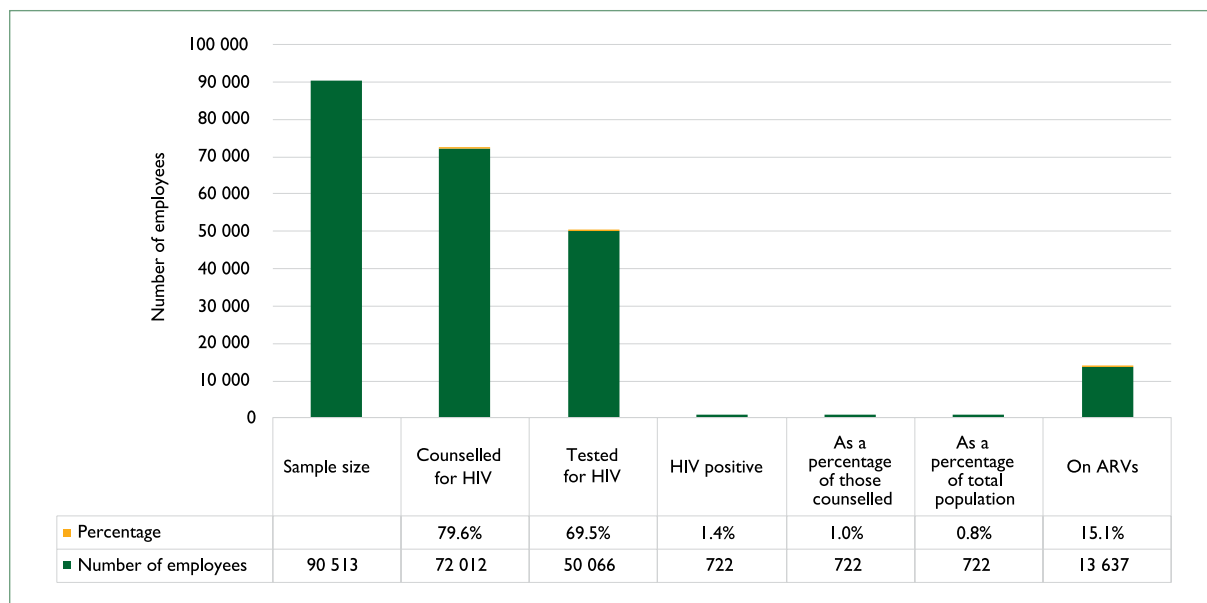
FIGURE 4.3.4.1: HCT services for all mines



4.3.4.2. HCT services for gold mines

HIV counselling in the gold sector has decreased from 88.2% in 2023 to 79.6% in 2024. There has however been a significant increase in employees testing for HIV from 59.8% in the previous reporting period when compared to 69.5%.

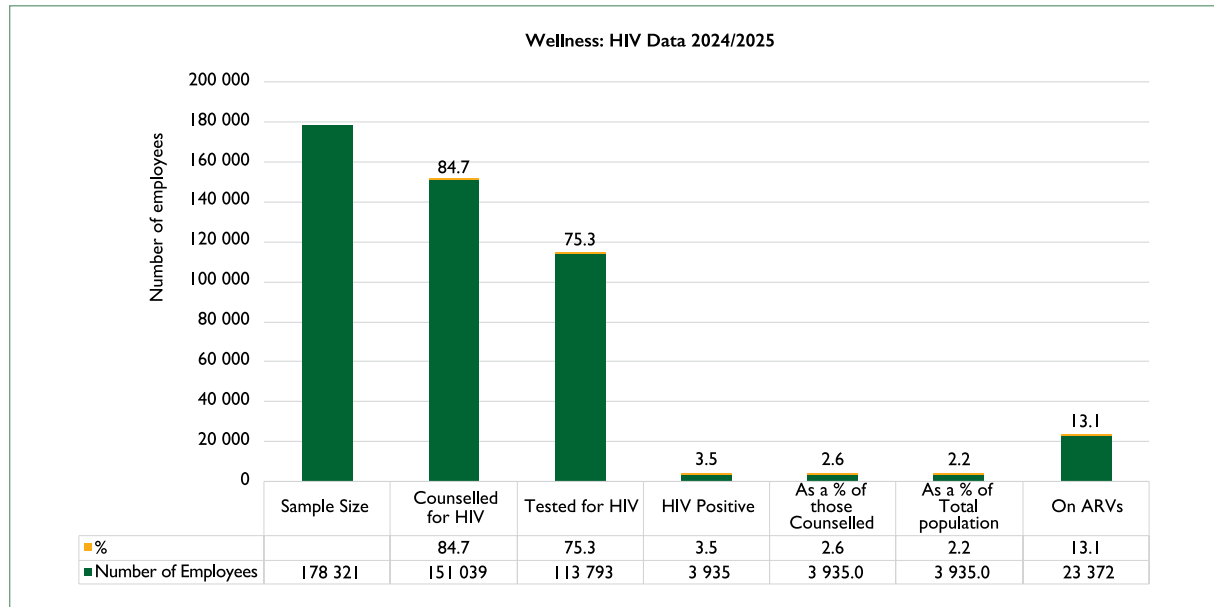
FIGURE 4.3.4.2: HCT services for gold mines



4.3.4.3. HCT services for platinum mines

The platinum sector has shown an improvement regarding HIV counselling from 81.0% in 2023 to 84.7% in 2024. Testing rates have also increased from 71.8% to 75.3% for the reporting period. The platinum sector has consistently performed well over the past two years.

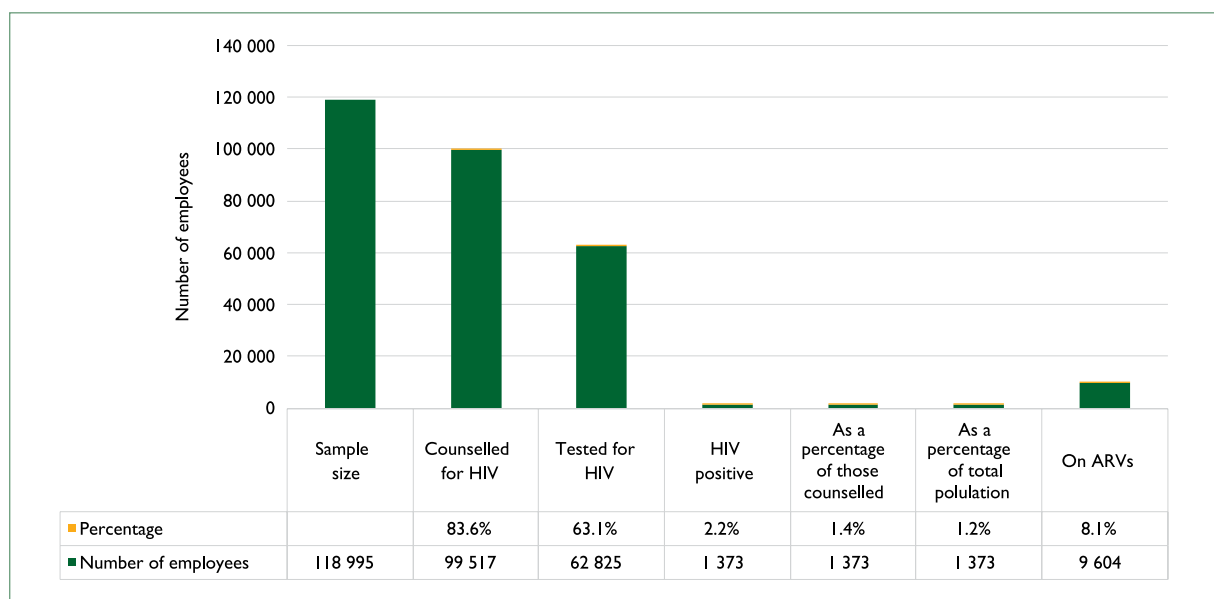
FIGURE 4.3.4.3: HCT services for platinum mines



4.3.4.4. HCT services for coal mines

HIV counselling in the coal sector continues to improve and has further increased from 79.8% in 2023 to 83.6% in 2024 while HIV testing has remained constant at 63.1%. The positivity rate has however reduced from 3.0% in 2023 to 2.2% in 2024.

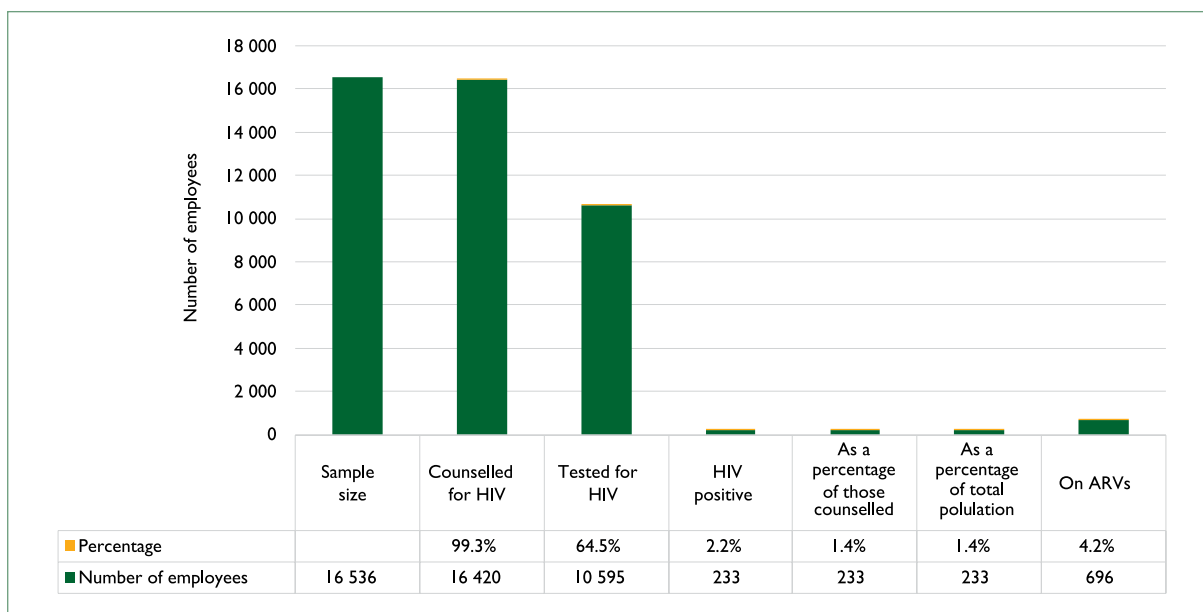
FIGURE 4.3.4.4: HCT services for coal mines



4.3.4.5. HCT services for diamond mines

HIV counselling in the diamond sector has increased from 82.0% in 2023 to 86.8% in 2024. HIV testing has however decreased from 71.1% in 2023 to 67.2% in 2024.

FIGURE 4.3.4.5: HCT services for diamond mines

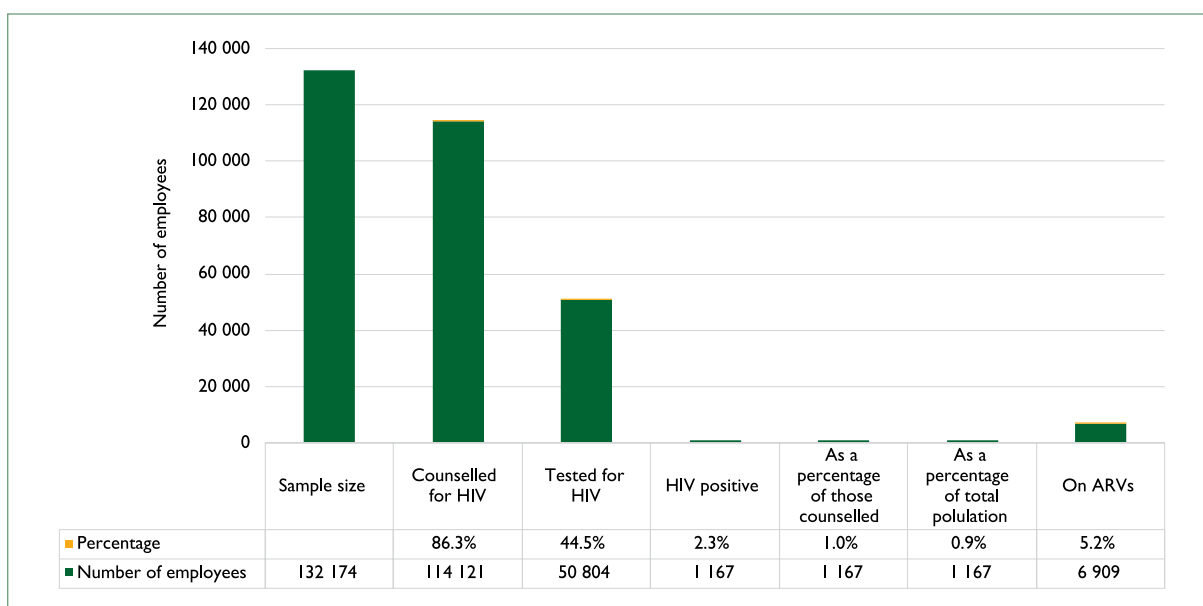


4.3.4.6. HCT services for other mines

Other mines are all other mines not mentioned above and range in size from very small mines with as little as three employees. Most of the small mines do not have health facilities and thus depend on either non-governmental organisations (NGOs) or Department of Health (DOH) clinics for HIV management.

For smaller mines to obtain and submit HIV data of their employees, they need to establish memorandums of understanding (MOUs) with the NGOs and the local health departments. From data received it was noted that HIV counselling has improved to 86.3% from 80.6% during the previous reporting period. The testing rate has however decreased from 65.4% to 44.5% in 2024.

FIGURE 4.3.4.6: HCT services for other mines



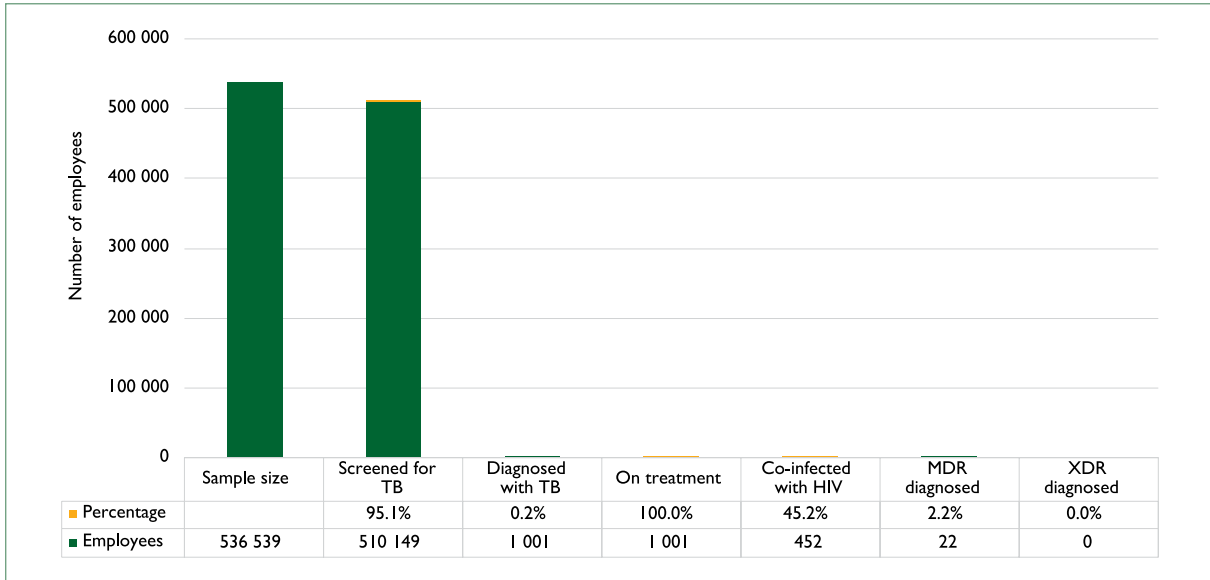
* Other mines include hard rock, for example: cobalt, dolerite, granite, limestone, magnesite, mica; and soft rock, for example: clay, dolomite, salt, shale, titanium, vanadium, etc.

4.3.5. TB programme and TB/HIV co-infection

TB screening for all mines has declined slightly from 96.7% in 2023 to 95.1% in keeping with the new 95/95/95 strategy. Keeping TB screening within the strategy will assist in achieving the End TB goals of decreasing TB infections and deaths from TB.

4.3.5.1. TB programme and TB/HIV co-infection for all mines

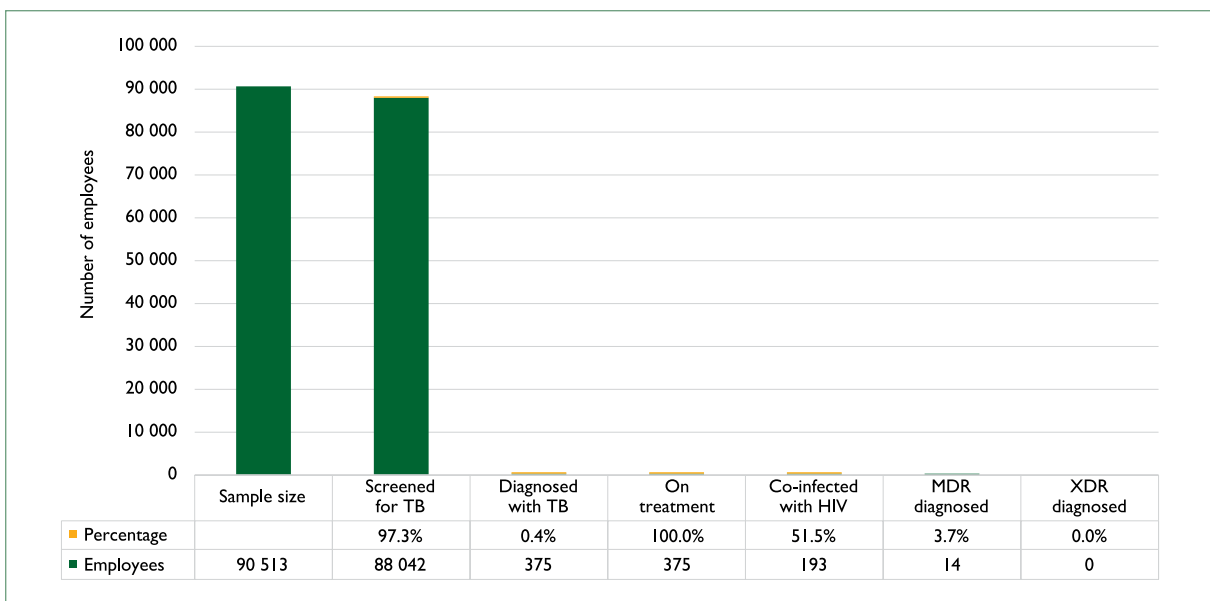
FIGURE 4.3.5.1: TB programme and TB/HIV co-infection for all mines



4.3.5.2. TB programme and TB/HIV co-infection for gold mines

TB screening in the gold sector has increased from 96.3% to 97.3% during the reporting period. Employees diagnosed with TB have further reduced from 0.5% in 2023 to 0.4% in 2024. This is a step in the right direction as the MHSC milestone intends to reduce the TB incidence rate in all commodities, especially in the gold sector.

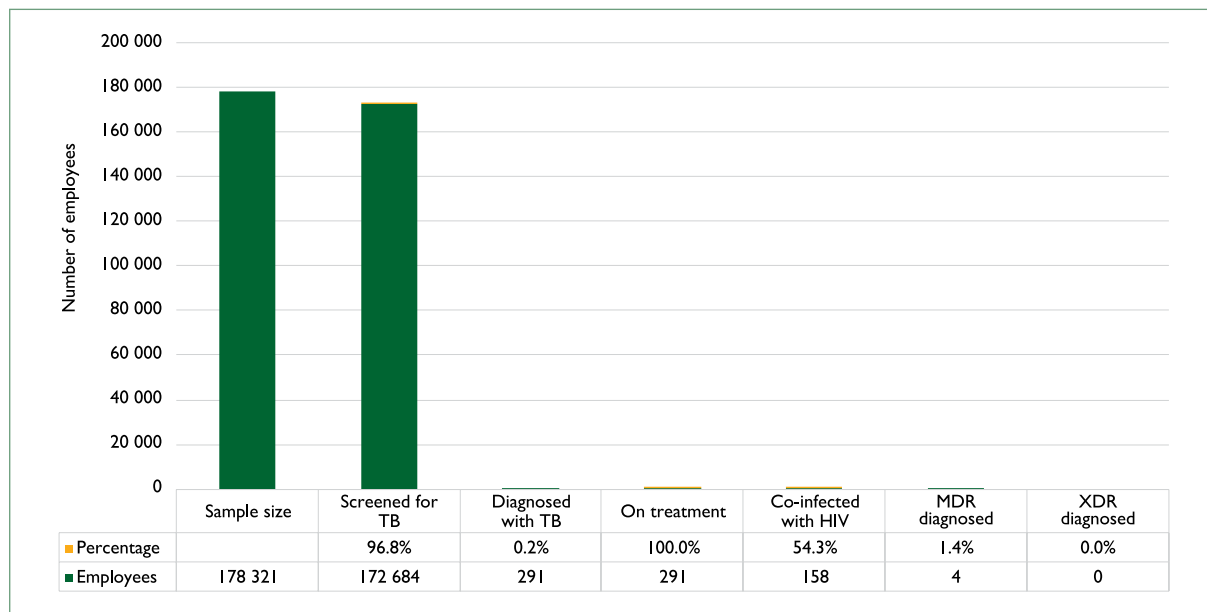
FIGURE 4.3.5.2: TB programme and TB/HIV co-infection for gold mines



4.3.5.3. TB programme and TB/HIV co-infection for platinum mines

TB screening in the platinum sector has constantly stayed above 95% at 96.8% in 2024. The percentage of employees diagnosed with TB has remained unchanged at 0.2% for the past four years. The platinum sector has consistently led the way in terms of TB performance with good TB programmes in place.

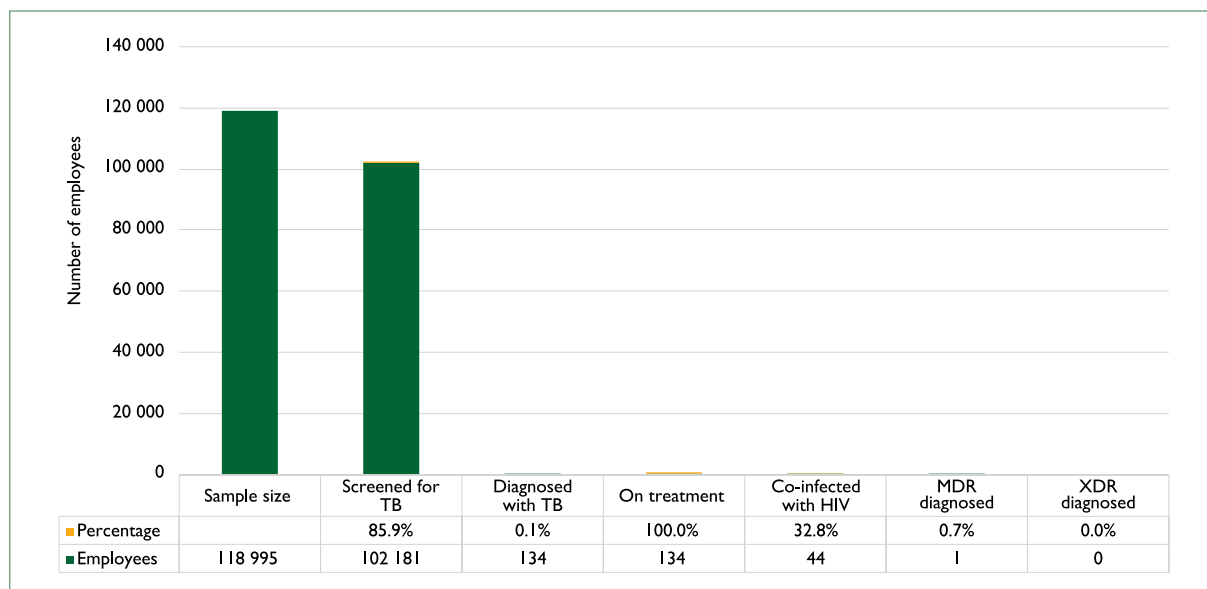
FIGURE 4.3.5.3: TB programme and TB/HIV co-infection for platinum mines



4.3.5.4. TB programme and TB/HIV co-infection for coal mines

TB screening in the coal sector has shown a marked reduction from 97.0% to 85.9% in 2024. This is concerning as it is against the 95% target and will affect the WHO goal of ending TB by 2035.

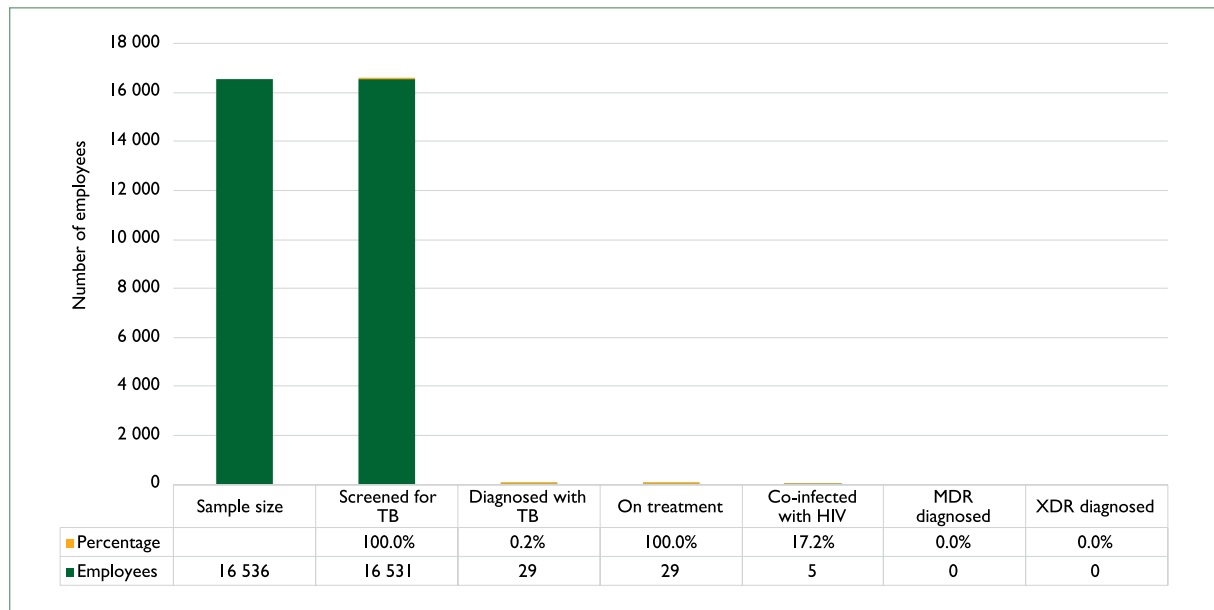
FIGURE 4.3.5.4: TB programme and TB/HIV co-infection for coal mines



4.3.5.5. TB programme and TB/HIV co-infection for diamond mines

The diamond sector has maintained a TB screening of 100% for two consecutive years. Employees diagnosed with TB have remained constant at 0.2% for the second year. The co-infection rate has decreased from 21.2% to 17.2%.

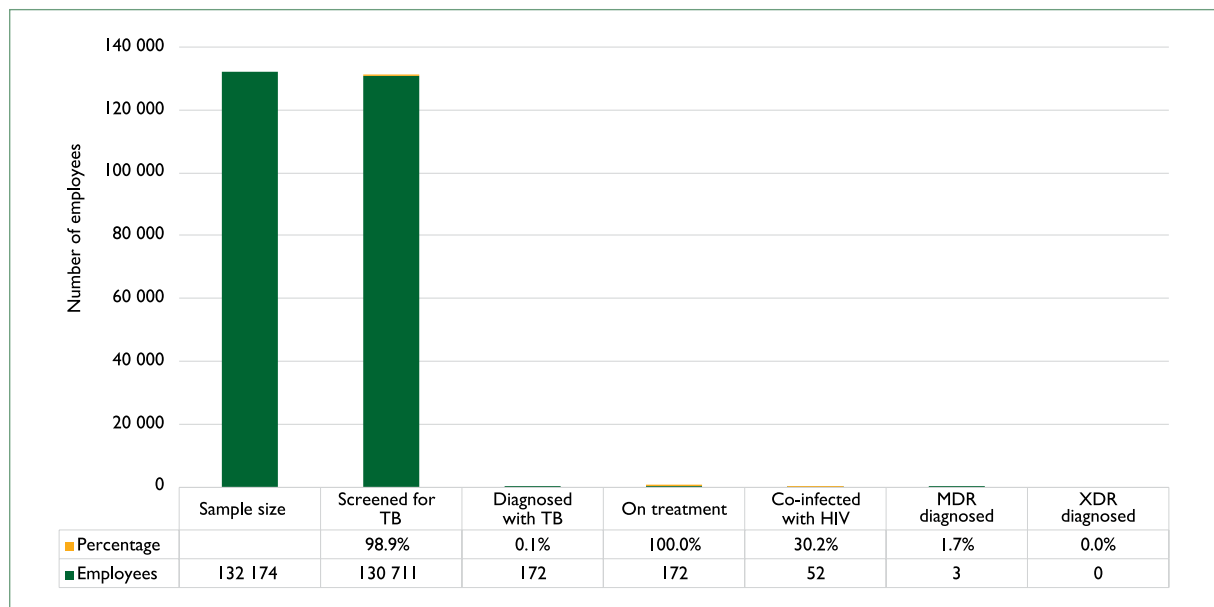
FIGURE 4.3.5.5: TB programme and TB/HIV co-infection for diamond mines



4.3.5.6. TB programme and TB/HIV co-infection for other mines

TB screening in other mines has progressively improved from 96.4% in 2023 to 98.9% in 2024. Employees diagnosed with TB have remained at 0.1%.

FIGURE 4.3.5.6: TB programme and TB/HIV co-infection for other mines



* Other mines include hard rock, for example: cobalt, dolerite, granite, limestone, magnesite, mica; and soft rock, for example: clay, dolomite, salt, shale, titanium, vanadium, etc.



STATE OF OCCUPATIONAL SAFETY

5



5. STATE OF OCCUPATIONAL SAFETY

Although the number of fatalities in the South African mining industry has declined dramatically over the past decades, the industry is still plagued by challenges of fatalities and injuries resulting from mining activities. The South African mining tripartite stakeholders comprising of the state, which regulates the mining sector, as well as the employers and the employees continue to work towards an enviable state of zero harm.

The South African mining industry is required to report any accident or dangerous occurrence which may pose a significant risk to the safety of persons at a mine in the manner prescribed in Chapter 23 of the MHSA. The data collected from the mining industry is captured on the South African Mines Reportable Accident Statistics System (SAMRASS) database from which information is analysed, and reports are drawn. The correct description of accidents or dangerous occurrences is of the utmost importance if the statistics produced from these reports, are to be meaningful.

A decrease of 25% in the number of fatalities recorded was noted from 56 fatalities in 2023 to 42 fatalities in 2024. This decrease in the number of fatalities is an encouraging achievement. The number of injuries recorded also showed an improvement of 10% from 2 184 injuries recorded in 2023 to 1 970 injuries recorded in 2024.

The FFR and IFR per million hours worked is a number calculated using a rounded-off figure conversion factor of 2 200, as the mines do not report the actual hours worked. The assumption is that each person works for an average of 48.9 weeks in a calendar year, discounting weekends, public holidays and annual leave days. The Basic Conditions of Employment Act, 1997 (Act 75 of 1997), requires a person to work not more than 45 hours a week.

Therefore, the conversion factor is rounded off to 2 200 hours per person per year. The rate is annualised. Therefore, for a full year, it is as follows:

$$\text{Fatality/injury rate} \left\{ \frac{\text{Number of fatalities/injuries for a calendar year}}{\text{Number of persons at work} \times 2\,200} \right\} = \times 10^6 \text{ hours}$$

5.1. The number of employees at work

Statistics show that there was a decrease of 1% in the number of employees at work in the South African mining industry from 451 150 employees in 2023 to 447 521 employees in 2024. The table below shows an increase in the number of employees at work in the coal, copper, chrome, manganese and the other mines sectors while the gold, platinum, diamond and iron ore sectors showed a decrease of 2%, 4%, 3% and 5%, respectively.

TABLE 5.1: Number of employees at work

	2023	2024*	PERCENTAGE CHANGE
Total	451 150	447 521	-1
Gold	88 715	86 834	-2
Platinum	161 245	154 405	-4
Coal	88 895	89 528	1
Diamonds	14 912	14 468	-3
Copper	7 541	8 305	10
Chrome	22 208	26 001	17
Iron ore	23 511	22 360	-5
Manganese	11 408	11 954	5
Other mines**	32 715	33 666	3

* Provisional data for the period 1 January – 31 December 2024

** Other mines include all other commodities not listed above.

5.2. Fatality rate trends

5.2.1. FFR per region

The table below indicates the number of fatalities reported for each of the regions of the MHSI during the 2023 and 2024 calendar years. There was an improvement of 25% in the total number of fatalities reported to the regions year-on-year and a slight decrease of 1% in the number of employees at work. The FFR improved by 33% from 0.06 in 2023 to 0.04 in 2024.

TABLE 5.2.1: FFR per region

	2023			2024*			PERCENTAGE CHANGE
	FATALITIES	EMPLOYEES AT WORK	FFR	FATALITIES	EMPLOYEES AT WORK	FFR	
ALL MINES	56	451 150	0.06	42	447 521	0.04	-33
Eastern Cape	0	1 198	0	0	1 217	0	0
Free State	2	23 367	0.04	2	23 220	0.04	0
Gauteng	16	55 099	0.13	7	52 858	0.06	-54
KwaZulu-Natal	1	11 175	0.04	2	11 175	0.08	100
Limpopo	1	65 038	0.01	3	68 625	0.02	100
Mpumalanga	8	92 420	0.04	6	93 591	0.03	-25
Northern Cape	2	44 435	0.02	3	44 838	0.03	50
North West: Klerksdorp	2	15 457	0.06	1	15 545	0.03	-50
North West: Rustenburg	22	137 652	0.07	18	131 343	0.06	-14
Western Cape	2	4 943	0.18	0	5 109	0	-100

* Provisional data for the period 1 January – 31 December 2024

5.2.2. FFR by commodity

The FFR per commodity improved by 33% from 0.06 in 2023 to 0.04 in 2024 while the number of employees at work showed a slight decrease of 1% from 451 150 in 2023 to 447 521 in 2024. The decrease in the number of fatalities of 25% when comparing 2023 and 2024 contributed to the decrease in the FFR.

The FFR for the gold, platinum, coal, iron ore and other mines sectors decreased by 40%, 17%, 25% and 83% respectively while the diamond and chrome mines show an increase of 100% each.

TABLE 5.2.2: FFR by commodity

	2023			2024*			PERCENTAGE CHANGE
	FATALITIES	EMPLOYEES AT WORK	FFR	FATALITIES	EMPLOYEES AT WORK	FFR	
ALL MINES	56	451 150	0.06	42	447 521	0.04	-33
Gold	20	88 725	0.10	12	86 834	0.06	-40
Platinum	23	161 245	0.06	18	154 405	0.05	-17
Coal	7	88 895	0.04	6	89 528	0.03	-25
Diamonds	1	14 912	0.03	2	14 468	0.06	100
Copper	0	7 541	0	0	8 305	0	0
Chrome	0	22 208	0	3	26 001	0.05	100
Iron ore	1	23 511	0.02	0	22 360	0	-100
Manganese	0	11 408	0	0	11 954	0	0
Other mines**	4	32 715	0.06	1	33 666	0.01	-83

* Provisional data for the period 1 January – 31 December 2024

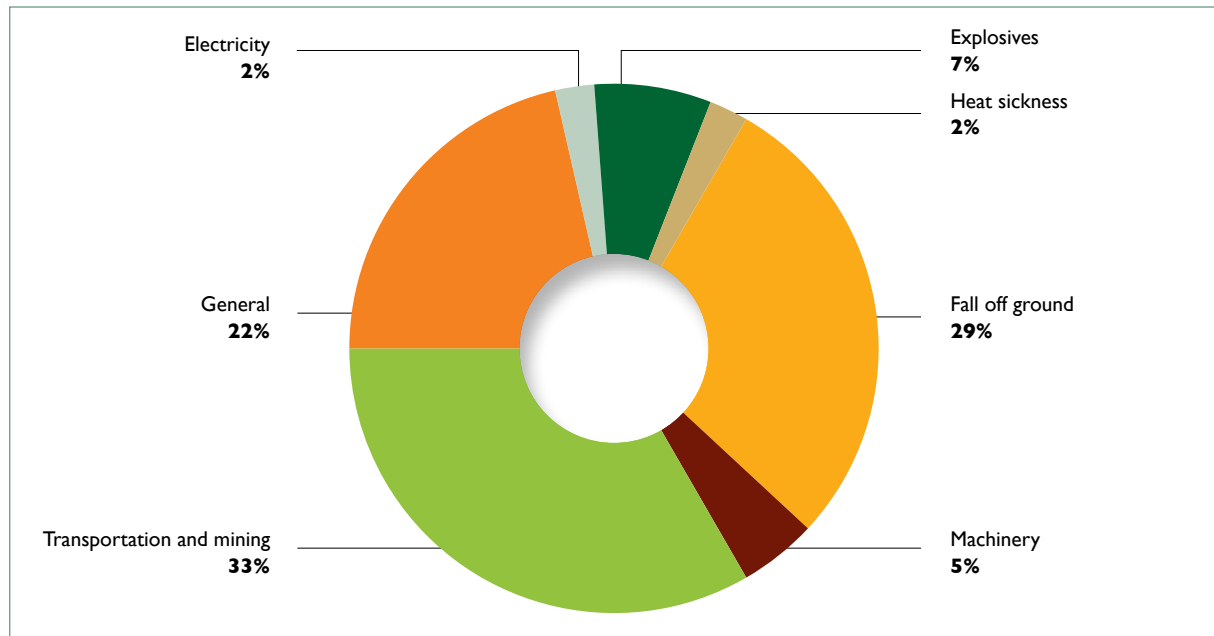
** Other mines include all other commodities not listed above.

5.3. Fatalities by casualty classification

5.3.1. Percentage fatalities per casualty classification

During the reporting period, 42 fatalities were reported and an analysis of the data notes that the classifications with the highest percentage of fatalities are T&M with 33%, FOG with 29% and general-type accidents with 22%.

FIGURE 5.3.1: Percentage fatalities per casualty classification



5.3.2. Breakdown of fatalities per casualty classification

5.3.2.1. T&M (33%)

There were 14 fatalities classified under T&M in 2024 compared to 12 fatalities in 2023. This translates to an increase of 17% year-on-year. These include two rail-bound equipment (RBE) related fatalities reported in 2024 compared to three in 2023, three winch related fatalities reported in 2024 as well as in 2023 and nine trackless mobile machines (TMM) related fatalities reported in 2024 compared to six in 2023.

5.3.2.2. FOG (29%)

There were 12 fatalities classified under FOG in 2024 compared to 16 fatalities in 2023. This translates to a decrease of 25% year-on-year. These include 11 gravity induced FOG fatalities in 2024 compared to eight in 2023 and one rockburst fatality reported in 2024 compared to eight in 2023.

5.3.2.3. Explosives (7%)

There were three fatalities classified under explosives in 2024 compared to none in 2023. This translates to an increase of 300% year-on-year.

5.3.2.4. Machinery (5%)

There were two fatalities classified under machinery in 2024 compared to six fatalities in 2023. This translates to a decrease of 67% year-on-year.

5.3.2.5. Electricity (2%)

There was one fatality classified under electricity in 2024 compared to none in 2023. This translates to an increase of 100% year-on-year.

5.3.2.6. Heat sickness (2%)

There was one fatality classified under heat sickness in 2024 compared to none in 2023. This translates to an increase of 100% year-on-year.

5.3.3. Sub-classification of general-type accidents for fatalities

5.3.3.1. General (22%)

There were nine fatalities classified under general in 2024 compared to eight fatalities in 2023. This translates to an increase of 13% year-on-year.

The subclassification of general fatalities reported were fall of material/rolling rock with two fatalities in 2024 compared to none in 2023, falling in/from with five fatalities in 2024 compared to none in 2023 and inundation/drowning with two fatalities in 2024 compared to none in 2023.

FIGURE 5.3.3.1: Sub-classification of general-type accidents for fatalities

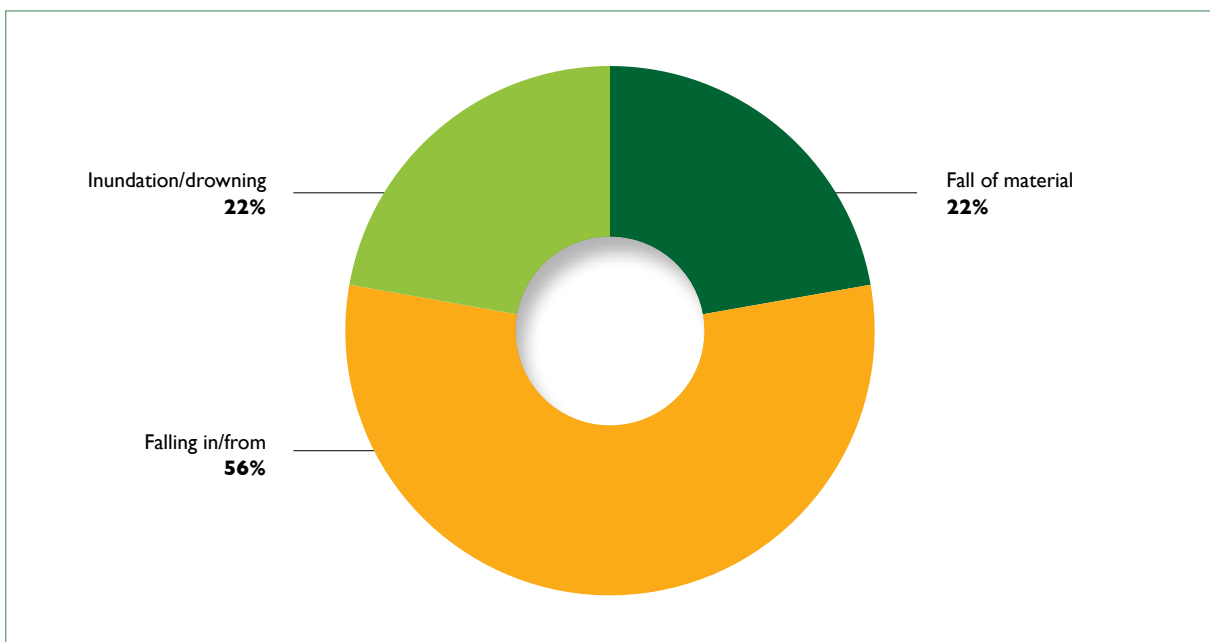


TABLE 5.3.3.1: Fatalities per casualty classification

	1 JANUARY TO 31 DECEMBER 2023	1 JANUARY TO 31 DECEMBER 2024*	PERCENTAGE CHANGE
FOG	16	12	-25%
Gravity	8	11	38%
Rockburst	8	1	-88%
MACHINERY	6	2	-67%
Conveyor belts	5	2	-60%
Other machinery not including TMM	1	0	-100%
T&M	12	14	17%
RBE	3	2	-33%
Coupling/uncoupling	1	0	-100%
Locomotive	1	0	-100%
Locomotive drawn vehicle	0	2	200%
Rocker arm shovel	1	0	-100%

	I JANUARY TO 31 DECEMBER 2023	I JANUARY TO 31 DECEMBER 2024*	PERCENTAGE CHANGE
Winches	3	3	0%
Scraper winch installation	2	2	0%
Single drum winch	1	1	0%
TMM	6	9	50%
Motor vehicles	1	1	0%
Tractor/Trailer	0	1	100%
Transporters	3	4	33%
T&M lifting machines	1	2	0%
T&M Mobile drilling machines	0	1	100%
Other T&M equipment	1	0	-100%
GENERAL	8	9	13%
Dust, gas and fumes	3	0	-300%
Falling in/from	0	5	500%
Fall of material/rolling rock	0	2	200%
Inundation/drowning	3	2	-33%
Manual handling of material	1	0	-100%
Slipping and falling	1	0	-100%
CONVEYANCE ACCIDENTS	13	0	-1 300%
ELECTRICITY (NOT CAUSING FIRES)	0	1	100%
EXPLOSIVES	0	3	300%
FIRES	1	0	-100%
HEAT SICKNESS	0	1	100%
TOTAL	56	42	-25%

* Provisional data for the period 1 January – 31 December 2024

5.4. Injuries rate trends

5.4.1. IFR per region

The table indicates the number of injuries reported to each of the regions of the MHSI, as well as the IFR during the 2023 and 2024 calendar year. There was a decrease of 9% in the number of injuries reported to the regions year-on-year and a decrease of 1% in the number of employees at work. The IFR decreased from 2.2 in 2023 to 2.0 in 2024.

TABLE 5.4.1: IFR per region

	2023			2024*			PERCENTAGE CHANGE
	INJURIES	EMPLOYEES AT WORK	IFR	INJURIES	EMPLOYEES AT WORK	IFR	
ALL MINES	2 184	451 150	2.20	1 970	447 521	2.00	-9
Eastern Cape	3	1 198	1.14	0	1 217	0	-100
Free State	178	23 367	3.46	166	23 220	3.25	-6
Gauteng	380	55 099	3.13	353	52 858	3.04	-3
KwaZulu-Natal	10	11 541	0.39	14	11 175	0.57	46
Limpopo	154	65 038	1.08	167	68 625	1.11	3
Mpumalanga	252	92 420	1.24	226	93 591	1.10	-11
Northern Cape	97	44 435	0.99	108	44 838	1.09	10
North West: Klerksdorp	101	15 457	2.97	120	15 545	3.51	18
North West: Rustenburg	1 005	137 652	3.32	806	131 343	2.79	-16
Western Cape	4	4 943	0.37	10	5 109	0.89	141

* Provisional data for the period 1 January – 31 December 2024

5.4.2. IFR by commodity

The overall IFR per commodity decreased by 9% from 2.20 in 2023 to 2.00 in 2024. The table below shows that the IFR for the gold, platinum, coal, diamonds, chrome and manganese sectors have decreased while the copper and other mines' sector increased by 293% and 80%, respectively.

TABLE 5.4.2: IFR by commodity

	2023			2024*			PERCENTAGE CHANGE
	INJURIES	EMPLOYEES AT WORK	IFR	INJURIES	EMPLOYEES AT WORK	IFR	
ALL MINES	2 184	451 150	2.20	1 970	447 521	2.00	-9
Gold	656	88 715	3.36	624	86 834	3.27	-3
Platinum	1 044	161 245	2.94	866	154 405	2.55	-13
Coal	212	88 895	1.08	194	89 528	0.98	-9
Diamonds	57	14 912	1.74	35	14 568	1.10	-38
Copper	3	7 541	0.18	13	8 305	0.71	294
Chrome	90	22 208	1.84	75	26 001	1.31	-29
Iron ore	30	23 511	0.58	28	22 360	0.57	-2
Manganese	26	11 408	1.04	13	11 954	0.49	-53
Other mines**	66	32 715	0.92	122	33 666	1.65	79

* Provisional data for the period 1 January – 31 December 2024

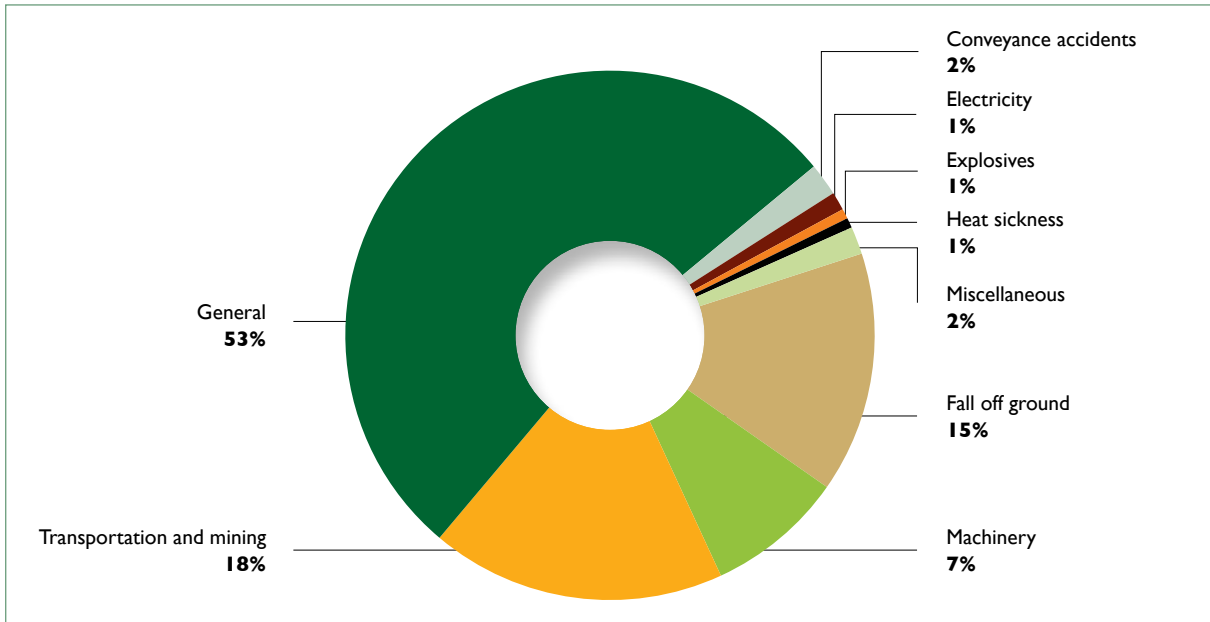
** Other mines include all other commodities not listed above

5.5. Injuries by casualty classification

5.5.1. Percentage injuries per casualty classification

From the analysis of the data, it is noted that the classifications with the highest percentage of injuries are general with 53%, T&M with 18% and FOG with 15%. A breakdown of the injuries by casualty classification are as follows:

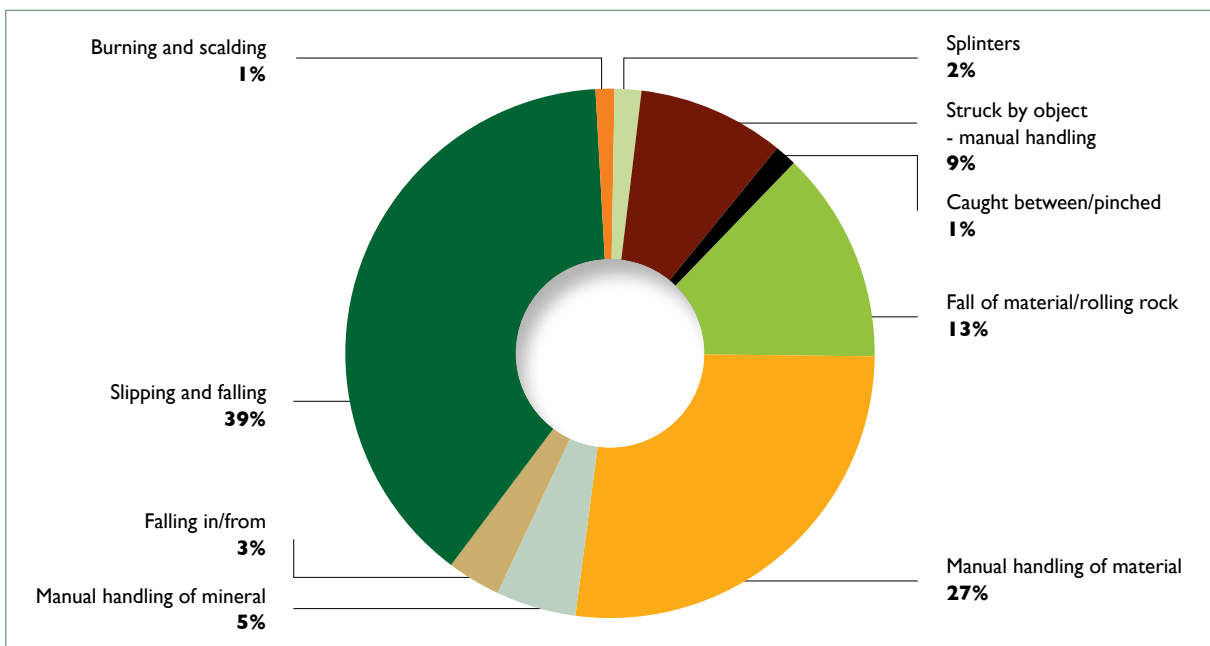
FIGURE 5.5.1: Percentage injuries per casualty classification



5.5.2. Sub-classification of general-type accidents for injuries

There were 1 038 injuries classified under general-type accidents in 2024 compared to 1 170 injuries in 2023. This translates to a decrease of 11% year-on-year. These include fall of material/rolling rock with 128 injuries in 2024 compared to 137 injuries in 2023, manual handling of material with 265 injuries in 2024 compared to 263 injuries in 2023 and slipping and falling with 396 injuries in 2024 compared to 407 injuries in 2023.

FIGURE 5.5.2: Sub-classification of general-type accidents for injuries



5.5.3. Breakdown of injuries per casualty classification

The table below shows a breakdown of injuries per casualty classification. There was a 10% reduction in injuries reported from 2 184 injuries in 2023 to 1 970 injuries in 2024. The general-type injuries need to be addressed as a matter of urgency with 396 slipping and falling incidents in 2024 compared to 407 incidents in 2023, 265 manual handling of material incidents in 2024 compared to 263 incidents in 2023 and 84 struck by object – manual handling incidents in 2024 compared to 131 incidents in 2023.

TABLE 5.5.3: Breakdown of injuries per casualty classification

	I JANUARY TO 31 DECEMBER 2023	I JANUARY TO 31 DECEMBER 2024*	PERCENTAGE CHANGE
FOG	300	289	-4%
Gravity	220	203	-8%
Rockburst	53	50	-6%
Strainburst	27	36	33%
MACHINERY	149	165	11%
Conveyor belts	36	42	17%
Drives, belts and chains	14	15	7%
Portable power tools	73	76	4%
Other machinery not included in TMM	26	32	23%
T&M	403	354	-12%
RBE	146	131	-10%
Coupling/uncoupling	53	39	-26%
Hand trammed	8	5	-38%
Locomotive	20	34	70%
Locomotive-drawn vehicle	30	19	-37%
Personnel transport	5	7	40%
Re-railing	13	13	0%
Rocker arm shovel	14	8	-43%
Other transport (specify)	3	6	100%
Winches	98	94	-4%
Double drum winch	23	21	-9%
Endless rope vehicle	1	1	0%
Mono rope/rail	11	8	-27%
Scraper winch installation	58	51	-12%
Single drum winch	5	13	160%
TMM	159	129	-19%
Coal mining machines	3	1	-67%
Mechanical loaders	18	13	-28%
Motor vehicles	19	21	11%
Tractor/trailer	6	3	-50%
Transporters	41	42	2%
T&M lifting machines	25	13	-48%
T&M mobile drilling machines	36	29	-19%
Other T&M equipment	11	7	-36%

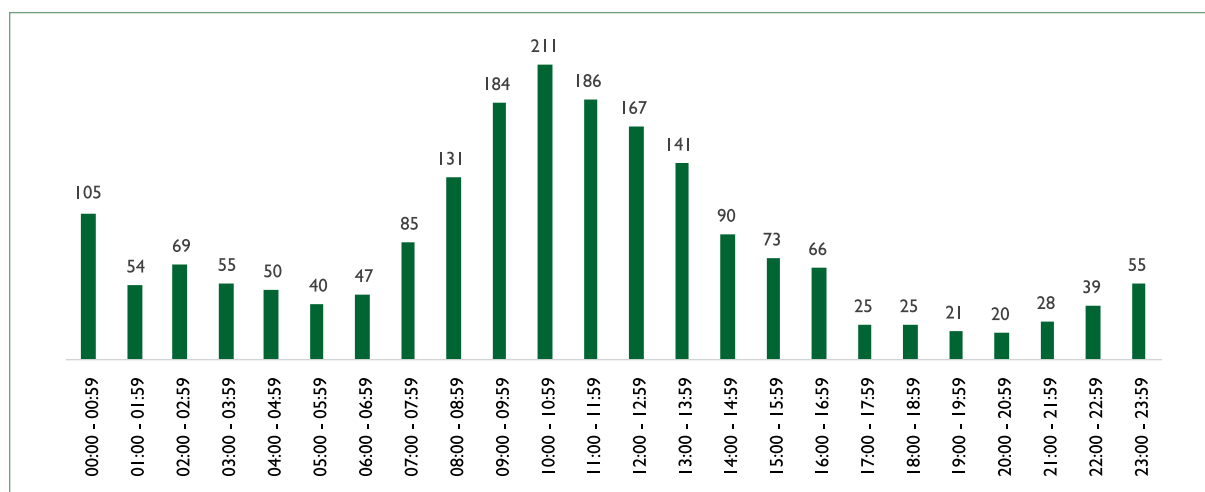
	I JANUARY TO 31 DECEMBER 2023	I JANUARY TO 31 DECEMBER 2024*	PERCENTAGE CHANGE
GENERAL	1 170	1 038	-11%
Burning and scalding	25	12	-52%
Caught between/pinched	38	14	-63%
Dust, gas and fumes	63	29	-54%
Falling in/from	33	34	3%
Fall of material/rolling rock	137	128	-7%
Inundation/drowning	2	1	-50%
Manual handling of material	263	265	1%
Manual handling of mineral	39	51	31%
Slipping and falling	407	396	-3%
Splinters	20	17	-15%
Struck by object – manual handling	131	84	-36%
Struck by ventilation door	12	7	-42%
CONVEYANCE ACCIDENTS	101	39	-61%
ELECTRICITY (NOT CAUSING FIRES)	15	22	47%
EXPLOSIVES	10	0	0%
FIRES	16	5	-69%
HEAT SICKNESS	15	12	-20%
MISCELLANEOUS	5	33	560%
OCCUPATIONAL DISEASES (NON-DIVING)	0	1	100%
TOTAL	2 184	1 970	-10%

* Provisional data for the period 1 January – 31 December 2024

5.6. Accidents classified by time of occurrence

Statistics show that accidents in 2024, when classified by time of occurrence, mainly took place between 08:00 and 14:00. This period is during the day shift when there are more employees at work. Most underground workers start the morning shift at 06:00 and the number of accidents peak at mid-shift between 09:00 and 11:00.

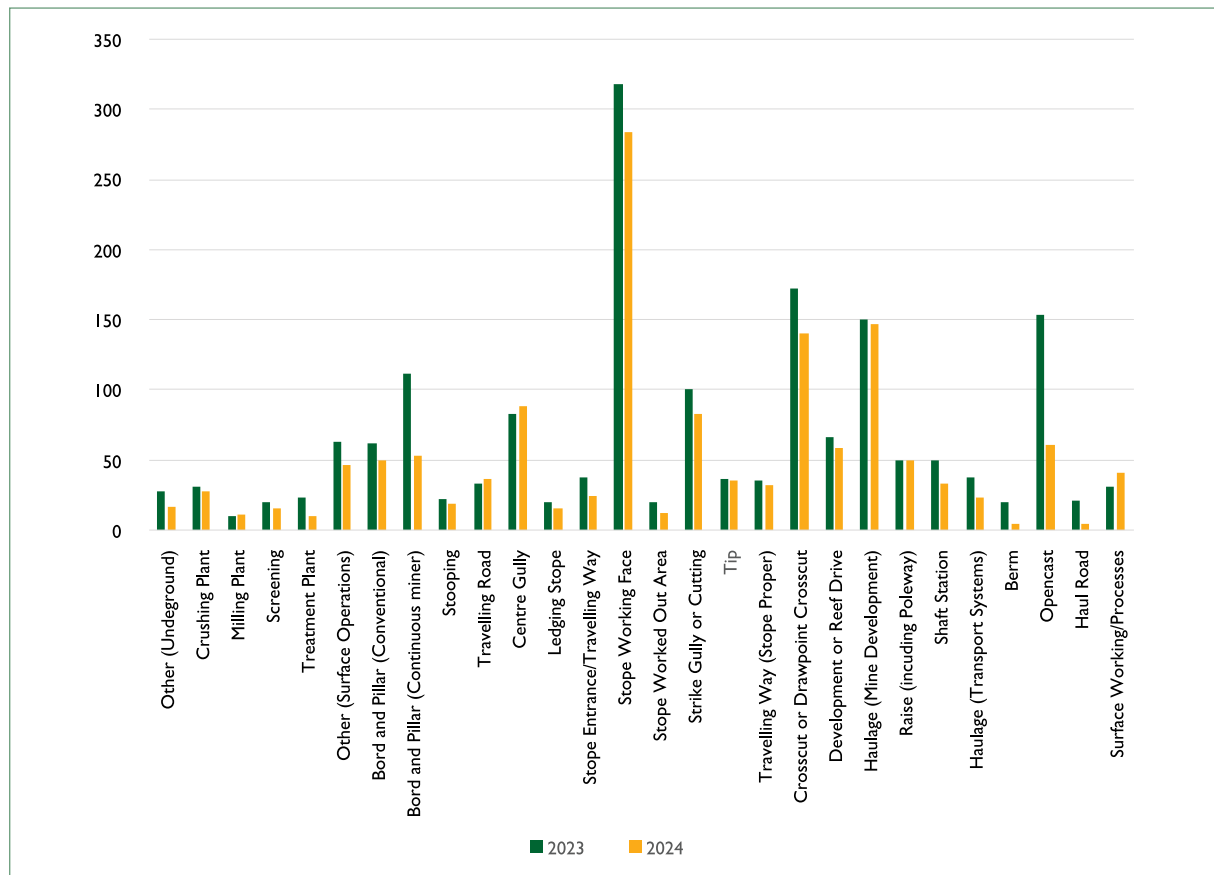
FIGURE 5.6: Number of accidents classified by time of occurrence



5.7. Accidents classified by location

Statistics show that most accidents in 2024 occurred at the stope working face, the haulage, the crosscut or draw point, centre gully, the strike gully or cutting and opencast. These are areas with a considerable concentration of employees working towards the set production targets.

FIGURE 5.7: Number of accidents classified by location



5.8. Disaster-type accidents

A disaster-type accident is classified as an accident where five or more employees lose their lives in the same accident.

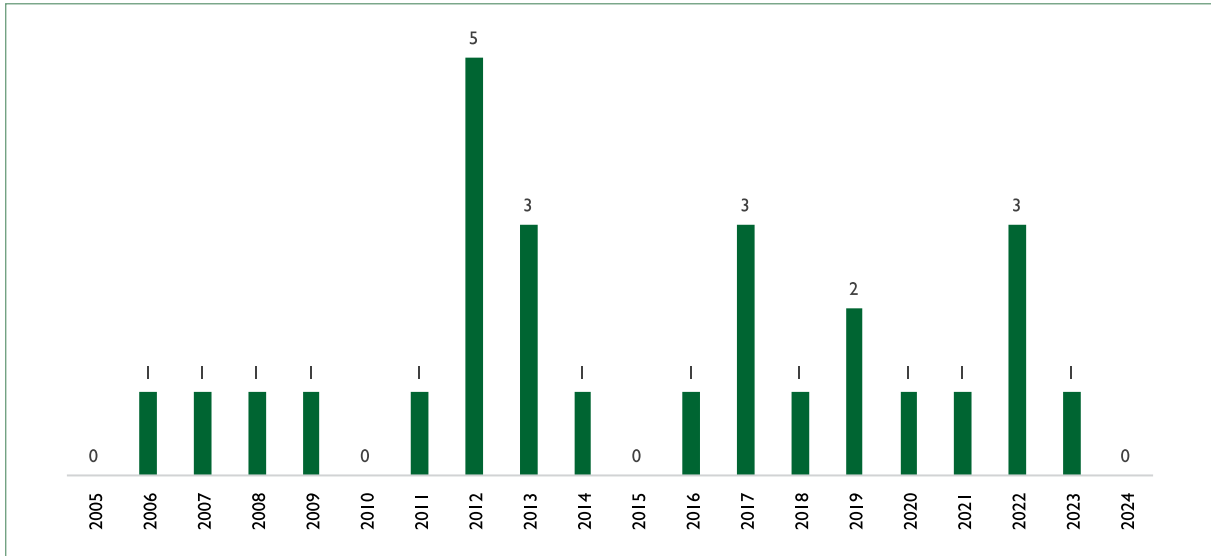
There were no disaster-type accidents reported in 2024.

5.9. Women in Mining

5.9.1. Actual number of fatalities for WIM

No women were fatally injured in 2024 compared to one woman in 2023 and translates to a decrease of 100% in fatalities for WIM year-on-year. Although a fatality of any mineworker is regrettable, irrespective of gender, the figure below shows that there were no fatalities for WIM reported for 2005, 2010, 2015 and 2024.

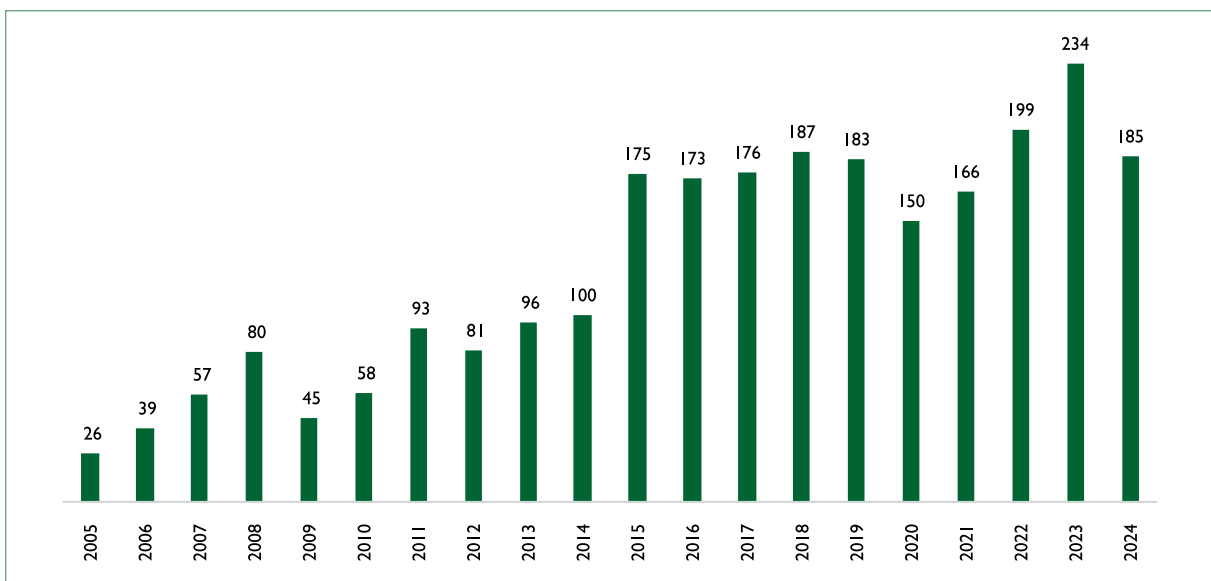
FIGURE 5.9.1: Number of fatalities for WIM



5.9.2. Actual number of injuries for WIM

There has been a decrease of 21% in the number of injuries involving WIM from 234 injuries in 2023 to 185 in 2024. The injuries that were reported involving women were mostly in the general classification (65%). These accidents were linked to slipping and falling, material handling and being struck by object.

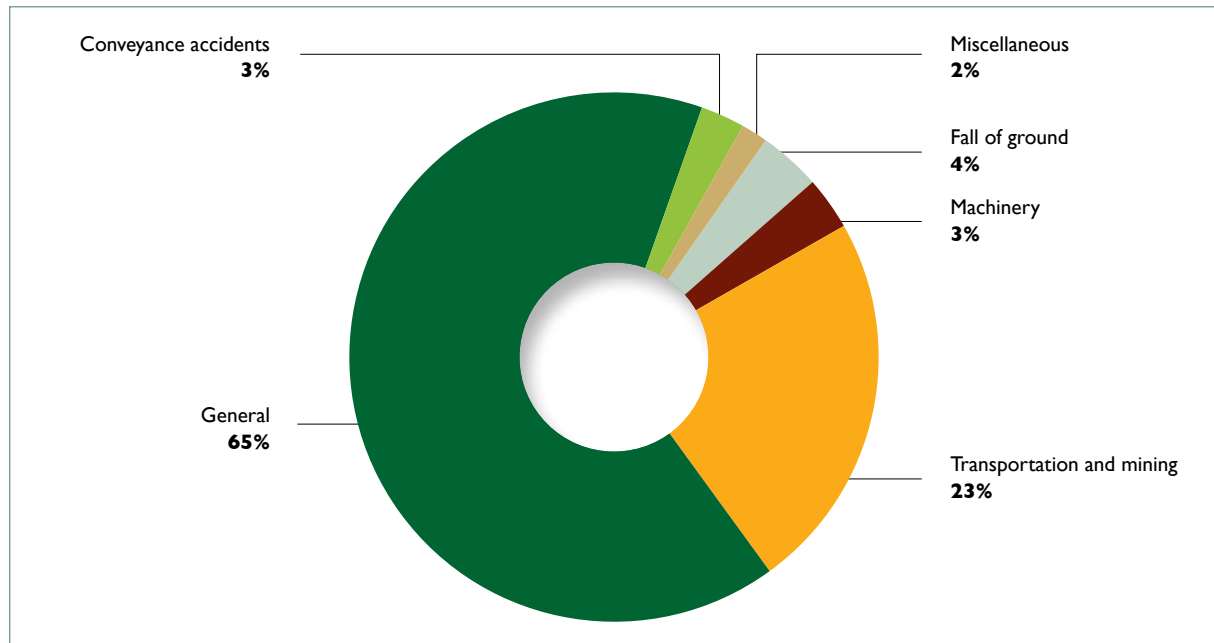
FIGURE 5.9.2: Actual injuries for WIM



5.9.3. Classification of injuries for WIM

Figure 5.9.3 shows the classification of injuries to women employees across all commodities for the 2024 calendar year:

FIGURE 5.9.3: Classification of injuries for WIM



5.10. Enforcement

5.10.1. Section 54 transgressions identified per category

TABLE 5.10.1 (a): Total number of Section 54 notices

SECTION 54 NOTICES		
NO	CATEGORY	TOTAL
1	Number of notices issued	629
2	Number of transgressions identified	5 086
3	Number of instructions issued	3 186

TABLE 5.10.1 (b): Number of Section 54 transgressions identified per category

CATEGORY	TOTAL IDENTIFIED	
	2023	2024
Accidents	43	5
Airborne pollutants / dust	41	27
Blasting	61	64
Chairlifts	12	0
Change house / washing facilities / eating facilities	22	15
Checklist	9	5
Codes of Practice (COPs)	88	134
Communications	22	32
Confined spaces	4	1
Conveyor belts	161	283

CATEGORY	TOTAL IDENTIFIED	
	2023	2024
Drilling / rigging	11	18
Electricity	98	83
Emergency preparedness	144	140
Exemptions / permissions / approvals / authorisations	46	27
Explosives	62	104
FOG	298	322
Falsifying Information	0	2
Fatigue management	1	2
Fires	44	25
Fixed plant	0	3
Fly rock	0	1
Gas instruments	5	19
Gas detection instrument (GDI) / gases	12	0
General	1	0
Guarding / guard house / security	0	9
Handover procedure	0	1
Health and safety standards	1	1
Highwall	27	21
Housekeeping / barring / barricade / fencing	60	72
Human resources	1	1
Incompetent	0	1
Induction	1	1
Isolation and lockout	1	6
Investigations	0	9
Lamproom / refuge bay	7	19
Legal appointments	122	111
Lifting equipment	39	27
Logbook and record keeping	5	0
Machinery / plant	154	99
Medical Conditions	0	3
Medical surveillance / COVID-19	34	30
MHSA Section 23	0	1
Mine inspection non-compliance	5	34
Mining permit / unauthorised access	6	17
Mining in close proximity to community	51	19
Mining practices / Standard Operating Procedures (SOP)	296	589
Mud-rush / inundation / water accumulation	59	29
Noise	23	7
Notices	7	2
Occupational hygiene	37	67
Offshore / offshore certificate of fitness	1	0

CATEGORY	TOTAL IDENTIFIED	
	2023	2024
Personal protective equipment (PPE)	15	30
Planning	0	1
Poor entry examination	0	2
Poor maintenance	0	2
Preventative maintenance	1	1
Proximity detection system (PDS)	12	20
RBE	159	125
Rehabilitation	0	0
Risk assessment / risk management	335	306
Road condition / haul roads / illumination / cross-cuts	40	85
Safe declaration	127	168
Safety devices	50	109
Safety Signage	0	1
South African National Standards (SANS)	0	1
Self-contained self-rescuer (SCSR)	2	1
Service column	1	0
Shaft / winders	79	29
Signage	0	0
Stability-monitoring	2	5
Statutory reporting	18	70
Substandard support	114	144
Substation	4	3
Supervision	255	454
Systems	0	19
System hooper	1	0
Thermal stress monitoring	0	0
Tip area	2	5
TMM	490	526
Traffic management	26	14
Training	106	157
Travelling ways / haulages / crosscuts / rails	33	16
Unsafe methods	0	1
Unsealed panels not checked	0	1
Vehicle conditions	1	0
Ventilation	171	115
Waiting place	17	21
Water drain / pipe / boreholes	10	2
Winches / winders	230	105
Winding plant	0	0
Work conditions	20	59
TOTAL	4 443	5 086

5.10.2. Section 55 instructions to deal with dangerous conditions

TABLE 5.10.2 (a): Total number of Section 54 notices

SECTION 54 NOTICES		
NO	CATEGORY	TOTAL
1	Number of notices issued	552
2	Number of transgressions identified	2 418
3	Number of instructions issued	1 667

TABLE 5.10.2 (b): Number of Section 54 transgressions identified per category

CATEGORY	TOTAL IDENTIFIED	
	2023	2024
Alcohol testing	0	7
Brake test	0	2
Chairlift	23	20
Ablution facility / eating facility / change house / laundry	21	2
Centre gully	0	1
Confined spaces	0	1
Conveyor belts / plant	137	97
COPs	252	248
Dust / airborne pollutants	33	28
Early warning system	1	0
Electricity	140	46
Emergency preparedness / firefighting equipment / first aid	52	79
Exemptions / permissions / approvals / authorisations	0	1
Expired license	0	2
Explosives	54	62
Fatigue management	3	0
Fires	0	3
Fitness certificate	0	1
FOG	74	54
General / housekeeping / road conditions / barring / barricade / unsafe travelling route / haul road	44	61
Guarding / guard house	13	4
Handrails	0	3
Health and safety equipment	0	1
Health and safety photo	0	5
Health and safety policy	5	23
Health and safety representative / committees	8	0
Hazard identification and risk assessment (HIRA)	0	0
Illumination	12	1
Inspector instructions / powers	0	5
Investigation	1	3

CATEGORY	TOTAL IDENTIFIED	
	2023	2024
Isolation and lockout	4	0
Laboratory	3	0
Lamp room / refuge bay	7	1
Legal appointments	131	169
Logbooks / registers / record-keeping	8	3
Machinery / lifting equipment / winder	97	103
Material handling	0	1
Making safe	0	3
Medical surveillance / COVID-19	63	100
Mine plans	1	0
Mining practices	34	57
No access control / perimeter fence / mine boundaries	2	3
Noise	10	11
Occupational hygiene	60	80
Panels and switchgears	2	0
PDS	0	2
PPE	48	37
Personnel sampling	1	0
Pre-use checklist	13	18
Pit berm	0	2
Poor maintenance	4	6
Poor management	1	0
Portable equipment	0	4
RBE	22	34
Rail switches	0	0
Raise gully	0	1
Refuelling bay	1	0
Reporting of issue to the office	2	0
Risk assessment	190	120
Road traffic management / road signs	13	40
Safe declaration	29	46
SCSRs	0	5
Section 11(5)	0	2
Section 16(2)(C)	0	2
Shafts	20	38
Stairway	0	1
SOP	71	54
Statutory reporting	33	29
Storage	0	1
Substation	20	1
Supervision	177	394

CATEGORY	TOTAL IDENTIFIED	
	2023	2024
Support designs	0	3
Surveying	2	2
Tip area / ore pass	0	3
TMM	184	147
Training	47	75
Transportation of employees	1	0
Vegetation	0	1
Ventilation	30	32
Water control	0	4
Water drain	0	5
Winches	11	8
Working conditions	7	10
TOTAL	2 222	2 418



STATE OF MINE SURVEYING





6. STATE OF MINE SURVEYING

The Directorate: Mine Surveying administers the archiving, retrieval and safe keeping of the prescribed mine plans, departmental copies of these plans and survey records of mines that have closed. The plans of closed-down mines are made available to the mine owners or their representatives.

The inspectors assist the regions in maintaining surveying and mapping standards by monitoring compliance by the mines to the relevant MHSA regulations. It further ensures that the departmental copies of all statutory mine plans are deposited annually at the regional offices.

Underground inspections are performed to check the measurements in restricted areas where surface structures require protection or to determine the accurate representation of such workings on the plans. During these underground visits, the inspectors also check that escape route plans are recorded and whether the refuge bays are life sustaining as prescribed in the regulations.

Inspectors conduct surveys to determine the distances between mining operations and residential areas when complaints are lodged. The Directorate also processes, comments and makes recommendations on applications for permissions and exemptions from the provisions of the MHSA regarding the status and the safe utilisation of undermined land for township development and other purposes.

Special surveys are done to quantify the volume of minerals removed and the extent of illegal surface mining activities. Furthermore, the inspectors verify the accuracy of survey data and plans submitted by candidates undertaking trial survey projects as part of their Mine Surveyors Certificate of Competency (MSCC) examinations.

6.1. Completed tasks for the Mine Surveying Directorate

TABLE 6.1: Completed tasks for the current reporting period compared to the previous reporting period

ACTIVITIES	PLANNED	COMPLETED	PERFORMANCE ANALYSIS
Underground and surface mine surveying inspections	336	340	Inspections are planned in accordance with the allocated budget.
Underground inspections for control measurements	168	171	Underground inspections focussing on the causes of fatalities were prioritised during the reporting period.
Permissions and exemptions	0	37	Applications received towards the end of the reporting period were carried over to the next reporting year. These applications are processed as we receive them
Surface utilisation applications	278	301	Incomplete applications were returned to the applicants and when the corrected applications were received towards the end of the reporting period, it was carried over to the next reporting year.

6.2. Section 55 instructions issued

During the reporting period, a total of three Section 55 notices in terms of the MHSA were issued for the following contraventions:

- Inaccurate representation of the workings on the mine plans.
- Mine operation exceeding the prescribed 60 days to replace a certificated Mine Surveyor.
- Mines taking longer than the prescribed period of 12 months to submit departmental copies to the regional office.





TRAINING AND EXAMINATIONS





7. TRAINING AND EXAMINATIONS

7.1. Implemented training

During the reporting period, the MHSI developed the skills and knowledge base of its staff as follows:

- A total of 37 MHSI officials attended technical and non-technical training courses as well as conferences.
- Two MHSI officials attended the EMDP during the reporting period, respectively.

7.2. Training interventions

7.2.1. Assistant inspector programme

The Department had five Assistant Inspectors at the commencement of the reporting period whom are in the process of obtaining their respective GCC.

7.2.2. Bursary scheme

There were no MHSI bursary holders during the reporting period.

7.3. Examinations

7.3.1. Written candidates vs certificates issued per examination category

TABLE 7.3.1: Number of candidates and certificates issued per examination category

TYPE OF CERTIFICATE	NUMBER OF CERTIFICATES ISSUED
Mine Engineer's (Electrical and Mechanical Certificate)	93
Mine Manager's Certificate	79
Mine Overseer's Certificate	132
Mine Surveyor's Certificate	3
Winding Engine Driver's Certificate	18
TOTAL	325

7.3.2. Onsetter examination

TABLE 7.3.2: Board meetings, candidates and certificates issued for the onsetter examination category

REGION	EXAMINATION BOARDS	NUMBER OF CERTIFICATES ISSUES
Eastern Cape	0	0
Free State	15	34
Gauteng	3	6
KwaZulu-Natal	0	0
Limpopo	0	0
Mpumalanga	1	14
Northern Cape	0	0
North West: Klerksdorp	2	10
North West: Rustenburg	5	32
Western Cape	0	0

7.3.3. Lampsman examination

TABLE 7.3.3: Board meetings, candidates and certificates issued for the lampsman examination

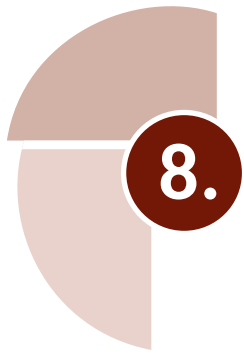
REGION	EXAMINATION BOARDS	NUMBER OF CERTIFICATES ISSUES
Eastern Cape	0	0
Free State	4	17
Gauteng	6	8
KwaZulu-Natal	1	0
Limpopo	2	6
Mpumalanga	5	23
Northern Cape	1	3
North West: Klerksdorp	0	0
North West: Rustenburg	3	8
Western Cape	0	0



REGIONAL OPERATIONS OF THE INSPECTORATE

8





8.

REGIONAL OPERATIONS OF THE INSPECTORATE

8.1. Central and Coastal Regions

The Central and Coastal regional operations consist of the Gauteng and KwaZulu-Natal regions. There are approximately 154 operating mines, employing approximately 64 033 employees collectively in these regions. The major commodities mined are gold, coal, diamonds, clay, sand, aggregates and industrial minerals. The mining operations range from small, medium, and large-scale enterprises operating both underground and on surface with numerous crushers, quarries and borrow pits.

Overall occupational safety performance

During the reporting period, nine fatalities were reported compared to 17 fatalities in 2023. This represents a decrease in fatalities of 47% year-on-year. The main classifications that contributed to these fatalities recorded were accidents resulting from FOGs, T&M and general-type accidents.

A total of 367 injuries were collectively reported during 2024 compared to 390 injuries in 2023 which corresponds to a 6% improvement. These injuries were mainly the result of FOGs, T&M and general-type accident classifications.

The Central and Coastal regional operations conducted 1 811 qualitative inspections and audits as well as completed 60 mine accident investigations and 12 mine accident fatal inquiries.

Inputs and comments into the MPRDA land use applications received during the reporting period totalled 119 and were finalised within the prescribed turnaround time of 30 days. These applications cover mine closure certificates, environmental management plans, mining and prospecting rights as well as township development applications.

A total of nine complaints from neighbouring communities regarding issues of blasting activities, as well as noise and dust amongst others, were investigated and completed.

Overall occupational health performance

The collective number of occupational diseases reported from AMRs for the Central and Coastal regional operations increased from 417 cases in 2023 to 427 cases in 2024. The main occupational diseases reported during 2024 were silicosis, PTB and NIHL with 51, 182 and 173 cases, respectively.

During the reporting period, 39 medical appeals were received from the Gauteng region and none from the KwaZulu-Natal region. All these medical appeals were handled and finalised by the Medical Inspector. A significant number of the appeals were due to NCDs such as hypertension, diabetes and epilepsy.

The medical appeal system is a multistakeholder system involving inputs from various role players. Challenges may arise from any of the stakeholder groups and some of these challenges as detailed in the Medical Inspector report have remained constant despite frequent information sessions with stakeholders annually.

Strategies adopted to improve the status quo

The Central and Coastal regional operations will continue to embark on a zero tolerance approach to non-compliance and the following are some of the strategies that were adopted to improve health and safety performance at the mines during the reporting period:

- The Inspectorate through its various disciplines will continue to promote and enforce health and safety at the mines by conducting regular inspections and audits.
- Regional tripartite workshops have been conducted to enhance understanding of operational protocols.
- Mines are strongly encouraged to submit Health Incident Reports (HIRs) promptly, allowing for timely interventions and all submitted HIRs are reviewed in accordance with Section 11.5 of the MHSA.
- Employers have been urged to strengthen security patrols in and around their operations regarding open excavations including opencast mines and quarries.
- Administrative controls, including worker rotation and the monitoring of noise instrument data downloads, were enforced to mitigate occupational health risks.
- Balance growth with regulatory enforcement, skills development and community safety. Whilst the groundwork for success exists, targeted improvements are needed for a sustainable and safe mining sector.
- The Inspectorate continues to promote participation and collaboration on health and occupation hygiene matters such as World TB Day, HIV & AIDS, gender-based violence (GBV) and Gauteng WIM forums.

The Inspectorate is monitoring and focusing on technology, research and development within the mining industry, as well as the impact of new equipment and machinery in relation to the health and safety of employees.

8.1.1. Gauteng

The Gauteng province is situated in the central part of South Africa surrounded by the Limpopo, Mpumalanga, Free State and North West provinces. It is the smallest province with a land area of approximately 18 000 km² which is about 1.5% of the total land area of South Africa. The province has the highest population of about 15.1 million people, which is a quarter of the total population of the country, who mainly speak isiZulu (19.8%), English (13.3%), Afrikaans (12.4%) and Sesotho (11.5%).

There are approximately 98 operating mines in the Gauteng region that employ approximately 60 000 employees. The major commodities mined consist mainly of gold, diamonds, coal, sand, clay and aggregates and the only fluorspar mine in South Africa.

The mining operations range from ultra-deep to shallow underground gold mines and underground to surface diamond operations. The region also has numerous coal and clay surface mines with a sizable tailings and waste dump reclamation operations.

8.1.1.1. Topical issues and matters of interest

- Gold One mining operations in the East Rand has managed to resuscitate and operate two shafts that were historically shut down by Pamodzi Gold liquidation. Both operations managed to install and commission winding engine hoists for transportation of material and rock.
- Harmony Gold Kusasalethu mine has been leading with the implementation of a continuous real time monitoring (CRTM) programme with a remote sensor network across the mine whilst being monitored from a surface control room. Fires and heat sensors were installed in all critical areas where extreme heat can be emitted should equipment catch fire with temperatures in excess of 100°C being the trigger point, whilst the normal working places sensors are installed at intakes and outlets where temperatures will trigger at >26.0°C and >32.5°C wet and dry bulb respectively.

Flammable gas sensors are installed at areas where the likelihood of ammonia, cyanide, lead, welding fumes, hydrogen, methane, carbon monoxide and oxygen deficiency are likely to be encountered with triggers set in line with OEL. Remote monitoring for dust, noise and diesel particulate matter sensors was installed underground at intakes and return airways including surface areas such as crushers, plant areas, workshops, main fans, compressor houses, assay laboratories and tailing storage facilities.

- Whilst Gauteng is a water scarce province, underground mines intercept large quantities of water from fissures and water table resources, and most of these mines would then filter and purify excess water. New opportunities were introduced regarding the purification of water to potable and palatable standards with reverse osmosis (RO) treatment plants. These include:
 - The Gold One RO plant process water to produce potable water that is SANS 241:2015 compliant. The plant produces 500m³ of potable water per day at 80.0% recovery which is pumped to the distribution network of the mine, whilst an average of 200m³ per day is returned to the mine tailings for waste management. This project benefits the mine by reducing environmental impact and ensuring the availability of water for the community.
 - The Harmony Gold Doornkop water treatment plant produces SANS 241:2015 compliant potable water and the plant receives water from surface storage tanks which are fed by settler dams located underground. The main process units at the plant consists of a pre-treatment section which includes sand filters, ultra-filtration, a final treatment process including RO with a remineralisation and a disinfection process. The plant produces 3 500m³ per day at 70.0% recovery whilst brine volume produced is approximately 800m³ per day and waste is thus pumped to the tailing storage facility. Potable water pumping is connected to the water reservoir of the mine and distributed to the shaft complex, hostels, married quarters, the warehouse and the medical centre. The benefit of the project for the mine includes cost reduction and minimising the environmental impact.

8.1.1.2. Strategies adopted for improving status-quo

- The region, through its various disciplines, will continue to promote and enforce health and safety at the mines by conducting regular inspections and audits.
- Promoting employer and employee participation and collaboration through the Merafong and Ukhozi RTFs, as well as bilateral engagements which are designed to cater for underground and surface operators within the region.
- Continue to promote participation and collaboration on health and occupation hygiene matters such as World TB Day, HIV & AIDS, GBV and Gauteng WIM forums.
- Monitor and focus on technology, research and development within the industry, and the impact of new equipment and machinery in relation to health and safety of employees.
- Planning activities of the region which may be impacted by external events such as holidays, seasonal changes and commodity prices, as well as employee representative elections and term of office but not limited to changes in management.
- Aiming to create a healthy balance between proactive and reactive measures whilst also encouraging that stakeholders prioritise meaningful proactive measures.

8.1.1.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	1 000
Actual	1 248
Percentage compliance	124.8%

* Figures include individual and group audits

8.1.1.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	61	10	71
Completed	59	11	70
Percentage completed	96.7%	110.0%	98.6%

8.1.1.5. Total accidents reported

Fatalities	7
> 14-day injuries	353
1 to 13-day reportable injuries	127

8.1.1.6. Administrative fines

No administrative fines were recommended by the PI.

8.1.1.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	8	8	100.0%
Complaints	9	9	100.0%
Environmental management	5	5	100.0%
Mining and prospecting rights	9	9	100.0%
Mining permits	1	1	100.0%
Township developments	53	53	100.0%

8.1.2. KwaZulu-Natal

The KwaZulu-Natal province is situated in the eastern part of South Africa surrounded by the Mpumalanga, Free State and Eastern Cape provinces and bordered by Lesotho and Eswatini. It is the third smallest province with a land area of approximately 94 000 km² which is about 7,7% of the total land area of South Africa. The province has the second highest population of about 12.4 million people, which is about 20.5% of the total population of the country, who mainly speak isiZulu (77.8%), English (13.1%) and Afrikaans (1.5%).

There are approximately 56 operating mines in the KwaZulu-Natal region that employ approximately 14 798 employees. These comprise 13 coal mines and 43 other mining operations. The major commodities mined consist mainly of coal, dolerite, limestone, aggregate, rutile, sand and lithium.

8.1.2.1. *Topical issues and matters of interest*

- The mining sector in KwaZulu-Natal has demonstrated notable growth over the past year.
- The heavy mineral mining sector continues to be the largest contributor to both employment and economic output in the province.
- While underground coal mining is experiencing a decline due to the depletion of accessible reserves, surface coal mining is witnessing renewed growth, particularly through the establishment of smaller-scale operations and the opening of new mines.
- Similarly, the quarrying industry has shown positive momentum, with several new operations commencing and minimal closures reported.
- Lithium mining has attracted increased investment, with current operations expanding to support the extraction of this high-demand mineral.
- Overall, the mining environment within the region reflects a dynamic and evolving landscape, marked by growth in key areas and sustained contributions to the local economy.
- Several key operational and compliance challenges continue to affect mining activities within the region, hindering overall progress toward improved safety and regulatory adherence.
- Several operations still rely on outdated statutory reporting templates, resulting in non-compliance with current legal requirements.
- The screening of contractors for health and safety competence remains inadequate at several sites, raising concerns about the overall effectiveness of risk management systems.
- The implementation of collision-prevention systems, both between vehicles and pedestrians, as well as between vehicles remains a persistent issue.
- Smaller mining operations frequently operate with outdated machinery and this, compounded by a shortage of skilled engineering personnel in legally appointed roles, has led to an increase in incidents involving TMMs, conveyor belts and other fixed equipment.
- Additionally, several abandoned mines have not undergone proper rehabilitation or closure, posing significant health and safety risks to nearby communities and livestock, especially during the rainy season.
- While it is encouraging that no drowning incidents were recorded during the current reporting period, the potential risks remain.
- Thermal stress management is also under pressure due to inaccurate or non-representative measurements, malfunctioning weather stations and a growing number of heat exhaustion cases.
- Similarly, challenges persist in noise exposure management, including rising exposure levels, poor sampling practices and insufficient quality assurance procedures by employers.
- Addressing these issues is critical for advancing the commitment of the region to health and safety excellence in the mining sector.

8.1.2.2. *Strategies adopted for improving status-quo*

- To support ongoing health and safety improvements in the South African mining industry, a series of workshops have been conducted to enhance understanding of operational protocols. Mines are strongly encouraged to submit HIRs promptly, allowing for timely interventions. It is also imperative that all submitted HIRs are reviewed in accordance with Section 11.5 of the MHSA.
- The region will continue to leverage quarterly tripartite workshops as a platform to emphasise the importance of compliance with the MHSA.
- Employers have been urged to strengthen security patrols in and around their operations regarding open excavations, including opencast mines and quarries. While fencing remains a critical protective measure, its effectiveness is often compromised in areas near closely situated communities where sections are frequently damaged or removed shortly after installation.

- Additionally, monitoring instruments used for assessing thermal stress will be calibrated and tracked consistently.
- Administrative controls, including worker rotation and the monitoring of noise instrument data downloads will also be enforced to mitigate occupational health risks.
- The mining sector in the KwaZulu-Natal region is economically robust and expanding, especially in strategic areas such as lithium and heavy minerals. To truly perform well, the region must balance growth with regulatory enforcement, skills development and community safety. The groundwork for success is there, but targeted improvements are needed for a sustainable and safe mining sector.

8.1.2.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	572
Actual	563
Percentage compliance	98.4%

* Figures include individual and group audits

8.1.2.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	1	2	3
Completed	1	1	2
Percentage completed	100.0%	50.0%	66.6%

8.1.2.5. Total accidents reported

Fatalities	2
> 14-day injuries	14
1 to 13-day reportable injuries	3

8.1.2.6. Administrative fines

No administrative fines were recommended by the PI.

8.1.2.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	2	2	100.0%
Complaints	0	0	0%
Environmental management	0	0	0%
Mining and prospecting rights	40	40	100.0%
Mining permits	0	0	0%
Surface utilisation	1	1	100.0%
Township developments	0	0	0%

8.2. Central, Coastal and North-eastern Regions

Overall occupational health performance

The total number of occupational diseases reported in the Central, Coastal and North-eastern Regions were 672 cases in 2023 compared to 557 cases in 2024. There was a decrease of 11% in the number of occupational diseases reported which is commendable.

The main occupational diseases reported by mines were PTB with 258 cases in 2023 and 229 cases in 2024, NIHL with 162 cases in 2023 and 195 cases in 2024, silicosis with 124 cases in 2023 and 56 cases in 2024. There was an 11% and 55% decrease PTB and silicosis cases and a significant increase in NIHL cases from 162 in 2023 to 195 in 2024. This corresponds to a 20% increase and the mines in the Mpumalanga region recorded an increase of 80%. PTB and NIHL contributed 41% and 35% respectively.

The mining companies must improve their respective case findings and procure mine equipment that generates less noise and dust levels to ensure compliance with legislation. The Mpumalanga region needs to investigate which mines caused the significant increase in the NIHL cases. Programmes should be implemented to ensure that employees diagnosed with TB complete their treatment. It must be aligned to the national TB Strategy of 95:95:95.

Overall occupational safety performance

There were regrettably, 11 fatalities reported in both 2023 and 2024. This implies that there was no decrease in the number of fatalities. There were no fatalities in the Eastern Cape which is commendable and no change in the Free State with two reported fatalities. The Limpopo region had an increase from one to three fatalities whilst the Mpumalanga region had an increase from eight to six fatalities which correspond to 25% decrease during the reporting period. The analysis of fatalities indicated that the majority of fatalities were due to transportation and mining equipment (5), general type (4) and FOG (1) and fatalities. This implies that 45% of the fatalities were due to transportation and mining equipment.

The number of injuries reported was 516 in 2024 compared to 453 in 2023. This corresponded to a decrease of 13%. The Eastern Cape had an increase of 2 to 3 injuries which corresponded to 50% increase. While the second highest increase was in Mpumalanga of 18% from 213 to 252 injuries.

The major contributors for these injuries were general, transportation and mining equipment and FOG had 260, 113 and 67 accidents respectively. There was significant decrease in the general, transportation and mining equipment and falls of ground 17%, 12% and 6%, respectively from 2023 to 2024. General accidents include manual handling of material, slipping and falling amongst others.

The all three regions successfully implemented the OHS Improvement Strategy Action Plan to enforce compliance with health and safety measures. The strategy addresses the issue of unacceptable loss of life and injuries at mines by emphasising accidents due to transportation and mining equipment and general type.

Safety Achievements

Overall there were mines that performed well on safety and did not have any fatalities during the reporting period. These mines are true examples that zero harm can be achieved in the sector and all stakeholders must work together on the journey to zero harm. More emphasis must be put to achieve the goal of zero harm.

MECC Examination Performance

The number of candidates who wrote the Legal Knowledge (LK) examinations in June and November 2023 and 2024 were 275 and 247, respectively. Similarly for and Plant Engineering (PE) the candidates were 213 and 265

respectively. The Department gazetted the increase in the examination fees in March 2023 which had a positive impact because the absenteeism rate dropped from 24% in 2023 to 11% in 2024. The pass rate for LK and PE was 63% and 47% respectively.

The number of Electrical and Mechanical Engineering Certificates of Competency issued were 37 and 49. While 17 Certificates of Competency were issued to females which corresponds to 20%. This number of females in the sector is currently at 16%. The number females with CoC are slightly higher than the national average and the Engineering Managers and Training Managers must ensure an increase in the number of Women Engineers in the sector.

Topical issues and matters of interest

During the reporting period a number of complaints were received due to mines blasting close to communities and township developments. The complaints normally include damages to properties due to ground vibration, air blasting and dust. The MHSI gazetted the *Guideline for the Compilation of a Mandatory Code of Practice for Minimum Standards on Ground Vibration, Noise, Airblast and Flyrock near Surface Structures and Communities to be Protected* in August 2024. The Guideline was effective from 1 November 2024.

Illegal Mining

There were illegal miners who were trapped in a gold mine where the shaft and tunnel had been sealed with some concrete. The illegal miners made an access hole just below the concrete plug in the tunnel and use ropes to go down the shaft. The DMPR, the South African Police Service (SAPS), South African National Defence Force and Mines Rescue Services (MRS) worked over a number of days to rescue the 153 trapped illegal miners and recovered 3 deceased. Most of the illegal miners were from Lesotho at 62% and Mozambique at 21% and South Africans were 7%.

The Central and North-eastern regional operations will continue to embark on a zero tolerance to non-compliance through the implementation of the OHS Improvement Strategy Action Plan. This will be achieved through the following:

- Convene meetings with CEOs of mining companies, professional associations in the mining sector and labour leadership to ensure that health and safety strategies are implemented.
- Focussing on strategies to reduce noise levels as well as exposure levels to respirable crystalline silica by implementing effective engineering controls.
- Focussing on the mines with employees in the HEG A and B exposure group ensuring that these companies develop engineering controls to reduce the occupational exposure levels of those employees. This will also lead to the withdrawal of employees who are over-exposed to noise and silica dust.
- Improve TB case findings and encourage and monitor employees to complete their treatment courses as per the National HIV and TB Strategy.
- Mining companies must align their HS strategies to the new MHS Summit 2024 Milestones.

8.2.1. Eastern Cape

The Eastern Cape province is situated in the southeastern part of South Africa surrounded by the KwaZulu-Natal, Free State, Northern Cape and Western Cape provinces and includes the former homelands of Transkei and Ciskei. It is the second largest province with a land area of approximately 170 000 km² which is about 13.8% of the total land area of South Africa. The province has the fourth highest population of about 7.2 million people, which is about 11.9% of the total population of the country, who mainly speak isiXhosa (78.8%), Afrikaans (10.6%) and English (5.6%).

There are approximately 159 operating mines in the Eastern Cape region that employ approximately 2 000 employees. The major commodities mined consist mainly of stone, aggregate, gravel, dimension stone, granite, syenite, salt and clay.

The mining operations range from small to medium-scale enterprises with surface or opencast-mining operations. The region also has numerous crushers, sand mines, quarries and borrow pits.

8.2.1.1. Topical issues and matters of interest

- The underground coal mine located near Indwe is still non-operational due to ownership issues.
- Other stakeholders such as the Aggregate and Sand Producers Association of South Africa (ASPASA) play a key role in assisting surface mines and quarries in the region with matters related to legal matters, safety, audits, training and WIM.

8.2.1.2. Strategies adopted for improving status-quo

- Continue to encourage all the stakeholders to attend the hybrid RTF meetings.
- Focus on encouraging all stakeholders to attend the quarterly WIM forum meetings as a result of the low number of stakeholders attending these meetings.
- Increase the frequency of inspections and audits on profiled high-risk quarries.
- Continued efforts to fill the vacant critical posts such as the PI, Occupational Hygiene Inspector, Mine Equipment Inspector, etc.
- Encourage the involvement of the NGOs, DOH and other stakeholders in the TB awareness programmes in the region.

8.2.1.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	280
Actual	299
Percentage compliance	106.8%

* Figures include individual and group audits

8.2.1.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	1	0	1
Completed	1	0	1
Percentage completed	100.0%	0%	100.0%

8.2.1.5. Total accidents reported

Fatalities	0
> 14-day injuries	0
1 to 13-day reportable injuries	0

8.2.1.6. Administrative fines

No administrative fines were recommended by the PI.

8.2.1.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	6	5	83.3%
Complaints	1	1	100%
Environmental management	69	69	100%
Mining and prospecting rights	18	18	100%
Mining permits	137	137	100%
Surface utilisation	12	12	100%
Township developments	0	0	0%

8.2.2. Free State

The Free State province is situated in the central part of South Africa surrounded by the North West, Gauteng, Mpumalanga, KwaZulu-Natal, Eastern Cape and the Northern Cape provinces. It is the third largest province with a land area of approximately 130 000 km² which is about 10.6% of the total land area of South Africa. The province has the second lowest population of about 3.0 million people, which is about 4.9% of the total population of the country, who mainly speak Sesotho (64.2%), Afrikaans (12.7%) and isiXhosa (7.5%).

There are approximately 41 operating mines in the Free State region that employ approximately 21 500 employees. The major commodities mines consist mainly of gold, coal, bentonite and sand.

The mining operations range from deep level to intermediate underground operations. The region also has numerous smaller mines including sand mines.

8.2.2.1. Topical issues and matters of interest

- The mines in the region that are reaching end of life and will be closing will result in reducing the numbers of mining employees in especially the underground mines.
- Although illegal mining is still experienced in the region, it has been reduced drastically due to the rehabilitation and closing of old underground holes with rubble.

8.2.2.2. Strategies adopted for improving status-quo

- Ongoing focused inspections and audits at mines and risk analysis of troubled mines.
- Ongoing monthly tripartite meetings and engagements by all stakeholders to deal with regional health and safety issues.
- Proactive and reactive health and safety campaigns by various stakeholders at mines focussing on problem areas.

8.2.2.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	812
Actual	1 129
Percentage compliance	139.0%

* Figures include individual and group audits

8.2.2.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	94	4	98
Completed	94	4	98
Percentage completed	100.0%	100.0%	100.0%

8.2.2.5. Total accidents reported

Fatalities	2
> 14-day injuries	166
1 to 13-day reportable injuries	42

8.2.2.6. Administrative fines

Number of fines recommended by an Inspector	1
Value of fines recommended by an Inspector	R2 000 000.00
Number of fines set aside by the PI	0
Value of fines set aside by the PI	R 0.00
Number of fines imposed by the PI	1
Value of fines imposed by the PI	R2 000 000.00
Appeals	1

8.2.2.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	14	14	100.0%
Complaints	19	19	100.0%
Environmental management	40	40	100.0%
Mining and prospecting rights	36	36	100.0%
Mining permits	32	32	100.0%
Surface utilisation	125	125	100.0%
Township developments	0	0	0%

8.2.3. Limpopo

The Limpopo province is situated in the northern part of South Africa surrounded by the North West, Gauteng and Mpumalanga provinces and bordered by Botswana, Zimbabwe and Mozambique. It is the fifth largest province with a land area of approximately 125 000 km² which is about 10.3% of the total land area of South Africa. The province has the fifth highest population of about 5.4 million people, which is about 8.9% of the total population of the country, who mainly speak Sepedi (52.9%), Xitsonga (17%) and Tshivenda (16,7%).

There are approximately 86 operating mines in the Limpopo region that employ approximately 82 820 employees. The major commodities mined consist mainly of coal, copper, chrome, platinum and numerous base minerals.

The mining operations range from small, medium and large-scale enterprises with shallow depth and opencast mining operations. The region also has numerous crushers, quarries and borrow pits.

8.2.3.1. Topical issues and matters of interest

- There are no topical issues and matters of interest for the current reporting period.

8.2.3.2. Strategies adopted for improving status-quo

- The visibility of inspectors is a pro-active way to ensure compliance through purposeful inspections and audits in identifying failures and weaknesses of the health and safety systems at mines. The outcomes are analysed to improve the quality of these activities and where non-compliance and substandard conditions are observed, appropriate enforcement actions are taken.
- Co-operation from mine employers, mine employees, communities affected by mining operations and the MHSI will continue to be encouraged to ensure that there are effective and efficient ways and strategies in dealing with health and safety relating to mining operations in the region.
- Mines are encouraged to continue developing and implementing strategies and measures to deal with occupational diseases.
- The region will continue to support efforts and initiatives to combat TB and HIV/ AIDS.

8.2.3.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	696
Actual	760
Percentage compliance	109.2%

* Figures include individual and group audits

8.2.3.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	126	3	129
Completed	126	1	127
Percentage completed	100.0%	33.3%	98.4%

8.2.3.5. Total accidents reported

Fatalities	3
> 14-day injuries	167
1 to 13-day reportable injuries	72

8.2.3.6. Administrative fines

No administrative fines were recommended by the PI.

8.2.3.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	20	20	100.0%
Complaints	9	7	77.8%
Environmental management	12	11	91.7%
Mining and prospecting rights	210	205	97.6%
Mining permits	371	361	97.3%
Surface utilisation	54	51	94.4%
Township developments	0	0	0%

8.2.4. Mpumalanga

The Mpumalanga province is situated in the northeastern part of South Africa surrounded by the Limpopo, Gauteng, Free State and KwaZulu-Natal provinces and bordered by Mozambique and Eswatini. It is the second smallest province with a land area of approximately 79 000 km² which is about 6.3% of the total land area of South Africa. The province has the fourth lowest population of about 5.1 million people, which is about 8.4% of the total population of the country, who mainly speak siSwati (27.7%), isiZulu (24.1%), Xitsonga (10.4%) and isiNdebele (10.0%).

There are approximately 173 operating mines in the Mpumalanga region that employ approximately 116 915 employees. The major commodities mined consist mainly of 141 coal mines, seven gold mines, two platinum mines, one manganese mine and 22 other commodity mines.

The mining operations ranges from small, medium and large-scale enterprises with underground coal mining operations, underground hard rock mining operations and opencast coal mining operations. The region also has some crushers and quarries.

8.2.4.1. Topical issues and matters of interest

- The region continues to experience high rates of reportable incidents, particularly slipping and falling and improper tool handling. Accidents involving TMM, FOGs and other general incidents remain significant concerns. The Inspectorate's efforts will prioritise the prevention of such accidents with a focus on enforcing health and safety regulations and the implementation of relevant COPs.
- Blasting-related complaints from communities near mines persist prompting continued emphasis on adherence to procedures and standards, particularly those outlined in the Guideline for the Compilation of a Mandatory COP for Minimum Standards on Ground Vibrations, Noise, Air-blast and Flyrock near Surface Structures and Communities to be Protected. Compliance regarding mine fires is also emphasised with mines urged to regularly reassess risks and maintain fire prevention strategies.
- Aging infrastructure in underground coal and hard rock mines is still a challenge, with some mines nearing depletion of reserves and reopening previously sealed areas. Operations must maintain strict adherence to health and safety protocols during these processes.
- Reports of illegal open-cast coal mining have declined, but incidents involving the illegal extraction of precious metals, fuel, and scrap materials still occur. Mines are encouraged to actively engage in anti-illegal mining initiatives and ensure employee safety.
- Some operations lack integrated TB and HIV/AIDS programmes. Mines are urged to host occupational health dialogues and implement wellness initiatives, especially small mines that should consider partnerships with larger mines or local clinics. The reporting of occupational diseases like PTB, NIHL and MSDs are on the rise, prompting a call for better preventative strategies aligned with the 2024 MHSC health milestones.
- There is ongoing concern about employee exposure to airborne pollutants and noise, particularly in homogenous exposure group (HEG) A and B. Mines found with excessive exposure levels have received relevant instructions following inspections. The Inspectorate will continue to promote occupational hygiene workshops and encourage mines to apply best practices to reduce exposure levels.

8.2.4.2. Strategies adopted for improving status-quo

- The Inspectorate aims to enhance mine oversight through frequent inspections, audits and investigations focused on identifying mine system failures in health and safety. Where necessary, enforcement actions will be taken.
- Mines are encouraged to review and update their risk management procedures and ensure alignment between their safety strategies and risk assessments.
- The mines are also urged to share lessons learned from past incidents to help prevent recurrence. Embracing innovation and leading industry practices is considered essential for progressing toward a goal of zero harm.

8.2.4.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	1 280
Actual	1 621
Percentage compliance	126.6%

* Figures include individual and group audits

8.2.4.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	121	6	127
Completed	135	5	140
Percentage completed	111.6%	83.3%	110.2%

8.2.4.5. Total accidents reported

Fatalities	6
> 14-day injuries	226
1 to 13-day reportable injuries	23

8.2.4.6. Administrative fines

Number of fines recommended by an Inspector	3
Value of fines recommended by an Inspector	R580 000.00
Number of fines set aside by the PI	0
Value of fines set aside by the PI	R0.00
Number of fines imposed by the PI	3
Value of fines imposed by the PI	R580 000.00
Appeals	0
Value of the fines paid	R560 000.00
Value of fines outstanding	R20 000.00

8.2.4.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	13	13	100.0%
Complaints	18	18	100.0%
Environmental management	0	0	0%
Mining and prospecting rights	31	31	100.0%
Mining permits	25	25	100.0%
Surface utilisation	2	2	100.0%
Township developments	0	0	0%

8.3. Western and Coastal Regions

The Western and Coastal regional operations consist of the Northern Cape, North West: Klerksdorp, North West: Rustenburg and Western Cape regions. There are approximately 585 operating mines collectively in these regions, employing at least 220 000 mine workers. The major commodities mined are Platinum Group Metals (PGM), iron ore, diamonds, manganese, chrome, gold, granite, dimension stones, sand, monazite and aggregates. The mining operations range from small, medium to large-scale enterprises operating both underground, offshore, and surface mining with numerous crushers, quarries, and borrow pits.

Overall occupational health performance

The collective number of occupational diseases reported from AMRs for the Western and Coastal regional operations decreased from 825 cases in 2023 to 739 cases in 2024. North West: Rustenburg, North West: Klerksdorp and the Western Cape reported a decrease in occupational diseases reported and the Northern Cape reported an increase in occupational diseases reported. The main occupational diseases reported during 2024 were NIHL, PTB and silicosis with 337, 335 and 29 cases respectively.

During the reporting period, a total of 36 medical appeals were received from the Western and Coastal Regions. The number of appeals received per region were 22 appeals in North West: Rustenburg, four appeals in North West: Klerksdorp and five appeals each in the Northern Cape and Western Cape.

All the reported medical appeals were handled and finalised by the Medical Inspector. The significant number of the appeals were due to NCDs such as hypertension, diabetes and epilepsy.

Overall occupational safety performance

During the reporting period, 22 fatalities were reported compared to 28 fatalities in 2023. This represents a decrease in fatalities of 21% year-on-year. The main classifications that contributed to the fatalities recorded were FOGs, T&M and general-type accidents at 31%, 27% and 13% respectively.

A total of 1 044 injuries were collectively reported during 2024 compared to 1 212 injuries in 2023 which corresponds to a 14% improvement. These injuries were mainly the result of general-type accidents, T&M and FOGs accident classifications.

The Western and Coastal regional operations conducted 3 319 qualitative inspections, 197 investigations and 13 inquiries.

Strategies adopted to improve the status quo

The Western and Coastal regional operations will continue to embark on a zero tolerance to non-compliance and the following are some of the strategies that were adopted to improve health and safety performance at the mines:

- Conducting detailed audits on noise, thermal stress and emergency preparedness.
- Thoroughly interrogate all presentations by the mines in the regions and ascertain that the employer has put adequate measures in place to prevent the recurrence of similar accidents before the upliftment of the respective statutory instructions.
- Prepare risk-profiles of the mines to enable the regions to classify the mines according to the level of risk identified based on the number of accidents or incidents and prioritise these mines for inspections and audits.
- Monitor the performance of individual supervisors at the mining operations within the region to identify high-risk personnel that had more accidents or fatalities in their respective areas of responsibility.
- Ensuring that multi-disciplinary comprehensive investigations are conducted and sound strategies are developed and implemented prior to the extraction or removal of any pillars and/or isolated blocks of ground.
- The adoption of Mine Occupational Safety and Health (MOSH) best practices will be implemented and monitored e.g. Trigger Action Report Plan (TARP), netting, buy-quiet (silence equipment) etc.
- Empowering health and safety representatives by engaging them in inspections, audits, investigations, inquiries and identify training gaps on Section 22 and Section 23 of the MHSA.
- Continue to encourage mines to conduct health wellness programmes including programmes to address non-communicable or occupational diseases as well as promote healthy lifestyles at mines.
- Continue issuing directives and intensifying visits to the mines to deal with safety challenges that tend to emerge in the month before and two weeks after long holidays to ensure compliance with the MHSA.

8.3.1. Northern Cape

The Northern Cape province is situated in the northern part of South Africa surrounded by the Western Cape, Eastern Cape, Free State and North West provinces and bordered by Namibia and Botswana. It is the largest province with a land area of approximately 372 000 km² which is about 30.5% of the total land area of South Africa. The province has the lowest population of about 1.4 million people, which is about 2.3% of the total population of the country, who mainly speak Afrikaans (53.8%), Setswana (33,1%), isiXhosa (5.3%) and English (3.4%).

There are approximately 116 operating mines in the Northern Cape region that employ approximately 50 383 employees. The major commodities mined consist mainly of iron ore, manganese, diamonds, copper, zinc, lead, granite and aggregate.

Most of the mining operations in the region are opencast mines. The ratio of mining operations in the region is approximately 90% surface and 10% underground.

8.3.1.1. Topical issues and matters of interest

- The region recorded a 50.0% regression in occupational fatalities when compared to the previous reporting period.
- An 11.0% regression was noted in occupational injuries when compared to the previous reporting period. Of the 108 occupational injuries reported during the current reporting period, 32.0% were the result of slipping and falling, 25.0% were recorded as hand injuries (caught between objects) and 20.0% was classified as struck by.
- The region recorded 49 health incidents, which is a 40.0% regression when compared to the previous reporting period. Of the 49 recorded health incidents, 71.0% were cases of PTB.

- There has been a noticeable increase in the HEG A classification on thermal stress. This is attributed to the high temperatures that were experienced in the region.
- A minimal improvement in the HEG A classification on airborne pollutants was recorded. This slight improvement can be attributed to the strategy adopted for mines to install and maintain real-time dust monitoring systems.
- There has been no noticeable improvement in recorded FOG accidents, however the region continues to record an increase in the number of slope failure incidents. This increase is attributed to inadequate support installation and poor blasting practices. Through routine inspections it was found that mines do not conduct quality assurance testing on support installed at opencast operations. It has also been noted that there are no slope monitoring systems installed at most operations.
- The shortage of skills and high turnover rates in key managerial positions are affecting the safety and stability of mining operations in the region.
- Mining companies do not verify the authenticity of certificates of competency during the recruitment process. This has led to an increase in the number of supervisors working with fraudulent certificates of competency.
- The regional office recorded an increase in TMM fire incidents which were attributed to poor maintenance and poor cable routing.
- It is concerning to note that there was an increase in the closure of small mining operations due to challenges such as lower commodity prices and logistical constraints.

8.3.1.2. Strategies adopted for improving status-quo

- The regional office will prepare a risk profile of the mines and classify each mine according to the level of risk, considering the quantity, frequency and severity of reported incidents.
- The inspection and audit master plans will be monitored to ensure that all mines in the region are attended to in a calendar year.
- The region will also increase the frequency of inspections and audits at mines that have a history of poor health and safety performance.
- The timeous investigation of all serious accidents and dangerous occurrences to enable inspectors to share the outcomes from the investigations with the industry to prevent similar occurrences.
- The region will also continue with safety campaigns in line with the risk-based approach.
- Participate in wellness workstream tripartite meetings to share health incident trends and guide the mines on improvement strategies.
- The region will instruct mines to install real-time thermal monitors and ensure that there are risk-based trigger responses where employees will be withdrawn from working places with severe temperatures.
- The regional office will instruct mines to install effective dust control systems and ensure that those controls are properly maintained.
- The regional office will also instruct the mines in the region to install real-time monitors for noise and dust.
- Mines will be encouraged to adopt new technology and MOSH-leading practices.
- The region will investigate all FOG incidents and/or accidents as well as slope failures.
- The region will participate in the rock engineering workstream to guide and encourage the reporting of slope failures and to accelerate the implementation of slope monitoring systems.
- Encourage surface mines to adopt a risk-based strategy to install aerial support whenever it is required.
- Mines to employ the services of independent personnel to conduct quality assurance on support units.
- Mines are instructed to investigate and present all fire incidents to the PI.
- Encourage mines to ensure appropriate systems for managing contractors are established and implemented.
- Issue Section 54 and Section 55 as well as administrative fines where necessary and conduct follow-up inspections.

8.3.1.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	588
Actual	605
Percentage compliance	102.9%

* Figures include individual and group audits

8.3.1.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	44	1	45
Completed	44	1	45
Percentage completed	100.0%	100.0%	100.0%

8.3.1.5. Total accidents reported

Fatalities	3
> 14-day injuries	108
1 to 13-day reportable injuries	55

8.3.1.6. Administrative fines

No administrative fines were recommended by the PI.

8.3.1.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	15	15	100.0%
Complaints	14	14	100.0%
Environmental management	0	0	0%
Mining and prospecting rights	338	338	100.0%
Mining permits	74	74	100.0%
Surface utilisation	39	39	100.0%
Township developments	0	0	0%

8.3.2. North West: Klerksdorp

The North West province is situated in the northwestern part of South Africa surrounded by the Northern Cape, Free State, Gauteng and Limpopo provinces and bordered by Botswana. It is the fourth smallest province with a land area of approximately 104 000 km² which is about 8.6% of the total land area of South Africa. The province has the third lowest population of about 3.8 million people, which is about 6.3% of the total population of the country, who mainly speak Setswana (63.4%), Afrikaans (9.0%) and isiXhosa (5.5%).

There are approximately 94 operating mines in the North West: Klerksdorp region that employs approximately 21 062 employees. The major commodities mined consist mainly of gold, limestone, diamond and other commodities. The other commodities include uranium, fluorspar, sand and clay which are commonly exploited with less labour-intensive surface operations.

The mining operations range from small, medium, and large-scale enterprises with, deep, shallow, and opencast mining operations. The region also has numerous crushers and quarries.

8.3.2.1. Topical issues and matters of interest

- Illegal miners were trapped in an underground gold mine in the North West: Klerksdorp region which has ceased operations over a decade ago but has not yet been issued with a closure certificate by the Department. Allegations were made that the SAPS from Operation Vala Umgodi were not allowing the community members to supply food, water and medication to the trapped illegal miners. The matter was taken to court and the court ordered that the supply of food and water to the trapped illegal miners must be permitted, which was done. The DMPR instructed the responsible mine owner to request MRS to perform a rescue and recovery assessment of the trapped illegal miners. MRS brought a mobile rescue winder to assist with the hoisting of the trapped and deceased illegal miners. The mobile winder made a total of five trips which rescued 246 illegal miners but sadly 78 illegal miners were recovered deceased.
- The closure of underground gold mines in Matlosana has resulted in the increased illegal mining activities conducted mainly by undocumented foreign nationals from Lesotho, Mozambique, Zimbabwe and a few locals. This illegal mining has now spread to some operational mines, posing a security risk to the mine employees and also denying the legitimate mine owners an opportunity to mine all their viable gold reserves. The DMPR continues to work with all relevant authorities and stakeholders to curb illegal mining activities in the country.

8.3.2.2. Strategies adopted for improving status-quo

- Empowering Health and Safety Representatives through engagements during inspections, audits, accident investigations, inquiries and identify training gaps on Section 22 and Section 23 of the MHSA.
- Continue to encourage mines to conduct health and wellness programmes including programmes to address non-communicable and/or occupational diseases and healthy lifestyles.
- Continue issuing directives and intensifying visits to the mines to deal with safety challenges that tend to emerge in the month before and two weeks after long holidays to ensure compliance with the MHSA.
- Conducting detailed audits with personnel from Head Office on noise, thermal stress, and emergency preparedness.
- Conducting investigations on most and/or all the fire incidents encountered in the cement factories within the region and issue appropriate instructions.
- Interrogate presentations conducted at the regional office to ascertain that the employer has put adequate measures in place to prevent the reoccurrence of similar accidents before the upliftment of a statutory instruction.
- Prioritise inspections and audits based on the risk profiles of the mines classified on the level of risk identified based on the number of accidents and/or incidents.
- Monitor the performance of individual supervisors at operations to identify high risk personnel based on the number of accidents or fatalities in their respective areas of responsibilities.
- Ensuring that multi-disciplinary comprehensive investigations are conducted and sound strategies are developed and implemented prior to the extraction or removal of any pillars and/or isolated blocks of ground.
- Adoption of MOSH best practices will be implemented and monitored e.g. TARP, netting, Buy-Quiet (silence equipment), etc.

8.3.2.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	769
Actual	848
Percentage compliance	110.3%

* Figures include individual and group audits

8.3.2.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	93	1	94
Completed	93	1	94
Percentage completed	100.0%	100.0%	100.0%

8.3.2.5. Total accidents reported

Fatalities	1
> 14-day injuries	120
1 to 13-day reportable injuries	46

8.3.2.6. Administrative fines

No administrative fines were recommended by the PI.

8.3.2.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	30	30	100.0%
Complaints	11	11	100.0%
Environmental management	32	32	100.0%
Mining and prospecting rights	54	54	100.0%
Mining permits	19	19	100.0%
Surface utilisation	101	101	100.0%
Township developments	0	0	0%

8.3.3. North West: Rustenburg

The North West province is situated in the northwestern part of South Africa surrounded by the Northern Cape, Free State, Gauteng and Limpopo provinces and bordered by Botswana. It is the fourth smallest province with a land area of approximately 104 000 km² which is about 8.6% of the total land area of South Africa. The province has the third lowest population of about 3.8 million people, which is about 6.3% of the total population of the country, who mainly speak Setswana (63.4%), Afrikaans (9.0%) and isiXhosa (5.5%).

There are approximately 224 operating mines in the North West: Rustenburg region that employ approximately 142 869 employees. The major commodities mined consist mainly of platinum, chrome, iron ore, silica and other commodities.

The mining operations range from small, medium and large-scale enterprises with deep, shallow and opencast mining operations. The region also has numerous concentrator plants, smelters, crushers, quarries and borrow pits.

8.3.3.1. *Topical issues and matters of interest*

- Concerns with reference to copper cable theft and illegal mining activities in the Rustenburg Region (underground and surface operations) include:
 - Threats to job security as retrenchments may occur if illegal mining activities continue.
 - Production loss due to the destruction of the infrastructure of the mine.
 - Underground fires.
 - Disruptions to air flow which have negative impacts on ventilation arrangements at mines.
 - Obstructions and/or destruction of emergency escape routes (second outlets) that are used as access ways by illegal miners.
 - Creeping threat to the safety and security of WIM including gender-based violence and femicide.
 - Illicit blasting causing the destabilisation of the ground and infrastructure resulting in health and safety risks in surrounding communities (cracked houses, drowning, etc.).
 - Loss of opportunity to harness tax revenue since ore is illegally mined and sold.
 - Burden on rescue services during major incidents.
 - Weaponry armed syndicates pose a risk to the safety of workforces, regulators and law enforcers, and the conviction rate is low or not present at all.
- The strategy to deal with addressing unauthorised access to operating shafts involves the scrutiny of plans to monitor quality of seals – especially the worked-out areas at least one month. Furthermore, the matters of illegal mining are referred to the Enforcement and Compliance Directorate within the department.
- The following concerns have contributed immensely to the increase of the winder incidents in the region:
 - Tripping incidents.
 - Winding Engine Drivers missing the set landing marks.
 - Trouble shooting incidents on winding plants.
 - Upgrades of programmable logic controllers (PLC) systems.
 - Load shedding challenges.
 - Power supply interruptions.
- The strategies that are in place to deal with the winding incidents involve the winding systems focused statutory inspections and monthly presentations and updates on winders behaviour in the region. Furthermore, for emergency preparedness, mines are instructed to have compulsory back-up power supply.

8.3.3.2. *Strategies adopted for improving status-quo*

- Employer to present start-up plans and risk assessments on white area mining to the PI.
- Presentations and/or submissions on FOG stop-notes to the PI.
- Presentations on major FOGs and/or non-casualties.
- Regularly review and/or revise risk assessment, standards and procedures after occurrences of accidents in line with actual ground conditions.
- Immediate enforcement of TMM Chapter 8 regulations.
- All plants to present risk assessment and traffic management plans to the PI where a standard letter signed by the PI will be issued after the presentation.
- Withdrawal of machines for non-compliance with Chapter 8 regulations.
- Installation of new technologies scrubber exhaust to minimise emissions underground – mines to present risk assessment to the PI.
- Inspectors to conduct system audits and/or inspections on planning and mine design – stoppage instructions to be issued.

- Inspectors to be accompanied by engineering personnel for disconnecting substandard winches during inspections and/or audits.
- Engineering personnel must check if installed winches are adequate for the hauling distance during the commissioning of the winch.
- Increase statutory engineering inspections and/or audits on mine equipment (winders, boilers, chairlifts, lifts and shafts).
- Employers to present all applications for permission on winding systems (e.g. shaft examinations).
- For every winder incident, the employer must stop the use of the winder, report the incident and do a presentation to the PI.
- Scrutiny of fire monitoring plans (fire hazard register, fire audits, adoption of best practices on fire detection and suppression) once per month.
- Profiling of fire risk at mines.
- Enforce fire detection real time monitoring.
- Scrutiny of ventilation plans during inspections.
- Enforce air-flow real time monitoring.
- Monitoring workplace designs (ergonomics, temperatures, noise and illumination).
- Enforce fatigue management.
- Enforce risk-based medical surveillance.
- Monitoring working hours and annual leave.
- Revive emergency preparedness - mines must have compulsory back up power for the winders.

8.3.3.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	1 212
Actual	1 246
Percentage compliance	102.8%

* Figures include individual and group audits

8.3.3.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	49	11	60
Completed	49	11	60
Percentage completed	100.0%	100.0%	100.0%

8.3.3.5. Total accidents reported

Fatalities	18
> 14-day injuries	806
1 to 13-day reportable injuries	161

8.3.3.6. Administrative fines

No administrative fines were recommended by the PI.

8.3.3.7. Land-use applications and complaints

The land-use applications are handled by the North West: Klerksdorp regional office.

	RECEIVED	COMPLETED	PERCENTAGE
Complaints	290	228	78.6%

8.3.4. Western Cape

The Western Cape province is situated in the southwestern part of South Africa surrounded by the Northern Cape and the Eastern Cape provinces. It is the fourth largest province with a land area of approximately 129 000 km² which is about 10.6% of the total land area of South Africa. The province has the third highest population of about 7.4 million people, which is about 12.3% of the total population of the country, who mainly speak Afrikaans (49.7%), isiXhosa (24.7%) and English (20.3%).

There are approximately 151 operating mines in the Western Cape region that employ approximately 5 601 employees. The major commodities mined consist mainly of clay, diamonds, gypsum, gas, salt, limestone, stone aggregates, sand, bentonite, manganese, ilmenite and granite.

The mining operations range from very small, small, medium to large-scale enterprises with an offshore gas installation and opencast -mining operations. The region also has numerous crushers, quarries and borrow pits.

8.3.4.1. Topical issues and matters of interest

- At PetroSA, the gas field supplying gas to the refinery at Mossel Bay, has declined substantially. From December 2020 to February 2024 the F-A Platform has been operating on one well producing gas for power generation to sustain life at sea, maintain safety critical systems and structural maintenance to prevent corrosion. As from March 2024, the F-A Platform commenced operating in island mode, meaning that all wells have been positively isolated and all hydrocarbon systems were purged with nitrogen. Diesel driven power generation is the means to power up F-A Platform.
- Steenkampskraal mine (an old dormant underground mine where monazite and rare earth minerals were mined previously) is still not operational although the mine is currently engaged in daily care and maintenance activities. It is transitioning into the construction phase of the processing plant. The plan is to reopen the mine and use contractors to conduct mining operations.
- The recent liquidation of the Mineral Sand Resources company based in the Vredendal area has caused job losses and will impact negatively on the socio-economy of the area.
- There is a shortage of GCC engineers in the region.
- An Occupational Hygienist vacancy in the region poses a serious challenge since the quality of the occupational hygiene quarterly reports might be affected.

8.3.4.2. Strategies adopted for improving status-quo

- Fill the Occupational Hygienist vacancy in the region.
- Prioritise the appointment of all the legal appointees at mines as required by the MHSA.
- Compliance with the MHSA is key and the enforcement of the act will continue by conducting inspections, audits and follow-ups on instructions issued.
- The stakeholder engagements through RTFs will continue to take place as scheduled, thus assisting to accelerate and to pave the zero-harm journey.
- The mines will be continuously checked for compliance with the statutory reporting as required by mine health and safety act.

- The mines are instructed to ensure health and safety improvement by developing and implementing the health and safety improvement strategy that addresses all the mine challenges.
- Develop human centric safe work procedures and implement it at all the mines in the region.

8.3.4.3. Inspections and audits

CATEGORY	QUALITATIVE INSPECTIONS*
Planned	360
Actual	620
Percentage compliance	172.2%

* Figures include individual and group audits

8.3.4.4. Investigations and inquiries

	INVESTIGATIONS	INQUIRIES	TOTAL
Initiated	11	0	11
Completed	11	0	11
Percentage completed	100.0%	0%	100.0%

8.3.4.5. Total accidents reported

Fatalities	0
> 14-day injuries	10
1 to 13-day reportable injuries	3

8.3.4.6. Administrative fines

Number of fines recommended by an Inspector	1
Value of fines recommended by an Inspector	R50 000.00
Number of fines set aside by the PI	0
Value of fines set aside by the PI	R 0.00
Number of fines imposed by the PI	1
Value of fines imposed by the PI	R50 000.00
Appeals	0
Value of the fines paid	R50 000.00

8.3.4.7. Land-use applications and complaints

	RECEIVED	COMPLETED	PERCENTAGE
Closure certificates	17	17	100.0%
Complaints	1	1	100.0%
Environmental management	0	0	0%
Mining and prospecting rights	18	18	100.0%
Mining permits	16	16	100.0%
Surface utilisation	21	21	100.0%
Township developments	0	0	0%



ANNEXURES





9. ANNEXURES

9.1. Annexure A: Organogram for the MHSI for the period ending 31 March 2025



9.2. Annexure B: Contact list of the MHSI for the period ending 31 March 2025

CHIEF INSPECTOR OF MINES					
POSITION	OFFICIAL	CONTACT DETAILS	POSTAL ADDRESS	PHYSICAL ADDRESS	
Chief Inspector of Mines	Mr D Msiza		Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Executive Assistant	Ms S Nzimande	+27 (0) 12 444 3970 Sithembele.nzimande@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Personal Assistant	Ms P Rambau	+27 (0) 12 444 3639 Phumudzo.rambau@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
DEPUTY CHIEF INSPECTORS OF MINES / CHIEF DIRECTORS					
POSITION	OFFICIAL	CONTACT DETAILS	POSTAL ADDRESS	PHYSICAL ADDRESS	
Deputy Chief Inspector of Mines: Central, Coastal and North-eastern Regions	Mr MMA Zondi	+27 (0) 12 444 3663 Mthokozisizondi@dmp.gov.za Lindiwe.sekwati@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Deputy Chief Inspector of Mines: Western and Coastal Regions	Mr T Ngwenya	+27 (0) 12 444 3547 Thabonngwenya@dmp.gov.za Daphneysekogobela@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Chief Director: Technical Support, Central and Coastal Regions	Mr X Mbonambi	+27 (0) 12 444 3676 Xolile.mbonambi@dmp.gov.za Arista.muller@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Chief Director: Occupational Health	Dr L Ndelu	+27 (0) 12 444 3667 Lindiwe.ndelu@dmp.gov.za Trevia.kungoane@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	

DIRECTORS					
POSITION	OFFICIAL	CONTACT DETAILS	POSTAL ADDRESS	PHYSICAL ADDRESS	
Director: Occupational Hygiene	Ms CT Kekana	+27 (0) 12 444 3646 Constance.kekana@dmp.gov.za Anesia.matjokane@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Director: Occupational Medicine	Ms D Mahlaba	+27 (0) 12 444 3785 Duduzile.mahlaba@dmp.gov.za Rudzani.moshapo@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Medical Inspector	Dr D Mokoboto	+27 (0) 12 444 3614 Dipalesa.mokoboto@dmp.gov.za Pertunia.makhubela@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Director: Mine Safety	Vacant	+27 (0) 12 444 3649 Vacant Freda.seema@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
Director: Mine Surveying	Mr NV Mahwasane	+27 (0) 12 444 3789 Ndivhudza.mahwasane@dmp.gov.za Goitsemang.sekwati@dmp.gov.za	Private Bag X59 ARCADIA 0007	Trevenna Campus 70 Meintjies Street Sunnyside PRETORIA	
PRINCIPAL INSPECTORS					
POSITION	OFFICIAL	CONTACT DETAILS	POSTAL ADDRESS	PHYSICAL ADDRESS	
Principal Inspector: Eastern Cape	Vacant	+27 (0) 41 403 6640 Vacant Megansingh@dmp.gov.za	Private Bag X6076 GOEBERHA 6000	Pier 11 Shopping Centre Building 444 Govan Mbeki Avenue 3rd Floor GOEBERHA	
Principal Inspector: Free State	Mr PH Nyaqcela	+27 (0) 57 391 1373 Pule.nyaqcela@dmp.gov.za Thandi.nyezi@dmp.gov.za	Private Bag X33 WELKOM 9460	The Strip Building 314 Stateway Street WELKOM	
Principal Inspector: Gauteng	Mr MN Madubane	+27 (0) 11 358 9776 Max.madubane@dmp.gov.za Portias.sokhulu@dmp.gov.za	Private Bag X5 BRAAMFONTEIN, 2017	222 Smith Street Braamfontein JOHANNESBURG	

Principal Inspector: KwaZulu-Natal	Ms EM Sebifloane	+27 (0) 31 335 9626 Matshidiso.sebitloane@dmp.gov.za Sindydlamini@dmp.gov.za	Private Bag X54307 DURBAN 4000	Mansion House 12 Joe Slovo Street DURBAN
Principal Inspector: Limpopo	Mr S Jivhuho	+27 (0) 15 287 4705 Sollyjivhuho@dmp.gov.za Nancy.montana@dmp.gov.za	Private Bag X9467 POLOKWANE 0700	Brool Building 101 Dorp Street POLOKWANE
Principal Inspector: Mpumalanga	Vacant	+27 (0) 13 653 0514 Nthabisengmphahlele@dmp.gov.za Nontembeko.zulu@dmp.gov.za	Private Bag X7279 EMALAHLENI 1035	Saveways Crescent Centre Mandela and OR Tambo Drive EMALAHLENI
Principal Inspector: Northern Cape	Mr TM Mateta	+27 (0) 53 807 1735 Tumelo.mateta@dmp.gov.za Dorothygoliath@dmp.gov.za	Private Bag X6093 KIMBERLEY 8300	Telkom Building 41 Schmidtsdrift Street KIMBERLEY
Principal Inspector: North West: Klerksdorp	Mr J Melembé	+27 (0) 18 487 4316 Jose.melembé@dmp.gov.za Elizabeth.mmotata@dmp.gov.za	Private Bag A1 KLERKSDORP 2570	Vaal University of Technology Building Voortrekker and Margaretha Prinsloo Street KLERKSDORP
Principal Inspector: North West: Rustenburg	Mr HM Mothiba	+27 (0) 14 594 9240 Monageng.mothiba@dmp.gov.za Tintswalobaloyi@dmp.gov.za	P O Box 150 TLHABANE 0309	Propcor Building 254 Beyers Naude Street RUSTENBURG
Principal Inspector: Western Cape	Mr K Leseyane	+27 (0) 21 427 1004 Kagiso.leseyane@dmp.gov.za Nntombikayise.ntlenzi@dmp.gov.za	Private Bag X9 ROGGE BAY 8012	MAP House 44 Strand Street 7th floor CAPE TOWN
TRIPARTITE INSTITUTIONS				
POSITION	OFFICIAL	CONTACT DETAILS	POSTAL ADDRESS	PHYSICAL ADDRESS
Mine Health and Safety Council Chief Executive Officer	Mr D Mamphitha	+27 (0) 11 656 1797 ext.: 112 Ysethlapelo@mhsc.org.za	Private Bag X11 WENDYWOOD 2144	Western Woods Office Park 145 Western Service Road Woodmead JOHANNESBURG

9.3. Annexure C: Abbreviations and acronyms

A	AIDS	Acquired Immune Deficiency Syndrome
	AMR(s)	Annual Medical Report(s)
	ARV	Antiretrovirals
	ASPASA	Aggregate and Sand Producers Association of South Africa
C	CIOM	Chief Inspector of Mines
	COAD	Chronic obstructive airway disease
	COP(s)	Code(s) of Practice
	COVID-19	Corona Virus Infection Disease 2019
	CRTM	Continuous real time monitoring
	CWP	Coal workers' pneumoconiosis
D	DMPR	Department of Mineral and Petroleum Resources
	DOH	Department of Health
E	EDP	Executive Development Programme
	EMDP	Emerging Management Development Programme
	EPTB	Extra pulmonary tuberculosis
F	FFR	Fatality frequency rates
	FOG(s)	Fall(s) of ground
G	GCC	Government Certificate of Competency
	GBV	Gender-based violence
	GDI(s)	Gas detection instrument(s)
H	HCT	HIV counselling and testing
	HEG(s)	Homogenous exposure group(s)
	HIR(s)	Health incident reports
	HIRA	Hazard identification and risk assessment
	HIV	Human Immunodeficiency Virus
I	IFR	Injury frequency rates

M	MDR-TB	Multidrug-resistant TB
	MHD(s)	Mental health disorder(s)
	MHSA	Mine Health and Safety Act, 1996 (Act 29 of 1996) as amended
	MHSC	Mine Health and Safety Council
	MHSI	Mine Health and Safety Inspectorate
	MOSH	Mine Occupational Safety and Health
	MOU(s)	Memorandum(s) of understanding
	MPRDA	Mineral and Petroleum Resources Development Act, 2002 (Act 28 of 2002)
	MRS	Mines Rescue Services
	MQA	Mining Qualifications Authority
	MSCC	Mine Surveyors Certificate of Competency
	MSD(s)	Musculoskeletal disorder(s)
	MTB	Miliary tuberculosis
N	NCD(s)	Non-communicable disease(s)
	NGO(s)	Non-governmental Organisation(s)
	NIHL	Noise-induced hearing loss
O	OEL(s)	Occupational exposure limit(s)
	OLD(s)	Occupational lung disease(s)
	OMP(s)	Occupational medical practitioner(s)
P	PDS	Proximity detection system
	PGM	Platinum Group of Metals
	PI(s)	Principal Inspector(s) of Mines
	PLC(s)	Programmable logic controllers
	PPE	Personal protective equipment
	PSS	Platinum salt sensitivity
	PTB	Pulmonary tuberculosis
R	RBE	Rail-bound equipment
	RO	Reverse osmosis
	RTF(s)	Regional Tripartite Forum(s)

S	SAMRASS	South African Mines Reportable Accident Statistics System
	SANS	South African National Standards
	SAPS	South African Police Service
	SCSR(s)	Self-contained self rescuer(s)
	SiI+TB	Silico-tuberculosis
	SOP	Standard operating procedures
	SETA	Sector Education and Training Authority
	SLE	Systemic lupus erythematosus
T	T&M	Transportation and mining
	TARP	Trigger Action Report Plan
	TB	Tuberculosis
	TBT	Track-bound transport
	TMM	Trackless mobile machines
U	UNAIDS	Joint United Nations Programme on HIV/AIDS
W	WHO	World Health Organization
	WIM	Women in mining
	WMSD(s)	Work-related musculoskeletal disorder(s)
	WRULD	Work-related upper-limb disorder
X	XDR-TB	Extensively drug-resistant TB

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RP: 210/2025

ISBN: 978-1-77997-928-5