Municipal

Health

Services

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1. INTRODUCTION:

A joint (Health and Local Government) MINMEC decision was taken in 2002 that Municipal Health Services (MHS) be defined as a list of Environmental Health Services (EHS). This decision was gazetted on 3 January and 13 June 2003 (latter gazette changed the date of implementation from July 2003 to July 2004 as agreed by the Ministers). According to the Municipal Structures Act, 1998 (Act No: 117 OF 1998), section 84(1)(i), Municipal Health Services (MHS) will the responsibility of District Municipalities (Category C) and not Local Municipalities (Category B). In addition, in terms of the National Health Act 2003, section 32(1), it is the exclusive competency of every Metropolitan (Category A) and District Municipalities (Category C) to ensure the provision/rendering of Municipal Health Services (MHS). Category C Municipalities can also enter into a service level agreement with Local Municipalities (Category B) if they are not in a position to deliver Municipal Health Services (MHS).

The Constitution of the Republic of South Africa, 1996 (Act No: 108 of 1996) allocates Municipal Health Services (MHS) as a Local Government function under Part B of Schedule 4, section 156(1)(a). On the other hand, the National Health Act, 2003, defines Municipal Health Services (MHS) as follows:

- (a) water quality monitoring
- (b) food control
- (c) waste management
- (d) health surveillance of premises
- (e) surveillance and prevention of communicable diseases, excluding immunizations
- (f) vector control
- (g) environmental pollution control
- (h) disposal of the dead, and
- (i) chemical safety

but excludes port health, malaria control and control of hazardous substances

2. THE COMPONENTS OF MUNICIPAL HEALTH SERVICES (MHS):

The various components of Municipal Health Services (MHS) will be divided into definitions, functional areas and functional activities as follows.

2.1 WATER QUALITY MONITORING:

2.1.1 **DEFINITION**:

Monitoring and surveillance of water quality and availability that is intended for human consumption, recreational and industrial use.

2.1.2 FUNCTIONAL AREAS:

- ❖ Domestic water supply.
- **Stormwater.**
- Boreholes
- Wells
- * Recreational water, public facilities such as swimming pools, water slides, spabaths, whirlpools and wading pools.
- Lakes, dams, springs and watercourses.
- * Rivers and streams not regulated by DWAF.

2.1.3 FUNCTIONAL ACTIVITIES:

- **!** Ensuring a hygienically safe and adequate supply of potable water provision.
- * Respond to consumer complaints on contamination/impurities.
- ❖ Water sampling and testing for bacteriological and chemical analysis.
- **!** Enforcement of laws and regulations related to water quality.
- Protection of water sources.
- ❖ Mapping of water sources in relation to pollution and contamination.
- ❖ Implement health, hygiene and awareness and education campaigns.
- ❖ Monitoring of water reticulation systems and other sources of water supply.
- Monitoring and control of stormwater runoff from premises, which may impact on public health.
- ❖ Identification and making safe of dangerous wells, boreholes and excavations.

2.2 FOOD CONTROL:

2.2.1 **DEFINITION**:

Food Control is described by the World Health Organization (WHO) as a mandatory regulatory activity of enforcement by National or Local authorities to provide consumer protection and ensure that <u>all</u> foods during production, handling, storage, processing and distribution are safe, wholesome and for human consumption; conform to quality and safety requirements and are honestly and accurately labeled as prescribed by law.

2.2.2 FUNCTIONAL AREAS:

***** FORMAL PREMISES:

- Food retailers (restaurants, cafes, franchises, fast-food outlets, bakeries, supermarkets, butcheries, cafeterias, etc).
- Food wholesalers/distributors.
- Food factories/industries (including homes).
- Food warehouses.
- Catering organizations/companies.
- Food transportation.
- Food preparation areas in accommodation establishments and places of care.
- Temporary carnivals, fetes, charity and sporting/special events.
- Open air markets.
- Food tenders.

***** INFORMAL PREMISES:

- Vendors.
- Hawkers.

2.2.3 FUNCTIONAL ACTIVITIES:

- ❖ Investigate all food quality and safety related complaints received from consumers and appropriate remedial measures.
- Present food safety related education/training programmes and conduct community developments programmes for, inter alia, food handlers (formal and informal sector), schools, industry, consumers, etc.

- Implement measures for the recall and/or condemnation and proper disposal of foodstuffs unfit, unwholesome for human consumption in accordance with applicable legislative procedures.
- Carry out routine inspections of food handling establishments (premises) and of foodstuffs covered by the relevant legislation.
- Investigate outbreaks/incidences of food borne diseases (infections and poisonings) and introduce appropriate preventative and remedial control measures.
- Scrutinizing/reviewing of construction/building plans of new or remodeled food establishments followed by inspections to ensure compliance with appropriate laws and regulations.
- ❖ Enforcement of the food related provisions of the Foodstuffs, Cosmetics and Disinfectants Act, 1972 9Act No: 54 of 1972) and Regulations.
- ❖ Enforcement of the food hygiene and safety related provisions of the Health Act, 1977 (Act No: 63 of 1977) and Regulations.
- ❖ Implement control programmes for specific high risks foodstuffs, such as milk, meat, eggs, seafoods and prepared foods, including street foods.
- ❖ Implement National and Local food monitoring and sampling programmes with specific reference to Routine Food Safety Monitoring Programme, Primary School Nutrition Programme and Food Fortification Programme.
- ❖ Taking of histological, bacteriological and chemical samples for analysis in terms of the Free Quota Sample.
- ❖ Promote the utilization of the HACCP and other quality assurance management systems aimed at enhancing food safety within the food industry.
- ❖ Provide information and advice to consumers, industry and other Departments and health workers on all food safety related matters.
- Support industry with regard to the health certification of consignments of foodstuffs destined for export and with special monitoring programmes implemented by approved certifying authorities (Agriculture, SABS, etc) aimed at promoting the export of foodstuffs to other countries.
- ❖ Ensure effective inter and intra-sectoral cooperation with other competent food control authorities, such as Department of Agriculture, SABS, PPECB, etc, and other components within the health system such as nutrition, primary health care services, communicable diseases control, health promotion, etc.
- ❖ Implement an appropriate food control programme management information system as part of a national information system for environmental health services.
- ❖ Issuing of certificate of acceptability in terms of Regulations R918.
- Monitoring and control of hawkers and street vendors.
- ❖ Enforcement and compliance of Tobacco Control Legislation.
- Monitoring, control, restriction or prohibition of foodstuffs in the handling, processing, production, manufacturing, packing, transportation, storing, preparation, displaying, sale or serving.
- ❖ Law enforcement by issuing of notices/summons.

2.3 WASTE MANAGEMENT:

2.3.1 **DEFINITION**;

Monitoring of waste management systems-refuse, health care waste, hazardous waste and sewage.

2.3.2 FUNCTIONAL AREAS:

- ★ Health care waste: Health care risk waste (medical waste).
 Health care general waste (domestic waste).
- Hazardous waste.
- Commercial waste.
- ❖ Agricultural waste.
- Incinerator waste.
- **&** Building rubble.
- ❖ Landfill, transfer and recycling sites.
- Garden refuse.
- Water and sewerage works.
- * Recreational waste.

2.3.3 **FUNCTIONAL ACTIVITIES**

- Complaint investigations and inspections on any activities relating to waste or any product resulting thereof.
- Ensuring proper refuse disposal.
- ❖ Sampling and analysis of any waste or product (sewage, rubbish or other waste).
- **❖** Advocacy on sanitation.
- ❖ Ensuring proper handling, storage, collection, treatment and disposal of health care waste and hazardous waste.
- ❖ Improve and control the handling and disposal of animal tissue.
- ❖ Ensuring that waste is stored, collected, removed and disposed off effectively and efficiently and that proper facilities and containers are provided.
- Compliance monitoring of garden refuse sites, refuse transfer sites, landfill sites, incinerators, recycling sites, sewerage and water works and the processes associated with such premises and instituting remedial and preventative measures.
- ❖ Law enforcement by issuing of notices/summons.

2.4 HEALTH SURVEILLANCE OF PREMISES:

2.4.1 **DEFINITION**:

The identification, monitoring and evaluation of health risks, nuisances and hazards and instituting remedial and preventative measures.

2.4.2 **FUNCTIONAL AREAS**:

- ❖ Agricultural holdings/farms.
- **❖** Dwellings: Informal

Formal

- Keeping of animals
- Public conveniences/Public bath houses.
- Construction sites.
- ❖ Informal trade: Non-food.
- Sport and recreational facilities/amenities.
- Places of entertainment/amusement centers.
- Pharmacies/chemists.
- Business centers and offices including government offices.
- Businesses.
- Industrial/manufacturing.

- Workshops.
- Places of worship.
- ❖ Accommodation establishments.
- Medical practices.
- Veterinary services.
- Sanitary facilities.
- Offensive trades.
- Hairdressing, beauty and cosmetology services.
- Second hand goods shops.
- Dry cleaning and laundry establishments.
- Swimming pools and spa-baths.
- ❖ Academic institutions: Colleges/Universities/Training institutions.
- Caravan parks, camping sites and holiday resorts.
- **A** Laboratories.
- Private and government (Public) schools.
- Places of care:
 - Childcare services (crèches, nurseries, day care, after school care, child minders, pre-schools).
 - Old age homes, medi-care centers, day care centers.
 - Orphanages.
 - Mental institution.
 - Homes for the destitute.
 - Homes for refugees.
 - Homes for the disables.
 - Hospices.
 - Clinics, community health centers, hospitals.
 - Nursing homes.
 - Prisons and police stations.
 - Places of safe keeping
 - Street children shelters.
 - Hotels/motels/boarding houses.

2.4.3 FUNCTIONAL ACTIVITIES:

- ❖ Complaint investigations relating to environmental health conditions.
- Giving advise on legal requirements for the establishments of premises as and when required.
- Compliance monitoring in terms of legislative requirements and provisions and instituting remedial and preventative measures.
- ❖ Identification of health risks, nuisances and hazards and instituting remedial and preventative measures.
- ❖ Identification, monitoring and control of overcrowding where applicable.
- Monitoring indoor air quality, ventilation, lighting and dampness and instituting remedial and preventative measures.
- Monitoring and control of sanitary and ablution facilities.
- Monitoring and control of pests.
- Enforcements of Tobacco control legislation.
- * Removal of health nuisances/hazards at the cost of the owner upon failure to comply with the requirements of compliance notices.
- Scrutinizing of building plans from a health point of view.

- ❖ Identifying occupational health and safety risks and hazards and referring to Department of Labour and/or instituting remedial and preventative measures.
- ❖ Issuing of certificates of acceptability and health certificates where applicable.
- **\Lambda** Law enforcement by issuing of notices/summons.

2.5 <u>SURVEILLANCE AND PREVENTION OF COMMUNICABLE DISEASES</u>, <u>EXCLUDING IMMUNISATIONS:</u>

2.5.1 **DEFINITION:**

The identification, monitoring and prevention of any disease which can be communicated directly or indirectly from any animal or through any agent to any person or from any person suffering therefrom or who is a carrier to any other person.

2.5.2 **FUNCTIONAL AREAS**:

As per attached Annexure 1 and Schedule.

2.5.3 FUNCTIONAL ACTIVITIES:

- ❖ Health and hygiene promotion in prevention of communicable diseases.
- ❖ Complaint investigation and follow ups of bacterial, viral and parasitic infections.
- Case investigations and reporting
- ❖ Determination of sources of infection, contacts and carriers of diseases.
- Provision of consultation on prevention and control of diseases.
- ❖ Collection of appropriate epidemiological information on communicable diseases.
- Collaboration with other stakeholders and Departments regarding outbreaks.
- Taking of samples and specimens for analysis and further action if deemed necessary.
- ❖ Instituting remedial and preventative measures including health education.

2.6 VECTOR CONTROL:

2.6.1 **DEFINITION**:

Monitoring, identification, evaluation and prevention of vectors.

2.6.2 FUNCTIONAL AREAS:

- * Rodents.
- Insects.
- Pests

2.6.3 FUNCTIONAL ACTIVITIES:

- Complaint investigations relating to environmental health conditions.
- ❖ Identification of vectors, their habitats and breeding places and instituting remedial and preventative measures.
- Carrying out of routine surveillance actions and surveys to determine the prevalence of vectors.
- Applications/instituting of eradication/control measures such as spraying of premises, baiting, fumigation, application of pesticides and placing of traps at properties/premises.
- * Removal or remedying of conditions permitting or favouring the prevalence or increase of rodents, insects and vectors.

- ❖ Monitoring of high-risk areas.
- **\Lambda** Law enforcement by issuing notices/summons.
- Community awareness campaigns on zoonotic diseases and control thereof by education and training.
- Collection and analysis of specimens.

2.7 ENVIRONMENTAL POLLUTION CONTROL:

2.7.1 **DEFINITION:**

The identification, evaluation, monitoring and prevention of land, soil, noise, water and air pollution.

2.7.2 **FUNCTIONAL AREAS**:

- ❖ Noise Pollution:
 - Factories, industries, formal premises, musical instruments, construction sites, machineries, etc.
- **❖** Air Pollution:
 - Industrial boilers, incinerators, stoves, fireplaces, refuse burning, etc.
- **❖** Land/Soil Pollution:
 - Landfill/dumping and burning of waste, farming, mining, factories, etc.
- ***** Water Pollution:
 - Mining and mining activities, industrial wastewater, municipal wastewater, agricultural wastewater, unprotected landfill sites, illegal dumping, etc.

2.7.3 FUNCTIONAL ACTIVITIES:

2.7.3.1 NOISE POLLUTION CONTROL:

- ❖ Complaint investigation relating to environmental health conditions.
- ❖ Identification and monitoring of sources and agents of noise pollution and instituting remedial or preventative measures.
- Measuring of ambient sound levels and noise levels.
- Outdoor and indoor measurements on a piece of land and in a room or enclosed space respectively.
- ❖ Law enforcement by issuing of notices/summons.

2.7.3.2 AIR POLLUTION CONTROL:

- * Complaint investigation relating to environmental health conditions.
- ❖ Identification and monitoring of premises to ensure that no health nuisances, risks or hazards occur and instituting of corrective measures where such nuisances, risks or hazards occur.
- ❖ Monitoring and control of legal/illegal dumping, littering and burning of waste.
- **❖** Law enforcements by issuing notices/summons.

2.7.3.3 WATER POLLUTION:

- * Complaint investigations relating to environmental health conditions.
- ❖ Identification and monitoring of sources of water pollution and instituting remedial or preventative measures.
- * Taking of water samples, including effluent and sludge samples.

- Ensuring proper systems are in place for the disposal and containment of waste water.
- ❖ Ensuring that sewerage and industrial effluents are disposed off in terms of legal requirements and that no blockages and spills occur and instituting remedial and preventative measures.
- ❖ Liaison with DWAF, GDACE and other relevant stakeholders on matters relating to water pollution.

2.8 DISPOSAL OF THE DEAD:

2.8.1 **DEFINITION**:

Compliance, monitoring of funeral undertakers, mortuaries, embalmers, crematoria, graves and cemeteries and to manage control and monitor exhumations and reburial or disposal of human remains.

2.8.2 **FUNCTIONAL AREAS**:

- Funeral undertakers.
- Mortuaries.
- ***** Embalmers.
- Crematoria.
- Graves.
- Cemeteries.

2.8.3 FUNCTIONAL ACTIVITIES:

- Control, restrict or prohibit:
 - The business of a funeral undertaker or embalmer.
 - Mortuaries and other places or facilities for the storage of dead bodies.
 - Treatment, removal or transport of dead bodies.
- * Regulating, control and prohibition of graves, cemeteries, crematoria and other facilities for the disposal of dead bodies.
- ❖ Manage and control exhumation and reburial or disposal of human remains.
- Ensure compliance with health, hygiene and structural requirements and standards for such premises.
- Enforcement of laws and regulations relating to these premises via. notices/summons.

2.9 CHEMICAL SAFETY:

2.9.1 **DEFINITION**:

Monitoring, identification, evaluation and prevention of the risks of chemical that are harmful to human health.

2.9.2 FUNCTIONAL AREAS:

- **Fumigation firms.**
- Formal and informal premises.

2.9.3 FUNCTIONAL ACTIVITIES:

❖ Complaint investigation relating to environmental health conditions.

- ❖ Monitoring of safe disposal of chemical wastes.
- ❖ Identification and controlling of premises/operators dealing with the application, manufacturing, transport, storage or selling of chemicals.
- ❖ Health education and training on chemical safety.
- **\Delta** Law enforcement by issuing notices/summons.

3. CONCLUSION:

The National Health Act, 2003, has made it mandatory for Local Government to render Municipal Health Services (MHS) at district level. This new system will allow for effective and efficient co-ordination and facilitation of Municipal Health Services (MHS) at district level. It also allows for the management of Municipal Health Services (MHS) to fall under a single authority. Most importantly, it overcomes the fragmentation of Municipal Health Services (MHS) and allows for full integration of services.

4. REFERENCES:

- 4.1 National Health Act, 2003
- 4.2 The Constitution of the Republic of South Africa, 1996 (Act No: 108 of 1996).
- 4.3 Municipal Structures Act, 1998 (Act No. 117 of 1998).
- 4.4 Briefing Document for the Minister: Municipal Health Services Definitions, Allocations, Consequences and Proposals.
- 4.5 Health Act, 1977 (Act No. 63 of 1977) and Regulations.
- 4.6 Foodstuffs, Cosmetics and Disinfectants Act, 1972 (Act No. 54 of 19720 and Regulations.
- 4.7 Circular Minute: Clarification of MHS as defined in the National Health Act of 2003.
- 4.8 Workshop: Devolution of Environmental Health Services: Gauteng Province: 17 June 2004, Kempton Park, Civic Centre.
- 4.9 World Health Organization (WHO).

ANNEXURE 1

Act 63 OF 1977(G.N. 1256/1986)

ANNEAURE	T	1977(G.N. 1230/1980)
Communicable Disease	Patient may return to teaching institution	Contact may return to teaching institution
Acquired immuno deficiency syndrome	On submission of a medical certificate	Immediately
Chicken pox	14 days after appearance of rash or on submission of a medical certificate	Immediately
Cholera	On submission of a medical certificate	According to quarantine measures
Diphtheria	On submission of a medical certificate and after two nose and two throat swabs, at appropriate intervals, prove negative	Non-immune contacts: Eight days after removal from source of infection Immune contacts: Immediately
Epidemic typhus	On submission of a medical certificate	Immediately
German measles (rubella)	Seven days after appearance of rash	Immediately
Haemorrhagic fever diseases of Africa	On submission of a medical certificate	According to quarantine measures
Haemorrhagic virus conjunctivitis	Seven days after beginning of symptoms	Immediately
Hepatitis A	Seven days after appearance of jaundice or on submission of a medical certificate	Immediately
Leprosy	On submission of a medical certificate	Immediately
Louse infestation	After complete cleansing and delousing and removal of nits on head, body and clothing	Immediately, but must be kept under surveillance
Measles	Seven days after appearance of rash	Immediately
Meningococcemia	On submission of a medical certificate	Immediately
Mumps	Nine days after appearance of swelling	Immediately
Plague	On submission of a medical certificate	According to quarantine measures
Poliomyelitis	On submission of a medical certificate	Immediately
Scabies	After proper treatment	Immediately
Tuberculosis of the lungs	On submission of a medical certificate	Immediately
Typhoid fever	On submission of a medical certificate. After three negative stool and urine tests have been done at appropriate intervals (at least 48 hours) and not less than 72 hours after cessation of antibiotic therapy	Immediately
Whooping cough	21 days after beginning of parosysms or on submission of a medical certificate	Immediately

Government Notice No. 328

22 February 1991

DECLARATION OF MEDICAL CONDITIONS TO BE NOTIFIABLE MEDICAL CONDITIONS IN TERMS OF SECTION 45 OF THE HEALTH ACT, 1977 (ACT NO. 63 OF 1977)

- I, Elizabeth Hendrina Venter, Minister of National Health, acting under and by virtue of section 45 of the Health Act, 1977 (Act No. 63 of 1977)
 - (a) hereby declare the medical conditions specified in the Schedule hereto to be notifiable medical conditions:
 - (b) hereby withdraw Government Notice No. R. 2708 of 15 December 1989.

SCHEDULE

Acute rheumatic fever;

Anthrax:

Brucellosis:

Cholera:

Congenital syphilis;

Diphtheria;

Food poisoning (outbreaks of more than four persons);

Haemorrhagic fevers of Africa (Congo fever, Dengue fever, Ebola fever, Lassa fever,

Marburg fever, Rift Valley fever);

Lead poisoning

Legionellosis

Leprosy;

Malaria;

Measles (rubeola);

Meningococcal infections;

Paratyphoid fever

Plague

Poisoning from any agricultural or stock remedy registered in terms of the Fertilizers,

Farm Feeds, Agricultural Remedies and Stock Remedies Act, 1947 (Act No. 36 of 1947);

Poliomyelitis;

Rabies (specify whether human case or human contact);

Smallpox and any smallpox-like disease, excluding chickenpox;

Tetanus:

Tetanus neonatorum;

Trachoma:

Tuberculosis-

- (i) pulmonary and other forms, except cases diagnosed solely on the basis of clinical signs and symptoms;
- (ii) in the case of any child younger than 5 years with a significant reaction following tuberculin testing;

Typhoid fever;

Typhus fever (epidemic louse-borne typhus fever, endemic flea-borne typhus fever); Viral hepatitis A, B, non-A, non-B and undifferentiated; Yellow fever.

E.H. VENTER Minister of National Health.