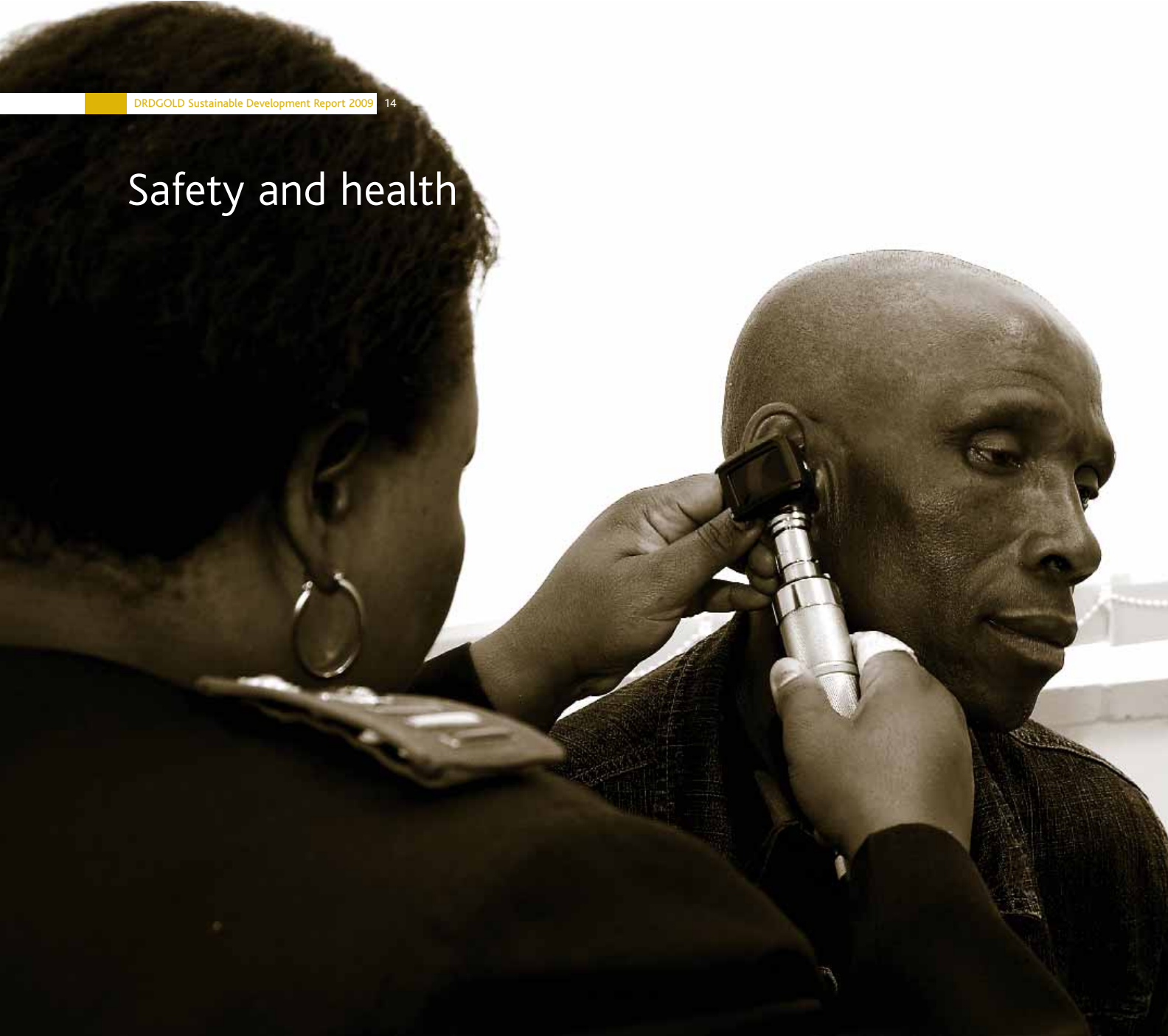


Safety and health



DRDGOLD is a signatory to the 10-year health and safety targets set at the 2003 summit of the Mine Health and Safety Council (MHSC). The MHSC is a tripartite body made up of government, unions and employees.

Each operation has a safety department which reports to the general manager of the mine and to the general manager responsible for projects across the group, who submits a quarterly report on safety and health to the Board of Directors.

Details of those who died in work-related accidents at DRDGOLD operations in 2009

Name and age	Date	Operation	Occupation and length of service	Home	Family
Aron Maqoma (45)	16 August 2008	Blyvoor, accident occurred at 35-29 S2 cross cut	Rock drill operator; 26 years	Bizana, Eastern Cape Province, South Africa	Aron leaves his wife Mantswele and seven children
Velelo Mshuwya (36)	4 September 2008	Blyvoor, 35-32 raise	Rock drill operator; six years	Lusikisiki, Eastern Cape Province, South Africa	Velelo leaves his wife Ncediswa and six children
Pieter Jonker (49)	19 September 2008	ERPM, South West Vertical Shaft	Timberman; 12 years	Boksburg, Gauteng Province, South Africa	Pieter leaves his wife Maria and three children
Fernando Vate (57)	19 September 2008	ERPM, South West Vertical Shaft	Shaft assistant; six years	Canicado, Mozambique	Fernando leaves his wives Albertina and Theresa, and 13 children.
Annianias Timbe (37)	8 October 2008	Blyvoor, No 6 Shaft	Box operator; close to three years	Massinga, Mozambique	Annianias leaves his wife Raquel and three children.

There are health and safety agreements with unions in place at all the operations. About 84% of the workforce is unionised. Unions and employees who are not unionised are involved in monitoring and assessing health and safety programmes at operational level. A Health and Safety Committee, which comprises management and employees, is in place at each operation. Mine management holds a monthly forum meeting with the unions at which members of the Health and Safety Committee are present. Health and safety issues are among the matters discussed at these sessions.

At Blyvoor, there are four full-time health and safety representatives in each working area – No 4 Shaft, No 5 Shaft, No 6 Shaft and the metallurgical plant. This mine has a steering committee which evaluates occupational health and safety programmes in the workplace. A total of 25 members of the National Union of Mineworkers (0.62% of the workforce) serve on these committees. Blyvoor also has a Lifestyle Committee which concentrates on health issues.

There is one full-time safety representative at ERPM and one at Crown, who visits the plants on a rotational basis.

Safety

DRDGOLD regrets to report that five employees died at work during the year, three at Blyvoor and two at ERPM. Two of the fatal accidents at Blyvoor were caused by seismic events, the third occurred from injuries sustained when the employee fell into the measuring flask of a loading box. At ERPM, two employees were asphyxiated in a shaft conveyance while on their way to conduct

routine water level measurements underground. The names and details of those who lost their lives appear in the table above.

The board and management of DRDGOLD extend their sincerest condolences to the families, friends and colleagues of those who died.

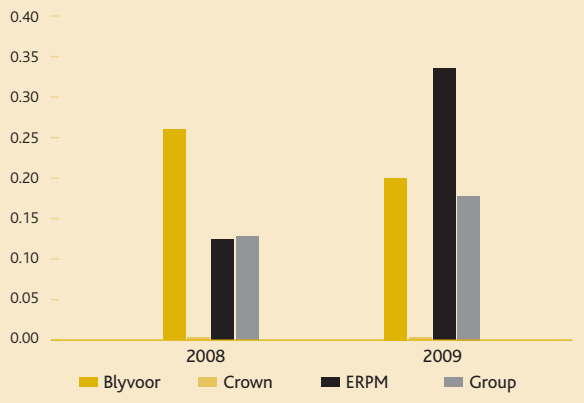
Regrettably, the number of fatalities rose by one in 2009 (2008: four) and, consequently, there was a deterioration in the Fatal Injury Frequency Rate (FIFR) from 0.128 to 0.178 per million hours worked. The company is pleased to report, however, that there were no fatalities in the last eight months of the year.

All the other safety indicators – measured per million hours worked – at DRDGOLD improved: the Lost Time Injury Frequency Rate (LTIFR) decreased from 8.67 to 7.60, the Reportable Injury Frequency Rate (RIFR) from 3.61 to 2.62, and the Dressing Station Injury Frequency Rate (DSIFR) from 39.59 to 24.55. The rates for ERPM indicate an improvement in all these categories but this has to be put into context. Underground mining was suspended in October 2008. The mine's full labour complement, however, was employed and recorded for accident purposes from the 6 October 2008 until 28 February 2009. Surface operations continue at ERPM.

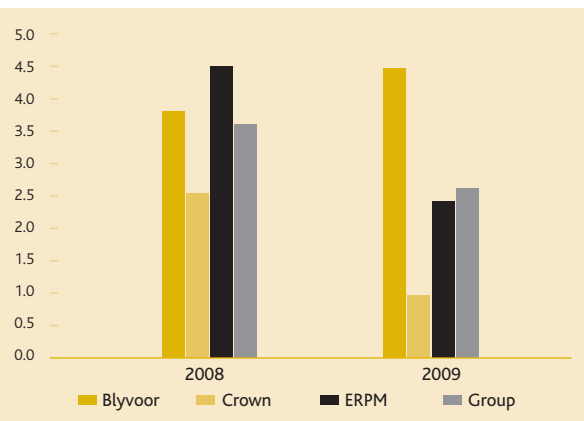
More accidents were caused by falls of ground (FOG) than any other factor, with gravity-related and seismic FOG accounting for just over 21% of all accidents. These were the major safety risks at Blyvoor, followed by fire and trucks and tramming incidents. Until underground mining was suspended at ERPM, falls of ground accounted for 27% of all accidents. As Crown is a surface operation, the main safety issues at this operation were very different and related to conveyor belts, the lifting of equipment, reagent handling and machinery.

Safety and health (continued)

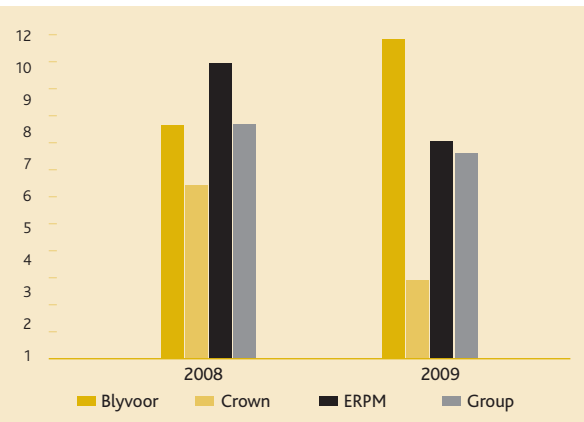
FIFR
per million hours worked



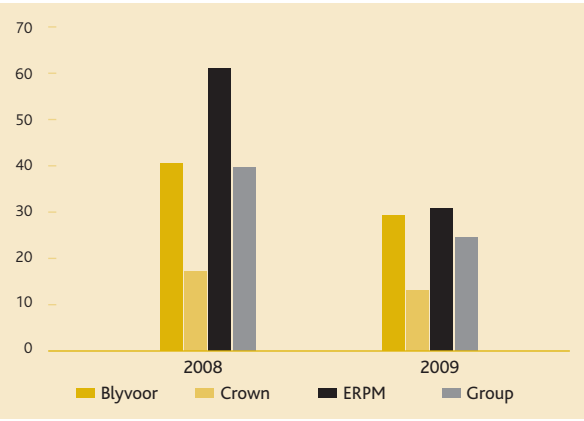
RIFR
per million hours worked



LTIFR
per million hours worked



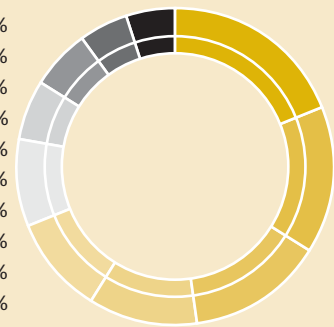
DSIFR
per million hours worked



The accompanying table indicates the agencies or causes of all accidents for the DRDGOLD group as a whole during 2009.

Agency	Total
Fall of ground	122
Fire	88
Slip and fall	83
Materials handling	64
Bumped against	59
Struck by	56
Seismic event	39
Rolling rock	35
Foreign body	30
Caught between	29
Strands and wires	28
Rolling stock	27
Heat	24
Winch ropes	24
Falling material	19
Sharp objects	16
Shaft conveyance	13
Rock splinter	11
Cutting torch	8
Winch	8
Rolling material	7
Lifting equipment	7
Falling from elevate	6
Chemicals	5
Mud rush	5
Hand tools	4
Machinery	4
Winches and rigging	4
Motor vehicle accidents	3
Toxic fumes	2
Vehicles	2
Conveyors	1
Caught by	1
Dust and mud	1
Flash arc	1
Over stressed	1
Structure	1
Total	838

- FOG – gravity 19%
- Fire 15%
- Slip and fall 14%
- Materials handling 11%
- Bumped against 10%
- Struck by 9%
- FOG – seismic 6%
- Rolling rock 5%
- Foreign body 5%
- Caught between 5%



Top ten agencies of accidents – 2009



During the year, Blyvoor lost 2 469 shifts (2008: 2 220) through accidents, Crown 321 shifts (2008: 253) and ERPM 858 shifts (2008: 2 610). As in the case of the safety indicators discussed above, the cessation of underground mining activities at ERPM explains the big discrepancy between the figure for this year and that for the previous year.

Section 54 of South Africa's Mine Health and Safety Act makes provision for the Mine Safety Inspectorate to close part or all of a mine should it believe that any particular occurrence or condition may endanger the health and safety of any individual on the mine. DRDGOLD received three such instructions during the year under review. Four-day stoppages were imposed at Blyvoor after the seismic events that led to fatalities on 16 August and 4 September 2008. The Section 54 instruction on 19 September 2008 at ERPM, which followed the death by asphyxiation of two employees, has not been lifted to date. As mentioned above, no underground mining takes place at this operation. There were no Section 54 orders received for Crown.

Addressing safety issues

A behaviour-based safety intervention, which was signed off by management and the unions, was launched at Blyvoor during 2009.

This initiative focuses on reducing behaviour that places employees at risk and focuses on encouraging safe behaviour. No 6 Shaft will be used as a pilot site for this process, which then be rolled out to the rest of Blyvoor and the other DRDGOLD operations.

The 'Before you Work' campaign, which focuses on making workplaces safe before work begins, was successfully implemented during 2008 at Blyvoor and is ongoing.

After the establishment of the Mining Industry Occupational Safety and Health (MOSH) Task Team which followed the Mine Health and Safety Council's summit of 2003, a team was set up to focus on each of the four key health and safety areas in the South African mining industry: leadership, noise, dust and FOG. Once leading practices had been identified, the emphasis changed to implementation. At this stage Community of Practice for Adoption (COPA) groups were formed. The members of these groups interact to share information in order to help in overcoming problems associated with implementation and to bring about continuous improvements in performance. During 2009, Blyvoor signed up as a COPA member to support the adoption team that focuses on falls of ground. The COPA to which the mine belongs is looking at the aspect of entry examinations.

Safety and health (continued)

Occupational health disease	Blyvoor		ERP M		Crown	
	2008	2009	2008	2009	2008	2009
OLD – number of cases submitted to MBOD	105	64	0	53	0	0
TB – prevalence rate per 1 000 employees	25.12	13.92	19.56	31.39	7	0
– new cases	82	49	65	53	7	0
NIHL – diagnostic audiograms performed	49	98	37	52	1	1
– submissions for possible compensation	27	31	27	52	1	1
– cases compensated	22	6	0	0	0	0

Crown started a 'hands and fingers' campaign during the year to make employees aware of the importance of taking precautions by wearing the right protective clothing and of vigilance at all times. There was also a major drive to focus attention on the wearing of eye protection.

As ERP M was placed on care and maintenance during the year, no safety-related initiatives were launched at this operation.

Health

The most significant occupational health diseases at DRDGOLD's operations are occupational lung disease (OLD) comprising silicosis and chronic obstructive airway disease (COAD), which can be caused by exposure to silica dust in operations with quartz-bearing rock; pulmonary tuberculosis (TB), the risk of contracting which is increased by exposure to silica and when people are HIV positive; and noise-induced hearing loss (NIHL), which can occur when employees are consistently exposed to high levels of noise – in excess of 85 decibels (dBA) – over an extended period of time.

Statistics regarding these diseases are provided for the operations in the table above.

DRDGOLD's occupational health strategy has two pillars: trying to eliminate or reduce the cause of health problems and regular medical monitoring of employees, particularly those most at risk, in an effort to prevent such problems occurring, and to detect symptoms as early as possible. (See case study: *Improving occupational health care at Blyvoor*, on page 21.)

Addressing the causes of health problems

In terms of NIHL, a baseline occupational hygiene audit was conducted at all operations during 2007, and project planning for

the implementation of a hearing protection programme is under way. Major focus areas during the year under review have included a programme to reduce the sound level of rock drills and fans, and reinforcing procedures regarding the use of hearing protection devices which are provided to all employees exposed to high levels of noise. Another 20% of all rock drills at Blyvoor were muffled to bring the percentage for 2009 to 95%. This procedure reduces sound levels by approximately 10dBA. In addition, 90% of all fan installations at this mine have been silenced. The installation of mufflers was planned to start at ERP M in October 2008 – the month in which the operation was placed on care and maintenance.

The fact that ERP M has been placed on care and maintenance means that no water is being used underground to allay dust. This means that when employees are required to go underground, they are issued with respirators. The installation of foggers to reduce dust at the tips at Blyvoor is being investigated.

Managing health care

Occupational health care at DRDGOLD, which forms part of the company's broader health care programme, makes provision for initial, periodic and exit medical examinations. Employees are screened for heat tolerance, NIHL and TB. The treatment for TB is in line with that prescribed by the World Health Organisation (WHO). Statutory records are kept and compensation claims submitted to the Medical Bureau for Occupational Diseases (MBOD).

At Blyvoor, health care has been outsourced to Healthshare Health Solutions since 2005. Primary health care is available 24 hours a day at two on-mine clinics. Secondary and tertiary health care is available to Blyvoor employees at the Gold Fields West Hospital in Carletonville. The mine subsidises the cost of this service.

Medical surveillance examinations in 2009

	Blyvoor	Crown	ERP M	Total
Initial	644	598	231	1 473
Periodic	3 307	823	543	4 673
Exit	185	267	1 401	1 853
Total	4 136	1 688	2 175	7 999



Safety and health *(continued)*

All employees at Crown are covered by a medical aid scheme. An occupational health clinic is staffed by a full-time occupational health practitioner and a part-time doctor.

Health care at ERPM was outsourced to Life Healthcare until the end of February 2009 when the operation was placed on care and maintenance. Since March health care has been provided at an on-site clinic where there is a full-time sister and a part-time doctor on duty.

HIV & AIDS

DRDGOLD recognises that HIV & AIDS is a serious threat to the well-being of employees, the company and the industry. The average prevalence level in the mining industry in South Africa is reported to be approximately 30%.

While acknowledging that there is no simple way to counter this threat, DRDGOLD's strategy includes the following:

- actively driving awareness programmes at each operation;
- involving all stakeholders in a multi-faceted approach to educate employees and their dependants to prevent the incidence of HIV & AIDS;
- the development of wellness programmes for employees;
- providing confidential, informed voluntary counselling and testing (VCT);
- providing appropriate medical care to employees suffering from HIV & AIDS; and
- giving terminally ill employees the opportunity to live the rest of their lives with dignity.

Managing HIV & AIDS

The management of the disease at DRDGOLD operations is based on preventing people from getting the disease and on providing treatment when they are found to HIV-positive.

At Blyvoor, a joint management/union initiative, known as Project Tsietsi, was established in 2008 and conducts awareness campaigns relating to HIV & AIDS, including the holding of education sessions and the use of posters. The mine's wellness programme encourages

a healthy lifestyle and a health awareness day was held during the year.

Crown is a participant in a three-year HIV awareness campaign which is run by accredited education and training service provider Redpeg (a company owned and managed by black women) in collaboration with the government.

Wellness days were held every quarter at ERPM, with HIV & AIDS and TB alternating as the topics.

Condoms are dispensed by the on-mine clinics at Blyvoor and the medical station at Crown, where dispensers are placed in the change houses. At ERPM, every shaft, recreation place and all change houses had condom dispensers and condoms were distributed on wellness days.

Blyvoor employees are encouraged to go for VCT at the clinics. When employees at Crown request assistance, VCT is recommended.

Medication for opportunistic infections is available at the Blyvoor clinics and patients are referred to a private practitioner in Carletonville for anti-retroviral therapy (ART) when this is medically indicated.

The total cost of Blyvoor's HIV & AIDS programme is between R800 and R1 000 per person per month.

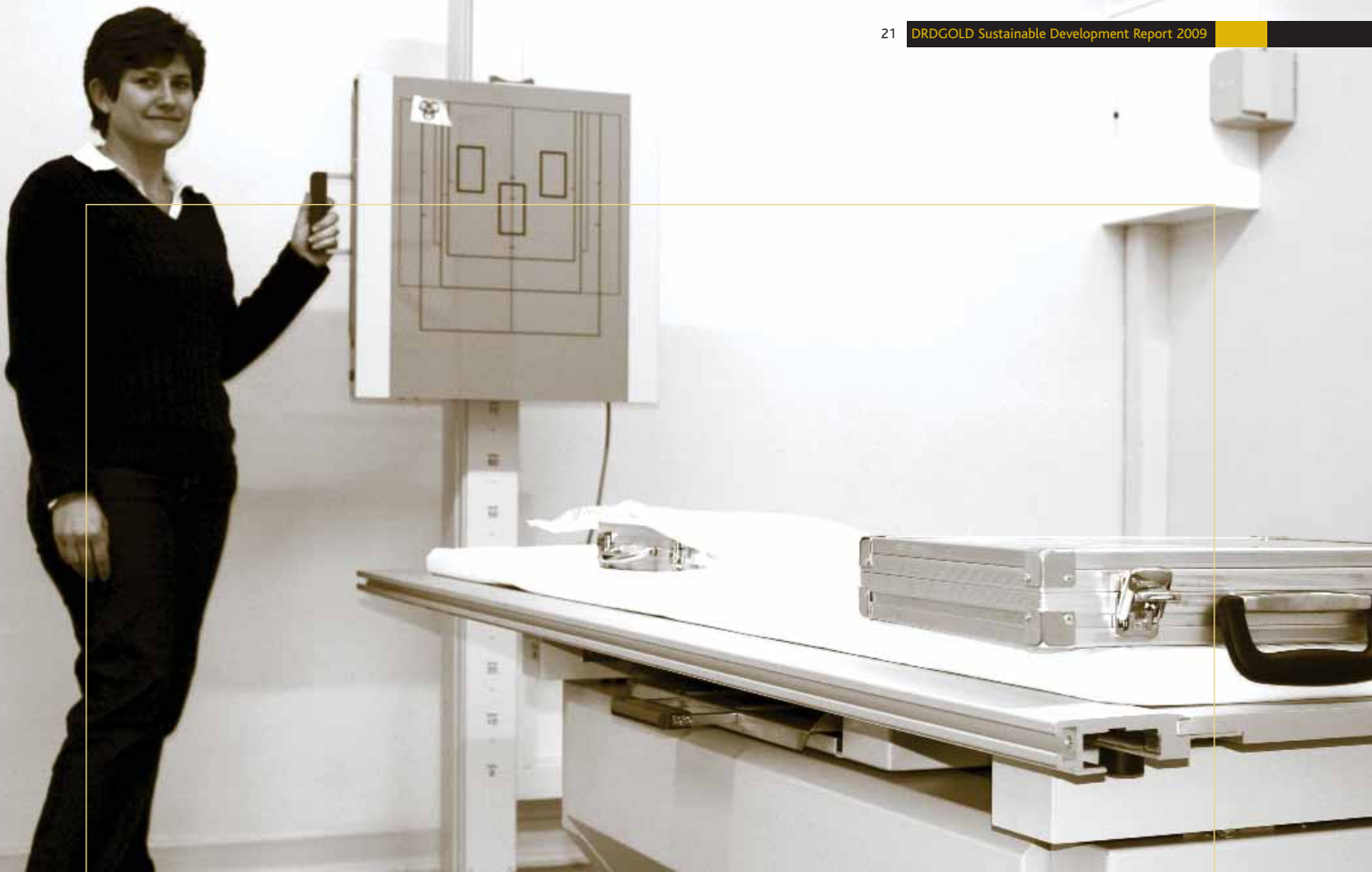
As Crown employees do not live on site and are covered by a medical aid scheme, they attend private or government clinics/hospitals and the operation does not keep their medical records. It is therefore not possible to give an estimate regarding the number of employees on ART or the costs associated with this.

Crown and corporate office support the AIDS Week Bannerthon when the business community in South Africa shows its solidarity with HIV & AIDS sufferers and helps to raise money for Aids orphans.

ERPM donated the premises for the Khotso-Caritas Care Home, which offers a wide range of treatment to employees and people from the wider Ekurhuleni area. This includes VCT, a wellness programme and free ART. See the Community section of this report for further information about this facility.

HIV & AIDS statistics

Aspect	Blyvoor		ERPM	
	2008	2009	2008	2009
VCT attendance	64	91	2	85
Employees on ART (Blyvoor); referrals for ART (ERPM)	169	102	-	40



Improving occupational health care at Blyvoor

Together with service provider Healthshare, which manages the operation's primary and secondary health care, Blyvoor is in the process of improving the standard of health care given to employees.

Phase 2 of the renovation of the old A J Orenstein Hospital, now known as the Blyvoor Occupational Health Centre, is under way and is expected to be finalised by the end of September 2009.

As part of this phase, Healthshare has installed an X-ray machine and employed a fully qualified radiographer, Madelein Felix (above), who joined Healthshare Contracts Executive Caroline Green and her team of 12 occupational health professionals during June 2009. "The medical facilities at Blyvoor have made it much easier for patients to have access to the medical care they require and have significantly reduced travelling expenses," Madelein explained.

Since December 2008, the number of employees using the clinic has increased substantially which has contributed towards the prevention of unnecessary hospitalisation.

The occupational health care centre offers the full spectrum of primary health care including an HIV & AIDS programme. In support of this programme, Healthshare has appointed a wellness co-ordinator which has resulted in a greater level of awareness on the mine and increased the number of employees receiving VCT.

Other health services available on site include audiology, lung function tests, TB X-rays and the admission of directly observed therapies. As part of DRDGOLD's Employee Assistance Programme (EAP), employees now also receive trauma counselling and marital guidance. Those requiring these services are referred to the nearby Leslie Williams Hospital.

Employee Relations Superintendent Paul Leenderts commented: "Blyvoor remains committed to ensuring the health and safety of each and every employee. We are in no doubt that through Healthshare our employees are in capable hands."