

SENTRAAL / CENTRAL KAROO

DISTRIKSMUNISIPALITEIT / DISTRICT MUNICIPALITY

**AFDELING
MUNISIPALE GESONDHEID**

**SECTION
MUNICIPAL HEALTH**

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JAN. 2018

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TABLE OF CONTENTS

	Pg nr.
Doel van ons Nuusbrief.....	2
MHS in the Central Karoo District.....	3
Achieve human rights step-by-step.....	4
National Norms & Standards for domestic water & sanitation.....	5
Water Safety Plans.....	6
Monitoring of water quality failures.....	6
Jaw dropping facts about South Africa's water crisis.....	6
Grey water re-use.....	7
Important when having a waste transfer station.....	8
Storage receptacles at point of waste generation.....	8
Reducing health risks to workers handling human waste	9
 SALGA WC Working Group: Human Settlements & Municipal Planning.....	 10
Taking action on Climate Change can strengthen public health.....	11
Indoor & Outdoor Air Quality.....	11
Prov. & Mun. Planning Workshop – Shale Gas Development in the Central Karoo District.....	12
Air Quality Monitoring in the Central Karoo District.....	13
Chemical Management makes good neighbors.....	13
Uitreiking van Geskiktheidsertifikate vir Voedselpersele	13
Voëlgriep in die Wes-Kaap.....	14
Legionella.....	15
By-Wette vir Munisipale Gesondheid & Lugkwaliteit.....	16
H & H Training Programme for Informal Settlements.....	17
Nasionale Oudit van Munisipale Gesondheidsdienste....	17
Challenges / Issues posing health risks in the CKDM.....	18



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DOEL VAN ONS NUUSBRIEF

Hierdie nuusbrieff aan Kategorie B-Munisipaliteite in die Sentraal Karoo Streek stel dit ten doel om:

- Die doelwitte van die Afdeling in die daarstelling van gesondheidsveilige omgewing te bevorder;
- Kommunikasie en samewerking in sake van gemeenskaplike belang tussen die Afdeling en Kategorie B-Munisipaliteite in die Streek te bevorder; en,
- Inligting te deel aangaande sekere gemeenskaplike aangeleenthede in die Streek.

WHY SHOULD WE CARE FOR THE ENVIRONMENT?

Because caring for the environment will ensure:

- A healthier future for our children;
- The earth's resources that support plant and animal life will be sustained;
- A healthy and clean environment to live, work and play in.



HEALTH



-a state of complete physical, mental, social, and emotional well-being and not merely the absence of disease or infirmity and the ability to lead a socially and economically productive life (WHO, 2002)

Health & Community and Environmental Health

ENVIRONMENTAL HEALTH



- comprises those aspects of human health that are determined by physical, chemical, biological, social, and psychosocial factors in the surrounding environment

Health & Community and Environmental Health

DIE GRONDWET VAN DIE REPUBLIEK VAN SUID-AFRIKA BEPAAL DAT ELKE LANDS-BURGER DIE REG HET OP 'N OMGEWING WAT NIE SKADELIK VIR SY / HAAR GESONDHEID OF ALGEMENE WELSYN IS NIE

MUNICIPAL HEALTH SERVICES IN THE CENTRAL KAROO DISTRICT

The Central Karoo District Municipality is sanctioned by legislation to provide Municipal Health Services within its area of jurisdiction.

Municipal / Environmental Health is a fundamental public health approach affecting the whole population and services provided by Environmental Health Practitioners (EHP's) are essential elements in building a healthy population.

Our residents have high expectations in respect of environmental / municipal health management and must this be dealt with in a structured and efficient manner in order to ensure:

- A good relationship between the municipality and its inhabitants with a collective responsibility for the environment;
- That the quality of the environment with regard to air, water and land will increase; and
- That all communities live in an environment that is beneficial to their health.

The National Health Act, 2003 (Act 61 of 2003) defines Municipal Health Services as Environmental Health. In terms of Section 1 of the Act Municipal Health Services are defined as Water Quality Monitoring, Food Control, Solid Waste Management and Monitoring, Health Surveillance of Premises, Supervision and Prevention of Communicable Diseases, excluding immunisations, Vector Control, Environmental Pollution Control, Disposal of Human Remains and the Safe handling of Chemical Substances.

Currently the Municipality is implementing the full service as defined by the Health Act, 2003

(Act 61 of 2003) throughout the Central Karoo District.



Services are rendered in ten (10) communities in the Central Karoo Region, namely Murraysburg, Beaufort West, Nelspoort, Merweville, Prince Albert, Leeu-Gamka, Klaarstroom, Prince Albert Road, Laingsburg and Matjiesfontein, as well as in the rural areas of the Murraysburg, Beaufort West, Prince Albert and Laingsburg Districts.

The staff component consists of five (5) Environmental Health Practitioners (EHP's) and one (1) Community Year EHP. Four (4) EHP's are employed at our Head Office in Beaufort West and one (1) in our Laingsburg Office



To fulfil the constitutional and legal obligations mandated to sectors responsible for provision of EH services, the availability of qualified and skilled EHPs is key to provide and facilitate comprehensive, pro- active and needs-related services to promote a safe, healthy and clean environment and prevent diseases.

In terms of the National Environmental Health Policy, in to render effective EHS in the country, it is required that one EHP be provided for every 10 000 members of the population.

EHP's act as public arbiters of EH standards, maintaining close contact with the communities they serve. They act as advisers, educators, consultants, managers and enforcement officers (enforcing health policies), ensuring people are able to live, work and play in safe, healthy environments.



ONS DOELSTELLINGS...

- Om 'n ontwikkelingsgerigte, prestasie-gedrewe diens op 'n volhoubare, billike, bekostigbare en verantwoordbare wyse aan ons Streek se inwoners te lewer;
- Dat alle inwoners in ons Streek toegang het tot inligting en kennis met betrekking tot munisipale gesondheidsdienslewering;
- Om 'n positiewe bydrae te lewer tot volhoubare fisiese en sosio- ekonomiese ontwikkeling en gemeenskaps-ontwikkeling binne die raamwerk van munisipale gesondheid te bevorder;
- Dat gemeenskapsgebaseerde projekte onderneem word ter bevordering van munisipale gesondheid; en, Dat toepaslike beleidsvoorskrifte effektief uitgevoer word.

ACHIEVE HUMAN RIGHTS STEP-BY-STEP



Our Constitution recognizes that government cannot fix all problems overnight.

But when it comes to unequal access to adequate housing, water, sanitation, food, a clean environment, and health care, government must move forward, not backward.

Government must plan to realise people's rights within their available resources, and carry out that plan step-by-step to improve people's enjoyment of their rights.

If government fails to make a plan, or leaves vulnerable people out of the plan, or later on ignores the plan they made, this is a violation of human rights.

The human rights obligations apply not just to local government administration, but to anyone local government has hired to deliver services to the public.

**THE GREATEST THREAT
TO OUR PLANET IS THE
BELIEF THAT SOMEONE
ELSE WILL SAVE IT.**

ROBERT SWAN

NATIONAL NORMS AND STANDARDS FOR DOMESTIC WATER AND SANITATION SERVICES: VERSION 3- FINAL DRAFT

The Minister responsible for water and sanitation has been called upon to develop norms and standards for equitable water services provision to households, which are aligned with the Strategic Framework for Water Services (SFWS), taking into account availability of water resources, financial challenges, geographical placement issues, servicing of vulnerable groups and addressing the backlog.

The document was prepared by the CSIR Built Environment team and is currently in a final draft format

After the introduction and definitions, the first part of the document (Part One) focuses on water components of water services and the second part of the document (Part Two) focuses on the sanitation and waste water components of water services. Part Three summarises the monitoring and reporting responsibilities and Part 4 conclude with a proposed plan of action in implementing the norms and standards for water and sanitation services.

Annexure A summarises the legislation impacting on water and sanitation services, Annexure B list the policies and strategies, and Annexure C provides a list of current guidelines and standards pertaining to water and sanitation services.

The actual delivery of the water and sanitation services, in accordance with the Constitution, is the responsibility of local government. According to the Strategic Framework for Water Services (SFWS) (DWAF, 2003), it is the

responsibility of a Water Services Authority (WSA) to ensure that “adequate and appropriate investments are made to ensure the progressive realisation of the right of all people in its area of jurisdiction to receive at least a basic level of water and sanitation services”; i.e. a universal service obligation (DWAF, 2003).

Meeting this universal service obligation requires that each South African has access to at least a basic water supply and a basic sanitation facility.

The norms and standards for levels of water services particularly draw on the principles of universal access, human dignity, user participation, service standards, redress, and value for money. The principles of sustainability, affordability, effectiveness, efficiency and appropriateness should be kept uppermost in supplying water to a community.

Cognisance is taken of the water scarcity context of the country, and as such reduction, re-use and recycling are common themes that underpin the norms and standards.

The effectiveness of the services towards the protection of public health and the greater economic development agenda of the country also receives firm attention.

We waste water needlessly and don't realize that clean water is a very limited resource. More than 1 billion people around the world have no access to safe, clean drinking water, and over 2.5 billion do not have adequate sanitation service.



WATER SAFETY PLANS: IS YOUR MUNICIPALITY'S PLAN IN PLACE?

The WHO has identified that the most effective means of consistently ensuring the safety of a drinking-water supply, is through the use of a comprehensive risk assessment and risk management approach, which encompasses all steps in the water supply system, from catchment to consumer.



Water Safety Plans are a powerful tool for the drinking-water supplier to manage the supply safely.

They are also valuable to also assist surveillance of water supply safety by public health authorities (e.g. EHS).

The Water Services Act and subsequent Strategic Framework on Water Services 2008 require that WSAs have Water Safety Plans in place; which must ideally be developed by multi-disciplinary team of experts, e.g. Engineers, Planning Officers, Architects, Infection Control Coordinators, Occupational Health and Safety, standard setting bodies, as well as public health or hygiene professionals.

**"The greatest vaccine
against disease
and death is ...
safe drinking water !"**
(Lifewater)

MONITORING OF DRINKING WATER QUALITY FAILURES

In terms Section 5(4) of the Water Services Act, 1997(Act No. 108 of 1997), "should



the results of the water samples taken by WSA's or WS's indicate that the water supplied poses a health risk, the WSA or WSP must inform the Director-General of the Department of Water Affairs and the head of the relevant Department of Health and also must take steps to inform the consumers:

- That the quality of water that it supplies poses a health risk.
- Of the reasons of the health risk.
- Of any precautions to be taken by consumers.
- Of the time frame, if any, within which it may be expected that the water of a safe quality will be provided.

FOUR JAW DROPPING FACTS ABOUT SOUTH AFRICA'S WATER CRISIS

37% OF OUR DRINKABLE WATER IS BEING LOST, NEEDLESSLY

South Africa is losing the equivalent of 4.3 million swimming pools of water a year because of leaky pipes and theft.

The water loss reportedly cost South Africa around R7.2bn a year.

IT IS PREDICTED THAT SOUTH AFRICA'S WATER DEMAND WILL OUTSTRIP ITS SUPPLY BY 2030

The 2030 Water Resources Group, of which the Water Affairs department is a member, has

calculated that, by 2030, the demand for water will exceed supply by 17%

WATER-SHEDDING IS A REALITY

This measure was introduced in late 2016 – before we saw any of the recent rainfall. South Africans would now need to learn to adapt to having limited supplies of water throughout the day, until the minimum saving of 15% per metropolitan was achieved.

Ekurhuleni was off the target badly – having only saved close on 5% in the first month of implementation. We are not seeing reduced water pressure and a complete shut-off of water between (usually) 9pm-5am on a rotational basis between areas.

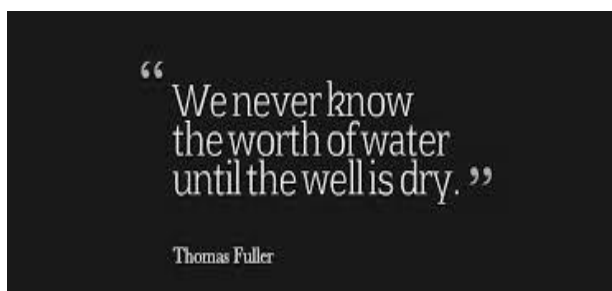
THE WORST DROUGHT IN OVER TWO DECADES

In May 2014, it was predicted that 2014 was set to be the biggest harvest since 1981. It was predicted that 13.5 million tons of maize would be harvested by end of the season. Well, 10 months later and the worst drought since 1992 we end up in a situation where we have to import maize due to the volatile climate we are experiencing now.

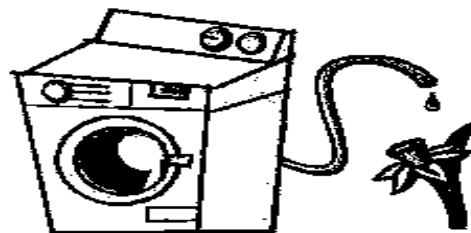
The effects are far-reaching, disastrous and frightening.

Ready to shorten that shower and not fill the pool?

Source credit: jamiat.org



GREYWATER RE-USE...



- Greywater re-use shall not contravene the National Health Act (No 61 of 2003), or allow greywater to create a nuisance, which is defined as fly/mosquito breeding, objectionable odours, the surface ponding of water and/or the entry of polluted water onto a neighbouring property.
- Greywater re-use shall be contained within the boundaries of the property/yard of the user.
- Greywater may be used for small-scale irrigation under low pressure that does not exceed 6 meters head at the sprinkler to prevent atomising of contaminants.
- The use of phosphate free washing powders shall be advocated when greywater is used for irrigating gardens.
- Successful implementation of greywater re-use requires that the concept and practices are accepted and supported by the general public. This acceptance becomes important especially related to water quality and costs. The public should be willing to encourage, support, and apply such projects even when reasonably extra costs are required. Therefore, an effective and sustained communication drive shall be implemented to raise awareness and increase users' knowledge about the benefits of greywater re-use. This communication programme shall accommodate the users' socio-cultural

traditions and beliefs; needs and expectations.

- Where greywater is re-used, users must receive technical training on how to use and maintain on-site greywater treatment systems.

IMPORTANT WHEN HAVING A WASTE TRANSFER STATION IN YOUR MUNICIPAL AREA...



Waste transfer stations must be equipped with the following:

- A suitable enclosure to prevent unauthorized entry and to ensure windblown waste is contained.
- A controlled entry gate to prevent unauthorized entry.
- Adequate equipment required for the operation of the station.
- A person in charge and personnel to administer and manage the facility during operational times.
- Sanitary facilities as prescribed in Part F of the National Building Regulations and

National Building Standards Act, 1977 (Act No. 103 of 1977) SANS 10400.

- Wind screens to protect blowing papers, where necessary.
- Water sprays to control dust, where necessary.

STORAGE RECEPTACLES AT POINTS OF WASTE GENERATION

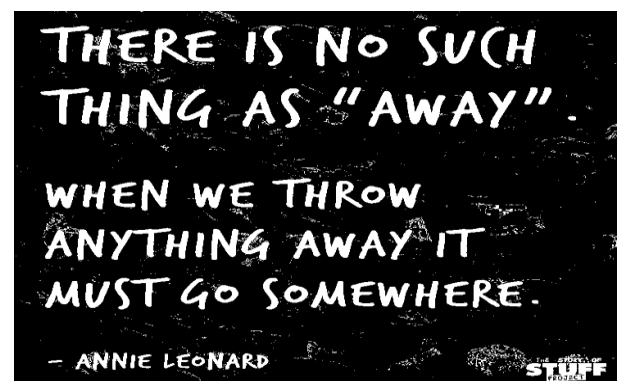
Most municipalities do not provide waste receptacles to all waste generators, especially the indigent households who cannot afford to buy such receptacles for themselves.

This lack of receptacles may result in littering and illegal dumping as people seek to clear their households of the accumulated waste.

SOLUTION:

Provision should be made to provide households with receptacles, especially indigent households who cannot afford to pay for such receptacles.

Please note that the Policy for providing indigent households with basic waste removal services has been approved by parliament and as such Treasury has made financial allocations to enable municipalities to implement this service.



REDUCING HEALTH RISKS TO WORKERS HANDLING HUMAN WASTE OR SEWAGE

Workers who handle human waste or sewage may be at increased risk of becoming ill from waterborne diseases. To reduce this risk and protect against illness, such as diarrhea, the following guidance should be followed by workers and employers

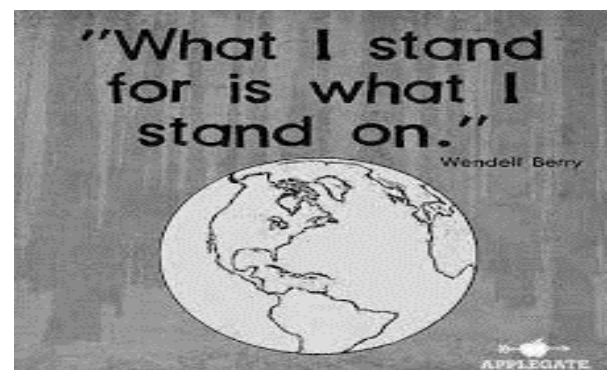


BASIC HYGIENE PRACTICES FOR WORKERS

- Wash hands with soap and water immediately after handling human waste or sewage.
- Avoid touching face, mouth, eyes, nose, or open sores and cuts while handling human waste or sewage.
- After handling human waste or sewage, wash your hands with soap and water *before* eating or drinking.
- After handling human waste or sewage, wash your hands with soap and water *before* and *after* using the toilet.
- Before eating, removed soiled work clothes and eat in designated areas away from human waste and sewage-handling activities.

- Do not smoke or chew tobacco or gum while handling human waste or sewage.
- Keep open sores, cuts, and wounds covered with clean, dry bandages.
- Gently flush eyes with safe water if human waste or sewage contacts eyes.
- Use waterproof gloves to prevent cuts and contact with human waste or sewage.
- Wear rubber boots at the worksite and during transport of human waste or sewage.
- Remove rubber boots and work clothes before leaving worksite.
- Clean contaminated work clothing daily with 0.05% chlorine solution (1 part household bleach to 100 parts water).

CUSTOMERS DON'T EXPECT YOU TO BE PERFECT. THEY DO EXPECT YOU TO FIX THINGS WHEN THEY GO WRONG.



**SALGA WESTERN CAPE WORKING
GROUP MEETING: HUMAN
SETTLEMENT AND MUNICIPAL
PLANNING PROVINCIAL WORKING
GROUP – 15 AUGUST 2017**

During the above mentioned Working Group meeting Ms Engela Petzer presented the revision of the Human Settlements Guideline (Red Book) which is conducted by the Council for Scientific and Industrial Research (CSIR).

The Department of Human Settlements (DHS) contracted the CSIR to revise the Guidelines.

The Guidelines for Human Settlement Planning and Design provides practical guidance to municipalities, built environment practitioners, communities and residents on how to achieve sustainable human settlements and to improve decision-making support regarding the provision of settlement services.

The current guide is in use for the last 20 years and the need for the revision of the Red Book emanated because of the spatial challenges the country is experiencing in terms of dysfunctional and inequitable settlement patterns; lack of basic service infrastructure in some areas and rapid urbanization

The revision aims to address matters such as settlement development types and consultation processes which are occasionally neglected as part of the service provision.

The general outcomes from consultations is that the guideline should address issues comprehensively to understand the basics and key principles on the levels of service. Further proposals to the revision of the guideline include amongst others that:

- It should respond to the needs of communities in terms of the context of the area;
- There is a paradigm shift in the minds of built environment practitioners - decisions are taken with the people.
- The guide should provide technical design guidance and provide options and implications.
- It should provide support in making decisions regarding options (designs, technologies etc.)

A new section will form part of the guideline which will cover Human Settlements, different types of housing for different typologies (Informal settlement and backyard shack upgrading) and cross-cutting issues such as climate change, resource efficiency, technological innovation, settlement economies/job creation.

Movement patterns of people and migration, either due to economic situations or otherwise and how municipalities can address this, was proposed to be included in the revision process.

The Guidelines is assisting municipalities with planning and design of human settlements and is available on the following link for municipal use:

<https://www.dropbox.com/sh/7wjfo7ml6o299xx/AADZux4rutrRPLT26BpxCGwJa?dl=0>.

SALGA will consult municipalities when the draft document is available for consultation.

DID YOU KNOW? ... BY TAKING ACTION ON CLIMATE CHANGE YOU CAN STRENGTHEN PUBLIC HEALTH

By placing health and climate change considerations at the centre of urban policies and design, we can create safer, fairer, and more prosperous communities

WHAT CAN LOCAL AUTHORITIES DO ABOUT IT?

Addressing the health impacts of climate change provides an opportunity for the integration of public health and climate change knowledge. Integration requires reciprocal understanding of terminology, goals and methods. Beyond this, it requires working together to achieve the goal of reducing deaths, disease and disabilities.

As policy-makers, you can use your powers to institutionalize the changes.

- You can insist that all new housing meets minimum environmental standards and that all transport meets certain standards that protect health and the environment.
- You could introduce traffic-reducing measures such as congestion charges, bicycle lanes and park-and-ride to limit CO2 emissions.
- You can also ensure that jobs and shops and other services are close enough to housing that people do not have to use their cars.
- You can create and maintain green spaces.



INDOOR & OUTDOOR AIR QUALITY

The World Health Organisation (WHO) states that poor quality air affects more than 80% of the world's population.

A polluted environment results in a heavy toll on the health of our children. Investing in the removal of environmental risks to health, such as improving water quality or using cleaner fuels, will result in massive health benefits.

Bad environments are responsible for one in four deaths among all children under five, according to new World Health Organisation reports, with toxic air, unsafe water, and lack of sanitation the leading causes.

The reports found polluted environments cause the deaths of 1.7 million children every year, but that many of the deaths could be prevented by interventions already known to work, such as providing cleaner cooking fuels to prevent indoor air pollution.

“A polluted environment is a deadly one, particularly for young children,” said Dr Margaret Chan, director-general of the WHO. “Their developing organs and immune systems – and smaller bodies and airways – make them especially vulnerable to dirty air and water.”

PROVINCIAL AND MUNICIPAL PLANNING WORKSHOP – SHALE GAS DEVELOPMENT IN THE CENTRAL KAROO

On 6 July 2017 a workshop was held in Beaufort West, hosted by the Western Cape Department of Environmental Affairs and Development Planning (DEA&DP).

The purpose of the BW workshop was to discuss the readiness of government to respond to an increase in demand for services in the Central Karoo area, in the event that the various existing regional development proposals (such as shale gas development and other major mining/industrial related developments) come to fruition.

The workshop discussions on readiness only focused on the likely development scenarios for the next 5 to 10 years. It was emphasised that the hosting of the workshop must not be regarded as support for these developments prior to the finalisation of any regulatory decision making process

The workshop was attended by multiple stakeholders and various organs of state across all three spheres of government.

THE FOLLOWING OVERALL WORKSHOP OUTCOMES ARE HIGHLIGHTED:

- It was agreed that a follow-up workshop is required to continue the initial discussions that was held at this workshop. Whilst these initial discussions were valuable, follow-up discussions will be required to facilitate more in-depth discussions on all the key issues. Such a second workshop must be organised within 5 months.
- In addition to taking responsibility for the write-up of the workshop proceedings, it

was agreed that DEA&DP will coordinate the process to use the workshop proceedings to start to draft Action Plans for all the major issues that were discussed during this workshop. Western Cape Government coordinators were selected for each grouping of issues. The draft Action Plans will form that basis for discussions at the proposed second workshop.

- The importance of partnerships across all spheres of government, across provincial boundaries and between sectors as a prerequisite for achieving the goal of improved readiness was also emphasised. All relevant organs of state will again be invited to attend the second workshop.
- Once available the draft Action Plans will be distributed to all the participants of the Beaufort West Workshop to allow for preparation of the proposed second workshop.

DID YOU KNOW?

An estimated 12.6 million people died as a result of living or working in an unhealthy environment in 2012 – nearly 1 in 4 global deaths.



Environmental risk factors such as air, water and soil pollution, chemical exposures, climate change, and ultraviolet radiation contribute to more than 100 diseases and injuries.



AIR QUALITY MONITORING IN THE CENTRAL KAROO DISTRICT

With the proposed uranium mining and the shale gas development scheduled to take place in the CKDM, it is necessary to establish the criteria pollutant levels before any mining activities take place.

An advertisement has been placed in order to get a service provider to develop and conduct an Ambient Air Quality Baseline Study in the Central Karoo District Municipality.

This information would form a scientific basis to determine if the mining and shale gas developments impact on the air quality and the environment in the CKDM.

The service provider is required to develop an air quality monitoring sampling network with the CKDM Air Quality Officer and provide sampling equipment to conduct the Baseline Study.



TODAY, EDUCATION IS PERHAPS THE MOST IMPORTANT FUNCTION OF STATE AND LOCAL GOVERNMENTS.

BOBBY SCOTT

CHEMICAL MANAGEMENT MAKES GOOD NEIGHBORS

When it comes to chemical management and the dissemination of critical safety information to employees, municipalities have a special challenge.

Not only must they meet the letter of the law in regard to OSHA and EPA compliance, they must also uphold the public trust – which means being a model of safety and compliance best practice.

Rightly or wrongly, citizens hold municipalities to a higher standard. The risk and liability government municipalities shoulder is also greater.

Unfortunately, safety professionals in these settings have fewer resources at their disposal and must contend with greater bureaucracy. It can create a lose-lose proposition.

UITREIKING VAN GESKIKTHEID-SERTIFIKATE AAN VOEDSELPERSELE

Die Afdeling Munisipale Gesondheid van die Sentraal Karoo Distriksmunisipaliteit staan ingevolge Regulasie 962 van 2012 onder 'n wetlike verpligting om Geskiktheidsertifikate aan voedselpersele uit te reik indien daar aan die gestelde minimum standaarde voldoen word.

Die uitreiking van sodanige sertifikaat deur die Afdeling sertifiseer slegs dat die inrigting, fasiliteit of onderneming aan die gestelde gesondheidsvereistes voldoen en impliseer dit nie dat die perseel voldoen aan wetgewing en / of ander gestelde vereistes rakende boubeheer, dorpsbeplanning, brandweer, handelslisensies ens. wat deur Kategorie B-Munisipaliteite gereguleer moet word nie.

VOËLGRIEP IN DIE WES-KAAP

Voëlgriep was gedurende Augustus / September 2017 in sekere dele van die Wes-Kaap Provinsie gerapporteer, waarvan ook 'n gerapporteerde geval van wilde voëls in die Merweville-distrik



Voëlgriep is 'n virus infeksie wat gevind word in pluimvee, voëls, eende, volstruise ens. waarvan die risiko vir infeksie met voëlgriep by die mens egter baie laag is, uitgesluit mense wat werk met dié geïnfekteerde diersoorte, gesond, siek, of dood.

Die Afdeling was gedurende September 2017 in telefoniese verbinding met onder andere Mnr. Eddie Hanekom van die Wes-Kaap Departement Omgewingsake & Ontwikkelingsbeplanning se Direktoraat Afvalbestuur betreffende die voorgestelde maatreëls met die hantering van enige bevestigde geval(le) van voëlgriep in die Sentraal Karoo Streek.

IN GEVALLE WAAR ENIGE VAN DIÉ DIERSOORTE POSITIEF GEDIAGNOSEER IS MET VOELGRIEP, WORD DIE VOLGENDE WERKSWYSE VOORGESKRYF TEN OPSIGTE VAN DIE VEILIGE BEHANDELING / Vernietiging / Wegdoening van dié diere:

- 'n Aansoekvorm vir bogenoemde moet verkry word by die Wes-Kaapse Departement Omgewingsake &

Ontwikkelingsbeplanning se Direktoraat Afvalbestuur.

- Kontakpersoon by die betrokke Direktoraat is Mnr. Lance McBain-Charles, Selnommer [073 185 9981](tel:0731859981) of e-pos adres Lance.McBain-Charles@westerncape.gov.za
- Die betrokke aansoekvorm spreek die voorgestelde prosedure(s) en metode(s) van behandeling / wegdoening / vernietiging aan.
- Aansoeke word oorweeg deur verskillende Departemente soos bv. Departement Omgewingsake (Afvalbestuur / Lugkwaliteit), Departement Landbou ens.

OM VERDERE VERSPREIDING TE VOORKOM, WORD DIT AANBEVEEL DAT:

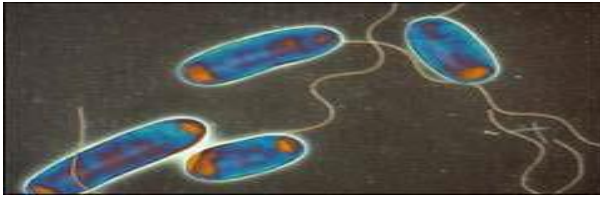
- Geïnfekteerde diere in oorleg met die staatsveearts gedood word.
- Geen geïnfekteerde diere vervoer word nie.
- Diere op die plek van aanhouding (daar waar hul dood is) gehou word en daarmee gehandel word soos voorgeskryf deur die Direktoraat, na aanleiding van die aansoek ontvang.

Moontlike metode(s) van hantering kan kompostering of verbranding ens. insluit - onder die gestelde voorwaardes van die Direktoraat.

Vir enige verdere navrae is u welkom met met Mnr. McBain-Charles, by die bovermelde kontakbesonderhede, in verbinding te tree.

LEGIONELLA

WHAT ORGANISM CAUSES LEGIONNAIRES DISEASE?



Legionnaires' disease, also called Legionellosis is a lung infection, a form of pneumonia which can be fatal, caused by the *legionella* bacterium

WHERE DO LEGIONELLA BACTERIA COME FROM?

Legionella bacteria commonly exist in rivers and lakes, and some other water sources, generally in low numbers. Occasionally, they may get into artificial water supply systems, as may be the case with evaporative condensers associated with air conditioning and industrial cooling or anywhere where artificial water is being supplied or used.

Since this first recorded outbreak, experience has shown that cooling towers, evaporative condensers and hot and cold water systems in a wide variety of workplaces present a risk of exposure to *Legionella* bacteria.

Other systems have also been identified that can present a risk of exposure to these bacteria (including ultrasonic humidifiers and foggers, water misting systems, spray humidifiers, air washers, wet scrubbers, water softeners, emergency showers and eye wash sprays, sprinkler and hose reel systems, lathe and machine tool coolant systems, spa baths or saunas, horticulture misting systems, dental equipment, car-bus washes, indoor fountains and water features).

WHAT ARE THE FAVORABLE CONDITIONS FOR THE BACTERIA TO GROW IN?

Within the natural aquatic environment, the concentrations of *L pneumophila* are relatively low.

Once the water is transferred into man-made water reservoirs, the *Legionella* organisms proliferate because of favorable conditions. *Legionella* bacteria will multiply where one or more of the following conditions exist in a water system, namely:

- Warmer temperatures – this organism thrives between the temperatures of 20°C to 50°C. Cold-water systems above 20°C and hot water systems below 50°C are thus especially at risk.
- Stagnation – when there are redundant water pipes in a building or lengths of pipe with blind ends or where taps are not used frequently – all this can produce stagnant water which allows *Legionella* to thrive and multiply.
- Sediment – this usually occurs in water tanks or boiler tanks. Over time there is a buildup of sediment which favors the survival and multiplication of *Legionella*.

HOW DO PEOPLE CONTRACT LEGIONELLA?

You cannot catch Legionnaires' disease from other infected people.

Legionella is transmitted to humans via inhalation of colonized aerosols or droplets, which are produced by air conditioners, cooling towers and condensers, water fountains, shower heads, faucets, whirlpools, ice machines, spas, nebulizers, and humidifiers. Legionnaire's disease strikes vulnerable people (immuno-compromised),

especially the elderly and those with other underlying medical conditions, the hardest.

WHAT ARE THE SIGNS AND SYMPTOMS OF LEGIONNAIRES' DISEASE?

Legionnaires' disease may be hard to diagnose at first because its signs and symptoms may be very similar to other forms of pneumonia.

Signs and symptoms usually appear between 3 to 6 days after initial infection; more rarely it may be just 2 days or up to 10 days. Signs and symptoms of Legionnaires' disease typically include:

- a high fever
- chills
- a cough
- muscle aches
- headaches

In some cases there may be an initial stage during which the patient experiences just muscle aches and a mild headache, before the other signs start to appear a couple of days later.

When more severe symptoms appear, the fever will be high. The muscle pains often get worse, and the patient starts to have chills. If the bacteria get into the patient's lungs, which often occurs, there may be a persistent cough, shortness of breath and chest pains. The cough may be dry at first, but can eventually have a lot of mucus and even blood as the infection develops.

WHAT TREATMENT OPTIONS ARE AVAILABLE?

Air condition systems need to be constructed, run and maintained according to the guidelines set out in the new standards.

- Water systems should be maintained at 20°C for cold water and 50°C for hot water.
- Stagnant systems should be flushed regularly.
- Water tanks and boilers should be cleaned to remove all sediment once a year.
- Chemical biocides can be used to kill Legionella in potable and air conditioning water systems.
- Systems should be treated for scale and corrosion by using inhibitors in order to reduce the likelihood of scale and deposits that will favor the growth of organisms.

BY-WETTE

Die Afdeling is tans besig met die finalisering van sy konsep by-wette vir munisipale gesondheidsdienste en asook lugkwaliteitsbestuur.



Daar word beoog om die betrokke by-wette in die 2017/18 finansiële jaar te finaliseer en af te kondig. Die betrokke By-wet vir munisipale gesondheid sal die een vervang wat gedurende 1999 afgekondig was.

"If you think you are
too small to be effective,
you have never been in bed
with a mosquito."

- Bette Reese

For other words of wisdom, click on the Quotations tab at:
www.TheGreenSpotlight.com

HEALTH & HYGIENE TRAINING & EDUCATION PROGRAMME FOR INFORMAL SETTLEMENTS IN THE CENTRAL KAROO DISTRICT



A Project Proposal was drafted and send to the Department Human Settlements during December 2017.

Environmental education is not only about gaining knowledge of environmental issues - it goes deeper to the motivation behind our actions. Nurturing values, such as 'care', 'respect' and 'responsibility', are an equally important aspect of environmental education.

The objective of this Programme is to educate and empower people staying in informal settlements to help them to:

- Address the dignity of these communities;
- Improve the health and hygiene conditions of informal households and to create a healthy environment;
- Change negative behavioral patterns towards health and the environment;
- Reduce the exposure of residents to diseases; and
- To identify other positive actions.

NASIONALE OUDIT VAN MUNISIPALE GESONDHEIDSDIENSTE



Twee-en-vyftig (52) owerhede, verantwoordelik vir munisipale gesondheidsdienste, was deur die Nasionale Departement van Gesondheid gedurende Januarie 2016 ge-oudit.

Drie-en-twintig (44%) van die owerhede het die betrokke oudit geslaag, met nege-en-twintig (56%) van die owerhede wat nie die oudit-slaagpunt kon bereik nie. Die hoogste nasionale oudit-persentasie behaal was 75% en die laagste 10%.

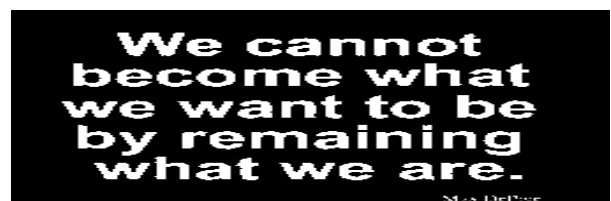
Die hoogste persentasie behaal in die Wes-Kaap is 57% en die laagste 43%.

Hoewel die Afdeling Munisipale Gesondheid van die Raad redelik goed in gevaar het met 'n oudit-persentasie van 54% in vergeleke met die gegewe oudit uitslae, was daar baie ruimte vir verbetering.

In 'n opvolg-oudit van die Departement gedurende Oktober 2017 het die Afdeling 'n oudit-persentasie van 77% behaal. Die Departement is steeds besig met hul landwyse oudit en sal finale uitslae in 2018 ontvang word.

Die Afdeling is stelselmatig besig om die gestelde Norme & Standaarde in plek te kry, werksprosedures en –metodes, waar nodig, aan te pas, te implementeer ens.

Voldoening aan alle gestelde vereistes bied egter ook verskeie uitdagings, gegewe die Afdeling se personeel, finansiële & IT kapasiteit.



SOME CHALLENGES / ISSUES POSING HEALTH RISKS IN THE CENTRAL KAROO DISTRICT

TRANSNET COMMUNITIES & RURAL AREAS (FARMS)

Poor water quality, quantity & access to water affects the environment and human well-being. Water quality and socio-economic issues such as poverty, livelihoods, health, and equality are closely linked

It is essential for households to receive an adequate quantity of good quality water (at least 25 liters per person per day within 200 meters from a household) because water has an impact on many vital sectors of society, including nutrition, health, education and sanitation.



A lack of clean water is also correlated with the presence of diseases such as diarrhea and cholera

LANDFILL SITES NOT COMPLYING TO PERMIT CONDITIONS, LEGISLATIVE REQUIREMENTS / HEALTH STANDARDS

Not all municipal landfill sites are permitted and permitted sites do not always operate according to their permit requirements - Compliance to permit conditions is critical in mitigating the impacts of landfill sites.

Poorly operated landfill sites impact on the environment and can cause nuisances to

communities. Improper management of solid waste is one of the main reasons for environmental pollution and degradation in our communities.

The above mentioned may cause a negative visual impact, air pollution, vector breeding, the spread of infectious diseases & health risks.



Municipalities need to comply with applicable NEM:WA requirements & Norms & Standards, the Minimum Requirements for Waste Disposal by Landfill & SANS Codes for solid waste management and, where necessary, get technical assistance, provided by WC Directorate Waste Management, with the aim to improve the construction, management and operation of waste management facilities in the Central Karoo region.

Municipalities also need to look at good practice initiatives which have resulted in real improvements to the way that waste is managed in other communities. In so doing, our municipalities may learn from these approaches and identify simple and innovative solutions to help solve some of their waste management problems in the short-term, as a first step towards implementing best practice waste management approaches.

The success of waste management services does not necessarily depend on the specific department where it is housed, but on other important issues including political stability

and support; a functional integrated planning process; rigorous financial management and procurement; senior managers and councilors with a good understanding of waste management issues; competent and dedicated waste managers implementing innovative schemes including reward schemes and a dedicated and motivated workforce.

LACK OF RECYCLING FACILITIES / REDUCE, RE-USE AND RECYCLING ACTIVITIES

Lack of Recycling facilities / Reduce, re-use and recycling activities result in a bigger waste stream to our landfill sites. The easier it is for communities to dispose of recyclables, the more likely they are to take part in the initiative.

More appropriate and sustainable approaches to waste needs to be adopted. To be sustainable municipalities need to move the emphasis toward a system that is local, community based, makes use of low tech / low energy systems and is focused on waste minimization.



The main messages of awareness campaigns must be: “Do not litter” and “Reduce, re-use and recycle” & payment for clean-ups must be decoupled from volumes of waste collected but should rather relate to cleanliness of the areas.

POLLUTION OF OPEN SPACES & COMMONAGE – ILLEGAL DUMPING OF WASTE IN & AROUND COMMUNITIES

General waste is one of the main reasons for environmental pollution and the degradation of our towns. It creates major environmental health problems; unpleasant smells; breeding of vectors; Injuries & assists in the spread of disease.



Clean-up campaigns do not succeed in changing behaviour and incentives associated with clean-up campaigns often reward bad behaviour. Paying for clean-up does not deal with the problem of illegal dumping & is job creation as a result of illegal dumping not sustainable. Although it has the potential, legislation and an enabling environment in itself also does not prevent illegal dumping practices.

An enabling environment includes the strategic provision of waste bins, waste collection services to all communities, alternative management options for specific conditions etc.

Illegal dumping can be eradicated through implementation of innovative waste streams and the enforcement of updated by-laws including the ability to issue spot fines for illegal dumping when caught in the act.

RAW SEWERAGE OVERFLOWING MANHOLES DUE TO BLOCKAGES

Wastes that are not intended for the sewer, may “choke” our system and leading to backflows of sewage.

Possible inadequate or negligent operation or maintenance, inadequate system capacity or improper system design and construction may also create such problems.



Residents are exposed through direct contact in areas of public access which may cause gastroenteritis, hepatitis, infection of skin or eyes etc.

It is therefore important that municipalities take the necessary steps in order to ensure that sewerage systems function effectively and ensure that the affected public area(s) are thoroughly cleaned and disinfected to reduce the risk of disease & conditions detrimental to the environment.

SANITATION BACKLOG: FARMS & SO-CALLED TRANSNET HOUSES (USE OF BUCKET SYSTEM AS ONLY SANITATION FACILITY)

Sanitation is a cornerstone of public health. A lack of proper sanitation may have a negative impact on public health, poverty, economic & social development & the environment.

Using proper toilets and hand washing - preferably with soap - prevents the transfer of bacteria, viruses and parasites found in human

excreta which otherwise contaminate water resources, soil and food. This contamination is a major cause of diarrhea, the second biggest killer of children in developing countries, and leads to other major diseases such as cholera, schistosomiasis, and trachoma.



Improving access to sanitation is a critical step towards reducing the impact of these diseases. It also helps create physical environments that enhance safety, dignity and self-esteem.

SLAUGHTERING OF ANIMALS FOR CULTURAL, RELIGIOUS & PRIVATE PURPOSES

Unsafe food containing harmful bacteria, viruses, parasites or chemical substances, causes more than 200 diseases – ranging from diarrhea to cancers.



Foodborne diseases impede socio-economic development by straining health care systems, and harming national economies, tourism and trade.

Municipalities must ensure that any person who wants to slaughter for the above

mentioned purpose, formally apply to the municipality and, before granting approval, refer such an application to the Section Municipal Health of the Central Karoo District Municipality.



An application form, available at the Section's offices, stipulating all the relevant details, must be completed by the applicant and submitted to the Section for evaluation and consideration. After receiving the Section's comments for consideration, a municipality may grant permission whereby the Section will then issue a Health Permit for Cultural / Religious Slaughtering to the applicant when notified by the municipality of its approval.

UNCONTROLLED KEEPING OF ANIMALS

Municipalities do not always regulate the keeping of animals as required by their relevant By-laws.

Keeping of an inappropriate number of animals, animals being accommodated inappropriately, or where animals are not being cared for properly, can result in circumstances that cause nuisance to neighbors; create unclean or unhealthy conditions for people, animals & the environment.

Responsible animal ownership is also a very important component of nuisance control within our environment generally and our residential environment particularly.

LACK OF PROPER WATER & SANITATION FACILITIES AT INFORMAL SETTLEMENTS

Municipalities are, because of the nature of their responsibilities, in the best position to ensure water & sanitation to informal settlements and need to monitor access to basic services on a more regular basis.

Diarrhea is the most important public health problem directly related to water and sanitation.

NOTIFIABLE MEDICAL CONDITIONS

Medical Institutions not always notifying the Section MHS on reported / treated listed notifiable medical conditions.

The disease reporting system in South Africa is based on government law (National Health Act, Act 61 of 2003) which states that specific infectious diseases must be reported on specific Government forms on a daily/weekly basis to the Local Authority for action who then reports to the Provincial Department of Health and on to the National Department of Health.



It is therefore important that all role players should notify cases and deaths due to a Notifiable condition. This will assist the health authorities to speedily implement measures that will prevent the spread of that disease.

NEMA SECTION 30 EMERGENCY INCIDENTS

Currently there is a lack of cooperative governance approach to emergency incidents.

Emergency incidents are recognized as those special cases of pollution events requiring quick and effective communication and mobilization of resources to ensure that the impacts on the environment from these incidents are minimized and contained.

When an emergency incident occurs it inevitably affects a community or group of stakeholders. The management of the incident requires a partnership / coming together of various stakeholders and cooperative relationships between the different spheres of government, the private sector and civil society.



Municipalities need to identify a 'coordinator' to respond to these incidents.

This position must have the responsibility to ensure that incidents are managed effectively, that all interested parties are included, that activities are coordinated, communicated and clear and that all statutory obligations by government (under all relevant pieces of legislation) are fulfilled.

It is important to note that whilst some functions and activities can be delegated or shared between government entities, the overall coordinator of the incident (who is the Relevant Authority for the incident) must still ensure that all statutory responsibilities under section 30 of NEMA are fulfilled and that all statutory responses which can be issued under

this legislation (for example, Directives) are issued by themselves in this capacity.

MINING ACTIVITIES

The Central Karoo District is highly rich in minerals such as uranium as well as shale gas.

There has been increasing interest in mining of these minerals in the area, as is evident by the the number of prospecting applications.



This is significant as both prospecting and mining are associated with various environmental impacts.

The current capability of the CKDM and municipalities is limited by the shortage of personnel, skills, tools & finances required for effective and coordinated monitoring.

