

NATIONAL ENVIRONMENTAL HEALTH NORMS AND STANDARDS ASSESSMENT TOOL, 2025

SECTION 1: Organisational Information

Name of the Province	
Name of Organisation	
Organisational Representative/s	
Name of assessor/s	
Date of Assessment	

ASSESSMENT SHEET

PART A: APPLICABLE TO ALL SPHERES

NS/01 - COMPONENT: CLIENTS RIGHTS AND EXPERIENCE OF CARE

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
Level 1	01	A system is in place to enable communication on service experience to the public.	 CI	YES,		20%
Level 2		A system is in place to enable communication on service experience to the public.				40%
	02	A Standard Operating Procedure is available for management of public complaints.				
Level 3		A system is in place to enable communication on service experience to the public.				50%
		A Standard Operating Procedure is available for management of public complaints.				
	03	Signage and display boards are in place, displayed outside the buildings/boundary to communicate to the public that Environmental Health Services (EHS) are rendered.				
Level 4		A system is in place to enable communication on service experience to the public.				70%
		A Standard Operating Procedure is available for management of public complaints.				
		Signage and display boards are in place, displayed outside the buildings/boundary to communicate to the public that Environmental Health Services (EHS) are rendered.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
	04	Such display boards shall be visible to the public and reflect the facility name, service hours, and contact details.				
Level 5		A system is in place to enable communication on service experience to the public.				80%
		A Standard Operating Procedure is available for management of public complaints.				
		Signage and display boards are in place, displayed outside the buildings/boundary to communicate to the public that Environmental Health Services (EHS) are rendered.				
		Such display boards shall be visible to the public and reflect the facility name, service hours, and contact details.				
	05	Signboards indicating offices/service centres/directions are available inside the building or entrance to the building.	 CI			
NS/02 - COMPONENT: INTERNAL AND EXTERNAL COMMUNICATION INFRASTRUCTURE						
Level 1	06	A help desk is available and functional for administrative reception.				20%
Level 2		A help desk is available and functional for administrative reception.				40%
	07	Functional office telephone is available.	 			
Level 3		A help desk is available and functional for administrative reception.				50%
		Functional office telephone is available.				
	08	Field Staff are equipped with mobile telephones.	 			

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
Level 4		A help desk is available and functional for administrative reception.				70%
		Functional office telephone is available.				
		Field Staff are equipped with mobile telephones.				
	09	Functional computer/s are provided, and Functional printer/s is/are provided.	 			
Level 5		A help desk is available and functional for administrative reception.				80%
		Functional office telephone is available.				
		Field Staff are equipped with mobile telephones.				
		Functional computer/s are provided, and Functional printer/s is/are provided.				
	010	Web access is available.	 			
NS/03 - COMPONENT: PLANNING						
Level 1	011	A costed five-year environmental health service delivery plan.				20%
Level 2		A costed five-year environmental health service delivery plan.				40%
	012	An annual operational plan and the plan forms part of the municipal service delivery and budget implementation plan at the district level.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
Level 3		A costed five-year environmental health service delivery plan.				50%
		An annual operational plan and the plan forms part of the municipal service delivery and budget implementation plan at the district level.				
	013	Municipal environmental health service delivery planning includes the point-of-entry environment.				
Level 4		A costed five-year environmental health service delivery plan.				70%
		An annual operational plan and the plan forms part of the municipal service delivery and budget implementation plan at the district level.				
		Municipal environmental health service delivery planning includes the point-of-entry environment.				
	014	Environmental health objectives form part of the municipal integrated development plans and annual performance plans at the entry-level points.				
Level 5		A costed five-year environmental health service delivery plan.				80%
		An annual operational plan and the plan forms part of the municipal service delivery and budget implementation plan at the district level.				
		Municipal environmental health service delivery planning includes the point-of-entry environment.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		Environmental health objectives form part of the municipal integrated development plans and annual performance plans at the entry-level points.				
	015	Plans are monitored and reports submitted to higher levels.	RA			
NS/04 - COMPONENT: HUMAN RESOURCES AND PROFESSIONAL IDENTITY						
Level 1	016	An approved EH structure is in place and approved, outlining management, functional and support posts.				20%
Level 2		An approved EH structure is in place and approved, outlining management and functional posts.				40%
	017	Environmental Health Practitioners are registered with the Health Professions Council of South Africa and in good standing.	RA			
	018	Environmental Health is directly managed by a qualified Environmental Health Practitioner (EHP) and registered with the Health Professions Council of South Africa, Board of environmental health, and is in good standing.	RA			
Level 3		An approved EH structure is in place and approved, outlining management, functional and support posts.				50%
		Environmental Health Practitioners are registered with the Health Professions Council of South Africa and in good standing.				
		Environmental Health is directly managed by a qualified Environmental Health Practitioner (EHP) and registered with the Health Professions Council of South Africa, Board of environmental health, and is in good standing.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
	019	Ratios of functional EHPs is in line with the Environmental Health Policy recommendations of 1 EHP/10 000 members of the population or the IHR 2005 for points of entry.				
Level 4		An approved EH structure is in place and approved, outlining management, functional and support posts.				70%
		Environmental Health Practitioners are registered with the Health Professions Council of South Africa and in good standing.				
		Environmental Health is directly managed by a qualified Environmental Health Practitioner (EHP) and registered with the Health Professions Council of South Africa, Board of environmental health, and is in good standing.				
		Ratios of functional EHPs is in line with the Environmental Health Policy recommendations of 1 EHP/10 000 members of the population or the IHR 2005 for points of entry.				
	020	An HR plan is in place to address staff shortages.				
Level 5		An approved EH structure is in place and approved, outlining management, functional and support posts.				80%
		Environmental Health Practitioners are registered with the Health Professions Council of South Africa and in good standing.				
		Environmental Health is directly managed by a qualified Environmental Health Practitioner (EHP) and registered with the Health Professions Council of South Africa, Board of environmental health, and is in good standing.				
		Ratios of functional EHPs is in line with the Environmental Health Policy recommendations of 1 EHP/10 000 members of the population or the IHR 2005 for points of entry.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		An HR plan is in place to address staff shortages.				
	021	An HR plan is in place with clear annual targets to address staff shortages, costed and implemented.	 RA			
NS/05 - COMPONENT: TRAINING AND DEVELOPMENT						
Level 1	022	Environmental health staff is periodically trained and developed on technical aspects linked with environmental health functions, and records thereof are kept and updated.	 RA CI			20%
Level 2		Environmental health staff is periodically trained and developed on technical aspects linked with environmental health functions, and records thereof are kept and updated.				40%
	023	Staff development and capacity building needs are determined every 2 (two) years.	RA CI			
Level 3		Environmental health staff is periodically trained and developed on technical aspects linked with environmental health functions, and records thereof are kept and updated.				50%
		Staff development and capacity building needs are determined every 2 (two) years.				
	024	Skills development plans are compiled annually and submitted to management for consideration.	RA			
Level 4		Environmental health staff is periodically trained and developed on technical aspects linked with environmental health functions, and records thereof are kept and updated.				70%
		Staff development and capacity building needs are determined every 2 (two) years.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		Skills development plans are compiled annually and submitted to management for consideration.				
	025	Training is aligned the Health Profession's Council's Continued Professional Development (CPD) Programme.				
	026	An orientation programme is in place for newly appointed staff at all levels.	 RA			
Level 5		Environmental health staff is periodically trained and developed on technical aspects linked with environmental health functions, and records thereof are kept and updated.				80%
		Staff development and capacity building needs are determined every 2 (two) years.				
		Skills development plans are compiled annually and submitted to management for consideration.				
		Training is aligned the Health Profession's Council's Continued Professional Development (CPD) Programme.				
		An orientation programme is in place for newly appointed staff at all levels.				
	027	Training should be budgeted for.	 RA			
NS/06 - COMPONENT: MANAGEMENT						
Level 1	028	Systems are in place to ensure management meets with operational staff to review performance at national, provincial, district and point of entry level.	 RA			20%

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
Level 2		Systems are in place to ensure management meets with operational staff to review performance at national, provincial, district and point of entry level.				40%
	029	Monthly and quarterly review meetings are held at an operational/sub-district level.	 RA			
Level 3		Systems are in place to ensure management meets with operational staff to review performance at national, provincial, district and point of entry level:				50%
		Monthly and quarterly review meetings are held at an operational/sub-district level.				
	030	Quarterly performance review meetings are held at District, Provincial and Regional levels.	 RA			
Level 4		Systems are in place to ensure management meets with operational staff to review performance at national, provincial, district and point of entry level:				70%
		Monthly and quarterly review meetings are held at an operational/sub-district level.				
		Quarterly performance review meetings are held at District, Provincial and Regional levels.				
	031	Provincial environmental health forums are established, functional, representative of relevant stakeholders and meetings held every quarter.	 RA			
Level 5		Systems are in place to ensure management meets with operational staff to review performance at national, provincial, district and point of entry level.				80%

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		Monthly and quarterly review meetings are held at an operational/sub-district level.				
		Quarterly performance review meetings are held at District, Provincial and Regional levels.				
		Provincial environmental health forums are established, functional, representative of relevant stakeholders and meetings held every quarter.				
	032	Staff satisfaction survey is conducted annually, and the results thereof utilized for work environment improvements.	 RA			
NS/07- COMPONENT: INFORMATION MANAGMENT						
Level 1	033	National Health Information Management System Policy is accessible.				20%
Level 2		National Health Information Management System Policy is accessible and implemented.				40%
	034	District Health Information System (DHIS) registers are available and utilized.				
	035	Standard operating procedure for data flow and management is available and implemented.				
	036	Data capturers/administration staff are provided to capture data for EH Unit and both data captures and EHPs are trained on the guidelines.	 SI			
Level 3		National Health Information Management System Policy is accessible.				50%

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		District Health Information System (DHIS) registers are available and utilized.				
		Standard operating procedure for data flow and management is available and implemented.				
		Data capturers/administration staff are provided for EH Unit and both data captures and EHPs are trained on the guidelines.				
	037	Validated, accurate, complete and reported Environmental Health data is captured into the DHIS system monthly and timeously.				
Level 4		National Health Information Management System Policy is accessible and implemented.				70%
		District Health Information System (DHIS) registers are available and utilized.				
		Standard operating procedure for data flow and management is available and implemented.				
		Data capturers/administration staff are provided for EH Unit and both data captures and EHPs are trained on the guidelines.				
		Validated, accurate, complete and reported Environmental Health data is captured into the DHIS system monthly and timeously.				
		038 Data is analysed quarterly and feedback provided to operational EHPs.				
Level 5		National Health Information Management System Policy is accessible and implemented.				80%

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		District Health Information System (DHIS) registers are available and utilized.				
		Standard operating procedure for data flow and management is available and implemented.				
		Data capturers/administration staff are provided for EH Unit and both data captures and EHPs are trained on the guidelines.				
		Validated, accurate, complete and reported Environmental Health data is captured into the DHIS system monthly and timeously.	 			
		Data is analysed quarterly and feedback provided to operational EHPs.				
	039	Environmental health has access to capture data and monitor data on the DHIS system	 			
NS/08 - COMPONENT: COOPERATIVE GOVERNANCE						
Level 1	040	Terms of reference for environmental health structures is in place.				20%
	041	Committees that support the environmental health structure are in place.	 RA			
Level 2		Terms of reference for environmental health structures is in place.				40%
		Committees that support the national environmental health structure are in place.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
	042	Official working structures, arrangements and or Memorandum of Understandings, and/or official mechanisms.				
Level 3		Terms of reference for environmental health structures is in place.				50%
		Committees that support the national environmental health structure are in place.				
		Official working structures, arrangements and or Memorandum of Understandings, and/or official mechanisms.	 RA			
	043	Meeting schedules, records of composition of the committees are in place.	 RA			
Level 4		Terms of reference for environmental health structures is in place.				70%
		Committees that support the national environmental health structure are in place.				
		Official working structures, arrangements and or Memorandum of Understandings, and/or official mechanisms.				
		Meeting schedules, records of composition of the committees are in place.				
	044	Meeting minutes are available.	 RA			
Level 5		Terms of reference for environmental health structures is in place.				80%

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		Committees that support the national environmental health structure are in place.				
		Committees that support the national environmental health structure are in place.				
		Official working structures, arrangements and or Memorandum of Understandings, and/or official mechanisms.				
		Meeting schedules, records of composition of the committees are in place.				
		Meeting minutes are available.				
	045	Committees' outputs are operationalized.	 RA			
NS/09 - COMPONENT: RECORD MANAGMENT						
Level 1	046	Environmental Health records are kept and maintained up to date at all levels.				20%
Level 2		Environmental Health records are kept and maintained up to date at all levels.				40%
	047	A record management system is in place.	 			
	048	Standard Operating Procedure/guideline for capturing, filing, accessing, tracking, archiving and disposal of records is in place at all levels.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
Level 3		Environmental Health records are kept and maintained up to date at all levels.				50%
		A record management system is in place				
		Standard Operating Procedure/guideline for capturing, filing, accessing, tracking, archiving and disposal of records is in place at all levels.				
	049	Records are kept electronically and manually.	 			
Level 4		Environmental Health records are kept and maintained up to date at all levels.				70%
		A record management system is in place				
		Standard Operating Procedure/guideline for capturing, filing, accessing, tracking, archiving and disposal of records is in place at all levels.				
		Records are kept electronically and manually.				
	050	Records are backed up through a back-up system.	 			
Level 5		Environmental Health records are kept and maintained up to date at all levels.				80%
		A record management system is in place and meets the following standards.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		Standard Operating Procedure/guideline for capturing, filing, accessing, tracking, archiving and disposal of records is in place at all levels.				
		Records are kept electronically and manually.				
		Records are backed up through a back-up system.				
	051	Records are in line with the provisions of the National Archives and Records Service of South Africa Act 1996 (Act. no 43 of 1996).	 			
NS/10 - COMPONENT: COMPLIANCE MONITORING AND ENFORCEMENT						
Level 1	052	Environmental health legislation is accessible to all Environmental Health Practitioners electronically and/or manually for use and reference purposes.	 RA			20%
Level 2		Environmental health legislation is accessible to all Environmental Health Practitioners electronically and/or manually for use and reference purposes.				40%
	053	Officials are appointed and/or designated as health officers in terms of Section 80 of the National Health Act 2003 (Act 61 of 2003), as amended, by the National Minister of Health, the Provincial Member of Executive Committee or the Mayor of a Metropolitan or District Council to enforce the Act; and trained and appointed as Peace Officers in terms of the Criminal Procedures Act 1977 (Act 51 of 1977	 RA			
	054	Staff are trained and capacitated on implementation and enforcement of legislation.	 RA			

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
Level 3		Environmental health legislation is accessible to all Environmental Health Practitioners electronically and/or manually for use and reference purposes.				50%
		Officials are appointed and/or designated as health officers in terms of Section 80 of the National Health Act 2003 (Act 61 of 2003), as amended, by the National Minister of Health, the Provincial Member of Executive Committee or the Mayor of a Metropolitan or District Council to enforce the Act; and trained and appointed as Peace Officers in terms of the Criminal Procedures Act 1977 (Act 51 of 1977).				
		Staff are trained and capacitated on implementation and enforcement of legislation.				
	055	Legal documents are available for use to issue notices, fines and closure notices in case of non-compliance.	  RA			
Level 4		Environmental health legislation is accessible to all Environmental Health Practitioners electronically and/or manually for use and reference purposes.				70%
		Officials are appointed and/or designated as health officers in terms of Section 80 of the National Health Act 2003 (Act 61 of 2003), as amended, by the National Minister of Health, the Provincial Member of Executive Committee or the Mayor of a Metropolitan or District Council to enforce the Act; and trained and appointed as Peace Officers in terms of the Criminal Procedures Act 1977 (Act 51 of 1977)				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		Staff are trained and capacitated on implementation and enforcement of legislation.				
		Legal documents are available for use to issue notices, fines and closure notices in case of non-compliance.				
	056	Records of non-compliances that led to legal action kept. Municipality has been authorized or designated to enforce the national health legislation, where required.	 RA			
Level 5		Environmental health legislation is accessible to all Environmental Health Practitioners electronically and/or manually for use and reference purposes.				80%
		Officials are appointed and/or designated as health officers in terms of Section 80 of the National Health Act 2003 (Act 61 of 2003), as amended, by the National Minister of Health, the Provincial Member of Executive Committee or the Mayor of a Metropolitan or District Council to enforce the Act; and trained and appointed as Peace Officers in terms of the Criminal Procedures Act 1977 (Act 51 of 1977.				
		Staff are trained and capacitated on implementation and enforcement of legislation.				
		Legal documents are available for use to issue notices, fines and closure notices in case of non-compliance.				
	057	To implement other environmental health related legislation outside the portfolio of the Ministry of Health, Environmental Health				
NS/11 - COMPONENT: COMPLAINT MANAGEMENT						

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
Level 1	058	A standard operating procedure for environmental health/pollution related complaints is in place.				20%
Level 2		A standard operating procedure for complaints is in place				40%
	059	Environmental health related public complaints are recorded/registered and investigated within 72 hours of receipt.	 RA			
Level 3		A standard operating procedure for complaints is in place.				50%
		Environmental health related public complaints are recorded/registered and investigated within 72 hours of receipt.				
	060	Complaints regarded as urgent/poses immediate danger to human health are investigated within 24 hours of receipt.	RA			
Level 4		A standard operating procedure for complaints is in place.				70%
		Environmental health related public complaints are recorded/registered and investigated within 72 hours of receipt.				
		Complaints regarded as urgent/poses immediate danger to human health are investigated within 24 hours of receipt.				
	061	Feedback of the outcome of every complaint investigated is provided to a complainant within 7 days of receiving the complaint.	RA			
Level 5		A standard operating procedure for complaints is in place.				80%
		Environmental health related public complaints are recorded/registered and investigated within 72 hours of receipt.				

Level	Element number	Level of compliance	Method of measure	Evidence provided Yes/No, Indicate	Choose one level X	Weight
		Complaints regarded as urgent/poses immediate danger to human health are investigated within 24 hours of receipt.				
		Feedback of the outcome of every complaint investigated is provided to a complainant within 7 days of receiving the complaint.				
	062	Complaints records are kept and monitored for reported cases if they are finalised.	RA			

PART B – POINT OF ENTRY

NS/12: COMPONENT: MONITORING STANDARDS FOR CONSIGNMENTS						
Level 1	063	Inspection checklist designed and utilised for every inspection conducted.				20%
	064	Consignments are inspected on arrival at the point of entry.				
	065	Records of Extended Health Detentions and the outcome inspections are kept.				
Level 2		Inspection checklist designed and utilised for every inspection conducted.				40%
		Consignments are inspected on arrival at the point of entry.				
		Records of Extended Health Detentions and the outcome inspections are kept.				
	066	Adequate inspection equipment is available and utilised.				

Level 3		Inspection checklist designed and utilised for every inspection conducted.				50%
		Consignments are inspected on arrival at the point of entry.				
		Records of Extended Health Detentions and the outcome inspections are kept.				
		Adequate inspection equipment is available and utilised.				
	067	All high-risk products are sampled upon arrival and before release.				
	068	Standard Operating Procedures (SOPs) for the application of health measures are in place.				
Level 4		Inspection checklist designed and utilised for every inspection conducted.				70%
		Consignments are inspected on arrival at the point of entry.				
		Records of Extended Health Detentions and the outcome inspections are kept.				
		Adequate inspection equipment is available and utilised.				
		All high-risk products are sampled upon arrival and before release.				
		Standard Operating Procedures (SOPs) for the application of health measures are in place.				
	069	Written inspection reports are issued by officials to the importer/agent for non-complying products.				
Level 5		Inspection checklist designed and utilised for every inspection conducted.				80%
		Consignments are inspected on arrival at the point of entry.				

		Records of Extended Health Detentions and the outcome inspections are kept.				
		Adequate inspection equipment is available and utilised.				
		All high-risk products are sampled upon arrival and before release.				
		Standard Operating Procedures (SOPs) for the application of health measures are in place.				
		Written inspection reports are issued by officials to the importer/agent for non-complying products.				
	070	Records of inspections are kept electronically and/or manually.				
	071	Database of agents and importers are kept and regularly updated.				
NS/13 – COMPONENT: MONITORING STANDARDS FOR CONVEYANCES						
Level 1	072	Inspection checklist designed and utilised for every inspection conducted.				20%
	073	All Conveyances are inspected on arrival at the point of entry including conveyances intentionally transporting sick passengers and free pratique is granted.				
Level 2		Inspection checklist designed and utilised for every inspection conducted.				40%
		All Conveyances are inspected on arrival at the point of entry including conveyances intentionally transporting sick passengers and free pratique is granted.				
	074	Adequate inspection equipment is available and utilised.	 			
Level 3		Inspection checklist designed and utilised for every inspection conducted.				50%

		All Conveyances are inspected on arrival at the point of entry including conveyances intentionally transporting sick passengers and free pratique is granted.				
		Adequate inspection equipment is available and utilised.				
	075	All conveyances arriving from countries where vector control is recommended are monitored to determine the implementation of vector control measures.				
	076	SOPs for the application of health measures are in place.				
Level 4		Inspection checklist designed and utilised for every inspection conducted.				70%
		All Conveyances are inspected on arrival at the point of entry including conveyances intentionally transporting sick passengers and free pratique is granted.				
		Adequate inspection equipment is available and utilised.				
		All conveyances arriving from countries where vector control is recommended are monitored to determine the implementation of vector control measures.				
	077	Records of conveyances where health measures were implemented and conveyance intentionally transporting sick travellers are kept.	 RA			
Level 5		Inspection checklist designed and utilised for every inspection conducted.				80%
		All Conveyances are inspected on arrival at the point of entry including conveyances intentionally transporting sick passengers and free pratique is granted.				
		Adequate inspection equipment is available and utilised.				

		All conveyances arriving from countries where vector control is recommended are monitored to determine the implementation of vector control measures.				
		Records of conveyances where health measures were implemented and conveyance intentionally transporting sick travellers are kept.				
	078	A database of conveyance operators is kept and regularly updated.	 RA			
NS/14 – COMPONENT: MONITORING OF TRAVELLERS						
Level 1	079	All travellers are subjected to screening processes for any signs and symptoms indicative of illness.	 			20%
Level 2		All travellers are subjected to screening processes for any signs and symptoms indicative of illness.				40%
	080	All travellers screened and presenting with elevated temperature and/or signs of illness are subjected to secondary screening.				
	081	An assessment tool is developed and utilized for secondary screening and records are kept.	 RA			
Level 3		All travellers are subjected to screening processes for any signs and symptoms indicative of illness.				50%
		All travellers screened and presenting with elevated temperature and/or signs of illness are subjected to secondary screening.				
		An assessment tool is developed and utilized for secondary screening and records are kept.				
	082	Requirements for additional health measures recommended for travellers are monitored.				

	083	Travellers placed under public health observation, quarantine or isolation are monitored.				
Level 4		All travellers are subjected to screening processes for any signs and symptoms indicative of illness.				70%
		All travellers screened and presenting with elevated temperature and/or signs of illness are subjected to secondary screening.				
		An assessment tool is developed and utilized for secondary screening and records are kept.				
		Requirements for additional health measures recommended for travellers are monitored.				
		Travellers placed under public health observation, quarantine or isolation are monitored.				
	084	records are kept and maintained.				
	085	All suspected cases are reported according to the communication procedure.				
	086	Contact details of stakeholders involved in the notification, surveillance, detection and response to suspect cases are kept and regularly updated.				
Level 5		All travellers are subjected to screening processes for any signs and symptoms indicative of illness.				80%
		All travellers screened and presenting with elevated temperature and/or signs of illness are subjected to secondary screening.				
		An assessment tool is developed and utilized for secondary screening and records are kept.				
		Requirements for additional health measures recommended for travellers are monitored.				

		Travellers placed under public health observation, quarantine or isolation are monitored.				
		records are kept and maintained.				
		All suspected cases are reported according to the communication procedure.				
	087	A plan for the implementation of entry and exit control for the early detection and prevention of sick or suspected travellers is available.				
NS/15 – COMPONENT: MONITORING STANDARDS FOR POINT OF ENTRY FACILITIES						
Level 1	088	Ablution maintenance and cleaning programme in place and implemented.				20%
Level 2		Ablution maintenance and cleaning programme in place and implemented				40%
	089	Monitoring programme for ablution facilities in place.				
	090	Inspection checklists are developed and utilized for all inspections conducted to guide and ensure complete assessment.				
Level 3		Ablution maintenance and cleaning programme in place and implemented				50%
		Monitoring programme for ablution facilities in place.				
		Inspection checklists are developed and utilized for all inspections conducted to guide and ensure complete assessment.				
	091	In case of unsatisfactory conditions, the person in charge is immediately notified and records are kept.				
Level 4		Ablution maintenance and cleaning programme in place and implemented				70%

		Monitoring programme for ablution facilities in place.				
		Inspection checklists are developed and utilized for all inspections conducted to guide and ensure complete assessment.				
	092	Written report with findings and recommendations communicated to the person in charge.				
Level 5		Ablution maintenance and cleaning programme in place and implemented				80%
		Monitoring programme for ablution facilities in place.				
		Inspection checklists are developed and utilized for all inspections conducted to guide and ensure complete assessment.				
		Written report with findings and recommendations communicated to the person in charge.				
	093	Records of inspections kept, and corrective action implemented.				
NS/16 – COMPONENT: DINATION AND COMMUNICATION PLAN						
Level 1	094	A Coordination and Communication procedure is in place and approved.				20%
Level 2		A Coordination and Communication procedure is in place and approved.				40%
	095	Updated contact details of stakeholders and management are available.				
Level 3		A Coordination and Communication procedure is in place and approved.				50%
		Updated contact details of stakeholders and management are available.				
	096	verified and updated contact details and functional communication equipment in place.				

						
Level 4		A Coordination and Communication procedure is in place and approved.				70%
		Updated contact details of stakeholders and management are available.				
		verified and updated contact details and functional communication equipment in place.				
	097	Records of communication are kept and made available. Tested communication procedure.				
Level 5		A Coordination and Communication procedure is in place and approved.				80%
		Updated contact details of stakeholders and management are available.				
		verified and updated contact details and functional communication equipment in place.				
		Records of communication are kept and made available. Tested communication procedure.				
	098	Tested communication procedure.				
	099	Report on the outcome of exercises to test communication procedures				
COMPONENT						
NS/17 - FOOD SAFETY MONITORING PLAN						
Level 1	0100	Municipal Food Safety Monitoring plan in place and approved.				20%

Level 2		Municipal Food Safety Monitoring plan in place and approved.				40%
	0101	PoE Food Safety Monitoring Programme in place and approved.				
	0102	Inspection checklist developed in collaboration with municipality utilized.				
Level 3		Municipal Food Safety Monitoring plan in place and approved.				50%
		PoE Food Safety Monitoring Programme in place and approved.				
		Inspection checklist developed in collaboration with municipality utilized.				
	0103	Food Safety Monitoring Programme implemented.				
Level 4		Municipal Food Safety Monitoring plan in place and approved.				70%
		PoE Food Safety Monitoring Programme in place and approved.				
		Inspection checklist developed in collaboration with municipality utilized.				
		Food Safety Monitoring Programme implemented.				
	0104	Inspection checklist utilized for the inspection provided to the person in charge.				
	0105	Inspection reports for non-compliance are shared with the Municipality.				
Level 5		Municipal Food Safety Monitoring plan in place and approved.				80%
		PoE Food Safety Monitoring Programme in place and approved.				

		Inspection checklist developed in collaboration with municipality utilized.				
		Food Safety Monitoring Programme implemented.				
		Inspection checklist utilized for the inspection provided to the person in charge.				
	0106	Quarterly Inspection reports from Municipal EHP are available.				
NS/18 – COMPONENT: MONITORING STANDARDS FOR WASTE MANAGEMENT						
Level 1	0107	Waste Management Plan in place and approved.				20%
Level 2		Waste Management Plan in place and approved.				40%
	0108	Waste Monitoring Plan in place and approved.				
	0109	Waste Monitoring Plan costed.				
Level 3		Waste Management Plan in place and approved.				50%
		Waste Monitoring Plan in place and approved.				
		Waste Monitoring Plan costed.				
	0110	A checklist developed and utilized.				
	0111	Waste Monitoring plan implemented.				
Level 4		Waste Management Plan in place and approved.				70%

		Waste Monitoring Plan in place and approved.				
		Waste Monitoring Plan costed.				
		A checklist developed and utilized.				
		Waste Monitoring plan implemented.				
	0112	Inspection reports with findings and recommendations are provided to the person in charge.				
Level 5		Waste Management Plan in place and approved.				80%
		Waste Monitoring Plan in place and approved.				
		Waste Monitoring Plan costed.				
		A checklist developed and utilized.				
		Waste Monitoring plan implemented.				
		Inspection reports with findings and recommendations are provided to the person in charge.				
	0113	Records of inspections and actions taken are kept	RA 			
	0114	Documented evidence of the final disposal site is kept.				
NS/19 – COMPONENT: VECTOR CONTROL MANAGEMENT PLAN						
Level 1	0115	Vector Control Plan in place and approved and covers the 400m perimeter zone.				20%
Level 2		Vector Control Plan in place and approved and covers the 400m perimeter zone.				40%

	0116	Vector Control Monitoring Plan in place, approved and costed				
Level 3		Vector Control Plan in place and approved and covers the 400m perimeter zone.				50%
		Vector Control Monitoring Plan in place, approved and costed				
	0117	A checklist developed and utilized.				
	0118	Vector Control Monitoring Plan implemented.				
Level 4		Vector Control Plan in place and approved and covers the 400m perimeter zone.				70%
		Vector Control Monitoring Plan in place, approved and costed				
		A checklist developed and utilized.				
		Vector Control Monitoring Plan implemented.				
	0119	Inspection reports with findings and recommendations are provided to the person in charge.				
Level 5		Vector Control Plan in place and approved and covers the 400m perimeter zone.				80%
		Vector Control Monitoring Plan in place, approved and costed				
		A checklist developed and utilized.				
		Vector Control Monitoring Plan implemented.				
		Inspection reports with findings and recommendations are provided to the person in charge.				

	0120	Records of inspections and vector measures applied are kept.				
NS/20 – COMPONENT: INDOOR AIR QUALITY MANAGEMENT PLAN						
Level 1	0121	Air Quality Management Plan in place and approved.				20%
Level 2		Air Quality Management Plan in place and approved.				40%
	0122	Indoor Air Quality Monitoring Plan in place and approved.				
	0123	Air Quality Monitoring Plan costed.				
Level 3		Air Quality Management Plan in place and approved.				50%
		Indoor Air Quality Monitoring Plan in place and approved.				
		Air Quality Monitoring Plan costed.				
	0124	Indoor Air Quality Monitoring Plan implemented.				
Level 4		Air Quality Management Plan in place and approved.				70%
		Indoor Air Quality Monitoring Plan in place and approved.				
		Air Quality Monitoring Plan costed.				
		Indoor Air Quality Monitoring Plan implemented.				
	0125	Inspection reports with findings and recommendations are provided to the person in charge.				
Level 5		Air Quality Management Plan in place and approved.				80%
		Indoor Air Quality Monitoring Plan in place and approved.				

		Air Quality Monitoring Plan costed.				
		Indoor Air Quality Monitoring Plan implemented.				
		Inspection reports with findings and recommendations are provided to the person in charge.				
	0126	Records of inspection and action taken are kept.				
	0127	Records of measures implemented.				
NS/21 – COMPONENT: WATER QUALITY MONITORING						
Level 1	0128	Water Safety Plan in place and approved				20%
Level 2		Water Safety Plan in place, approved and implemented.				40%
	0129	Water Quality Monitoring Plan in place and approved.				
	0130	Water Monitoring Plan costed.				
Level 3		Water Safety Plan in place, approved and implemented.				50%
		Water Quality Monitoring Plan in place and approved.				
		Water Monitoring Plan costed.				
	0131	Water Quality Monitoring Plan implemented.				
Level 4		Water Safety Plan in place, approved and implemented.				70%
		Water Quality Monitoring Plan in place and approved.				

		Water Monitoring Plan costed.				
		Water Quality Monitoring Plan implemented.				
	0132	Inspection reports with findings and recommendations are provided to the person in charge.				
Level 5		Water Safety Plan in place, approved and implemented.				80%
		Water Quality Monitoring Plan in place and approved.				
		Water Monitoring Plan costed.				
		Water Quality Monitoring Plan implemented.				
		Inspection reports with findings and recommendations are provided to the person in charge.				
	0133	Monitoring reports with findings and recommendations are provided to the person in charge.				
	0134	Records of monitoring and action taken are kept.				
NS/22 – COMPONENT: PUBLIC HEALTH EMERGENCY CONTINGENCY PLAN						
Level 1	0135	Public Health Emergency Contingency Plan in place and approved.				20%
Level 2		Public Health Emergency Contingency Plan in place and approved.				40%
	0136	Public Health Emergency Contingency Plan is integrated with other response plans.				
Level 3		Public Health Emergency Contingency Plan in place and approved.				50%

		Public Health Emergency Contingency Plan is integrated with other response plans.				
	0137	Public Health Emergency Contingency Plan inclusive of events caused by all hazards approach in line with IHR2005.				
Level 4		Public Health Emergency Contingency Plan in place and approved.				70%
		Public Health Emergency Contingency Plan is integrated with other response plans.				
		Public Health Emergency Contingency Plan inclusive of events caused by all hazards approach in line with IHR2005.				
	0138	Public Health Emergency Plan tested, report available and kept.				
Level 5		Public Health Emergency Contingency Plan in place and approved.				80%
		Public Health Emergency Contingency Plan is integrated with other response plans.				
		Public Health Emergency Contingency Plan inclusive of events caused by all hazards approach in line with IHR2005.				
		Public Health Emergency Plan tested, report available and kept.				
	0139	PHECP reviewed in line outcome of the drill exercise				

PART C– PROVINCES AND DISTRICT HEALTH LEVELS

NS/23 – COMPONENT: ENVIRONMENTAL HEALTH FORUM COORDINATION

Level 1	0140	The provincial EH forum is in place and operational.				20%
Level 2		The provincial EH forum is in place and operational.				40%
	0141	Meetings are held every quarter.				
Level 3		The provincial EH forum is in place and operational.				50%
		Meetings are held every quarter.				
	0142	Terms of reference are in place.				
Level 4		The provincial EH forum is in place and operational.				70%
		Meetings are held every quarter.				
		Terms of reference are in place.				
	0143	Minutes of meetings are available and approved by the chairperson.				
Level 5		The provincial EH forum is in place and operational.				80%
		Meetings are held every quarter.				
		Terms of reference are in place.				
		Minutes of meetings are available and approved by the chairperson.				
	0144	Feedback from the National Environmental Health Interprovincial meetings is integrated in agenda.				
NS/24 – COMPONENT: CLIMATE CHANGE AND HEALTH ADAPTATION						

Level 1	0145	Climate Change and health adaptation plan is available, budgeted and approved				20%
	0146	An implementation plan for heat and health guideline is in place.				
Level 2		Climate Change and health adaptation plan is available budgeted and approved.				40%
		An implementation plan for heat and health guideline is in place.				
	0147	Systems are in place to strengthen environmental health to address the impact of climate change on human health through mitigation and adaptation				
Level 3		Climate Change and health adaptation plan is available budgeted and approved.				50%
		An implementation plan for heat and health guideline is in place.				
		Systems are in place to strengthen environmental health to address the impact of climate change on human health through mitigation and adaptation				
	0148	A formalized collaboration with the South African Weather Services (SAWS) on Early Warning System for proactive response to climate change associated challenges				
	0149	A structure collaborative mechanism with relevant stakeholders to address climate change challenges.				
Level 4		Climate Change and health adaptation plan is available budgeted and approved.				70%
		An implementation plan for heat and health guideline is in place.				
		Systems are in place to strengthen environmental health to address the impact of climate change on human health through mitigation and adaptation				

		A formalized collaboration with the South African Weather Services (SAWS) on Early Warning System for proactive response to climate change associated challenges				
		A structure collaborative mechanism with relevant stakeholders to address climate change challenges.				
	0150	Climate Change and health adaptation forms part of operational plans within existing costed.				
Level 5		Climate Change and health adaptation plan is available budgeted and approved...				80%
		An implementation plan for heat and health guideline is in place.				
		Systems are in place to strengthen environmental health to address the impact of climate change on human health through mitigation and adaptation				
		A formalized collaboration with the South African Weather Services (SAWS) on Early Warning System for proactive response to climate change associated challenges				
		A structure collaborative mechanism with relevant stakeholders to address climate change challenges.				
		Climate Change and health adaptation forms part of operational plans within existing costed.				
	0151	A budget has been allocated to implement climate change programmes				
	0152	Records of climate change programmes and projects implemented are available.				
NS/25 – COMPONENT: ASSESSMENT OF SERVICE PROVISION BY MUNICIPALITIES						
Level 1	0153	Monitoring / assessment plan in place.				20%
Level 2		Monitoring / assessment plan in place.				40%

	0154	Assessment plan costed and budget made available.				
Level 3		Monitoring / assessment plan in place.				50%
		Assessment plan costed and budget made available.				
	0155	Implementation of the plan.				
Level 4		Monitoring / assessment plan in place.				
		Assessment plan costed and budget made available.				
		Implementation of the plan.				
	0156	Feedback given to municipalities.				70%
Level 5		Monitoring / assessment plan in place.				
		Assessment plan costed and budget made available.				
		Implementation of the plan.				
		Feedback given to municipalities.				
	0157	Municipality's Quality improvement plan monitored.				
NS/26 – COMPONENT: HEALTH CARE WASTE MANAGEMENT MONITORING						
Level 1	0158	A plan / policy is in place to monitor waste management activities with relevant to prevent conditions that may constitute a health hazard.				20%

Level 2		A plan / policy is in place to monitor waste management activities with relevant to prevent conditions that may constitute a health hazard.			40%
	0159	Inspection Reports are generated and shared with relative authorities / stakeholders for actioning.			
	0160	A Waste Management Information System (WMIS) is kept.	 		
Level 3		A plan / policy is in place to monitor waste management activities with relevant to prevent conditions that may constitute a health hazard.			50%
		Inspection Reports are generated and shared with relative authorities / stakeholders for actioning.			
		A Waste Management Information System (WMIS) is kept.			
	0161	General and/or Treatment plant and hazardous landfill sites are inspected at least twice (2) per year.			
	0162	Waste management practices are monitored at all levels.			
Level 4		A plan / policy is in place to monitor waste management activities with relevant to prevent conditions that may constitute a health hazard.			70%
		Inspection Reports are generated and shared with relative authorities / stakeholders for actioning.			
		A Waste Management Information System (WMIS) is kept.			
		General and/or Treatment plant and hazardous landfill sites are inspected at least twice (2) per year.			
		Waste management practices are monitored at all levels.			
	0163	Records of inspections, findings and recommendations of all inspections conducted on premises relating to waste (all types) management, particularly hazardous waste is kept	RA		

	0164	Health facilities are audited twice a year on waste management practices and reports produced.				
	0165	Facilities registration with SAWIS as waste generator is kept.				
Level 5		A plan / policy is in place to monitor waste management activities with relevant to prevent conditions that may constitute a health hazard.				80%
		Inspection Reports are generated and shared with relative authorities / stakeholders for actioning.				
		A Waste Management Information System (WMIS) is kept.				
		General and/or Treatment plant and hazardous landfill sites are inspected at least twice (2) per year.				
		Waste management practices are monitored at all levels.				
		Records of inspections, findings and recommendations of all inspections conducted on premises relating to waste (all types) management, particularly hazardous waste is kept				
		Health facilities are audited twice a year on waste management practices and reports produced.				
NS/27 – COMPONENT: MALARIA CONTROL						
Level 1	0166	A malaria control programme is in place and implemented.				20%
Level 2		A malaria control programme is in place and implemented.				40%
	0167	House-to-house surveys are conducted to actively detect malaria cases and vector				
	0168	A programme is in place to conduct blood smears from migrants and people who have visited malaria-endemic countries for malaria parasitaemia screening.				
Level 3		A malaria control programme is in place and implemented.				50%

		House-to-house surveys are conducted to actively detect malaria cases and vector				
		A programme is in place to conduct blood smears from migrants and people who have visited malaria-endemic countries for malaria parasitaemia screening.				
	0169	Malaria health education and awareness programmes are conducted.				
Level 4		A malaria control programme is in place and implemented.				70%
		House-to-house surveys are conducted to actively detect malaria cases and vector				
		A programme is in place to conduct blood smears from migrants and people who have visited malaria-endemic countries for malaria parasitaemia screening.				
		Malaria health education and awareness programmes are conducted.				
	0170	Epidemiological surveys are conducted to research the extent of transmission and gather data on the infected population.				
	0171	A vector control programme is in place for application of residual insecticides on inner wall surfaces, roofs and eaves of dwellings in malaria areas				
Level 5		A malaria control programme is in place and implemented.				80%
		House-to-house surveys are conducted to actively detect malaria cases and vector				
		A programme is in place to conduct blood smears from migrants and people who have visited malaria-endemic countries for malaria parasitaemia screening.				
		Malaria health education and awareness programmes are conducted.				
		Epidemiological surveys are conducted to research the extent of transmission and gather data on the infected population.				

		A vector control programme is in place for application of residual insecticides on inner wall surfaces, roofs and eaves of dwellings in malaria areas				
	0172	There are collaborative mechanisms in place with SAWS on Early Warning Systems for planning purposes and possible movement of malaria vectors.				
NS/28 – COMPONENT: HAZARDOUS SUBSTANCES CONTROL						
Level 1	0173	Environmental health practitioners are authorised as Inspectors in terms of the Hazardous Substances Act 1973 (Act No. 15 of 1973) to enforce the provisions of the Act.				20%
Level 2		Environmental health practitioners are authorised as Inspectors in terms of the Hazardous Substances Act 1973 (Act No. 15 of 1973) to enforce the provisions of the Act.				40%
	0174	Inspections of Group 1, Category A and B hazardous substances dealers' premises are conducted at least twice a year.				
Level 3		Environmental health practitioners are authorised as Inspectors in terms of the Hazardous Substances Act 1973 (Act No. 15 of 1973) to enforce the provisions of the Act.				50%
		Inspections of Group 1, Category A and B hazardous substances dealers' premises are conducted at least twice a year.				
	0175	Inspection checklists are designed and utilised for all inspections conducted to guide and ensure complete assessment.				
	0176	A database of all dealers available.				
Level 4		Environmental health practitioners are authorised as Inspectors in terms of the Hazardous Substances Act 1973 (Act No. 15 of 1973) to enforce the provisions of the Act.				70%
		Inspections of Group 1, Category A and B hazardous substances dealers' premises are conducted at least twice a year.				

		Inspection checklists are designed and utilised for all inspections conducted to guide and ensure complete assessment.				
		A database of all dealers available.				
	0177	A database of hazardous substances dealers and premises (both registered and unregistered) is kept and maintained for monitoring and control purposes.				
	0178	An inspection report indicating the conditions of the premises and the recommendations applicable is issued to the owner or person in charge after every inspection.				
Level 5		Environmental health practitioners are authorised as Inspectors in terms of the Hazardous Substances Act 1973 (Act No. 15 of 1973) to enforce the provisions of the Act.				80%
		Inspections of Group 1, Category A and B hazardous substances dealers' premises are conducted at least twice a year.				
		Inspection checklists are designed and utilised for all inspections conducted to guide and ensure complete assessment.				
		A database of all dealers available.				
		A database of hazardous substances dealers and premises (both registered and unregistered) is kept and maintained for monitoring and control purposes.				
		An inspection report indicating the conditions of the premises and the recommendations applicable is issued to the owner or person in charge after every inspection.				
	0179	A monitoring system is in place to manage and ensure that all pesticide and chemical poisonings are investigated by an environmental health practitioner and reported on the pesticide/chemical incident report form				
	0180	Records of all poisoning cases investigated are kept for reference purposes.				
NS/29 – COMPONENT: WATER SAFETY PLAN						

Level 1	0181	A costed and approved Water Safety Plan is in place in health facilities.				20%
Level 2		A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				40%
	0182	Water quality sampling equipment is available in the health facility, and samples are collected as per the recommended frequencies.	 RA			
Level 3		A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				50%
		Water quality sampling equipment is available in the health facility, and samples are collected as per the recommended frequencies.				
	0183	Facilities without municipal water supply or without adequate municipal water supply are mapped out, documented and form part of high-risk areas.				
Level 4		A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				70%
		Water quality sampling equipment is available in the health facility, and samples are collected as per the recommended frequencies.				
		Communities without municipal water supply or without adequate municipal water supply are mapped out, documented and form part of high-risk areas.				
	0184	Water monitoring records are kept and used to inform intervention plans.	 RA			
Level 5		A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				80%
		Water quality sampling equipment is available in the health facility, and samples are collected as per the recommended frequencies.				

		Communities without municipal water supply or without adequate municipal water supply are mapped out, documented and form part of high-risk areas.				
		Water monitoring records are kept and used to inform intervention plans.				
	0185	Diarrhoeal disease health facility records are monitored for possible linkages to compromised water quality.	RA			

PART D – LOCAL GOVERNMENT

NS/30 – COMPONENT: HEALTH SURVEILLANCE OF PREMISES						
Level 1	0186	Environmental health practitioners' routine inspections periodically to monitor conditions that may constitute a health hazard or a nuisance.				20%
Level 2		Environmental health practitioners' routine inspections periodically to monitor conditions that may constitute a health hazard or a nuisance.				40%
	0187	Inspection checklists are designed and utilised for every inspection conducted. Inspection reports are issued after every inspection is conducted.				
Level 3		Environmental health practitioners' routine inspections periodically to monitor conditions that may constitute a health hazard or a nuisance.				50%
		Inspection checklists are designed and utilised for every inspection conducted. Inspection reports are issued after every inspection is conducted.				
	0188	Inspections of premises adopt a risk management approach to ensure that interventions are directed at achieving maximum impact and resources are utilised where there is a greater need.				
	0189	Premises are categorised according to risk (high, medium, low) and record kept and updated.				

Level 4		Environmental health practitioners' routine inspections periodically to monitor conditions that may constitute a health hazard or a nuisance.				70%
		Inspection checklists are designed and utilised for every inspection conducted. Inspection reports are issued after every inspection is conducted.				
		Inspections of premises adopt a risk management approach to ensure that interventions are directed at achieving maximum impact and resources are utilised where there is a greater need.				
		Premises are categorised according to risk (high, medium, low) and record kept and updated. Air Quality Monitoring Plan and Indoor Air Quality Monitoring Plan in place and implemented				
	0190	Databases for all premises are available.				
Level 5		Environmental health practitioners' routine inspections periodically to monitor conditions that may constitute a health hazard or a nuisance.				80%
		Inspection checklists are designed and utilised for every inspection conducted. Inspection reports are issued after every inspection is conducted.				
		Inspections of premises adopt a risk management approach to ensure that interventions are directed at achieving maximum impact and resources are utilised where there is a greater need.				
		Premises are categorised according to risk (high, medium, low) and record kept and updated. Air Quality Monitoring Plan and Indoor Air Quality Monitoring Plan in place and implemented				
		Databases for all premises are available.				
	0191	State institutions are monitored for compliance to legislation.				
	0192	Recommended minimum frequencies of inspections are met.				

NS/31 – COMPONENT: FOOD SAFETY MONITORING						
Level 1	0193	The municipality is authorized in terms of Section 23 (1) of the Foodstuffs, Cosmetics and Disinfectants Act 1972 (Act no 54 of 1972), as amended, to enforce food control provisions of the act.				20%
	0194	Officials are authorized to enforce the foodstuffs Act.				
Level 2		The municipality is authorized in terms of Section 23 (1) of the Foodstuffs, Cosmetics and Disinfectants Act 1972 (Act no 54 of 1972), as amended, to enforce food control provisions of the act.				40%
		Officials are authorized to enforce the foodstuffs Act.				
	0195	Inspections are conducted in accordance with the provisions of Regulations Relating to the Powers and Duties of Inspectors and Analysts conducting inspections and Analysis at Food Premises, R328 of 20 April 2007.				
Level 3		The municipality is authorized in terms of Section 23 (1) of the Foodstuffs, Cosmetics and Disinfectants Act 1972 (Act no 54 of 1972), as amended, to enforce food control provisions of the act.				50%
		Officials are authorized to enforce the foodstuffs Act.				
		Inspections are conducted in accordance with the provisions of Regulations Relating to the Powers and Duties of Inspectors and Analysts conducting inspections and Analysis at Food Premises, R328 of 20 April 2007.				
	0196	A food sampling plan is available, and				
	0197	food samples are collected periodically to check compliance with bacteriological and chemical standards.				
	0198	Foodborne outbreaks are investigated, reports and records thereof are kept.				
	0199	A risk management approach is used in food premises, and all food premises are risk categorized.				

Level 4		The municipality is authorized in terms of Section 23 (1) of the Foodstuffs, Cosmetics and Disinfectants Act 1972 (Act no 54 of 1972), as amended, to enforce food control provisions of the act.				70%
		Officials are authorized to enforce the foodstuffs Act.				
		Inspections are conducted in accordance with the provisions of Regulations Relating to the Powers and Duties of Inspectors and Analysts conducting inspections and Analysis at Food Premises, R328 of 20 April 2007.				
		A food sampling plan is available, and				
		food samples are collected periodically to check compliance with bacteriological and chemical standards.				
		Foodborne outbreaks are investigated, reports and records thereof are kept.				
		A risk management approach is used in food premises, and all food premises are risk categorized.				
	0200	Every food handling premises is inspected at least once every quarter.				
Level 5		The municipality is authorized in terms of Section 23 (1) of the Foodstuffs, Cosmetics and Disinfectants Act 1972 (Act no 54 of 1972), as amended, to enforce food control provisions of the act.				80%
		Officials are authorized to enforce the foodstuffs Act.				
		Inspections are conducted in accordance with the provisions of Regulations Relating to the Powers and Duties of Inspectors and Analysts conducting inspections and Analysis at Food Premises, R328 of 20 April 2007.				
		A food sampling plan is available, and				
		food samples are collected periodically to check compliance with bacteriological and chemical standards.				

		Foodborne outbreaks are investigated, reports and records thereof are kept.				
		A risk management approach is used in food premises, and all food premises are risk categorized.				
		Every food handling premises is inspected at least once every quarter.				
	0201	Checklists are utilised for every inspection and inspection reports issued after every inspection is conducted.				
	0202	Food related outbreaks and complaints are investigated within 24hours, records and reports thereof are kept.				
NS/32 – COMPONENT: VECTOR CONTROL MONITORING						
Level 1	0203	A vector control monitoring plan is in place.				20%
Level 2		A vector control monitoring plan is in place.				40%
	0204	A vector control monitoring plan is in place, costed and approved.				
Level 3		A vector control monitoring plan is in place.				50%
		A vector control monitoring plan is in place, costed and approved.				
	0205	Inspection checklists are designed and utilized for every vector control related inspection and highlight the analysis of risk areas.				
Level 4		A vector control monitoring plan is in place.				70%
		A vector control monitoring plan is in place, costed and approved.				
		Inspection checklists are designed and utilized for every vector control related inspection and highlight the analysis of risk areas.				

	0206	Documentation of premises is verified, including records of chemical applications and quantities.				
Level 5		A vector control monitoring plan is in place.				80%
		A vector control monitoring plan is in place, costed and approved.				
		Inspection checklists are designed and utilized for every vector control related inspection and highlight the analysis of risk areas.				
		Documentation of premises is verified, including records of chemical applications and quantities.				
	0207	Inspection records are kept and maintained.				
NS/33 – COMPONENT: WATER QUALITY MONITORING						
Level 1	0208	A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				20%
Level 2		A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				40%
	0209	Water quality sampling equipment is available, and samples are collected as per the recommended frequencies.	RA 			
Level 3		A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				50%
		Water quality sampling equipment is available, and samples are collected as per the recommended frequencies.				

	0210	Communities without municipal water supply or without adequate municipal water supply are mapped out, documented and form part of high-risk areas.				
Level 4		A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				70%
		Water quality sampling equipment is available, and samples are collected as per the recommended frequencies.				
		Communities without municipal water supply or without adequate municipal water supply are mapped out, documented and form part of high-risk areas.				
	0211	Water monitoring records are kept and used to inform intervention plans.	RA			
Level 5		A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).				80%
		Water quality sampling equipment is available, and samples are collected as per the recommended frequencies.				
		Communities without municipal water supply or without adequate municipal water supply are mapped out, documented and form part of high-risk areas.				
		Water monitoring records are kept and used to inform intervention plans.				
	0212	Diarrhoeal disease clinic records are monitored for possible linkages to water supplies failures	RA			
NS/34 – COMPONENT: WASTE MANAGEMENT MONITORING						
Level 1	0213	A plan is in place to monitor waste management activities in the district, to prevent conditions that may constitute a health hazard in the district.				20%

Level 2		A plan is in place to monitor waste management activities in the district/facilities, to prevent conditions that may constitute a health hazard in the district.				40%
	0214	Reports are generated and shared with respective locals for actioning.				
Level 3		A plan is in place to monitor waste management activities in the district/facilities, to prevent conditions that may constitute a health hazard in the district.				50%
		Reports are generated and shared with respective locals for actioning.				
	0215	General and landfill sites are inspected at least twice a year.				
Level 4		A plan is in place to monitor waste management activities in the district/facilities, to prevent conditions that may constitute a health hazard in the district.				70%
		Reports are generated and shared with respective locals for actioning.				
		General and landfill sites are inspected at least twice a year.				
	0216	A database for landfill sites is kept.				
	0217	Waste management practices are monitored at all levels.				
	0218	Records of inspections, findings and recommendations of all inspections conducted on premises relating to waste (all types) management, particularly hazardous waste is kept.	RA			
Level 5	Level 5	A plan is in place to monitor waste management activities in the district/facilities, to prevent conditions that may constitute a health hazard in the district.				80%
		Reports are generated and shared with respective locals for actioning.				

		General and landfill sites are inspected at least twice a year.				
		A database for landfill sites is kept.				
		Waste management practices are monitored at all levels.				
		Records of inspections, findings and recommendations of all inspections conducted on premises relating to waste (all types) management, particularly hazardous waste is kept.				
	0219	Health facilities are audited twice a year on waste management practices and report produced.				
NS/35 – COMPONENT: CHEMICAL SAFETY MANAGEMENT						
Level 1	0220	Systems are in place at district level for Environmental Health to monitor chemical safety management.				20%
Level 2		Systems are in place at district level for Environmental Health to monitor chemical safety management				40%
	0221	A database of wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals is kept and maintained for monitoring and control purposes.				
Level 3		Systems are in place at district level for Environmental Health to monitor chemical safety management				50%
		A database of wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals is kept and maintained for monitoring and control purposes.				
	0222	Inspection checklist of manufacturers, wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals are designed and utilized to ensure complete assessment.				
Level 4		Systems are in place at district level for Environmental Health to monitor chemical safety management				70%

		A database of wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals is kept and maintained for monitoring and control purposes.				
		Inspection checklist of manufacturers, wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals are designed and utilized to ensure complete assessment.				
	0223	A database of manufacturers, wholesalers and retailers that ONLY supplies paints is kept and maintained.				
	0224	Records of chemical poisoning investigations are kept.	RA			
	0225	Sampling of cosmetics is conducted as and when the need arises and resources for sampling packaged cosmetics are available.				
Level 5		Systems are in place at district level for Environmental Health to monitor chemical safety management				80%
		A database of wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals is kept and maintained for monitoring and control purposes.				
		Inspection checklist of manufacturers, wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals are designed and utilized to ensure complete assessment.				
		A database of manufacturers, wholesalers and retailers that ONLY supplies paints is kept and maintained.				
		Records of chemical poisoning investigations are kept.				
		Sampling of cosmetics is conducted as and when the need arises and resources for sampling packaged cosmetics are available.				

	0226	Education campaigns on chemical safety issues (chemical poisoning, lead poisoning, household chemicals, pharmaceuticals, poisonous plants, mercury and other chemicals of public health concern is conducted at least once per year in conjunction with relevant stakeholders.				
NS/36 -COMPONENT: CLIMATE CHANGE AND HEALTH ADAPTATION						
Level 1	0227	Climate Change and health adaptation plans are available, budgeted and approved.				20%
	0228	An implementation plan for heat and health guidelines is in place.				
Level 2		Climate Change and health adaptation plan is available, budgeted and approved.				40%
		An implementation plan for heat and health guideline is in place.				
	0229	Systems are in place to strengthen environmental health to address climate change for health adaptation, prevention, management and control.				
Level 3		Climate Change and health adaptation plans are available, budgeted and approved.				50%
		An implementation plan for heat and health guideline is in place.				
		Systems are in place to strengthen environmental health to address climate change for health adaptation, prevention, management and control.				
	0230	A formalized collaboration with the South African Weather Services (SAWS) on Early Warning System for proactive response to climate change associated challenges.				
	0231	A collaborative mechanism structure with relevant stakeholders to address climate change challenges.				
Level 4		Climate Change and health adaptation plans are available, budgeted and approved.				70%

		An implementation plan for heat and health guideline is in place.				
		Systems are in place to strengthen environmental health to address climate change for health adaptation, prevention, management and control.				
		A formalized collaboration with the South African Weather Services (SAWS) on Early Warning System for proactive response to climate change associated challenges.				
	0232	Climate Change and health adaptation forms part of operational plans				
	0233	A budget has been allocated to implement climate change programmes.				
Level 5		Climate Change and health adaptation plans are available, budgeted and approved.				80%
		An implementation plan for heat and health guideline is in place.				
		Systems are in place to strengthen environmental health to address climate change for health adaptation, prevention, management and control.				
		A formalized collaboration with the South African Weather Services (SAWS) on Early Warning System for proactive response to climate change associated challenges.				
		Climate Change and health adaptation forms part of operational plans				
		A budget has been allocated to implement climate change programmes.				
	0234	Records of climate change programmes are available.				
	0235	Climate change projects implemented are available.				

GENERAL COMMENTS/REMARKS

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings visible.

ANNEXURE A

SUMMARY OF SCORES

Steps to complete the score sheet

- Complete the first part on institution details
- Enter the percentage scores under the weight column
- Highlight and select component and weight columns up to the end.
- Click copy
- Open a new excel spread sheet and just paste on the selected first column.
- Click insert
- Look for graph icon and select column graph
- Click on the edges of the graph to highlight it
- Select Chart design on top right
- Look for the graph with percentages on top of each column
- Click on it to show percentages
- You will have the graph, end

INSTITUTION: _____

PROVINCE: _____

DATE: _____

SUMMARY OF SCORES

NO	INSTITUTION	COMPONENET	WEIGHT	LEVEL OF COMPLIANCE
NS/1	ALL SPHERES	CLIENTS RIGHTS AND EXPEIENCE OF CARE		
NS/2		INTERNAL AND EXTERNAL COMMUNICATION INFRASTRUCTURE		
NS/3		PLANNING		

NS/4		HUMAN RESOURCES AND PROFESSIONAL IDENTITY		
NS/5		TRAINING AND DEVELOPMENT		
NS/6		MANAGEMENT		
NS/7		INFORMATION MANAGEMENT		
NS/8		COOPERATIVE GOVERNANCE		
NS/9		RECORD MANAGEMENT		
NS/10		COMPLIANCE MONITORING AND ENFORCEMENT		
NS/11		COMPLAINT MANAGEMENT		
NS/12	POINTS OF ENTRY	MONITORING STANDARDS FOR CONSIGNMENTS		
NS/13		MONITORING STANDARDS FOR CONVEYANCES		
NS/14		MONITORING OF TRAVELLERS		
NS/15		MONITORING STANDARDS FOR POINT OF ENTRY FACILITIES		
NS/16		COORDINATION AND COMMUNICATION PLAN		
NS/17		FOOD SAFETY MONITORING PLAN		
NS/18		MONITORING STANDARDS FOR WASTE MANAGEMENT		
NS/19		VECTOR CONTROL MANAGEMENT PLAN		
NS/20		INDOOR AIR QUALITY MANAGEMENT PLAN		
NS/21		WATER QUALITY MONITORING		
NS/22		PUBLIC HEALTH EMERGENCY CONTINGENCY PLAN		
NS/23	PROVINCES AND DISTRICT HEALTH LEVEL	ENVIRONMENTAL HEALTH FORUM COORDINATION		

NS/24		CLIMATE CHANGE AND HEALTH ADAPTATION		
NS/25		ASSESSMENT OF SERVICE PROVISION BY MUNICIPALITIES		
NS/26		HEALTH CARE WASTE MANAGEMENT MONITORING		
NS/27		MALARIA CONTROL		
NS/28		HAZARDOUS SUBSTANCES CONTROL		
NS/29		WATER QULAITY MONITORING		
NS/30		CLIMATE CHANGE		
NS/31	LOCAL GOVERNEMNT	HEALTH SURVEILLANCE OF PREMISES		
NS/32		FOOD SAFETY MONITORING		
NS/33		VECTOR CONTROL MONITORING		
NS/34		WATER QUALITY MONITORING		
NS/35		WASTE MANAGEMENT MONITORING		
NS/36		CHEMICAL SAFETY MANAGEMENT		
NS/37		CLIMATE CHANGE AND HEALTH ADAPTATION		

ANNEXURE B

EXPLANATORY NOTES/GUIDELINES ON ASSESSING ELEMENTS

ELEMENT NO	ELEMENT DESCRIPTION	EXPLANATORY NOTES
01	A system is in place to enable communication on service experience to the public.	A mechanism/procedure either online or manual for registering and management of public complaints, including record keeping.
02	A Standard Operating Procedure is available for management of public complaints.	An approved written SOP document, approved by the institution should be in place outlining how public complaints or compliments should be handled starting from receiving up to conclusion of the process.
03	Signage and display boards are in place, displayed outside the buildings/boundary to communicate to the public that Environmental Health Services (EHS) are rendered.	Written signage on the building indicating that environmental health services are rendered
04	Such display boards shall be visible to the public and reflect the facility name, service hours, and contact details.	Sign boards reflect details of operating hours, the name of the institution,
05	Signboards indicating offices/service centres/directions are available inside the building or entrance to the building	If offices are stationed in more than one service area.
06	A help desk is available and functional for administrative reception.	A physical help desk ment by a person/s is a physical contact centre where an official is posted to attend to walk-ins, available always during office hours.
07	Functional office telephone is available.	Working office telephones/landlines.
08	Staff are equipped with mobile telephones.	Individual Cell phones for field EH workers.
09	Functional printer/s is/are provided.	An accessible functioning office printer/s.
010	Web access is available.	Accessible office internet connection.
011	A costed five-year environmental health service delivery plan.	A documented strategic plan indicating long, medium- and short-term targets for environmental health services.
012	An annual operational plan and the plan forms part of the municipal service delivery and budget implementation plan at the district level.	Yearly EH service delivery plan (could be incorporated into the Institutions SDBIPs) -outlining EH indicators.
013	Municipal environmental health service delivery planning includes the point-of-entry environment.	Municipal plans should be inclusive of all environmental health services in the area, including services rendered at points of entry.
014	Environmental health objectives form part of the municipal integrated development plans and annual performance plans at the entry-level points.	EH indicators outlined in the IDP, District health plan.
015	Plans are monitored and reports submitted to higher levels.	Implementation/progress reports of the plans and submission to management.
016	An approved EH structure is in place and approved, outlining management, functional and support posts.	An organisational structure outlining EH (management, functional and support) posts.

017	Environmental Health Practitioners are registered with the Health Professions Council of South Africa and in good standing.	Records of annual EH registrations.
018	Environmental Health is directly managed by a qualified Environmental Health Practitioner (EHP) and registered with the Health Professions Council of South Africa, Board of environmental health, and is in good standing.	Manager/s supervising operational EHPs annual registrations with HPCSA.
019	Ratios of functional EHPs is in line with the Environmental Health Policy recommendations of 1 EHP/10 000 members of the population or the IHR 2005 for points of entry.	Operational EHP/population meet recommended ratio.
020	An HR plan is in place to address staff shortages.	A documented HR plan outlining long, medium- and short-term targets for recruitment of EHPs.
021	An HR plan is in place with clear annual targets to address staff shortages, costed and implemented.	HR plan costed and proof of targets implementation.
022	Environmental health staff is periodically trained and developed on technical aspects linked with environmental health functions, and records thereof are kept and updated.	Records of staff training interventions.
023	Staff development and capacity building needs are determined every 2 (two) years.	Records (2 years interval) of staff training needs assessments.
024	Skills development plans are compiled annually and submitted to management for consideration.	Documented performance development and skills development plans.
025	Training is aligned the Health Profession's Council's Continued Professional Development (CPD) Programme.	Proof of staff training interventions alignment to CPD.
026	An orientation programme is in place for newly appointed staff at all levels.	Documented orientation programme/s.
027	Systems are in place to ensure management meets with operational staff to review performance at national, provincial, district and point of entry level.	Records of staff progress review meetings.
028	Monthly and quarterly review meetings are held at an operational/sub-district level.	Records of staff progress monthly and quarterly review meetings.
029	Quarterly performance review meetings are held at District, Provincial and Regional levels.	Records of quarterly progress review meetings.
030	Provincial environmental health forums are established, functional, representative of relevant stakeholders and meetings held every quarter.	Records of EH forum meetings (Agenda, minutes).
031	Staff satisfaction survey is conducted annually, and the results thereof utilized for work environment improvements	Records of annual staff survey results/findings and implementation of findings.
032	National Health Information Management System Policy is accessible.	A copy of the DHIS policy available for implementation.
033	District Health Information System (DHIS) registers are available and utilized.	EH data collection tools/registers are in place at EH service delivery point/office and are used to record data that is captured into the DHIS monthly.
034	Standard operating procedure for data flow and management is available and implemented.	The latest (2013) Provincial/District/Sub-district DHIS SOP and National EH Environmental Health Services Information Management

		SOP is available and is followed in terms of data flow. Data is signed off by data capture/EHP/EH Supervisor, EH line manager for verification before submission for capturing.
035	Data capturers/administration staff are provided to capture data for EH Unit and both data captures and EHPs are trained on the guidelines.	Staff capturing data for EH Unit is available. Both data captures and EHPs are trained on the latest guiding policy, SOPs and National Indicator Dataset (NIDS) for EH. Training register from the 2025 NIDS training is available
036	Validated, accurate, complete and reported Environmental Health data is captured into the DHIS system monthly and timeously.	Checked and signed off (by data capture, EHP, EH Supervisor, EH line manager), for verification, non-error, correct, logical and complete data is captured and represent the complete list of eligible sources and not just a fraction of it. District data is captured in the system by the 30th of each month.
037	National Health Information Management System Policy is accessible and implemented.	Refer to Level 1. Implementation in the form of available SOPs, data captures, trained data captures and EHPs, data sign off (by data capture, EHP, EH Supervisor, EH line manager), correct and complete data, data analysis and feedback provision to EHPs
038	Data is analyzed quarterly and feedback provided to operational EHPs.	Quarterly feedback on performance of provincial/district/sub-district data is provided to EHPs in the form of report presentation/ written report in meetings/workshop and via-email/notice boards. Feedback meeting agenda and attendance register, report presentation copy, e-mail distribution copy and report displayed on the notice board
039	Environmental health has access to capture data and monitor data on the DHIS system	Proof of registration and access to the DHIS system for one or two of environmental health staff members to capture data and monitor data on the system. Registered staff have the latest (2023) Standard Operating Procedure for User Access to Health Information Systems and the latest (2023) WebDHIS User Manual.
040	Terms of reference for environmental health structures is in place.	Records of terms of reference for all structures that are established to guide its operations (e.g. waste, water, food safety, environmental management etc).
041	Committees that support the national environmental health structure are in place.	Established committees where necessary (supporting main structure)
042	Official working structures, arrangements and or Memorandum of Understandings, and/or official mechanisms	Formalised cooperative working arrangements (e.g. MOUs, SLAs, forms, coordinating committee) where applicable.
043	Meeting schedules, records of composition of the committees are in place.	Records of agreed upon meeting schedules.
044	Meeting minutes are available.	Records of meeting minutes.
045	Committee outputs are operationalised	Records of committee work informing operational plans.
046	Environmental Health records are kept and maintained up to date at all levels.	Proof of records of investigation reports, premises files, COAs, databases (premises, complaints, notifiable medical conditions

		investigations, etc) and staff legislation designations/appointments, etc.
047	A record management system is in place.	Procedure for record keeping e.g. electronic/web-based, manual.
048	Standard Operating Procedure/guideline for capturing, filing, accessing, tracking, archiving and disposal of records is in place at all levels.	A documented SOP for standardisation.
049	Records are kept electronically and manually.	Proof of an electronic or manual record keeping.
050	Records are backed up through a back-up system.	Proof of back-up (e.g. external hard drive, USB flash drive, CD/DVD, Cloud storage, Google Drive, iCloud, Dropbox, Backblaze, iDrive, and Microsoft OneDrive) on server, Network Attached Storage (NAS) dedicated file storage server, etc..
051	Records are in line with the provisions of the National Archives and Records Service of South Africa Act 1996 (Act. no 43 of 1996).	Proof of alignment with RSSA.
052	Environmental health legislation is accessible to all Environmental Health Practitioners electronically and/or manually for use and reference purposes.	Proof of records of legislation (electronic, manual).
053	Officials are appointed and/or designated as health officers in terms of Section 80 of the National Health Act 2003 (Act 61 of 2003), as amended, by the National Minister of Health, the Provincial Member of Executive Committee or the Mayor of a Metropolitan or District Council to enforce the Act; and trained and appointed as Peace Officers in terms of the Criminal Procedures Act 1977 (Act 51 of 1977).	Proof of appointment in terms of NHA. Proof of appointment as peace Officers.
054	Staff are trained and capacitated on implementation and enforcement of legislation	Proof of staff training initiatives.
055	Legal documents are available for use to issue notices, fines and closure notices in case of non-compliance.	Availability of fine books, J76 records.
056	Records of non-compliances that led to legal action kept. Municipality has been authorized or designated to enforce the national health legislation, where required.	Proof of authorisation letters, where applicable. Records of compliance notices and other supporting documents, where applicable.
057	To implement other environmental health related legislation outside the portfolio of the Ministry of Health, Environmental Health	Proof of authorisation, where applicable.
058	A standard operating procedure for complaints is in place.	A documented SOP (may form part of institutional complaints management).
059	Environmental health related public complaints are recorded/registered and investigated within 72 hours of receipt.	A record of complaints, outlining dates of complaints, investigation and closure.
060	Complaints regarded as urgent/poses immediate danger to human health are investigated within 24 hours of receipt.	A record of complaints, outlining dates of complaints, investigation and closure.
061	Feedback of the outcome of every complaint investigated is provided to a complainant within 7 days of receiving the complaint.	A record of complaints, outlining dates of complaints, investigation, date of feedback and closure.

062	Complaints records are kept and monitored for reported cases if they are finalised.	A record of complaints, outlining dates of complaints, investigation, date of feedback and closure.
063	Inspection checklist designed and utilised for every inspection conducted.	Proof of inspection checklists.
064	Consignments are inspected on arrival at the point of entry.	Consignments detained for Port Health/Health specialists by customs should be inspected on arrival. Records of consignments should be presented during the assessment, including the detained, inspected, released without inspection.
065	Records of Extended Health Detentions and the outcome inspections are kept.	All consignments granted EHD (referred or issued), should be inspected within the area of the PoE jurisdiction. Records of all EHDs, should be presented during the assessment these include referred and issued, and the outcome of the inspection.
066	Adequate inspection equipment is available and utilised.	Inspection tape, cutter, sample bottle, sampling containers, cooler box, ice packs, seal land border, and equipment to be presented during the assessment.
067	All high-risk products are sampled upon arrival and before release.	All honey, wheat, peanut butter, baby formula, ground nuts, and spices are sampled before release. All products identified during public health emergencies from the importing country. Records of all high-risk products received, sampled and laboratory reports to be presented during the assessment.
068	Standard Operating Procedures (SOPs) for the application of health measures are in place.	A documented procedure outlining the application of health measures at the PoE. (disinfection, decontamination). SOPs should be presented during the assessment.
069	Written inspection reports are issued by officials to the importer/agent for non-complying products.	Non-compliance report in a BMA letterhead outlining the shortcomings, the legislative provision contravened and remedial action. A report signed by a health specialist should be presented during the assessment.
070	Records of inspections are kept electronically and/or manually.	Digitalised or paper-based records of all consignment inspections conducted.
071	Database of agents and importers are kept and regularly updated.	Regularly updated database of agents facilitating clearance of health-related products operating in the points of entry as well as details of importers importing health-related consignment.
072	Inspection checklist designed and utilised for every inspection conducted.	A checklist designed and utilised for the monitoring of conveyances, includes assessment of required documentation, interviewing the crew, searching of conveyance and disinsection. In the case of seaports, the inspection checklist should include the issuance of a ship sanitation certificate. Used checklists should be presented during the assessment
073	All Conveyances are inspected on arrival at the point of entry including conveyances intentionally transporting sick passengers and free pratique is granted.	The records of all monitored conveyances including all conveyances transporting sick passengers.

		Records of passenger conveyance and all vessels granted free pratique. In the case of seaports record of all issued free pratique should be presented during the assessment. A completed checklist and applications for transporting sick passengers should be presented during the assessment.
074	Adequate inspection equipment is available and utilised.	Necessary equipment for monitoring based on the type of conveyance should be made available.
075	All conveyances arriving from countries where vector control is recommended are monitored to determine the implementation of vector control measures.	Records of all conveyances arriving from vector-borne disease endemic countries, which includes conveyances arriving from countries where health measures are recommended by WHO or the Department of Health. Completed Checklist to be presented during the assessment.
076	SOPs for the application of health measures are in place.	Documented procedure outlining the application of health measures (disinfection, disinfection and decontamination). A SOP should be presented during the assessment.
077	Records of conveyances where health measures were implemented and conveyance intentionally transporting sick travellers are kept.	Detailed information of all conveyances where health measures were implemented. A manual or digitalised database of all conveyance intentionally transporting sick passengers and updated records where health measures were applied should be presented.
078	A database of conveyance operators is kept and regularly updated.	An updated electronic or manual record of all conveyance operators, their ground handlers and agents. Date of the last update should be reflected in the database should be presented
079	All travellers are subjected to screening processes for any signs and symptoms indicative of illness.	Types of screening, includes, visual-observation to identify travellers who looks unwell , non-invasive temperature screening. Visual assessment during walk about.
080	All travellers screened and presenting with elevated temperature and/or signs of illness are subjected to secondary screening.	Secondary screening of traveller referred from primary screening, include traveller interview, with the use of assessment form, where necessary referral to the health facility. Records of all travellers subjected to secondary screening should be presented during the assessment
081	An assessment tool is developed and utilized for secondary screening and records are kept.	To ensure that the relevant questions are asked and required traveller information is collected. A completed assessment tool should be presented during the assessment.
082	Requirements for additional health measures recommended for travellers are monitored.	Additional health measure during emergencies recommended by WHO and/or Department of Health implemented. Written circular/ directive/ instruction on the application of addition health measures is available. Procedure on the implementation of additional measure available.
083	Travellers placed under public health observation, quarantine or isolation are monitored.	Travellers that are monitored over a certain period of time to determine whether they develop signs and symptoms (public

		observation), suspect travellers that are monitored to determine whether they develop signs and symptoms(quarantine), ill travellers that have been separated from other persons monitored to prevent further spread of disease(isolation). A completed monitoring form presented during the assessment.
084	records are kept and maintained.	Manual and electronic records of travellers placed under public health observation, quarantine or isolation presented during the assessment.
085	All suspected cases are reported according to the communication procedure.	All suspected cases referred to a health facility are communicated to Provincial CDC, IHR Focal point, internal BMA senior officials, District and provincial outbreak response team, etc. Records of all suspected cases reported to relevant authorities presented during the assessment.
086	Contact details of stakeholders involved in the notification, surveillance, detection and response to suspect cases are kept and regularly updated.	Updated contact details of all stakeholders involved in informing, notifying, detecting and responding to a suspect case, this includes conveyance operators, service providers, district and provincial outbreak response teams etc. Manual and electronic list of regularly updated contact details presented during the assessment.
087	A plan for the implementation of entry and exit control for the early detection and prevention of sick or suspected travellers is available	A plan outlining procedure for entry and exit screening is developed for early detection and prevention of sick or suspected travellers. Entry and exit control presented during the assessment.
088	Ablution maintenance and cleaning programme in place and implemented.	Documented programme outlining the schedule, including the checklist, etc. for maintenance and cleaning of ablution facilities. A formalised document for the maintenance and cleaning of ablution facilities by the landlord/or the services provider appointed/ should be presented during the assessment including the completed checklist.
089	Monitoring programme for ablution facilities in place.	A documented programme developed by the health specialist to monitor the implementation of the maintenance, and cleaning programme. A documented programme including a completed checklist should be presented during the assessment.
090	Inspection checklists are developed and utilized for all inspections conducted to guide and ensure complete assessment.	A checklist developed by the health specialist indicating the areas of inspections, findings recommended remedial actions etc. A completed checklist presented during the assessment
091	In case of unsatisfactory conditions, the person in charge is immediately notified and records are kept.	Unsatisfactory refers to a facility with conditions that do not conform to the basic hygiene requirements, such as lack of water, soap, for hand washing, toilet paper and inadequate hand washing facility. The person in charge should be informed within 24 hours. Communication records between the health specialist and the person in charge should be presented during the assessment.
092	Written report with findings and recommendations communicated to the person in charge.	A signed, dated report detailing the outcomes of the inspections including corrective actions should be communicated to the person in

		charge on a monthly basis. A documented report should be presented during the assessment.
093	Records of inspections kept, and corrective action implemented.	Records of all inspections that have been conducted and all corrective actions implemented by the services provider/person in charge. Electronic or Manual records should be presented during the assessment.
094	A Coordination and Communication procedure is in place and approved.	A documented procedure outlining the channels and summary of events that require internal and/or external communication. An approved documented procedure should be presented during the assessment.
095	Updated contact details of stakeholders and management are available.	Regularly updated list of internal and external contact details of all relevant stakeholders and should be accessible to all health specialists. Should be updated when required but not more than six (6) months. A documented list of stakeholders indicating the last date of update should be presented during the assessment
096	Verified and updated contact details and functional communication equipment in place.	Contact details should be updated and verifiable and the communication equipment (computer, cell phones, telephone) should be in good working condition. Equipment and contact details will be tested during the assessment.
097	Records of communication are kept and made available. Tested communication procedure.	Records of communication done with the internal or external stakeholders with emphasis on public health events. Records of communication should be presented during the assessment.
098	Tested communication procedure.	A regularly tested communication procedure by health specialists to ensure seamless communication. A schedule on the frequency of testing the communication procedure should be presented during the assessment.
099	Report on the outcome of exercises to test communication procedures	A documented report outlining the findings following tested communication procedure exercise. A report should be presented during the assessment.
0100	Municipal Food Safety Monitoring plan in place and approved.	An approved documented plan inclusive of PoE food establishment monitoring should be presented during the assessment.
0101	PoE Food Safety Monitoring Programme in place and approved.	An approved documented plan is developed by the health specialist to monitor the implementation of the Municipal Food Safety Monitoring. An approved food safety monitoring programme should be presented during the assessment
0102	Inspection checklist developed in collaboration with municipality utilized.	Health specialists in collaboration with the municipal Environmental Health Practitioner (EHP) develop the checklist indicating the areas of inspection, applicable legislation etc. to ensure the standardisation of inspections. A completed checklist should be presented during the assessment.

0103	Food Safety Monitoring Programme implemented.	Food establishments at the PoE are monitored. A completed checklist and records where applicable should be presented during the assessment.
0104	Inspection checklist utilized for the inspection provided to the person in charge.	The health specialist should share a completed checklist with the person in charge after each inspection conducted. A copy of a completed checklist should be presented during the assessment.
0105	Inspection reports for non-compliance are shared with the Municipality.	Health specialists should inform municipal EHP where non-compliance was identified during the inspection. An email notification should be presented during the assessment as evidence
0106	Quarterly Inspection reports from Municipal EHP are available.	Records of inspections conducted by municipal EHP should be provided to the health specialist. Records of reports should be presented during the assessment.
0107	Waste Management Plan in place and approved.	An approved documented plan for the management of waste inclusive of all types of waste in the PoEs developed by the landlord including the final destination of the waste. An approved plan should be presented during the assessment
0108	Waste Monitoring Plan in place and approved.	An approved plan developed by health specialists to monitor the implementation of the Waste Management Plan and other waste-related nuisances that may cause risk to public health. An approved documented plan should be presented during the assessment.
0109	Waste Monitoring Plan costed.	The plan should be budgeted for, to ensure the comprehensive implementation of the plan. A plan indicating the budget allocation should be presented during the assessment.
0110	A checklist developed and utilized.	A checklist developed for all types of waste generated at the PoE and used by a health specialist to ensure comprehensive inspection. A completed checklist should be presented during the assessment.
0111	Waste Monitoring plan implemented.	Implementation of the plan means regular inspection of the PoE facilities. A completed checklist should be presented during the assessment.
0112	Inspection reports with findings and recommendations are provided to the person in charge.	Health specialists should communicate to the person in charge monthly and areas requiring remedial action should be communicated within 24 hours. A signed and dated report indicating the outcomes of the inspection including the recommendations should be presented during the inspection
0113	Records of inspections and actions taken are kept.	Electronic or manual records of inspections and actions taken by service provider are kept. Records of inspections and actions taken should be presented during the assessment
0114	Documented evidence of the final disposal site is kept.	Final disposal sites of all types of waste should be included in the Waste Management Plan, and Waste Monitoring Plan, where

		applicable should include a disposal certificate. Evidence of final disposal should be presented during the assessment.
0115	Vector Control Plan in place and approved and covers the 400m perimeter zone.	An approved documented plan for the management of vectors in the PoEs environment developed by the person in charge, inclusive of a 400m perimeter zone. A document should be presented during the assessment.
0116	Vector Control Monitoring Plan in place, approved and costed	An approved plan developed by health specialists to monitor the implementation of the Vector Control Plan. The plan should be budgeted for, to ensure the comprehensive implementation of the plan. An approved documented plan indicating the budget allocation should be presented during the assessment.
0117	A checklist developed and utilized.	A checklist developed for vector-control monitoring at the PoE and used by a health specialist to ensure comprehensive inspection. A completed checklist should be presented during the assessment.
0118	Vector Control Monitoring Plan implemented.	Implementation of the plan means regular inspection of the PoE facilities. A completed checklist should be presented during the assessment.
0119	Inspection reports with findings and recommendations are provided to the person in charge.	Health specialists should communicate the outcomes of the inspection to the person in charge. Areas requiring remedial action should be communicated within 24 hours. A signed and dated report indicating the outcomes of the inspection including the recommendations should be presented during the assessment
0120	Records of inspections and vector measures applied are kept.	Electronic or manual records of inspections and actions taken by service provider are kept. Records of inspections and actions taken should be presented during the assessment
0121	Air Quality Management Plan in place and approved.	An approved documented plan for the management of Air Quality Management Plan for the PoEs environment developed by the person in charge
0122	Indoor Air Quality Monitoring Plan in place and approved.	An approved document developed by Health Specialist to monitor the implementation of the Indoor Air Quality outlined in the Air Quality Plan within the PoE environment. An approved document indicating the areas of inspection should be presented during the assessment
0123	Air Quality Monitoring Plan costed.	The plan should be budgeted for, to ensure the comprehensive implementation. A plan indicating the budget allocation should be presented during the assessment.
0124	Indoor Air Quality Monitoring Plan implemented.	Implementation of the plan means regular inspections of the PoE facilities are conducted. A completed checklist should be presented during the assessment.
0125	Inspection reports with findings and recommendations are provided to the person in charge.	Health specialists should communicate the outcomes of the inspection to the person in charge. A signed and dated report

		indicating the outcomes of the inspection including the recommendations should be presented during the assessment
0126	Records of inspection and action taken are kept.	Electronic or manual records of inspections and actions taken by service provider are kept. Records of inspections and actions taken should be presented during the assessment
0127	Records of measures implemented.	Electronic and manual records of corrective measures implemented should be presented during the assessment. Records of inspections and actions taken should be presented during the assessment
0128	Water Safety Plan in place and approved	An approved documented water safety plan for the PoEs is developed by the municipality or person in charge of the PoE. An approved plan should be presented during the assessment
0129	Water Quality Monitoring Plan in place and approved.	An approved plan developed by health specialists to monitor the implementation of the Water Safety Plan An approved documented plan should be presented during the assessment.
0130	Water Monitoring Plan costed.	The plan should be budgeted for, to ensure the comprehensive implementation of the plan. A plan indicating the budget allocation should be presented during the assessment.
0131	Water Quality Monitoring Plan implemented.	Regular water samples are collected in the PoE to determine compliance with relevant standards. Records of samples taken and analysis results should be presented during the assessment.
0132	Inspection reports with findings and recommendations are provided to the person in charge.	Health specialists should communicate to the person in charge on a monthly basis and areas requiring remedial action should be communicated within 24 hours. A signed and dated report indicating the outcomes of the inspection including the recommendations should be presented during the inspection
0133	Monitoring reports with findings and recommendations are provided to the person in charge.	Health specialists should communicate to the person in charge on a monthly basis and areas requiring remedial action should be communicated within 24 hours. A signed and dated report indicating the outcomes of the inspection including the recommendations should be presented during the inspection
0134	Records of monitoring and action taken are kept.	Electronic or manual records of inspections and actions taken by service provider are kept. Records of inspections and actions taken should be presented during the assessment
0135	Public Health Emergency Contingency Plan in place and approved.	An approved plan for the management of public health events during emergencies. An approved document detailing the activities for Public Health Emergencies should be presented during the assessment.
0136	Public Health Emergency Contingency Plan is integrated with other response plans.	The plan should reference emergency response plans from other stakeholders within and outside the port. Document should be signed by all stakeholders. An integrated document developed in

		collaboration with all relevant stakeholders should be presented during the assessment.
0137	Public Health Emergency Contingency Plan inclusive of events caused by all hazards approach in line with IHR2005.	The documented plan should include biological, nuclear, chemical and radiation hazards that may cause a public health risk. An approved document with all hazard approach should be presented during the assessment.
0138	Public Health Emergency Plan tested, report available and kept.	A simulation exercise (desktop or full-scale) of the plan should be conducted to test the effectiveness of the plan. A register of participants and a signed report should be presented during the assessment.
0139	PHECP reviewed in line outcome of the drill exercise	The document should be updated in line with the findings of the exercise. An outcome report should be presented during the assessment.
0140	The provincial EH forum is in place and operational.	Proof of provincial EH forum (e.g. list of members).
0141	Meetings are held every quarter.	Proof of quarterly meetings (Agenda, attendance registers).
0142	Terms of reference are in place.	Documented and agreed upon ToRs
0143	Minutes of meetings are available and approved by the chairperson.	Proof of meeting minutes.
0144	Feedback from the National Environmental Health Interprovincial meetings is integrated in agenda.	Proof of inclusion of national feedback in the meeting agenda.
0145	Climate Change and health adaptation plan is available.	A documented, costed and approved CCHD plan.
0146	An implementation plan for heat and health guideline is in place.	A documented, HH plan, outlining activities.
0147	Systems are in place to strengthen environmental health to address the impact of climate change on human health through mitigation and adaptation	Proof of procedures, methods, and stakeholder collaboration mechanisms.
0148	A formalized collaboration with the South African Weather Services (SAWS) on Early Warning System for proactive response to climate change associated challenges.	Proof/ evidence of collaboration with SAWS on Early Warning System
0149	A structure collaborative mechanism with relevant stakeholders to address climate change challenges.	Proof of existing committee/task team with stakeholders as members.
0150	Climate Change and health adaptation forms part of operational plans within existing costed.	Proof of climate change and health adaptation indicators incorporated in the operational plans.
0151	A budget has been allocated to implement climate change programmes.	Proof of allocated budget.
0152	Records of climate change programmes and projects implemented are available.	Records are kept on climate change programmes and project implementation either manually or electronically
0153	Monitoring / assessment plan in place.	A documented monitoring plan, outlining activities and timeframes
0154	Assessment plan costed and budget made available.	Proof of budget.
0155	Implementation of the plan.	Proof/records of monitoring activities.
0156	Feedback given to municipalities.	Records of feedback sessions or reports.
0157	Municipality's Quality improvement plan monitored.	A systematic plan to monitor and support municipalities on the improvement plan is in place.

0158	A plan / policy is in place to monitor waste management activities with relevant to prevent conditions that may constitute a health hazard.	A written costed and approved plan/policy, hard or electronic, is in place to monitor waste management activities.
0159	Reports are generated and shared with relative authorities / stakeholders for actioning.	Inspection reports produced and proof of sharing with relevant authorities /stakeholders so that action can be taken.
0160	A Waste Management Information System (WMIS) is kept.	Proof of uploading into the WMIS where applicable.
0161	General and/or Treatment plant and hazardous landfill sites are inspected at least twice (2) per year.	Proof of inspections (checklists, reports)
0162	Waste management practices are monitored at all levels.	Monitoring reports/inspections on waste management practices are available.
0163	Records of inspections, findings and recommendations of all inspections conducted on premises relating to waste (all types) management, particularly hazardous waste is kept.	Hard or electronic copies of inspections outlining findings and recommendations.
0164	Health facilities are audited twice a year on waste management practices and reports produced.	Proof of audits/audit records.
0165	Facilities registration with SAWIS as waste generator is kept.	Proof of records of facilities generating more than 20kg of waste per day in terms of the National Waste Information System Regulations, 2012.
0166	A malaria control programme is in place and implemented.	A written costed and approved plan/policy, hard or electronic, is in place to monitor waste management activities.
0167	House-to-house surveys are conducted to actively detect malaria cases and vector.	Proof of records of house-to-house surveys conducted in endemic provinces (Provinces that have Malaria vector i.e. Kwazulu Natal, Limpopo and Mpumalanga)
0168	A programme is in place to conduct blood smears from foreigners and people who have visited malaria-endemic countries for malaria parasitaemia screening.	Proof of records of non-endemic provinces, blood smears to be done in cases of odyssean / taxi malaria / unclassified cases
0169	Malaria health education and awareness programmes are conducted.	Awareness plan in place.
0170	Epidemiological surveys are conducted to research the extent of transmission and gather data on the infected population.	Proof/records of surveys.
0171	A vector control programme is in place for application of residual insecticides on inner wall surfaces, roofs and eaves of dwellings in malaria areas	Records of residual spraying.
0172	There are collaborative mechanisms in place with SAWS on Early Warning Systems for planning purposes and possible movement of malaria vectors. Environmental health practitioners are authorised as Inspectors in terms of the Hazardous Substances Act 1973 (Act No. 15 of 1973) to enforce the provisions of the Act.	There is evidence of collaboration with SAWS on Early Warning System to assist with planning for intervention looking at change in weather patterns.
0173	Environmental health practitioners are authorised as Inspectors in terms of the Hazardous Substances Act 1973 (Act No. 15 of 1973) to enforce the provisions of the Act.	Letters of appointment issued by the NDoH, hard or electronic copy, are made available.
0174	Inspections of Group 1, Category A and B hazardous substances dealers' premises are conducted at least twice a year.	Proof/records of 2 inspections per year.

0175	Inspection checklists are designed and utilised for all inspections conducted to guide and ensure complete assessment.	A checklist for inspections is developed and available.
0176	A database of all dealers available.	Proof of a hard or electronic databases.
0177	A database of hazardous substances dealers and premises (both registered and unregistered) is kept and maintained for monitoring and control purposes.	Proof of a hard or electronic databases.
0178	An inspection report indicating the conditions of the premises and the recommendations applicable is issued to the owner or person in charge after every inspection.	Records of inspection reports issued.
0179	A monitoring system is in place to manage and ensure that all pesticide and chemical poisonings are investigated by an environmental health practitioner and reported on the pesticide/chemical incident report form	Records of pesticide/chemical incident report forms.
0180	Records of all poisoning cases investigated are kept for reference purposes.	Records of poisoning cases investigated.
0181	A Water Safety Plan is in place, costed and approved in the health facility (budget allocation included) in facilities where municipal water is augmented.	A document facility plan (outlining water sources and sampling points, sampling frequencies, determinants to be monitored as per the water quality monitoring plan template, with funding allocated to support its implementation
0182	Water quality sampling equipment is available in the health facility, and samples are collected as per the recommended frequencies.	Water quality sampling equipment is procured, and samples are collected regularly according to recommended schedules in alignment with the water quality monitoring plan
0183	Facilities without municipal water supply or without adequate municipal water supply are mapped out, documented and form part of high-risk areas.	Proof of mapping
0184	Water monitoring records are kept and used to inform intervention plans.	Water monitoring results from the laboratory are recorded, analysed and utilised to guide intervention planning and decision-making
0185	Diarrhoeal disease health facility records are monitored for possible linkages to compromised water quality.	Explanatory Notes: Facility records of diarrhoeal diseases are reviewed and analysed to detect any trends or outbreaks that may be associated with compromised water quality, to identify potential contamination of drinking water sources and to ensure timely implementation of environmental health interventions.
0186	Environmental health practitioners' routine inspections periodically to monitor conditions that may constitute a health hazard or a nuisance.	Records of inspections.
0187	Inspection checklists are designed and utilised for every inspection conducted. Inspection reports are issued after every inspection is conducted.	Proof of inspection checklist. Records of inspection records.
0188	Inspections of premises adopt a risk management approach to ensure that interventions are directed at achieving maximum impact and resources are utilised where there is a greater need.	Records of risk categorisation of premises.

0189	Premises are categorised according to risk (high, medium, low) and record kept and updated. Air Quality Monitoring Plan and Indoor Air Quality Monitoring Plan in place and implemented	Records of risk categorisation of premises.
0190	Databases for all premises are available.	Records of databases (electronic/manual, on-line)
0191	State institutions are monitored for compliance to legislation.	Records of state premises inspections.
0192	Recommended minimum frequencies of inspections are met.	Proof of inspections and frequencies as per databases.
0193	The municipality is authorized in terms of Section 23 (1) of the Foodstuffs, Cosmetics and Disinfectants Act 1972 (Act no 54 of 1972), as amended, to enforce food control provisions of the act.	Proof of authorisation.
0194	Officials are authorized to enforce the foodstuffs Act.	Proof of authorisation.
0195	Inspections are conducted in accordance with the provisions of Regulations Relating to the Powers and Duties of Inspectors and Analysts conducting inspections and Analysis at Food Premises, R328 of 20 April 2007.	Proof of alignment of inspections with R328 (seizure, detaining, inspection of records etc) whichever is applicable.
0196	A food sampling plan is available	A documented plan, outlining activities, priorities etc.
0197	Food samples are collected periodically to check compliance with bacteriological and chemical standards.	Records pf samples and analysis of results.
0198	Food borne outbreaks are investigated, reports and records thereof are kept.	Outbreak investigation reports.
0199	A risk management approach is used in food premises, and all food premises are risk categorized.	Proof of records of high, medium and low risk premises.
0200	Every food handling premises is inspected at least once every quarter.	Proof of inspection records in line with databases.
0201	Checklists are utilised for every inspection and inspection reports issued after every inspection is conducted.	Proof of checklists.
0202	Food related outbreaks and complaints are investigated within 24hours, records and reports thereof are kept.	Proof of records of complaint investigations.
0203	A vector control monitoring plan is in place.	A documented plan (outlining situational analysis, priorities, activities, targets etc).
0204	A vector control monitoring plan is in place, costed and approved.	Proof of approval and allocation of budget.
0205	Inspection checklists are designed and utilized for every vector control related inspection and highlight the analysis of risk areas.	Proof of completed checklists.
0206	Documentation of premises is verified, including records of chemical applications and quantities.	Completed inspection lists, and records of chemicals use.
0207	Inspection records are kept and maintained.	Proof of documented records.
0208	A Water Quality Monitoring Plan is in place, costed and approved in the health facility (budget allocation included).	Proof of a documented plan outlining (community profile (rural/urban/peri urban setting, total population, number of wards, types of dwellings, types of water sources) and sampling sites/points, sampling frequencies, determinants to be monitored as per the water quality monitoring plan template, with funding allocated to support its implementation.

0209	Water quality sampling equipment is available, and samples are collected as per the recommended frequencies.	Water quality sampling equipment's (as outlined in the Norms and standards) Proof/records of samples and results.
0210	Communities without municipal water supply or without adequate municipal water supply are mapped out, documented and form part of high-risk areas.	Proof of documented mapping.
0211	Water monitoring records are kept and used to inform intervention plans.	Water monitoring results from the laboratory are recorded, analysed and utilised to guide intervention planning and decision-making
0212	Diarrhoeal disease clinic records are monitored for possible linkages to water supplies failures.	Proof of records of diarrhoeal diseases.
0213	A plan is in place to monitor waste management activities in the district, to prevent conditions that may constitute a health hazard in the district.	A costed and approved plan, in hard or electronic form, is available to monitor waste management activities.
0214	Reports are generated and shared with respective locals for actioning.	Proof of reports produced, hard or electronic form, are shared for action to be taken.
0215	General and landfill sites are inspected at least twice a year.	Proof of inspections.
0216	A database for landfill sites is kept.	Hard or electronic database is always maintained of landfill sites.
0217	Waste management practices are monitored at all levels.	Proof of inspections and monitoring activities.
0218	Records of inspections, findings and recommendations of all inspections conducted on premises relating to waste (all types) management, particularly hazardous waste is kept.	Hard or electronic records of inspections including findings and recommendations are always maintained.
0219	Health facilities are audited twice a year on waste management practices and report produced.	Records of audits.
0220	Systems are in place at district level for Environmental Health to monitor chemical safety management.	Proof of monitoring (inspection records)
0221	A database of wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals is kept and maintained for monitoring and control purposes	Hard or electronic database is always maintained.
0222	Inspection checklist of manufacturers, wholesalers and retailers that ONLY supplies household detergents, disinfectants, cosmetics and industrial chemicals are designed and utilized to ensure complete assessment.	Proof of inspection checklists, hard or electronic form, and used during the assessment.
0223	A database of manufacturers, wholesalers and retailers that ONLY supplies paints is kept and maintained.	Hard or electronic database is always maintained.
0224	Records of chemical poisoning investigations are kept.	Hard or electronic records of chemical poisoning investigations are maintained.
0225	Sampling of cosmetics is conducted as and when the need arises and resources for sampling packaged cosmetics are available.	Equipment and materials are readily available for sampling purposes.
0226	Education campaigns on chemical safety issues (chemical poisoning, lead poisoning, household chemicals, pharmaceuticals, poisonous plants, mercury and other chemicals of public health concern is	Documented evidence in the form of projects reports, hard or electronic form, of educational campaigns are available in collaboration with relevant stakeholders.

	conducted at least once per year in conjunction with relevant stakeholders.	
0227	Climate Change and health adaptation plan is available.	A plan developed on climate change and health adaptation (outlining priorities, activities, targets) is in place, costed and approved
0228	An implementation plan for heat and health guideline is in place.	An implementation plan developed on heat health action guidelines is in place, costed and approved.
0229	Systems are in place to strengthen environmental health to address climate change for health adaptation, prevention, management and control.	Systems are available e.g. collaboration with other stakeholders on addressing mitigation and adaptation
0230	A formalized collaboration with the South African Weather Services (SAWS) on Early Warning System for proactive response to climate change associated challenges.	There is evidence of collaboration with SAWS on Early Warning System
0231	A structure collaborative mechanism with relevant stakeholders to address climate change challenges.	There is evidence of collaboration with other relevant stakeholders to address climate change impacts e.g. structures, committees/task teams)
0232	Climate Change and health adaptation forms part of operational plans.	Climate change activities incorporation in the operational plans.
0233	A budget has been allocated to implement climate change programmes.	There is allocated budget for climate change programmes
0234	Records of climate change programmes are available.	Proof of records are kept on climate change programmes and project implementation either manually or electronically
0235	Climate change projects implemented are available.	Documented projects, scheduled, reports.