

CENTRAL KAROO

DISTRICT MUNICIPALITY



SECTION: MUNICIPAL HEALTH SERVICES

HEALTH CARE RISK WASTE



The Section Municipal / Environmental Health of the Central Karoo District Municipality aims to create an environment supportive of good health and minimize those factors detrimental to our health in the Central Karoo district

The Section is focused on the needs and expectations of our communities in the Central Karoo. We seek a good relationship between the municipality and its inhabitants, with a collective responsibility for the environment to ensure that all communities will live in an environment that is beneficial to their health

OUR FUNCTION

The National Health Act, 2003 (Act 61 of 2003) defines Municipal Health Services as Environmental Health. In terms of Section 1 of the Act Municipal Health Services are defined as:

- Water Quality Monitoring;
- **Waste Management and Monitoring;**
- Food Control;
- Environmental Pollution Control;
- Health Surveillance of Premises;
- Communicable Diseases Control;
- Vector Control;
- Chemical Safety; and
- Management of Human Remains

The Air Quality Management & Integrated Waste Management functions are also performed by the Section Municipal Health.

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

STAFF & AREA OF SERVICE DELIVERY

EHP's are employed at our Head Office in Beaufort West as well as our Prince Albert & Laingsburg Offices

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

DID YOU KNOW...

THE CATEGORIES OF HEALTH CARE RISK WASTE INCLUDES BUT IS NOT LIMITED TO THE FOLLOWING:

- Infections liquids & infectious waste;
- Pathological / anatomical waste;
- Pharmaceutical waste;
- Chemical waste;
- Waste with a high content of metals;
- Pressurized containers;
- Sharps waste;
- Laboratory waste;
- Genotoxic / cytotoxic waste;
- Radioactive waste;
- Isolation waste.

HEALTH CARE WASTE

Health-care waste is special in that it has a higher potential of infection and injury than any other type of waste. Therefore, it has to be handled with sound and safe methods wherever generated.

Inadequate handling of health-care waste may have serious public health consequences and impact on the environment. Health-care waste management is, therefore, an important and necessary component of environmental health protection.

Hospitals and health-care establishments have responsibilities and a "duty of care" for the environment and public health, particularly in relation to the waste they produce.

They also carry a responsibility to ensure that there are no adverse health and environmental consequences as a result of waste handling, treatment and disposal activities.

DISPOSAL OF HEALTH CARE RISK WASTE

A disposer may receive health care risk waste only from a registered treater or registered transporter.

Treated health care risk waste must be disposed of in accordance with the Minimum Requirements for Waste Disposal, Hazardous Waste Management and Monitoring.

Treated health care risk waste, excluding human tissue, may be co-disposed of with general waste, provided that the health care risk waste is rendered unrecognizable as of its medical origin, is unfit for reuse, and is disposed of in accordance with the Minimum Requirements for Waste Disposal, Hazardous Waste Management and Monitoring.

Health care risk waste that remains liquid after being treated may be discharged into the municipal sewerage system only if it poses no risk of infection and complies with all the applicable requirements of the municipality in whose area of jurisdiction this activity is conducted, including the requirements of the National Water Act, 1998 (Act 36 of 1998), relating to wastewater discharges.

(Western Cape Health Care Waste Management Act, 2007 (Act 7 of 2007): Western Cape Health Care Risk Waste Management Regulations, 2013)

WHO IS AT RISK OF EXPOSURE TO INCORRECT HANDLING AND DISPOSAL OF HEALTH CARE WASTE?

- Medical staff: Doctors, nurses, sanitary staff and hospital maintenance personnel;
- In and out-patients receiving treatment in health care facilities as well as their visitors;

- Workers in waste disposal facilities, including reclaimers;
- Workers in support services linked to health care facilities such as laundries, waste handling and transportation services;
- General public.

HEALTH CARE WASTE - INDIRECT RISKS VIA THE ENVIRONMENT

The dumping of HCW in uncontrolled areas can have a direct environmental effect by contaminating soils and underground waters.

During incineration, if no proper filtering is done, air can also be polluted causing illnesses to the nearby populations.

This has to be taken into consideration when choosing a treatment or a disposal method by carrying out a rapid environmental impact assessment (EIA).

SOME GOOD PRACTICES FOR HEALTH CARE WASTE MANAGEMENT

- Continuous awareness, education, information, training and communication on the proper handling, storage, removal and disposal of health care waste;
- Proper and correct colour coding and segregation practices;
- Wearing of personal protective equipment when handling and disposal of health care waste;
- Regular auditing, evaluation and monitoring of health care waste by health care facility and health officials;
- Proper record keeping.



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