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GOVERNMENT NOTICES • GOEWERMENTSKENNISGEWINGS

DEPARTMENT OF HEALTH

NO. 1877

15 March 2022

NATIONAL HEALTH ACT, 2003**REGULATIONS RELATING TO THE SURVEILLANCE AND THE CONTROL OF
NOTIFIABLE MEDICAL CONDITIONS: AMENDMENT**

The Minister of Health intends, in terms of section 90(1)(j), (k) and (w) read with section 90(4)(c) of the National Health Act, 2003 (Act 61 of 2003), and after consultation with the National Health Council, to make the regulations contained in the Schedule hereto.

Interested persons are invited to submit within 30 days from the date of publication of this Notice substantiated comments or representations on the proposed Regulations to the Director-General, Department of Health, Private Bag X 828, Pretoria, 0001, by fax to: 012- 395 8802, attention: Ms Tsakani Furumele, or by e-mail to: tsakani.furumele@health.gov.za.



DR. M.J PHAAHLA, MP
MINISTER OF HEALTH

DATE: 14/03/2022

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CHAPTER 1 DEFINITIONS

Definitions

1. In these Regulations any word or expression to which a meaning has been assigned in the Act, shall have such meaning and, unless the context otherwise indicates—

“compliance notice” means a notice as set out in section 82 of the Act;

“Environmental Health Practitioner” means a person registered in terms of section 34 of the Health Professions Act, 1974 (Act No. 56 of 1974) who performs the functions contemplated in Annexure A to the Regulations defining the scope of the profession of environmental health practitioners (Government Notice No. R. 888 of 26 April 1991);

“environmental health nuisance” refers to the use of any premises or place in a manner which creates conditions that significantly increase the risk of a public health hazard occurring or which compromises any aspect of public health to an extent that is more than trivial or insignificant and includes any—

- (a) stream, pool, pond, marsh, ditch, gutter, watercourse, cistern, water closet, earth closet, urinal, cesspool, cesspit, drain, sewer, dung pit, slop tank, ash heap or dung heap that is foul and is offensive and dangerous to health;
- (b) stable, kraal, shed, run or premises used for the keeping of animals which is offensive or dangerous to health;
- (c) accumulation of refuse, offal, manure or other matter which is dangerous to health;
- (d) public building which is so unsafe that it is dangerous to health;
- (e) occupied dwelling without sufficient potable water within a reasonable distance from it;
- (f) industrial or business premises which are not kept in a clean state and free from offensive smells or are not properly ventilated and are overcrowded and dangerous to the health of the persons working on the premises;
- (g) industrial or business premises that emits offensive smells or effluvia which are dangerous to health;
- (h) other situation or state of affairs deemed to be a nuisance by the Environmental Health Practitioner; and

- (i) other situation or state of affairs which an Environmental Health Practitioner may consider as such;

“health risk” means that one or more exposures to a hazardous substance may damage the health of the exposed person;

“municipality” means a municipality established in terms of section 12 of the Local Government: Municipal Structures Act, 2000 (Act No. 27 of 2000);

“occupier” in relation to premises means any person who is entitled to occupy the premises or is managing the premises on behalf of another person and includes the agent of any such person if he or she is absent from the Republic or his or her whereabouts is unknown.

“owner” of any premises, means—

- (a) the person in whose name the premises is registered or if he or she is deceased or incapacitated the administrator of his or her estate; or
- (b) in the case where the premises are registered under a notarial lease, the lessee; or
- (c) where the premises is registered in the name of a juristic person, the secretary or manager, or director or member, or the managing body or committee of such juristic person;

“pollution” means the discharge into the environment of any substance or matter, whether liquid, gas or solid, that may on contact with a human cause harm or endanger human health;

“public health hazard” means any actual threat to public health, and includes—

- (a) unsanitary conditions;
- (b) conditions which make it easier for a communicable disease to spread;
- (c) conditions which make food or drink, including water for domestic consumption, unhygienic or unsafe to drink or eat; and
- (d) conditions which allows pests or parasites to infest any place or body of water where they may affect public health;

“relevant authority” refers to the municipal or provincial department exercising powers in terms of by-law, provincial or national legislation;

“seizure” means removing items from the premises and taking control until all necessary procedures have been performed;

“the Act” means the National Health Act, 2003 (Act No. 61 of 2003); and

“waste” means waste as defined in the National Environmental Management: Waste Act, 2008 (Act No. 59 of 2008).

CHAPTER 2 POWERS OF ENVIRONMENTAL HEALTH PRACTITIONER

Environmental health inspections

2. (1) An Environmental Health Practitioner must upon entering any premises for the purpose of an inspection, present his or her identification card, announce the purpose of the visit and may search the premises, unless there are reasonable grounds to believe that such announcement might defeat the purpose of the search.

(2) An Environmental Health Practitioner may—

- (a) in writing, or verbally demand that the owner or occupier of a premises, submit to him or her any book, document or object that must be kept or displayed in terms of the Act or that relates to any matter provided for by the Act that is in the custody or under control of the owner or occupier;
- (b) make extracts from or copy from any book, or document referred to in paragraph (a) in the presence of the owner or occupier;
- (c) question the person referred to in paragraph (a) with regard to any matter provided for in the Act, and obtain information regarding any activity or process or entry in a book or document referred to in paragraph (a): Provided that if the questioning takes place in the presence of a police official the Environmental Health Practitioner must advise the person of his or her rights to a legal representative;
- (d) for the purpose of combating a communicable disease, immediately demand any information from the person referred to in paragraph (a) or from any other person who has at any time been on or in such premises, in any format contemplated in paragraph (a);
- (e) in the presence of the owner or the occupier, examine any process, product, material or substance that is found or is suspected to be used, or destined or intended for use which constitutes an environmental health nuisance or is likely to cause an environmental health nuisance or is detrimental to health;

- (i) The first name and surname, identity or passport number, residential address, and cellular phone numbers of the person tested; and
 - (ii) a copy or photograph of the passport, driver's licence, identity card, identity book of the person tested,
- with the consent of such person or the consent of a person authorised to give such consent.
- (b) The information referred to in paragraph (a) must be submitted, along with any information he or she has regarding likely contacts of the person tested, to the Director-General: Health for inclusion in the Notifiable Medical Conditions Contact Tracing Database.
- (7) Where any laboratory has tested a sample for a notifiable medical condition listed in Annexure A, Table 1, 2 or 3, the laboratory must promptly transmit to the Director-General: Health, for inclusion in the Notifiable Medical Conditions Contact Tracing Database—
- (a) all details the laboratory has, including the first name and surname, identity or passport numbers, residential address and cellular phone numbers, regarding the person tested; and
 - (b) the notifiable medical condition test result concerned.
- (8) The National Institute for Communicable Diseases (NICD) must transmit to the Director-General: Health for inclusion in the Notifiable Medical Conditions Contact Tracing Database—
- (a) all details the NICD has, including the first name and surname, identity or passport numbers, residential address and cellular phone numbers of any person tested for a notifiable medical condition listed in Annexure A, Table 1, 2 or 3;
 - (b) the results of a notifiable medical condition test concerned; and
 - (c) any information the NICD has regarding likely contacts of the person tested.
- (9) Every accommodation establishment must transmit to the Director-General: Health, for inclusion in the Notifiable Medical Conditions Contact Tracing Database, the following information regarding every person who stayed at

the accommodation establishment during the period of lockdown, with such person's consent:

- (a) the first name and surname, identity or passport number, residential address and cellular phone numbers of the person concerned; and
 - (b) a copy or photograph of the passport, driver's licence, identity card or identity book of the person concerned.
- (10) Nothing in this regulation entitles the Director-General: Health or any other person to intercept the contents of any electronic communication.
- (11) Within six weeks after the national state of disaster has lapsed or has been terminated—
- (a) the information on the Notifiable Medical Conditions Contact Tracing Database shall be de- identified;
 - (b) the de- identified information on the Notifiable Medical Conditions Contact Tracing Database shall be retained and used only for research, study and teaching purposes;
 - (c) all information on the Notifiable Medical Conditions Contact Tracing Database which has not been de- identified shall be destroyed; and
 - (d) the Director-General Health shall file a report with the notifiable medical conditions Designated Judge recording the steps taken in this regard.”.

Insertion of regulations 16A to 16M

3. The Regulations are hereby amended by the insertion after regulation 16 of the Regulations of the following regulations:

“General measures to contain the spread of notifiable medical condition that can spread through droplets or aerosol

- 16A.** (1) In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread through droplets or aerosol, the containment measures stipulated in subregulations (2) to (8) must be adhered to.

- (2) A person must, when in a gathering in an indoor public place, wear a face mask or a homemade item that covers his or her nose and mouth.
- (3) No person may be allowed to use any form of public transport, or enter a public premises, if they do not wear a face mask or a homemade item that covers the nose and mouth when in an indoor public place.
- (4) An employer must provide employees, with a cloth or shield face mask to cover his or her nose and mouth.
- (5) Every business premises, including, but not limited to a supermarket, shop, grocery store, retail store, wholesale produce market or pharmacy must—
 - (a) determine the area of floor space in square metres;
 - (b) based on the information contemplated in paragraph (a), determine the number of customers and employees that may be inside the premises at any one time with adequate space available;
 - (c) take steps to ensure that persons queuing inside or outside the premises are able to maintain a distance of at least one metre from each other;
 - (d) provide hand sanitisers for use by the public and employees at the entrance to the premises; and
 - (e) assign, in writing, an employee or any other suitable person as the compliance employee, who must ensure—
 - (i) compliance with the measures provided for in paragraphs (a) to (d); and
 - (ii) that all directions in respect of hygienic conditions and limitation of exposure to persons with notifiable medical conditions listed in Annexure A, Table 1, 2 and 3, are adhered to.
- (6) All employers must adopt measures to promote physical distancing of employees, which measures may include the following:
 - (a) enabling employees to work from home where necessary or minimising the need for employees to be physically present at the workplace where necessary;
 - (b) the provision for adequate work space;

- (c) restrictions on face-to-face meetings;
 - (d) special measures for employees with known or disclosed health issues or comorbidities, or with any condition which may place such employees at a higher risk of complications or death if they are infected with a notifiable medical condition listed in Annexure A, Table 1, 2 or 3;
 - (e) special measures for employees at a higher risk of complications or death if they are infected with notifiable medical condition listed in Annexure A, Table 1, 2 or 3.
- (7) The requirements as set out in subregulation (4) applies with the necessary changes to any other building that is not specified in subregulation (4).

Persons exiting the Republic

- 16B.** (1) In the event that a notifiable medical condition listed in Annexure A, Tables 1,2 & 3 has been declared as a public health emergency of international concern and has the potential of spreading beyond the borders of the republic and based on the epidemiological situation, the containment measures stipulated in subregulations (2) to (5) must be adhered with regard to persons existing the Republic.
- (2) All persons exiting the Republic must have the full vaccination certificate. In the event that such person does not have the full vaccination certificate, a negative PRC test results of not more than 72 Hours. All persons exiting the Republic must ensure that they comply with the requirements of the country of their destination.
- (3) Persons exiting the Republic through a point of entry may be subjected to screening.
- (4) Persons found to have an elevated temperature or symptoms in line with the national departmental guidelines consistent with a notifiable medical condition listed in Annexure A, Table 1, 2 or 3 must be subjected to a medical examination which may include testing.

- (5) Persons found to have contracted a notifiable medical condition listed in Annexure A, Table 1, 2 or 3 pursuant to testing as contemplated in subregulation (3) may be placed under mandatory isolation.
- (6) Persons required to isolation as provided for in subregulation (5) may be permitted to self-isolate at their own private residence subject to compliance with the criteria set out in regulation 15G.

Persons entering the Republic

- 16C.** (1) In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, the containment measures stipulated in subregulations (2) to (10) must be adhered to with regard to persons entering the Republic.
- (2) During the Covid-19 pandemic, all persons entering the Republic must have the full vaccination certificate. In the event that such person does not have the full vaccination certificate, a negative PRC test results of not more than 72 Hours must be produced at the point of entry.
 - (3) All persons entering the Republic through any point of entry must be subjected to screening at the point of entry and—
 - (a) may be placed under mandatory quarantine for a period of time stipulated and in line with the national department guidelines; or
 - (b) may be permitted to self-quarantine at a place that complies with the criteria set out in regulation 15G; or
 - (c) may be required to provide a test result for a notifiable medical condition listed in Annexure 1,2 or 3.
 - (4) A person who, during screening, is found to have had exposure to a notifiable medical condition listed in Annexure A, Table 1, 2, or 3 and or is presenting with any signs and symptoms of a notifiable medical condition listed in Annexure A, Table 1, 2, or 3, must be subjected to a medical examination which may include testing.

- (4) A person who wishes to be placed under self-quarantine must submit a written application, 72 hours prior to the intended date of entry into the Republic, to the Director -General: Health to obtain approval for such self-quarantine.
- (5) An application referred to in subregulation (4) must be supported by the following:
 - (a) Particulars of the place and address where self -quarantine will take place;
 - (b) written declaration committing to all conditions for self -quarantine;
 - (c) copy of Identity Document or Passport;
 - (d) contact details where the applicant may be reached for the duration of the quarantine period; and
 - (e) details of his or her itinerary for the period of time stipulated and in line with the national department guidelines.
- (6) Where approval for self -quarantine has not been granted or it has been determined that the person has failed to adhere to the self -quarantine conditions, such a person may be placed at in a state identified quarantine facility.
- (7) The Director-General may exempt certain person from quarantine provided that, the person submit sworn statement in the form of affidavit detailing the reasons for exemptions.
- (8) The Director-General may require the person exempted in terms of subregulation (7) to comply with certain requirements as stipulated in the exemption letter.
- (9) All unvaccinated travellers will be offered vaccinations.

Aircraft crew on international travel

- 16D.** (1) In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be

spread, the containment measures stipulated in subregulations (2) to (4) must be adhered to for international travel aircraft crew entering the Republic.

- (2) A crew member who has been permitted to disembark, irrespective of circumstances, must be subjected to screening and if necessary may be subjected to medical examination which may include testing and quarantine for a period of time stipulated and in line with the national department guidelines if such crew member has concluded his or her operation.
- (3) Where a crew member is in transit or is still required to undertake an operation or board or depart for international travel within the quarantine period, such a crew member must be quarantined at a facility identified and managed by the employer.
- (4) A crew member may prior to boarding be subjected to screening and necessary to medical examination which may include testing and quarantine for a period and in line with national department guidelines.

Vessel crew

- 16E.(1)** In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread, the containment measures stipulated in subregulations (2) and (3) must be adhered to with regard to vessel crew.
- (2) A crew member disembarking from a vessel must be subjected to screening and if necessary may be subjected to medical examination which may include testing and quarantine for a period stipulated in line with the national department guideline.
 - (3) A crew member, prior to embarking a vessel may be subjected to screening and if necessary may be subjected to medical examination which may

include testing and quarantine for a period stipulated in line with the national department guideline.

Local air travel

- 16F.** (1) In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread, the containment measures stipulated in subregulations (2) to (3) must be adhered with regard to persons undertaking local air travel.
- (2) All persons undertaking local air travel must be subjected to screening before departure.
- (3) Persons found to have an elevated temperature or symptoms consistent with a notifiable medical condition listed in Annexure A, Table 1, 2 or 3 must be subjected to a medical examination which may include testing and may not be allowed to board the aircraft.

Cross Border Freight Operators

- 16G.**(1) In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread the containment measures stipulated in subregulations (2) to (5) must be adhered to with regard to cross border truck operators.
- (2) A person operating cross border freight for the movement of goods must be subjected to screening at the point of entry and may be subject to a medical examination which may include testing and quarantine for a period stipulated and in line with the national department guidelines.
- (3) A cross border freight operator who has tested positive for a notifiable medical condition listed in Annexure A, Table 1, 2 or 3 whilst outside the borders of the Republic and who intends to return to the Republic, must

inform the port health official at the point of entry of his or her intention to return prior to returning.

- (4) The employer of the freight operator referred to in subregulation (3) must ensure that arrangements are made for the safe transportation of the freight operator from the point of entry to the quarantine facility or isolation area or medical facility for medical attention.

Control Measures for Public places

16H. (1) In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread, the containment measures stipulated in subregulation (2) must be adhered to in public places.

(2) Government departments, municipalities and private entities responsible for public places must—

- (a) ensure that public hygiene measures are implemented in all public places as described in the National Public Hygiene Strategy, 2020;
- (b) ensure that public places are cleaned and disinfected;
- (c) provide for hand sanitisers at all entrances to promote hand hygiene; and
- (d) enable the practice of physical distancing.

(3) Every event, gathering and business premises in a public place, including but not limited to, a supermarket, shop, grocery store, retail store, wholesale produce market and pharmacy must assign, in writing, an official or any other suitable person, as the compliance officer, who must ensure compliance with—

- (i) the containment measures provided for public places; and
- (ii) that all directions in respect of hygienic conditions and limitation of exposure to persons with a notifiable medical condition listed in Annexure A, Table 1, 2, or 3.

Attendance of funerals

- 16I.** (1) In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread, the containment measures stipulated in subregulations (2) to (4) must be adhered to when attending a funeral.
- (2) Attendance of a funeral during an epidemic or pandemic of a notifiable medical condition listed in Annexure 1, Table 1, 2 or 3 may be restricted to a number of persons as may be guided by the scientific evidence of the risk of transmission, with persons observing a distance guided by the scientific evidence of the risk of transmission. During the Covid-19 pandemic, the attendance of funerals is limited to 100 persons.
- (3) Night vigils and after-funeral gathering may be restricted as guided by the scientific evidence of the risk of transmission. During the Covid-19 pandemic, the above-mentioned activities are prohibited.
- (4) During a funeral, a person must wear a face mask and must adhere to all health protocols and social distancing measures guided by the scientific evidence of the risk of transmission.

Gatherings

- 16J.** (1) In order to contain, during an epidemic or pandemic, the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread, the containment measures stipulated in subregulations (2) to (4) must be adhered to at gatherings.
- (2) Every person, when attending a gathering during an epidemic or a pandemic, must—
- (a) be guided by the scientific evidence of the risk of transmission;
- (b) wear a face mask;

- (c) adhere to all health protocols;
 - (d) maintain a distance of 1 meter as guided by the scientific evidence of the risk of transmission from each other; and
 - (e) adhere to any other health protocols and social distancing measures put in place.
- (3) An owner or operator of any indoor or outdoor facility, where gatherings are held, must display the certificate of occupancy which sets out the maximum number of persons the facility may hold.
- (4) Indoor and outdoor gatherings may be restricted in accordance with the scientific evidence of the risk of transmission. During the Covid-19 pandemic, the indoor and outdoor gatherings will be up to the 50% of the venue capacity may be occupied on the proviso that:
- (a) production a valid vaccine certificate;
 - (b) they practice social distancing of at least 1 m; and
 - (c) compulsory mask wearing for indoor gatherings.
- (5) Notwithstanding the provisions above, the attendance of a gathering without proof of vaccination shall be limited to 1000 indoors and 2000 outdoors but the conditions on paragraphs (b) and (c) above will be applicable.

Controlled visits by members of the public

16K. Visits by members of the public to health establishments and facilities, except to receive treatment or medication, may be restricted by the management of the relevant health establishments and facilities subject to strict adherence to health protocols and as guided by the scientific evidence of the risk of transmission.

Compliance officers

16L. (1) In order to monitor and implement containment measures relating to notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread , all industries, businesses and entities, both in the private and public sector, must designate a compliance officer who must oversee –

- (a) the implementation of the plan referred to in paragraph (c); and
- (b) the strict adherence to the standards of hygiene and health protocols relating to a notifiable medical condition as referred to in subregulation (1), at the workplace;
- (c) develop a plan containing measures to ensure that the workplace meets the standards of health protocols relating to notifiable medical conditions as referred to in subregulation (1), and relevant guidelines; and
- (d) retain a copy of the plan contemplated in paragraph (c) for inspection, which plan must also contain the details of the notifiable medical conditions as referred to in subregulation (1).

Sharing Advice

16M. In order to contain the spread of notifiable medical conditions listed in Annexure A, Tables 1, 2, and 3, which notifiable medical conditions may be spread , and guided by the scientific evidence of the risk of transmission of such notifiable medical conditions advice may be shared amongst the relevant Cabinet members with regard to the following:

- (a) Curfew;
- (b) sport activities;
- (c) operations of economic sector;
- (d) lockdown of the country or locality;
- (e) public transportation;
- (f) religious and cultural practices; and
- (g) sale, dispensing and consumption of alcohol.”.

Amendment of regulation 17 of the Regulations

4. Regulations 17 of the Regulations is hereby amended by the insertion after subregulation (2), of the following:

“(3) Notwithstanding the provisions of subregulations (1) and (2), and subject to regulation 15A, a person who is a clinical or laboratory confirmed case, carrier or contact of a notifiable medical condition listed in Annexure A, Table 1, 2 or 3, and who refuses—

- (a) to voluntarily consent to a medical examination by a qualified health care provider including the taking of any biological specimen;
- (b) to be admitted at a health establishment; or
- (c) mandatory prophylaxis, treatment, isolation or quarantine in order to prevent transmission,

may be compelled through a warrant issued by a competent court to be subjected to any of the processes referred in paragraphs (a) to (c).”.

Short title

5. These Regulations are called Regulations Relating to the Surveillance and The Control of Notifiable Medical Conditions: Amendment, 2022.

DEPARTMENT OF HEALTH

NO. 1878

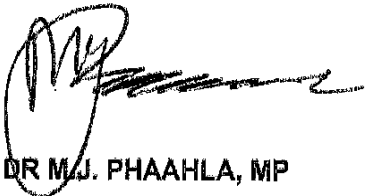
15 March 2022

INTERNATIONAL HEALTH REGULATIONS ACT, 1974 (ACT No. 28 OF 1974)

REGULATIONS RELATING TO PUBLIC HEALTH MEASURES IN POINTS OF ENTRY

The Minister of Health intends, in terms of section 3(2) of the International Health Regulations Act, 1974 (Act No. 28 of 1974) after consultation with the National Health Council to make Regulations in the Schedule hereto.

Interested persons are invited to submit within 30 days from the date of publication of this Notice substantiated comments or representations on the proposed regulations to the Director-General, Department of Health, Private Bag X 828, Pretoria, 0001 (for the attention of the Chief Directorate: Environmental Health & Port Health Services), by fax to: 012- 395 8802, attention: Ms Funeka Bongweni, or by email to: Funeka.Bongweni@health.gov.za.



DR M.J. PHAAHLA, MP
MINISTER OF HEALTH

DATE: 14/03/2022

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CHAPTER 1

DEFINITIONS

Definitions

1. In these Regulations, any word or expression to which a meaning has been assigned in the Act bears such meaning and, unless the context otherwise indicates: -

“**affected**” means persons, baggage, cargo, containers, conveyances, goods, postal parcels or human remains that are infected or contaminated, or carry sources of infection or contamination, to constitute a public health risk;

“**affected area**” means a geographical location specifically for which health measures have been recommended by WHO under IHR (2005);

“**aircraft**” means an aircraft making an international voyage;

“**airport**” means any airport in the Republic where international flights arrive or depart;

“**aircraft general declaration**” means a document which must conform to the model specified in **Annexure B** and is completed by a pilot in command of an aircraft or pilot’s agent/ designated crew member.

“**arrival**” of a conveyance means:

- (a) in the case of a seagoing vessel, arrival or anchoring in the defined area of a port;
- (b) in the case of an aircraft, arrival at an airport;
- (c) in the case of an inland navigation vessel on an international voyage, arrival at a point of entry; and

(d) in the case of a train or road vehicle, arrival at a point of entry;

“baggage” means the personal effects of a traveler;

“cargo” means goods carried on a conveyance or in a container;

“competent authority” means an environmental health practitioner appointed by the State and is responsible for the implementation of health measures at points of entry under these Regulations or any other person authorized by the Director-General;

“container” means an article of transport equipment:

- (a) of a permanent character and accordingly strong enough to be suitable for repeated use;
- (b) specially designed to facilitate the carriage of goods by one or more modes of transport, without
intermediate reloading;
- (c) fitted with devices permitting its ready handling, particularly its transfer from one mode of
transport to another; and
- (d) specially designed as to be easy to fill and empty;

“container loading area” means a place or facility set aside for containers used in international traffic;

“contamination” means the presence of an infectious or toxic agent or matter on a human or animal body surface, in or on a product prepared for consumption or on other inanimate objects, including conveyances that may constitute a public health risk;

“conveyance” means an aircraft, ship, train, road vehicle or other means of transport on an international voyage;

“conveyance operator” means a natural or legal person in charge of a conveyance or their agent;

“crew” means persons on board a conveyance who are not passengers;

“decontamination” means a procedure whereby health measures are taken to eliminate an infectious or toxic agent or matter on a human or animal body surface, in or on a product prepared for consumption or on other inanimate objects, including conveyances that may constitute a public health risk;

“departure” means, for persons, baggage, cargo, conveyances or goods, the act of leaving a territory;

“deratting” means the procedure whereby health measures are taken to control or kill rodent vectors or human disease present in baggage, cargo, containers, conveyances, facilities, goods and postal parcels at the point of entry;

“Director-General” means the Director-General of Health;

“disease” means an illness or medical condition, irrespective of origin or source that presents or could present significant harm to humans;

“disinfection” means the procedure whereby health measures are taken to control or kill infectious agents on a human or animal body surface or in or on baggage, cargo, containers, conveyances, goods and postal parcels by direct exposure to chemical or physical agents;

“disinsection” means the procedure whereby health measures are taken to control or kill the insect vectors of human diseases present in or on baggage, cargo, containers, conveyances, goods and postal parcels and disinsected has a corresponding meaning;

“event” means a manifestation of disease or an occurrence that creates a potential for disease;

“environmental health practitioner” means a person registered as such in terms of section 34 of the Health Professions Act, 1975 (Act No.56 of 1974) and who performs functions as listed in the Schedule of the Scope of Professions of Environmental Health (Government Notice No. R888 of 26 April 1991);

“free pratique” means permission for a ship to enter a port, embark or disembark, discharge or load cargo or stores; permission for an aircraft, after landing, to embark or disembark, discharge or load cargo or stores; and permission for a ground transport vehicle, upon arrival, to embark or disembark, discharge or load cargo or stores;

“goods” mean tangible products, including animals and plants, transported on an international voyage, including for utilization on board a conveyance;

“ground crossing” means a point of land entry in a State Party, including one utilized by road vehicles and trains;

“ground transport vehicle” means a motorized conveyance for overland transport on an international voyage, including trains, coaches, lorries and automobiles;

“health measure” means procedures applied to prevent the spread of disease or contamination; a health measure does not include law enforcement or security measures;

“ill person” means an individual suffering from or affected with a physical ailment that may pose a public health risk;

“infection” means the entry and development or multiplication of an infectious agent in the body of humans and animals that may constitute a public health risk;

“inspection” means the examination, by the competent authority or under its supervision, of areas, baggage, containers, conveyances, facilities, goods or postal parcels, including relevant data and documentation, to determine if a public health risk exists;

“International Health Regulations ” means the IHR that were adopted by the fifty-eighth World Health Assembly on 25 July 1969; and includes subsequent revisions

“international traffic” means the movement of persons, baggage, cargo, containers, conveyances, goods or postal parcels across an international border, including international trade;

“international voyage” means:

- (a) in the case of a conveyance, a voyage between points of entry in the territories of more than one State, or a voyage between points of entry in the territory or territories of the same State if the conveyance has contacts with the territory of any other State on its voyage but only as regards those contacts;
- (b) in the case of a traveler, a voyage involving entry into the territory of a State other than the territory of the State in which that traveler commences the voyage;

“intrusive” means possibly provoking discomfort through close or intimate contact or questioning;

“invasive” means the puncture or incision of the skin or insertion of an instrument or foreign material into the body or the examination of a body cavity. For the purposes of these Regulations, medical examination of the ear, nose and mouth, temperature assessment using an ear, oral or cutaneous thermometer, or thermal imaging; medical inspection; auscultation; external palpation; retinoscopy; external collection of urine, faeces or saliva samples; external measurement of blood pressure; and electrocardiography are considered to be non-invasive;

“isolation” means separation of ill or contaminated persons or affected baggage, containers, conveyances, goods or postal parcels from others in such a manner as to prevent the spread of infection or contamination;

“medical examination” means the preliminary assessment of a person by an authorized health worker or by a person under the direct supervision of the competent authority, to determine the person’s health status and potential public health risk to others, and includes the scrutiny of health

documents, and a physical examination when justified by the circumstances of the individual case;

“national IHR focal point” means the national centre, designated by each State Party, which must be accessible at all times for communications with World Health Organizations (WHO) IHR Contact Points under the International Health Regulations (2005);

“personal data” means any information relating to an identified or identifiable natural person;

“point of entry” means a passage for international entry or exit of travelers, baggage, cargo, containers, conveyances, goods and postal parcels as well as agencies and areas providing services to them on entry or exit; and includes a frontier post, as contemplated in the Act;

“port health officer” means an environmental health practitioner employed by the National Department of Health and registered in terms of section 34 of the Health Professions Act, 1974 (Act 56 of 1974) and who performs port health functions in a point of entry;

“port” means a seaport or a port on an inland body of water where ships on an international voyage arrive or depart;

“postal parcel” means an addressed article or package carried internationally by postal or courier services;

“Pratique” refers to the permission granted to a conveyance to have dealings with a port, given after quarantine or on showing a clean bill of health;

“public health emergency of international concern” means an extraordinary event which is determined, as provided in IHR (1969):

- (a) to constitute a public health risk to other States through the international spread of disease; and
- (b) to potentially require a coordinated international response;

“public health observation” means the monitoring of the health status of a traveler over time for the purpose of determining the risk of disease transmission;

“public health risk” means a likelihood of an event that may affect adversely the health of human populations, with an emphasis on one which may spread internationally or may present a serious and direct danger;

“quarantine” means the restriction of activities and/or separation from others of suspect persons who are not ill or of suspect baggage, containers, conveyances or goods in such a manner as to prevent the possible spread of infection or contamination;

“reservoir” means an animal, plant or substance in which an infectious agent normally lives and whose presence may constitute a public health risk;

“road vehicle” means a ground transport vehicle other than a train;

“scientific evidence” means information furnishing a level of proof based on the established and accepted methods of science;

“scientific principles” mean the accepted fundamental laws and facts of nature known through the methods of science;

“ship” means a seagoing or inland navigation vessel on an international voyage;

“surveillance” means the systematic ongoing collection, collation and analysis of data for public health purposes and the timely dissemination of public health information for assessment and public health response as necessary;

“suspect” means those persons, baggage, cargo, containers, conveyances, goods or postal parcels considered by a State Party as having been exposed, or possibly exposed, to a public health risk and that could be a possible source of spread of disease;

“the Act” means the International Health Regulations Act, 1974 (Act No. 28 of 1974);

“transit” means a conveyance arriving in a Point of Entry with no embarking and disembarking or loading and discharging

“traveler” means a natural person undertaking international travel, including crew;

“vector” means an insect or other animal which normally transports an infectious agent that constitutes a public health risk; and

“World Health Organization (WHO)” means a specialized agency of the United Nations that is concerned with international public health.

CHAPTER 2 IMPLEMENTATION PRINCIPLES AND RESPONSIBILITIES

Implementation principles

2. (1) These Regulations must be implemented with full respect for the dignity, human rights and fundamental freedom of persons as enshrined in the Constitution of the Republic of South Africa, 1996.

(2) These Regulations must be implemented in consideration of the International Health Regulations (1969).

Responsibilities of the Director-General

3. The Director-General must: -
- (a) authorize a competent authority who will be responsible for the implementation of health measures in points of entry under these Regulations and is in the employ of the National Department of Health or any other person or organ of state the Director-General may deem fit;
 - (b) assess and develop core public health capacities in points of entry as required by the International Health Regulations;
 - (c) ensure points of entry are compliant with the requirements of the International Health Regulations ;
 - (d) designate and ensure the functioning of the National IHR Focal Point;
 - (e) submit to the World Health Organization, a list of ports authorized to offer;
 - (i) the issuance of Ship Sanitation Control Certificates,
 - (ii) the issuance of Ship Sanitation Control Exemption Certificates only,
 - (iii) extension of the Ship Sanitation Control Exemption Certificates for a period of one month until the arrival of the ship in the port at which the Certificate will be received;
 - (f) communicate changes to the status of ports referred to in paragraph (e) above to the WHO on regular basis.

Functions of a Port Health Officer

4. A port health officer must: -
- (a) inspect and monitor baggage, cargo, containers, conveyances, goods, postal parcels and human remains departing and arriving into the Republic to determine compliance with applicable legislation and that they are free of sources of infection or contamination, including vectors and reservoirs;
 - (b) inspect and monitor that facilities used by travelers at points of entry are maintained in a hygienic condition and are kept free of sources of infection or contamination, including vectors and reservoirs;
 - (c) supervise or cause to be supervised, any disinfection, derating or decontamination of baggage, cargo, containers, conveyances, goods, postal parcels and human remains or hygiene measures for persons;
 - (d) implement surveillance measures for early detection and response of suspect cases;
 - (e) advise conveyance operators, as far in advance as possible, of their intent to apply control measures to a conveyance and provide, where available, written information concerning the methods to be employed;
 - (f) supervise or cause to be supervised the removal and safe disposal of any contaminated water or food, human or animal dejecta, wastewater and any other contaminated matter from a conveyance or in the point of entry;
 - (g) take all practicable measures consistent with these Regulations to monitor and control the discharge by ships of sewage, refuse, ballast water and any other potentially disease-causing matter which might contaminate the waters of a port, river, canal, lake or other international waterway;
 - (h) supervise or cause to be supervised service providers for services concerning travelers, baggage, cargo, containers, conveyances, goods, postal parcels and human remains at points of entry, including conducting inspections and medical examinations as necessary;
 - (i) have effective contingency arrangements to deal with a public health event;
 - (j) communicate with the National IHR Focal Point on the relevant public health measures taken pursuant to these Regulations and the IHR ; and
 - (k) Support other stakeholders with the implementation of recommended surveillance protocols for travelers.

CHAPTER 3 ARRIVAL OF CONVEYANCES

General provisions for incoming conveyances

5. (1) Subject to provisions in these Regulations, a ship or aircraft may not be refused free pratique for public health reasons.

(2) Where the granting of free pratique may result in a public health risk, the applicable health measures should be applied to prevent such public health risk prior to the granting of such free pratique.

(3) Subject to subregulation (2), free pratique may be granted by radio or other communication means to a ship or an aircraft when, based on information received prior its arrival, the competent authority is of the opinion that such arrival of the ship or aircraft will not result in the introduction or spread of disease.

(4) Officers in command of ships and pilots in command of aircrafts or persons or agents in charge of a conveyance entering the Republic must: -

- (a) prior to arrival at a point of entry within the Republic, inform the competent authority of any illness of an infectious nature, or evidence of a public health risk, or death on board the conveyance;
- (b) inform the competent authority of any emergency measures taken for the health and safety of travelers on board;
- (c) Submit a passenger manifest to the competent authority on arrival;
- (d) In the case of ships, upon arrival, furnish the competent authority with a signed Maritime Declaration of Health, a model of which is provided in **Annexure A**; and
- (e) In the case of aircraft, upon arrival, furnish the competent authority with a signed Aircraft General Declaration, of which, the Declaration of Health must also be completed, a model of which is provided in **Annexure B**.

(5) If, for reasons beyond the control of the officer in command of a ship, pilot in command of an aircraft persons or agents in charge of a conveyance, a suspect or affected ship, aircraft or any conveyance lands, berths or arrives within the Republic in a point of entry other than a point of entry at which it was due to land, berth or arrive or at a point of entry where there is no competent authority:-

- (a) the officer in command of the ship or the pilot in command of the aircraft or any other person in charge of a conveyance must communicate without delay, with the nearest competent authority; and
- (b) the competent authority contemplated in paragraph (a) must, as soon as he or she is informed of such landing, berthing or arrival apply any health measures provided in these Regulations.

(6) Except where required for emergency purposes or for communicating with the competent authority, no person on board such ship, aircraft or conveyance must disembark and no cargo must be offloaded, unless authorized by a competent authority.

Affected conveyances

6. (1) A conveyance is affected if, on arrival it has on board: -

- (a) A person with clinical signs or symptoms of a communicable disease; and
- (b) evidence of a public health risk, whether based on fact or evidence.

(2) In the case of conveyances contemplated in sub-regulation (1) above a competent authority must: -

- (a) disinfect, decontaminate, disinsect or derat the conveyance or cause these measures to be carried out under his or her supervision; and
- (b) implement any other health measure he or she may deem to be effective, including isolation of the conveyance or persons to prevent the spread of disease.

(3) If for any reasons, the competent authority is not able to implement measures referred to in sub-regulation (2), the conveyance may be allowed to depart, provided that:

- (a) the competent authority informs the competent authority of the next point of entry of the information regarding the affected conveyance; and

- (b) in the case of a ship, the evidence found, and control measures required must be included in the ship sanitation control certificate.
- (4) Conveyances referred to in sub-regulation (3) must be allowed, under the supervision of a competent authority, to take on fuel, water, food and supplies.
- (5) A conveyance that has been considered as affected must cease to be regarded as such when: -
 - (a) measures provided for in sub regulation (2) have been effectively carried out; and
 - (b) there are no conditions on board that could constitute a public health risk.

Ground and air medical evacuations

7. (1) No person may bring into the Republic an ill person without prior written approval from the port health officer of the point of entry at which the conveyance is entering the Republic.
- (2) Persons or medical evacuation companies intending to undertake medical evacuations for medical reasons, must obtain approval from the port health officer prior arrival into the Republic.
- (3) Requests for approval for such medical evacuation must be submitted using Forms AC 1 and AC 2 provided for in **Annexure E** and **Annexure D** respectively.
- (4) Medical evacuation crew must adhere to personal protective equipment requirements and must be subjected to screening at the point of entry on arrival.
- (5) In addition to screening, the medical evacuation crew member may be subjected to a medical examination and any other additional relevant health measures.

Medical evacuations from vessels

8. (1) All emergency medical evacuations to be conducted on vessels out at sea must be communicated by the shipping agent and Maritime Rescue Coordination Centre (MRCC) to Port Health Services of the nearest harbour.

(2) Evacuation of seafarers, passengers, mariners on board all ships along the South African coastline must be allowed in terms of Search and Rescue as well as the Merchant Shipping Act, 1951 (Act No. 57 of 1951), and subject to the following:

- (a) The evacuation must comply with the provisions of Medical Evacuations as contained in the South African Maritime and Aeronautical Search and Rescue Act, 2002 (Act No. 44 of 2002).
- (b) The evacuation to be carried out in terms of the MRCC SOPS and Marine Notice 24 of 2020.

Conveyances in transit

9. No health measures must be applied, unless authorized by international agreements or obligations or evidence of a public health risk exists or clinical signs and symptoms of a communicable disease, to: -

- (a) a ship not coming from an affected area which passes through the shores of the Republic on its way to a port in another Country, however any such ship may be permitted to take on, under the supervision of the competent authority, fuel, water, food and supplies; and
- (b) an aircraft in transit at an airport in the Republic, with no embarking and disembarking or loading and discharging, however, any such aircraft may be permitted to take on, under the supervision of the competent authority, fuel, water, food and supplies.

Ship sanitation certificates

10. (1) Ships arriving on an international voyage must produce a valid Ship Sanitation Control Certificate or valid Ship Sanitation Control Exemption Certificate.

(2) If, on arrival of a ship the master is unable to produce a valid Ship Sanitation Control Exemption Certificate or Ship Sanitation Control Certificate, the competent authority must:

- (a) apply applicable health measures and thereafter furnish the master with a Ship Sanitation Control Certificate; provided that the point of entry is authorised in terms of regulation 3(e).
- (b) subject the ship to an inspection in ports designated in terms of regulation 3(e).

(3) If a competent authority is, after subjecting a ship to an inspection referred to in sub-regulation (2)(b) above, satisfied that the ship is free of infection and contamination, furnish the master with a Ship Sanitation Control Exemption Certificate.

(4) If a competent authority deems that measures referred to in sub-regulation (2)(a) above are not effective, he must indicate such on the Ship Sanitation Control Certificate; provided that the point of entry is designated in terms of regulation 3(e).

Maritime safety precautions

11. (1) Masters of vessels must maintain a medical log of daily temperature screening of all persons on board and this must be presented to the Port Health Officer on request.

(2) Persons disembarking and embarking vessels must comply with general hygiene and precautionary measures to prevent the occurrence or spread of a communicable disease.

CHAPTER 4 REQUIREMENTS FOR TRAVELLERS

Health measures relating to travelers

12. (1) Persons entering the Republic must be subjected to screening on arrival at the point of entry.

(2) A person who, during screening, is found to have had exposure to a communicable disease or is presenting with any signs and symptoms of a communicable disease, must be subjected to a medical examination which may include testing, isolation or quarantine.

(3) Travelers must be subjected to medical examination, vaccination or prophylaxis or required to produce proof of vaccination or prophylaxis as a condition of entry: -

- (a) when necessary to determine whether a public health risk exists.
- (b) as a condition of entry for travelers.

(4) A traveler for whom medical examination, vaccination or other prophylaxis referred to in sub-regulation (3) is required may be denied entry if;

- (a) he or she fails to consent to such measure,
- (b) he or she refuses to provide information or documents referred to in sub-regulation (5) or regulation 13.

(5) A traveler arriving into the Republic or the agent responsible for a conveyance transporting travelers into the Republic is required, for public health reasons to: -

- (a) provide information concerning the traveler to allow the traveler to be contacted;
- (b) Provide information of travelers for the purposes of contact tracing;
- (c) provide information concerning the traveler's itinerary to determine whether any travel from or near an affected area was undertaken by the traveler; and
- (d) undergo medical examination if necessary.

(6) A traveler suspected of having contracted a communicable disease must not be permitted to disembark from a conveyance unless he or she has complied with the requirements of the competent authority.

(7) If a traveler is suspected of having contracted a communicable disease, a competent authority must-

- (a) subject traveler to medical examination;
- (b) isolate, or cause such traveler to be isolated;
- (c) quarantine, or cause such traveler to be quarantined;
- (d) place such traveler under public health surveillance for a period not exceeding the incubation period of the disease or as determined by the competent authority;
- (e) implement any other measures he or she deems necessary in order to prevent the spread of such disease; or
- (f) refer a traveler to the nearest health care facility designated to handle the suspected disease condition.

(8) A traveler placed under public health surveillance may be required to report, at specified times during the period of surveillance or isolation, to a health officer or any institution as determined by the Director-General.

Requirements for Yellow Fever

13. (1) No traveler arriving from an area where vaccination against Yellow Fever is required may be permitted entry into the Republic unless he or she complies with requirements for Yellow Fever as stipulated in **Annexure C**.

(2) Any traveler who is not in possession of a valid certificate of vaccination against Yellow Fever must be: -

- (a) denied entry into the Republic, or
- (b) placed under quarantine for a period not exceeding six days.

Additional health measures during a public health emergency

14. (1) The Director-General must during a public health emergency of international concern or pandemic, issue Directives on any additional health measures required to prevent or contain the spread of the event and where required, exemptions of persons to such health measures.

(2) The competent authority may, during a public health emergency of international concern or pandemic: -

- (a) require all travelers to undergo medical examination;
- (b) require travelers to complete and submit a travel health questionnaire;
- (c) keep in isolation an infected or suspected traveler for such period as he or she considers necessary to contain;
- (d) place travelers and goods exposed to infection, in isolation or quarantine or surveillance for a period not exceeding the incubation period of such disease;
- (e) require arriving passengers and crew to produce a test result for a timeframe stipulated by the Director-General; or
- (f) subject travelers to quarantine.

CHAPTER 5 VECTOR CONTROL

Vector control requirements for conveyances

15. (1) Conveyances arriving from areas where vector control measures are required must be disinfected using methods recommended by the World Health Organization prior to arriving at any point of entry in South Africa and must be kept free of vectors.

(2) Where conveyances referred to in sub-regulation (1) are not disinfected, the competent authority must ensure the conveyance is disinfected.

(3) The competent authority must not allow any person to disembark from a conveyance referred to in sub regulation (2) unless he or she is satisfied that the disinsection has been effective.

(4) If any vectors are detected on board any conveyance, the conveyance must be subjected to measures specified in regulation 6(2).

(5) The presence of vectors on board a conveyance and control measures implemented to eradicate such vectors must be included: -

- (a) in the case of aircrafts, in the Health Part of the Aircraft General Declaration;
- (b) in the case of ships, on the Ship Sanitation Control Certificate;
- (c) in the case of other conveyances, on a written proof of treatment issued to the person in charge of the conveyance or their agent.

(6) If a public health emergency of international concern has been declared by WHO, conveyances arriving from affected areas may be subjected to additional health measures stipulated by the Director-General whenever necessary.

Vector control requirements for point of entry facilities

16. (1) The owner or person in charge of a point of entry or premises in a point of entry must implement vector control measures to ensure the premises are kept free from vectors.

(2) The owner or person in charge of a point of entry must develop, in consultation with the competent authority and implement an integrated vector control management plan.

(3) The competent authority must monitor the implementation of the integrated vector control management plan.

CHAPTER 6 REQUIREMENTS FOR BAGGAGE AND CONTAINERS

Containers and container loading areas

17. (1) The owner or a person in charge of the container loading areas must keep the areas free from sources of infection or contamination, including vectors and reservoirs.

(2) A competent authority must conduct routine inspections to determine if container loading areas and warehouses are kept free from sources of infection or contamination.

Cargo and baggage

18. (1) If the competent authority has reason to believe that any goods have become contaminated by a communicable disease or may serve as a vehicle for the spread of any disease, he or she must require such goods to be subjected to health measures provided for in these Regulations.

(2) The provisions of subregulation (1) do not apply to laboratory samples, blood and blood products.

CHAPTER 7 GENERAL MATTERS

Requirements for departure from the Republic

19. A competent authority must, if he or she has grounds to believe that any person who is about to depart from the Republic by air, sea, rail or road may be suffering from or has come into contact with any other person suffering from a communicable disease:-

- (a) subject such person to a medical examination and prohibit the departure of such person if he or she is of the opinion that he or she is suffering or suspected to be suffering or is likely, as a result of such contact, to contract any such disease until he or she: -
 - (i) has recovered from;
 - (ii) is free from; or
 - (iii) is no longer likely, as a result of such contact, to contract any such disease;
- (b) prohibit the removal from the Republic of any goods or baggage in the possession of any such person which is considered likely to be contaminated, until it has been disinfected, disinfected or decontaminated; and
- (c) Supervise the disinfection, disinsection or decontamination of any goods or baggage referred to in paragraph (b).

Quarantine and isolation

20. (1) Owners or persons in charge of point of entry facilities must designate a specific area for the temporary isolation of suspect travelers by a competent authority.

(2) Owners or persons in charge of passenger vessels must designate facilities for the temporary quarantine or isolation of suspect travelers.

(3) When the competent authority places in quarantine or isolation or treatment in a medical facility any person who has not been granted authority to enter the country by an immigration officer he or she must immediately after examination, inform the immigration officer of the name of such

person, the means by which he or she arrived in the country and the place of quarantine, isolation or name of medical facility.

(4) The competent authority must also notify the medical officer or other official in charge of the quarantine or isolation facility or medical facility of the means by which such person arrived into the country, the name and address of the owner or agents; or operator of the mode of transport and that such person has not been authorized to enter the country and must not be discharged or released from detention until the master or agents of the ship, if he has arrived by ship, or the operator if he or she arrived by aircraft or the person in charge, owner or agents of the means of transport, have been notified of the intended time of discharge or release.

(5) The competent authority must give the immigration officer and the master or agents of the ship, or operator of the aircraft or the person in charge, owner or agents of the means of transport, as the case may be, due notice in advance of the release or discharge of such person, and upon being so released or discharged such person must revert to the custody of the master or agents of the ship or operators of the aircraft or of the person in charge, owner or agents of the means of transport, as the case may be, until authorised by the immigration officer to enter the country.

(6) All expenses in connection with the quarantine, isolation or treatment of such person until permitted to enter the country and in connection with his or her repatriation in the event of being declared a prohibited person, must be borne by the person, master of the ship, operator of the carrier or the person in charge, owner or agents of the means of transport and nothing in these regulations must be construed as relieving any such person, master, operator, person in charge, owner or agent of his obligations and responsibilities under the Immigration Act, 2002 (Act No. 13 of 2002).

Certificates to be issued by the Competent Authority

21. When any measures have been applied for the removal or eradication of any communicable disease or public health risk by the competent authority in terms of these Regulations, the competent authority must, if so requested by the master of the ship, agents, pilot in command or by the person in charge, owner or agents of any conveyance, furnish a statement of the measures taken and the reasons therefore.

Prevention of public health nuisance

22. (1) No owner or person in charge of a point of entry facility, master of a ship, agents, pilot in command or person in charge of any other conveyance may cause or permit to be caused, any health nuisance or condition that is a danger to health to exist at the point of entry facility or on board such conveyance.

(2) Should any such nuisance or condition that is a danger to health arise, the competent authority must require the master, operator or person in charge to remedy such immediately and to take such measures as he or she may specify, for preventing its recurrence.

(3) The competent authority must conduct routine inspections at point of entry facilities to ensure no health nuisance or condition that may be a danger to health exists in the point of entry facility.

Charges for health measures regarding travelers

23. (1) No charge may be made by the Director-General on the traveler for the following measures for the protection of public health without prior notification of such charge and cost:-

- (a) a medical examination provided for in these Regulations, or any supplementary examination which is required to ascertain the health status of the traveler examined;
- (b) vaccination or other prophylaxis provided to a traveler on arrival;
- (c) isolation or quarantine requirements of travelers;
- (d) testing required as a condition of entry or departure or on arrival;
- (e) health measures applied to baggage accompanying the traveler; or
- (f) any other relevant health measures.

(3) Where charges are made for applying health measures to travelers under these Regulations, such charges must:

- (a) not exceed the actual cost of the service rendered; and
- (b) be levied without discrimination of the nationality, domicile or residence of the traveler concerned.

(4) The tariff of such charges and any amendment thereto, must be published at least 10 days in advance.

(5) The Director-General may require reimbursement for expenses incurred in providing the health measures in sub regulation (1): -

- (a) from conveyance operators or owners with regard to their employees; or
- (b) from applicable insurance sources.

(6) Any incidental cost other than those stipulated above which may arise as a result of the implementation of health measures on conveyances or travelers shall be borne by traveler, operator or employer.

Charges for baggage, cargo, containers, conveyances, goods and postal parcels

24. (1) The Director-General may impose charges for the application of health measures on baggage, cargo, containers, conveyances, goods or postal parcels under these Regulations.

(2) The charges contemplated in sub regulation (1): -

- (a) may not exceed the actual cost of the service rendered; and
- (b) be levied without discrimination as to the nationality, flag, registry or ownership of the baggage, cargo, containers, conveyances, goods or postal parcels concerned.

(3) The tariff of such charges and any amendment thereto, must be published at least 10 days in advance.

(4) Where goods, cargo, consignments or postal parcels which have been imported into the Republic and deemed after inspection by a competent authority, to not be in compliance with applicable legislation and must undergo destruction processes as provided for in applicable legislation, such destruction must be at the cost of the owner, importer or agent representing such owner or importer of such goods, cargo, consignment or postal parcels.

Charges in respect of a vessel

25. (1) The following charges apply in respect of the services carried out by or on the instructions of a competent authority in relation to maritime traffic, under these regulations: -

- (a) for the complete fumigation or fumigation of any part of a ship, or fumigation of any cargo on a ship, the tariffs as determined by the approved and or registered service provider;
- (b) for the issuing of a Ship Sanitation Control Exemption Certificate or a Ship Sanitation Control Certificate by a competent authority, charges at the following specified rates are payable:

CODE	NETT TONNAGE OF VESSEL	FEES (R)
1	Up to 1 000 tonnes	300.00
2	Exceeding 1 000 tonnes but not exceeding 3 000 tonnes	600.00
3	Exceeding 3 000 tonnes but not exceeding 10 000 tonnes	875.00
4	Exceeding 10 000 tonnes but not exceeding 20 000 tonnes	1 150.00
5	Exceeding 20 000 tonnes but not exceeding 50 000 tonnes	1 425.00
6	Exceeding 50 000 tonnes	1 700.00

- (c) for the issuing of a 30-day Extension of the Ship Sanitation Control Exemption Certificate by a port health officer, a fee of R100.00 applies; and
- (d) for the transmission of a message by a port health officer relating to an application for the request for free pratique, a fee of R100.00 applies.

(2) The Director-General must determine and publish the annual increase of charges contemplated in sub regulation (1).

Reapplication of health measures

26. (1) The competent authority must reapply on arrival, if there is an indication or evidence that measures applied on departure in an affected area were unsuccessful, any health measures for travelers, baggage, cargo, containers, conveyances, goods, postal parcels and human remains.

(2) Disinsection, deratting, disinfection, decontamination and other health measures must be carried out so as to avoid injury and as far as possible discomfort to persons and animals or damage to the environment in a way which impacts on public health, or damage to baggage, cargo, containers, conveyances, goods and postal parcels.

**CHAPTER 8
GENERAL**

Offences and penalties

27. Any person who contravenes a provision of these Regulations or allows such a contravention to take place is guilty of an offence and liable on conviction to imprisonment not exceeding six years or an equivalent fine or both as determined by the court of law.

Appeals

28. (1) A person affected by a decision taken in terms of these regulations who wishes to appeal against the decision, must lodge an appeal with the Minister, as the case may be, within 30 days after that person has been notified of the decision.

(2) The Minister, may, as the case may be, in writing, on good cause extend the period within which an appeal must be submitted.

(3) The Minister must, after considering all relevant information, uphold or dismiss the appeal and inform the appellant.

Short title

29. These Regulations are called the Regulations Relating to Public Health Measures in Points of Entry, 2022.



ANNEXURE A

MODEL OF MARITIME DECLARATION OF HEALTH

To be completed and submitted to the competent authorities by the masters of ships arriving from foreign ports.

Submitted at the port of Date

Name of ship or inland navigation vessel Registration/IMO No arriving from sailing to.....

(Nationality) (Flag of vessel) Master's name.....

Gross tonnage (ship)

Tonnage (inland navigation vessel)

Valid Sanitation Control Exemption/Control Certificate carried on board? Yes..... No Issued at date

Re-inspection required? Yes No

Has ship/vessel visited an affected area identified by the World Health Organization? Yes... No

Port and date of visit

List ports of call from commencement of voyage with dates of departure, or within past thirty days, whichever is shorter:

.....

Upon request of the competent authority at the port of arrival, list crew members, passengers or other persons who have joined ship/vessel since international voyage began or within past thirty days, whichever is shorter, including all ports/countries visited in this period (add additional names to the attached schedule):

(1) Name joined from: (1) (2) (3)

(2) Name joined from: (1) (2) (3)

(3) Name joined from: (1) (2) (3)

Number of crew members on board

Number of passengers on board

Health questions

(1) Has any person died on board during the voyage otherwise than as a result of accident? Yes No

If yes, state particulars in attached schedule. Total no. of deaths.....

(2) Is there on board or has there been during the international voyage any case of disease which you suspect to be of an infectious nature? Yes.....

No.....

If yes, state particulars in attached schedule.

(3) Has the total number of ill passengers during the voyage been greater than normal/expected? Yes No

How many ill persons?

(4) Is there any ill person on board now? Yes..... No

If yes, state particulars in attached schedule.

(5) Was a medical practitioner consulted? Yes..... No

If yes, state particulars of medical treatment or advice provided in attached schedule.

(6) Are you aware of any condition on board which may lead to infection or spread of disease? Yes..... No

If yes, state particulars in attached schedule.

(7) Has any sanitary measure (e.g. quarantine, isolation, disinfection or decontamination) been applied on board? Yes..... No

If yes, specify type, place and date.....

(8) Have any stowaways been found on board? Yes..... No If yes, where did they join the ship (if known)?

(9) Is there a sick animal or pet on board? Yes..... No.....

Note: In the absence of a surgeon, the master should regard the following symptoms as grounds for suspecting the existence of a disease of an infectious nature:

(a) fever, persisting for several days or accompanied by (i) prostration; (ii) decreased consciousness; (iii) glandular swelling; (iv) jaundice; (v) cough or shortness of breath; (vi) unusual bleeding; or (vii) paralysis.

(b) with or without fever: (i) any acute skin rash or eruption; (ii) severe vomiting (other than sea sickness); (iii) severe diarrhea; or (iv) recurrent convulsions.

I hereby declare that the particulars and answers to the questions given in this Declaration of Health (including the schedule) are true and correct to the best of my knowledge and belief.

Signed Master

Countersigned Ship's Surgeon (if carried)

Date



ANNEXURE B

AIRCRAFT GENERAL DECLARATION

<p>GENERAL DECLARATION (Outward/Inward)</p> <p>Operator</p> <p>Marks of Nationality and Registration Flight No. Date</p> <p>... ..</p> <p>Departure from. Arrival at</p> <p style="text-align: center;">(Place) (Place)</p>		
<p>FLIGHT ROUTING ("Place" Column always to list origin, every end-route stop and destination)</p>		
PLACE	NAMES OF CREWS	NUMBER OF PASSANGERS ON THIS STAGE
		<p><i>Departure Place:</i> Embarking</p>

		Through on same flight
		Arrival Place:
		Disembarking
		Through on same flight
<p>Declaration of Health</p> <p>Name and seat number or function of persons on board with illnesses other than airsickness or the effects of accidents, who may be suffering from a communicable disease (a fever — temperature 38°C/100°F or greater — associated with one or more of the following signs or symptoms, e.g. appearing obviously unwell; persistent coughing; impaired breathing; persistent diarrhoea; persistent vomiting; skin rash; bruising or bleeding without previous injury; or confusion of recent onset, increases the likelihood that the person is suffering a communicable disease) as well as such cases of illness disembarked during a previous stop</p> <p>Details of each disinsecting or sanitary treatment (place, date, time, method) during the flight. If no disinsecting has been carried out during the flight, give details of most recent disinsecting</p> <p>Signed, if required, with time and date</p> <p>_____</p> <p style="text-align: center;">Crew member concerned</p>		<p>For official use only</p>
<p>I declare that all statements and particulars contained in this General Declaration, and in any supplementary forms required to be presented with this General Declaration, are complete, exact and true to the best of my knowledge and that all through passengers will continue/have continued on the flight.</p> <p style="text-align: center;">SIGNATURE _____</p> <p style="text-align: center;">Authorized Agent or Pilot-in-command</p>		



ANNEXURE C

REQUIREMENTS CONCERNING VACCINATION OR PROPHYLAXIS FOR SPECIFIC DISEASES

1. In addition to any recommendation concerning vaccination or prophylaxis, the following disease is the only disease specifically designated under International Health Regulations (2005) for which proof of vaccination or prophylaxis may be required for travelers as a condition of entry into South Africa.

Vaccination against yellow fever.

2. Recommendations and requirements for vaccination against yellow fever:
 - (a) For the purpose of this Annex:
 - (i) the incubation period of yellow fever is six days;
 - (ii) yellow fever vaccines approved by WHO provide protection against infection starting 10 days following the administration of the vaccine;
 - (iii) yellow fever vaccine offers life long protection ; and
 - (iv) the validity of a certificate of vaccination against yellow fever commences 10 days after vaccination and doesnot expire.
 - (b) Vaccination against yellow fever may be required of any traveler leaving an area where WHO has determined that a risk of yellow fever transmission is present.
 - (c) If a traveler is in possession of a certificate of vaccination against yellow fever which is not yet valid, the traveler may be permitted to depart, but the provisions of paragraph 2(h) of this Annex may be applied on arrival.
 - (d) A traveler in possession of a valid certificate of vaccination against yellow fever shall not be treated as suspect, even if coming from an area where WHO has determined that a risk of yellow fever transmission is present.
 - (e) In accordance with paragraph 1 of Annex 6 the yellow fever vaccine used must be approved by the WHO
 - (f) States Parties shall designate specific yellow fever vaccination centers within their territories in order to ensure the quality and safety of the procedures and materials are employed.
 - (g) Every person employed at a point of entry in an area where WHO has determined that a risk of yellow fever transmission is present, and every member of the crew of a conveyance using any such point of entry, shall be in possession of a valid certificate of vaccination against yellow fever.
 - (h) A State Party(such as South Africa) in whose territory vectors of yellow fever are present, shall require a traveler from an area where WHO has determined that a risk of yellow fever transmission is present, to be vaccinated. A person who is unable to produce a valid certificate of vaccination against yellow fever, to be quarantined until the certificate becomes valid, or until a period of not more than six days, reckoned from the date of last possible exposure to infection, has elapsed, whichever occurs first.
 - (i) Travelers who possess an exemption (medical waiver) from yellow fever vaccination, signed by an authorized medical officer or an authorized health worker, may nevertheless be allowed entry, subject to the provisions of the foregoing paragraph of this Annex and to being provided with information regarding protection from yellow fever vectors. Should the travelers not be quarantined, they may be required to report any fever or other symptoms to the competent authority and be placed under surveillance.



ANNEXURE D

FORM AC1

**NOTIFICATION OF TRANSPORTATION OF A PATIENT/SICK PASSENGER PER AIRCRAFT/VESSELS/VEHICLE
TO SOUTH AFRICA (AC1)**

To be completed faxed or sent by e-mail (or phoned through) to the Port Health Officer at:

Port of Entry:..... Tel: Fax:

E-mail:..... Province:

MODE OF TRANSPORT INFORMATION

Mode of Transportation: _____

Flight/Vessel/registration no: _____

Port of Entry/ departure: _____

Date of departure: _____ Time of departure: _____

Point of Entry of disembarkation: _____

Date of arrival: _____ Time of arrival: _____

Seat no: _____

INFORMATION OF PATIENT/SICK PASSENGER

Name of patient/sick passenger: _____

Age: _____ Gender: _____

Nationality: _____

Passport no: _____

Medical condition of patient / Diagnosis (confirmed or suspected): _____

Presenting Condition _____

Date of onset _____

Treatment given thus far _____

Has the patient had fever during this illness or few days earlier (yes or no) _____

Countries lived in or visited during previous 21 days: _____

INFORMATION OF HOSPITAL/INSTITUTION IN SOUTH AFRICA

Name of hospital/institution responsible for treatment of patient: _____

Treating Doctor: _____

Contact person: _____

Tel: _____ Fax no: _____

Email: _____

MEDICAL EVACUATION COMPANY:

Medical Evacuation Company: _____

Contact Person: _____

Tel: _____ Email: _____

Airline/vessel/vehicle company responsible: _____

Signature of Applicant: _____

Date: _____



ANNEXURE E

FORM AC2

NOTIFICATION OF SYMPTOMS OF PATIENT/SICK PASSENGER TRANSPORTED PER VESSELS/VEHICLE/AIRCRAFT TO SOUTH AFRICA (AC2)

1. To be completed by Medical companies

The form should be faxed or sent by e-mail to the Port health Officer (PHO) or may be submitted to the PHO on arrival. The form should be given to pilot/captain/driver who should give the information to the Port Coordinators/immigration officers or control tower of the destination port;

Reference number of PHO on form PH1 to approve transportation

A completed Form AC1 should accompany this form if not yet submitted to PHO.

To be completed and faxed/ sent by e-mail (or phoned through) to the Port Health Officer at:

NAME:..... Port of Entry:..... Tel:

..... Fax: E-mail:.....

Province:

OR

To be completed by Pilot/Captain/driver (crew member on his/her behalf) with the sick passenger on board.

Information should be provided to Port Coordinators/immigration officers or the control tower of the destination airport; or the form should be submitted to the PHO on arrival.

Flight no:		Seat no:		Date:	
Name of patient/sick passenger:					
CONDITION OF PATIENT/SICK PASSENGER (Tick in relevant box)					
NO	SIGNS/SYMPTOMS	YES	NO	UNCERTAIN	
	Does the patient have the following symptoms?				
1	Fever				
	Temperature if above 38° C	°C/	°F		
2	Severe headache				
3	Abnormal sweating				
4	Rapid breathing (Shortness of breath)				
5	Excessive coughing				
6	Severe vomiting				
7	Diarrhoea				
8	Bleeding				

Other symptoms/Diagnosis (Confirmed or working): _____

NB Temperature to be written down, whether the patient has a fever or not (Compulsory)

I hereby confirm that the above-mentioned information is true and correct:

Name and Surname: _____

Signature: _____ Date: _____

DEPARTMENT OF HEALTH

NO. 1879

15 March 2022

NATIONAL HEALTH ACT, 2003 (ACT NO. 61 OF 2003)

REGULATIONS RELATING TO THE MANAGEMENT OF HUMAN REMAINS

The Minister of Health intends, in terms of section 68(1)(b) read with section 90(4)(a) of the National Health Act, 2003 (Act 61 of 2003) to make Regulations contained in the Schedule hereto.

Interested persons are invited to submit within 30 days from the date of publication of this Notice substantiated comments or representations on the proposed regulations to the Director-General, Department of Health, Private Bag X 828, Pretoria, 0001 (for the attention of the Chief Directorate: Environmental Health & Port Health Services), by fax to: 012- 395 8802, attention: Mr Daniel Nkuna or by e-mail to: daniel.nkuna@health.gov.za.



DR M.J. PHAAHLA, MP

MINISTER OF HEALTH

DATE: 14/03/2022

SCHEDULE

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CHAPTER 1

DEFINITIONS

Definitions

1. In these Regulations a word or expression to which a meaning has been assigned in the Act has that meaning and, unless the context otherwise indicates—

“body” means a dead human body or the remains thereof and *“corpse”* has a corresponding meaning;

“burial at sea” means the disposal of human remains in the sea by ship or aircraft excluding human remains ashes;

“certificate of competence” means a document contemplated in regulation 5 of these Regulations;

“certificate holder” means the person in whose name a certificate of competence has been issued;

“coffin” means a box, case, or other receptacle, designed for, and into which, human remains are placed for storage, movement, burial, or cremation;

“crematorium” means a place used for the purpose of burning or cremating human remains and includes every part of the premises;

“embalming” means the treatment of human remains to prevent decay;

“environmental health practitioner” means, subject to the provisions of the Health Professions Act, 1974 (Act No. 56 of 1974), any person registered as such with the Health Professions Council of South Africa, and includes an Environmental Health Practitioner doing compulsory community service;

“export permit” means a permit issued by the Director-General as contemplated in regulation 23;

“funeral undertaker” means a person whose business is to manage funeral and **burial services**, including the handling of human remains that are to be buried or cremated, and **“funeral director”** has a corresponding meaning;

“funeral undertaker’s premises” means premises that are used for the preparation and storage of human remains, and includes the vehicles used for the transportation of human remains;

“Health Professions Act” means the Health Professions Act, 1974 (Act No. 56 of 1974);

“human remains” means a dead human body, or the remains of a dead human body whether decomposed or otherwise and includes ashes and “mortal remains” has a corresponding meaning;

“import permit” means a permit issued by the Director-General as contemplated in regulation 23;

“infectious disease” means a disease capable of being transferred by any means from one person to another;

“mortuary” means premises in which human remains are kept for hygienic storage and preservation or for examination purposes, until burial or cremation;

“municipality” means a municipality as defined in section 1 of the Local Government: Municipal Structures Act, 1998 (Act No. 117 of 1998);

“National Environmental Management Act” means the National Environmental Management Act, 1998 (Act No. 107 of 1998);

“potable water” means water which complies with the SANS 241 for drinking water and its subsequent amendments, with regard to its chemical, microbiological and physical quality;

“preparation” means any action aimed at the preparation of human remains for a burial or cremation or for exportation or other disposal and includes the embalming of such human remains for the said purposes, and “prepare” and any word derived there from has a corresponding meaning;

“public transport” means a transport system consisting of vehicles such as buses, trains or taxis used by the general public;

“relevant health authority” means a relevant municipality established under section 155 of the Constitution, and responsible for rendering municipal health services;

“rodent proofing” refers to the construction of premises or containers in such a manner as to ensure that the premises or container cannot be penetrated by rodents and rodent proof has a similar meaning;

“the Act” means the National Health Act, 2003 (Act No. 61 of 2003);

“trailer” means a trailer as defined in section 1 of the National Road Traffic Act, 1996 (Act No. 93 of 1996), and used as contemplated in these Regulations; and

“utensils” means tools, devices and apparatus used in burial services.

CHAPTER 2

APPLICATION OF REGULATIONS

Application

2. (1) These Regulations apply to—
- (a) any private or public mortuary, funeral undertaker's premises and crematorium, including a mortuary or crematorium under the control of the state or a Government Department such as the police services and public hospitals;
 - (b) any state or private owned burial sites;
 - (c) a natural person who is not in the service of a funeral undertaker or mortuary and who does not, either directly or indirectly, undertake or arrange funerals but only prepares human remains;
 - (d) a natural person outside or within the Republic who undertakes the movement of or requires the movement of human remains to or from the Republic; and
 - (e) private households burying human remains in their plots, residences, open land or homes.
- (2) (a) The relevant health authority may, in writing temporarily exempt any person, a public or a private mortuary or a funeral undertaker, a non-governmental organisation or a government or a private institution from any provision of these Regulations.
- (b) The temporary exemption referred to in paragraph (a) may be granted if, in the opinion of the relevant health authority, it does not create a health nuisance, health hazard or endanger human health.
- (3) The exemption contemplated in sub-regulation (2) is subject to such conditions, and is valid for such a period, as the relevant health authority may determine.

CHAPTER 3

FUNERAL UNDERTAKER'S PREMISES AND MORTUARIES

Requirements relating to crematoria, funeral undertaker's premises and mortuary

3. (1) Every crematorium, funeral undertakers' premises and mortuary must have all facilities used in connection with the receiving, storage, transportation and preparation of human remains, which facilities must include at least the following:

- (a) A preparation room for the preparation of human remains only;
- (b) separate male and female change-rooms for employees;
- (c) approved and adequate refrigeration facilities for the refrigeration of human remains;
- (d) facilities for the washing and cleaning of utensils and equipment;
- (e) facilities for the cleaning of vehicles equipped with approved drainage systems;
- (f) facilities for the loading and unloading of human remains; and
- (g) an alternative energy source, in the case of power failure.

(2) No room on a funeral undertaker's premises, crematorium or mortuary may be used for a purpose other than the purpose for which it is intended.

(3) The preparation room must—

(a) be so designed as to—

- (i) be separate from all other rooms on the premises and as not to communicate directly with any office or salesroom: Provided that, where a preparation room on an existing funeral undertaker's premises so communicates, the entrance thereto must be so concealed that the interior thereof is completely out of the sight of any person in such office or salesroom;
- (ii) enable obnoxious odours and vapors to be adequately eliminated; and

- (iii) be sufficiently ventilated and illuminated;
- (b) have a floor—
 - (i) covering an area of not less than 16m² for the first table of the kind referred to in paragraph (e) and 8m² for each additional such table;
 - (ii) constructed of concrete or similar waterproof material with a smooth non-slippery surface that is easy to clean, and sloped at an angle to ensure that any run-off drains into an approved disposal system; and
 - (iii) that is coved where it meets the walls;
- (c) have walls the inner surface of which has a smooth impervious washable finish, which finish must be of a light colour;
- (d) have a ceiling not less than 2,4 m above the floor level, which is dust-proof and painted with a light-coloured washable paint;
- (e) contain not less than one table of stainless steel or glazed earthenware or other approved material, equipped with a raised rim on the outside, a tap with cold running water to which a flexible pipe can be connected and a drainage opening connected to an approved disposal system;
- (f) contain not less than one wash-basin for each such table, made of stainless steel or glazed earthenware or other approved material, with a working surface of the same material, taps with hot and cold running water and approved drainage system connected to a Municipal disposal system or a disposal approved by the relevant authority, and provided with disposable towels, a nailbrush and soap;
- (g) have not less than one tap with running water to which a flexible pipe, long enough to reach all corners of such room, can be connected for cleaning the interior surfaces; and
- (h) have door openings that are not less than 0,82 meters in width and 2 meters in height so that human remains can be taken into and out of such room without any difficulty.

- (4) The change-room must contain at least the following:
- (a) One hand-basin with hot and cold running potable water for every six employees or part thereof;
 - (b) disposable towels, soap, nailbrushes and disinfectants; and
 - (c) not less than one toilet for every 12 male employees or part thereof and not less than one toilet for every 12 female employees or part thereof, employed at the funeral undertaker's premises concerned: Provided that, where a separate urinal for men forms part of such facilities, one toilet plus one separate urinal is permissible for every 30 men or part thereof.
- (5) (a) Refrigerators or cold chambers must be —
- (i) installed in or within easy reach of such preparation room for the keeping of human remains;
 - (ii) made of a material that does not absorb moisture and be fitted with removable trays;
 - (iii) so designed as to drain properly and be easy to clean; and
 - (iv) able to cool the human remains temperature to between 2⁰C and 6⁰C within three hours of its being received on the premises and must be maintained at a temperature of between 2⁰C and 6⁰C.
- (b) A sufficient number of trays must be provided for the storage of bodies, with one body stored per tray.
- (c) Cold chambers must comply with paragraph (a)(i),(ii),(iii) and (iv) and must be fitted with shelves manufactured from a material that does not absorb moisture and that is easy to clean.
- (6) Cleaning and loading and unloading facilities must consist of a paved area, screened from public view, with an approved drainage system into a gully connected to a Municipal disposal system or to disposal system approved by relevant health authority.
- (7) The loading and unloading of human remains and the cleaning of vehicles must not take place anywhere except in the area contemplated in subregulation (1)(e) and (6).

- (8) A funeral undertaker's premises or mortuary must be rendered rodent-proof.

Minimum requirements for cremation facility

4. A cremation facility must—
- (a) be located at least 10 meters from any habitable dwelling;
 - (b) have a chimney fitted with anti-ash scrappers and of a height of not less than three metres above the roof;
 - (c) be kept clean, sanitary and good repair; and
 - (d) be adequately ventilated and illuminated.

Certificate of competence

5. (a) Subject to the provisions of these regulations, no person may prepare or store human remains except on approved funeral undertaker's premises or mortuary in respect of which a certificate of competence, the format of which is set out in **Annexure G** to these regulations, has been issued by the relevant health authority, and is in effect.
- (b) No person may transport human remains in a road conveyance without a valid certificate of competence in respect of the vehicle or trailer used to transport such human remains.
- (c) The possession of a valid certificate of competence does not apply to rail, sea and air transportation.

Application for certificate of competence: Premises

6. (1) (a) A person who wishes to apply for a certificate of competence must submit an application form prescribed by the relevant health authority and must attach the following documents to the application form:
- (i) Special consent use issued by the municipality or traditional authority;
 - (ii) a zoning certificate issued by the municipality in urban areas or a permit to occupy issued by traditional authority;

- (iii) proof of public Notice advertisement;
- (iv) approved plans showing drainage connections;
- (v) a complete ground plan of the proposed construction or of existing buildings on a scale of 1:100; and
- (vi) copies of identity document, passport or permit of the person in charge or owner or particulars of any person other than the applicant or any of his or her employees who is or are responsible for preparing human remains on the premises.

(2) An application for a certificate of competence may be made by the applicant or his or her authorised representative to the relevant health authority in whose area of jurisdiction the funeral undertaker's premises or mortuary is located.

(3) The relevant health authority, when considering an application for a certificate of competence, may request from the applicant or any other person any such further information as it may deem necessary to enable the authority to properly consider the application concerned.

(4) The relevant health authority may not consider an application for a certificate of competence, unless a complete inspection of the premises concerned has been carried out by an Environmental Health Practitioner employed by the relevant health authority.

(5) The conditions of an existing certificate of competence remain valid for a period of 30 days after a change of ownership.

(6) The new owner is legally responsible for the premises from the date of taking ownership.

(7) The new owner must apply for a certificate of competence within seven days of taking ownership of the premises.

Issue of provisional certificate of competence

7. (1) (a) Where a certificate of competence has been applied for in respect of a funeral undertaker's premises or a mortuary, and the relevant health authority is not satisfied that the applicant has complied with the requirements contemplated in regulations 3, the relevant health authority may, nevertheless, in the case of an existing funeral undertaker's premises or mortuary, issue a provisional certificate of competence.
- (b) A provisional certificate of competence contemplated in paragraph (a) is valid only for a period of six months.
- (c) Before issuing a provisional certificate of competence contemplated in paragraph (a), the relevant health authority must satisfy itself that the use of the funeral undertaker's premises or mortuary concerned does not create a health nuisance or endanger human health.

(2) The relevant health authority may not extend a provisional certificate unless the authority is satisfied that the owner or his or her representative is in the process of making the necessary changes so as to comply with the requirements prescribed in regulation 3.

(3) If the relevant health authority extends a provisional certificate as contemplated in subregulation (2), such extension may not be for a period of more than 12 months.

Issuance of certificate of competence

8. (1) The relevant health authority must, if satisfied that the applicant complies with the requirements set out in these regulations, issue a certificate of competence for the premises, mortuary or crematorium.

(2) Where the relevant health authority refuses to issue the certificate of competence, it must provide reasons for such refusal and inform the applicant of the right to appeal the decision.

Validity of certificate of competence

9. (1) A certificate of competence is—
- (a) renewable every second year; and
 - (b) not transferable from one person to another or from one funeral undertaker's premises to another.

(2) An application for the renewal of a certificate of competence must be submitted at least six months before its expiry date.

(3) The relevant health authority may, if the decision to grant the certificate of competence was taken on incorrect or misrepresented information submitted in the application, revoke the certificate of competence with immediate effect.

(4) Before the relevant health authority revokes the certificate of competence as contemplated in subregulation (3), the relevant health authority must give the holder of the certificate a notice to furnish reasons, at a place and time specified in the notice, as to why the certificate must not be revoked.

Application for certificate of competence: vehicle or trailer

10. (1) A person who wishes to apply for a certificate of competence must, when applying for a certificate of competence for premises, also submit an application, on a form prescribed by the relevant health authority, for a certificate of competence for a vehicle or trailer.

- (2) The application must be accompanied by—
- (a) registration documents of the vehicle or trailer issued by traffic authorities; and
 - (b) a certificate or written confirmation by the manufacturer or modifier regarding the specifications of the vehicle or trailer.

Suspension or revocation of certificate of competence or provisional certificate of competence

11. (1) If the relevant health authority is, on the strength of an inspection report by an Environmental Health Practitioner, is of the opinion, based on reasonable grounds, that—

- (a) the funeral undertaker's premises or mortuary is used or suspected of being used in a manner that poses a health hazard;
- (b) conditions entailing a health nuisance or health hazard have been or are being created on the funeral undertaker's premises or mortuary;
- (c) the funeral undertaker's premises or mortuary is being used in contravention of the provisions of these regulations; or
- (d) the conditions under which the certificate of competence or a provisional certificate of competence in respect of a funeral undertaker's premises or mortuary was issued contravene the provisions of these regulations, the relevant health authority may, subject to the provisions of subregulation (2), serve a written notice to the holder of a certificate of competence or provisional certificate of competence or the person in charge of the funeral undertaker's premises or mortuary to—
 - (i) remove such health nuisance or health hazard from the premises;
 - (ii) cease the use of the premises in contravention of the certificate of competence or a provisional certificate of competence; and
 - (iii) furnish reasons, at a place and a time specified in the notice, why the certificate of competence or provisional certificate of competence, whatever the case may be, must not be suspended or revoked.

(2) A notice referred to in subregulation (1) must set out such particulars that are reasonably adequate to inform the holder of the certificate of competence or provisional certificate of competence why the suspension or revocation of the certificate is contemplated.

(3) If the holder of the certificate of competence or provisional certificate of competence fails to comply with the notice contemplated in subregulation (1), the relevant health authority may suspend or revoke the certificate of competence or the

provisional certificate of competence, whatever the case may be, and close the premises.

(4) From the date of coming into operation of the decision to suspend or revoke a certificate of competence or provisional certificate of competence—

- (a) no preparation or storage of human remains may take place on the funeral undertaker's premises or mortuary concerned;
- (b) no human remains may be received for preparation or storage on the funeral undertaker's premises or mortuary concerned;
- (c) no human remains may be preserved on the funeral undertaker's premises or mortuary concerned;
- (d) no human remains may be examined on the funeral undertaker's premises or mortuary concerned; and
- (e) all human remains on the funeral undertaker's premises or mortuary concerned must immediately be removed to a mortuary under the control of the State, a provincial administration or relevant health authority or any other funeral undertaker's premises, mortuary or religious premises approved by the relevant health authority for storage and preservation, and the cost of such removal, storage and preservation must be borne by the holder of the suspended or revoked certificate of competence or provisional certificate of competence concerned.

Appeals

12. (1) A person affected by a decision taken in terms of these regulations who wishes to appeal against the decision, must lodge an appeal with the Mayor or Member of Executive Council for Health or the Minister within 30 days after that person has been notified of the decision.

(2) The Mayor or Member of Executive Council for Health or the Minister, may, pursuant to a written request and on good cause shown, extend the period within which an appeal must be submitted or indulge the late lodgment of an appeal.

(3) The Mayor or Member of Executive Council for Health or the Minister must, after considering all relevant information make a decision on the appeal and inform the appellant of such decision.

(4) Reasons for the decision must be provided to the appellant in writing.

Duties of holder of certificate of competence

- 13.** (1) The holder of a certificate of competence must—
- (a) immediately inform the relevant health authority in writing, if there are changes in the particulars supplied in the application for the certificate of competence concerned;
 - (b) ensure that all workers or employees are provided with personal protective clothing (PPE);
 - (c) ensure that all employees working with human remains are vaccinated and tested for Hepatitis B bi-annually;
 - (d) ensure that employees or workers are trained on legislation related to the management of human remains;
 - (e) ensure that premises and equipment used for the management of human remains are kept clean and disinfected at all times;
 - (f) put infection prevention and control measures in place;
 - (g) ensure that waste is managed according to the waste management legislation;
 - (h) keep proper records of all deaths and exhumations handled, coffins used, import and export of human remains handled, for a period of at least five years;
 - (i) ensure that the necessary documentation for all human remains is kept in the premises and must have the documentation available when transporting human remains from one place to another; and
 - (j) ensure that the person transporting human remains has all the relevant documentation in place and that the receiving municipality or tribal authority has given permission for burial.

(2) Failure by the holder of a certificate of competence or a person in charge of a funeral undertaker's premises or mortuary or an authorised person to comply with this regulation is an offence and the holder or person is liable on conviction to a fine or imprisonment or both.

Duties with regard to management of cremations

- 14.** (1) Every crematorium must keep a register for each cremation performed.
- (2) The register must contain the following:
- (a) The date of each cremation;
 - (b) the name, identity number, address, occupation, age, sex, and marital status of each deceased person cremated;
 - (c) the date of death of each deceased person;
 - (d) the name, identity number and address of the person in whose name the crematorium is registered in terms of the certificate of competence referred to in regulation 8;
 - (e) the name, designation and address of the person who issued the certificate relating to the cause of death of each person cremated;
 - (f) the cause of death and the registration number of the death certificate of each person cremated; and
 - (g) the manner in which the ashes of the person cremated were disposed.

Waste Management

15. (1) Disposable empty body bags must be used once, cut and treated as a health care risk waste and disposed of immediately.

(2) All health care general waste generated on the funeral undertaker's premises, crematoria or mortuary must be kept in corrosion-resistant and rodent proof containers with tight-fitting lids and must be dealt with in accordance with the waste management legislation.

(3) Health care risk waste must be segregated from general waste at all times.

(4) All waste generated in the preparation room, including contaminated disposable personal protective clothing and equipment is health care risk waste and the collection, storage, handling and disposal of such waste must be done in accordance with the relevant health care risk waste standards and legislation.

(5) The certificate holder or person in charge and the appointed waste management contractor must conclude a written contract for the collection, removal, transportation, treatment and disposal of health care risk waste.

Hygiene requirements for funeral undertaker's premises, crematoria and mortuary

16. (1) Every holder of a certificate of competence or provisional certificate of competence for a funeral undertaker's premises, crematorium or mortuary must ensure that —

- (a) employees and all other persons involved in the handling of human remains are provided with clean and appropriate personal protective equipment consisting of surgical gloves, gumboots, plastic aprons so designed that the front hangs over the top of the gumboots, face masks and linen overcoats, and each such employee or other person must, at all times when handling human remains, use the personal protective equipment;
- (b) all entrances and exits of the premises are provided with sanitiser dispenser dispensing hand sanitisers with alcohol content of 60% to 70% alcohol;
- (c) premises are kept free of insects, offensive odours, gases and fumes;
- (d) premises are rodent proof;
- (e) a pest control programme is in place;
- (f) all working areas or surfaces at the premises where human remains are prepared, are cleaned and disinfected immediately after the preparation of human remains;
- (g) all equipment used for the preparation of human remains is washed and disinfected immediately after use;

- (h) all used personal protective equipment is washed, cleansed and disinfected daily on the premises; and
- (i) the number of human remains kept within the premises does not exceed the number of removable trays available to accommodate such human remains in the refrigerators or cold chambers.

(2) The number of removable trays that must be stored in the refrigerators must be specified on the certificate of competence.

(3) The deceased person's apparel and other articles on the deceased person's body must be handled with gloves and cleaned with a detergent followed by disinfection with a solution of at least 70% ethanol or 0.1% (1000 ppm) bleach.

(4) Clothing and other fabric worn by the deceased must be machine washed with warm water at 60 ° to 90 °C and laundry detergent.

(5) If machine washing is not possible—

- (a) linens may be soaked in hot water and soap in a large drum using a stick to stir while being careful to avoid splashing;
- (b) the drum must then be emptied, and the linens must be soaked in 0.05% chlorine for approximately 30 minutes; and
- (c) the laundry must be rinsed with clean water and the linens must be allowed to dry in full sunlight.

(6) A surface where the body was prepared, must first be cleaned with soap and water, or a commercially prepared detergent solution and then a disinfectant with a minimum concentration of 0.1% (1000 ppm) sodium hypochlorite (bleach), or 70% ethanol must be used to disinfect such surface.

CHAPTER 4

CONVEYANCE OR TRANSPORTATION OF HUMAN REMAINS

Prohibition of transportation of human remains on public transport

17. No human remains may be transported through the public transport system except transportation by air.

Requirements for body collecting vehicle

18. (1) The vehicle used for the collection of human remains must be permanently marked “**Funeral Undertaker Transport**” and must be certified by the relevant health authority who must issue the certificate of competence.

(2) The certificate of competence for the vehicle must be kept in the vehicle at all times.

(3) The vehicle must be used solely for the removal and transportation of human remains.

(4) The load box or loading space of the vehicle or trailer must have an easy to wash surface which is non-corrosive and is able to contain fluids.

(5) The vehicle or trailer load box or loading space must be fitted with a drainage system.

(6) The contents loaded in the trailer or vehicle must not be visible from outside.

(7) A funeral undertaker's employees must always wear full personal protective clothing every time when collecting human remains.

(8) Human remains must be placed in a body bag, and then in a steel tray during transportation.

(9) The load box or loading space of the trailer or vehicle must be long enough to contain the human remains without exposing the remains.

Requirements for vehicle used for transportation of human remains

19. (1) The vehicle used for the transportation of human remains must—
- (a) be attached to a funeral undertaker's premises or mortuary;
 - (b) be used solely to transport human remains;
 - (c) be approved and issued with a certificate of competence; and
 - (d) not be washed in public car wash bays.

(2) The space for loading the human remains must be made of smooth, non-corrosive and washable material and must be able to contain fluids.

Use of trailers to transport human remains for burial

20. (1) The trailer must be registered for transporting human remains and must have a certificate of competence issued by the relevant health authority.

- (2) (a) The trailer must be permanently marked on both sides as "Funeral Undertaker Transport".
- (b) Temporary or magnetic stickers are not allowed to be used to mark the trailer as required in terms of paragraph (a).

(3) The trailer must only be used for transporting human remains or a sturdy coffin.

(4) The trailer must be long enough to carry the coffin without exposing it and must have a minimum length of 2m.

(5) The trailer must have a closing door or lid to keep its contents hidden from the public's view.

(6) All human remains transported across borders must be embalmed and the embalming certificate must accompany the human remains during transportation and the remains must be stored in sturdy coffin.

(7) The load space of the trailer must be washable and non-corrosive.

(8) The human remains must be well packaged in a body bag in a coffin during transportation.

(9) The trailer must only be used by a registered funeral undertaker who is in possession of a certificate of competence.

(10) The trailer must be enclosed in design and be in a good state of repair.

(11) The trailer must be fitted with a fixed or removable Hearse floor or Roller board with 2m x 1.2m dimensions and must have lockers at the edges.

(12) The trailer must be fitted with a locker that must be kept locked at all times during the transportation of human remains.

(13) The trailer must be roadworthy and be registered with a valid licence issued by the relevant licensing authority.

Conveyance of infectious human remains

21. (1) The human remains of a person who, at the time of his or her death suffered from a disease or condition which is capable of transmitting an illness even after death and which, in the opinion of the relevant health authority, may pose a health hazard or endanger public health in one way or another, may not be imported or exported in any way unless—

- (a) such human remains are—
 - (i) placed in a moisture-proof clear or transparent polythene bag;
 - (ii) sealed in an airtight container;

- (iii) placed in a sturdy non-transparent sealed coffin; and
 - (iv) embalmed or are completely covered with a 5 cm layer of wood sawdust or other absorbent material which is treated with a disinfectant;
- (b) the outer surface of the coffin or container is free from any leakages or any other secretion matter emanating from such human remains;
- (c) offensive odours are not emitted;
- (d) an Environmental Health Practitioner declares in writing that in his or her opinion—
- (i) the conveyance of such human remains out of the Republic does not constitute a health hazard if packaged and handled in terms of these Regulations; or
 - (ii) the import of such human remains into the Republic does not constitute a health hazard.

(2) The declaration contemplated in subregulation (1)(d) must accompany the human remains at all times during the conveyance and up to the burial and must be shown by the person responsible for the conveyance of the human remains to an official on demand.

(3) The human remains of a person whose cause of death was smallpox, anthrax or viral hemorrhagic fever, may not be embalmed or transported across borders, and such human remains must be buried or cremated within 24 hours at the place of death.

(4) Infectious human remains excluding those referred to in subregulation (3) must be embalmed when transported by Air.

(5) No person, except a law enforcement official, may open a container that contains human remains or remove the human remains from the container or come into direct contact with the human remains after the container has been sealed if he or she does not have a prior approval from an Environmental Health Practitioner.

Requirements for transportation of human remains inland and across borders of Republic

22. (1) A vehicle used for the transportation of human remains must be designed to accommodate a fixed or removable hearse floor or a roller board for ease of movement of the coffin in and out of the vehicle.

(2) The fixed or removable hearse floor or roller board must at least be 2m x 1.2m in dimensions in order to accommodate all sizes of coffins and caskets.

(3) An undertaker transporting human remains from or into the Republic must ensure that the coffin containing the human remains is transported in a vehicle approved by the relevant health authority.

(4) No coffin or container in which the human remains have been placed may be conveyed using public transport.

(5) The person responsible for the transportation of human remains must ensure that where there are leakages, secretions or odours emanating from the coffin or container of the human remains conveyed, such coffin or container is taken forthwith to the nearest mortuary or approved undertaker's premises in order for the necessary measures to be taken to eliminate such conditions.

(6) The holder of a certificate of competence operating in the Republic may be contracted to move human remains up to the border where the body may then be given to a foreign operator.

Authorisation to import and export human remains

23. (1) Subject to the provisions of regulations 21 no person may import or export human remains unless he or she is issued with an import or export permit by the Director-General or his or her delegated person, and such import or export permit is valid for a period of seven days after the date of issue.

(2) A person requiring an import or export permit must apply, on a Form similar to Annexure I, to the Director-General or his or her delegated person in writing three days prior to importation or exportation.

(3) An application for the importation of human remains into the Republic must be made directly to the Director-General or his or her delegated person through the Department of International Relations and Cooperation (DIRCO), and such application must be accompanied by the following:

- (a) A checklist in a form similar to Annexure F to these regulations;
- (b) a death certificate, indicating the deceased's name, the date and place of death and the cause of death. Such information must be provided in one of the official languages of the Republic;
- (c) the name and export permit of the country from which the human remains are to be imported;
- (d) the name of the first point of entry where the human remains are to be imported, the type of transport to be used to import the human remains and convey the remains to the place of burial;
- (e) the name of the municipality and place in the Republic where the burial of the human remains is to take place;
- (f) a permit from the receiving municipality authorising the burial of the human remains;
- (g) a valid certificate of competence of the mortuary or funeral undertaker's premises where the body is to be stored in the Republic;
- (h) the reasons, if the human remains are imported for reasons other than burial;
and
- (i) an embalming certificate.

(4) The movement of human remains within the Republic must be accompanied by all relevant permits.

- (5) (a) If any human remains in respect of which an import permit referred to in subregulation (1) has not been issued are imported into the Republic, the Director-General or his or her delegated person may

order that such human remains be returned to the country of export or be kept in a mortuary or at an undertaker's premises at the expense of the importer until such time that the required permit has been issued.

- (b) If the prescribed permit is not issued within 30 days after the date of the order contemplated in paragraph (a), the Director-General may order that such human remains be buried or dealt with in accordance with the burial prescripts in the Republic at the expense of the importer.

(6) The funeral undertaker must provide the seal number to the Medical Practitioner for recording on the non-infectious disease certificate.

(7) The provisions of subregulation (1) apply with the changes required by the context to the human remains of a person that has died—

- (a) in transit on a boat or aircraft the moment that the human remains are being brought into the Republic, irrespective of whether such human remains are to be buried in the Republic; or
- (b) in the Republic and has to be exported out of the Republic for compliance with the requirements of the International Health Regulations IHR (1969) to contain events at their sources.

(8) The person responsible for the conveyance or burial of human remains must have in his or her possession the import permit referred to in subregulation (1), and the permit must be produced, on request by a Port Health Officer, at the port of entry in terms of the International Health Regulations Act, 1974 (Act No. 28 of 1974) or its subsequent amendments.

Embalming of radioactive contaminated human remains

24. (1) Radioactive contaminated human remains must be embalmed through an injection method only.

(2) Embalmers must wear lead coated personal protective equipment.

(3) All radioactive contaminated human remains must have a label attached, identifying the radionuclide and its activity at the time of death.

CHAPTER 5

ADDITIONAL REQUIREMENTS OF EVENT OF INTERNATIONAL CONCERN, DISASTER OR PUBLIC HEALTH EMERGENCY

Persons who die outside health establishment

25. Where a person dies of an infectious disease outside a health establishment, specimen from such person may only be taken either by a—

- (a) medical practitioner when certifying death at home;
- (b) medical practitioner at a funeral parlour when certifying death; or
- (c) mortician or professional nurse or other suitable health personnel at a funeral parlour.

Additional storage and cooling system

26. (1) An undertaker may, for a limited period during an event of international concern, disaster or public health emergency, in addition to the cooling system in his or her premises, use the mortuary containers or mobile cooling systems.

(2) A crematorium may, in order to increase capacity, make use of mortuary containers on its premises.

(3) The mortuary container must be able to store human remains at the temperature of between 2 and 6 Degrees Celsius.

(4) The container must be issued with a temporary certificate of competence in the name of the existing owner, with conditions determined by the relevant authority.

(5) The door leading to the inside of the container must be screened from the public's view.

(6) The container must meet all requirements for a permanent refrigeration structure relating to washability.

(7) The container drainage system must be connected to the main sewer connection of the funeral undertaker.

Storage of radioactive contaminated human remains

27. (1) Persons handling radioactive human remains must wear appropriate lead based protective clothing with thermoluminescent dosimeter (TLD) or film badge to record the level of exposure to radioactive materials.

(2) The human remains must be stored in an adequately refrigerated compartment until the exposure dose rate at one metre from the remains is less than 2.5 millirems per hour (mR/hr).

(3) The storage of radioactive human remains must be marked with a radiation symbol.

Prohibition of viewing of human remains

28. (1) No person may at any given time make contact with or touch the human remains without wearing the appropriate Personal Protective Clothing (PPE).

(2) The family may not wash or prepare the human remains.

(3) A funeral undertaker must deliver the human remains on the morning of burial and not the night before the burial and must ensure that the remains are not touched.

(4) Those tasked with placing the human remains in the grave or on the funeral pyre must wear gloves and wash hands with soap and water once the burial is complete.

(5) People carrying the coffin must wear disposable hand gloves that must be disposed of properly so as not to create a health nuisance.

(6) Burial services during a disaster or a state of public health emergency must be as short as possible and may not exceed two hours, in order to minimise possible exposure.

(7) Mourners must observe physical distancing during and after the burial service.

(8) Only close family members may attend a funeral and burial service.

(9) For the purposes of protecting the health of the mourners at a burial service, a person who is ill or suspected to have contracted an infectious pathogen or is a patient must not attend a burial service irrespective of his or her relationship with the deceased.

(10) A body bag must be used for transferring the body from the mortuary to a private undertaker to be exported for non-South Africans or to the family for final burial or cremation.

(11) The reusable empty heavy duty body bags must be decontaminated after every use.

Personal Protective Clothing and segregation of human remains

29. (1) Personal Protective Clothing must be kept in a sound state and, if damaged, must be discarded.

(2) Funeral undertakers must use surgical masks, heavy duty rubber gloves and heavy duty aprons when handling human remains.

(3) Safety goggles or shield must be used when performing embalming or working with human remains.

(4) The funeral undertaker must store the human remains of a person who died of an infectious disease separately from the human remains of a person who died of a non-infectious disease or other natural or unnatural causes.

(5) The relevant health authority or traditional authority may not create specific cemetery space for the burial of the human remains of a person who died of an infectious disease.

Application of Chapter

30. This Chapter applies to the handling, storage, preparation and the burial or cremation, of the human remains of a person who dies during a disaster or a public health emergency.

CHAPTER 6 DISPOSAL OF HUMAN REMAINS

Declaration and certification of death

31. (1) When a person dies at home or anywhere outside a health facility, Emergency Services, South African Police Service or a traditional authority may be called to declare the person dead: Provided that the traditional authority has been trained and is able to perform the necessary examination of the body so as to declare a person dead.

(2) A Medical Practitioner, Professional Nurse or a forensic pathologist must certify a person dead whether the person died in or outside a health facility.

(3) The Medical Practitioner, Professional Nurse or forensic pathologist that certifies the death must fill in the DHA Form BI -1663.

- (4) (a) A relevant health authority may not issue a cremation permit, unless the application is accompanied by a certificate of death issued by a Medical Practitioner, Professional Nurse or a relevant health professional who certified the person dead, (and if applicable, who also performed a postmortem examination of the deceased) in respect of whom cremation is intended.
- (b) The certificate of death contemplated in paragraph (a) must indicate the cause of death and whether the cause of death is natural or is from a contagious communicable disease, and that the remains of the deceased may be disposed.

Burial sites

32. (1) A burial site must be—

- (a) subjected to the processes of an Environmental Impact Assessment referred to in the National Environmental Management Act and a Land Use application;
- (b) located outside the 100-year floodplain;
- (c) located at least 50 metres from ground water sources used for drinking purposes;
- (d) located at least 10 metres from the nearest habitable building:
Provided that—
- (i) two rows of natural trees are planted, or solid walls are provided around the perimeter of the cemetery to prevent visibility of activities taking place inside;
- (ii) noise control measures are implemented to ensure that residents around the cemetery are not negatively affected by operations;
- (iii) dust control measures are implemented;
- (iv) access control measures are implemented; and

- (v) a plan is developed to monitor the operation of the cemetery throughout its lifespan.

(2) For a preferred burial site with a soil of sand-clay mix of low porosity and a small and fine-grain texture, the water table must be at least 2.5m deep in order to allow for a traditional grave depth of six feet (1.8 meters);

(3) For areas with higher water tables, the relevant health authority may determine a reasonable depth with additional walling recommendations to protect underground water.

- (4) (a) In the case of private burial sites in respect of which a land survey has been conducted by a municipality, the municipality may grant the necessary approval.
- (b) The approval contemplated in paragraph (a) must be in writing and must contain conditions for use relating to the availability of waste management and ablution facilities which must include access to potable water and sanitation facilities.

(5) A private household, homestead and private farm burial may be allowed relevant health authority on condition that—

- (a) Traditional council authority permit must be in place;
- (b) the chosen site must be at least 50 metres from the source of drinking water; and
- (c) for areas with higher water tables, the relevant health authority may determine a reasonable depth with additional walling recommendations to protect underground water, if home burial is a cultural practice in that area.

Disposal by burial

33. (1) Human remains may only be buried in an authorised cemetery in terms of the National Environmental Management Act.

(2) The depth of the grave must at least be six feet (1.8m).

(3) Human remains of a person who died from anthrax or similar disease must be cremated as soon as possible after such death.

Multiple Burials

34. (1) Where the carrying capacity of the cemetery is exceeded, the municipality or traditional authority may allow more than one human remains to a maximum of three, to be buried in one grave.

(2) Multiple burials must be undertaken taking into consideration the spacing between coffins.

(3) The grave earmarked to be used for a multiple burial must be dug to the depth of at least 2.8 metres from the natural ground level as if all bodies are going to be buried simultaneously.

(4) A municipality must ensure that a multiple burial is done in consideration of human dignity and the necessary controls must be put in place to ensure that human remains can be identified.

(5) The top covering soil may not be less than 1 m, if three bodies are buried in the same grave, 300mm of soil must be maintained between the coffins.

Burial of radioactive contaminated human remains

35. (1) The amount of incorporated radioactivity allowed for the burial of radioactive human remains must not exceed 2.5 mR/hr at one metre.

(2) All objects, clothes, and other material that might have been in contact with the deceased must be tested for contamination and must be disposed of at the hazardous substances landfill.

(3) The body of radioactive human remains must be marked with a radiation symbol.

Disposal of human remains by cremation

36. (1) Human remains may only be cremated in an authorised crematorium in terms of the National Environmental Management Act.

(2) The cremation process must be able to break down the human remains to ashes.

Disposal of radioactive contaminated human remains by cremation

37. (a) Human remains containing radioactive levels higher than 15 mCi (millicurie) must not be released for cremation but must be stored until the limit of 15 mCi is reached.

(b) A radiologist must be consulted to issue certificate declaration the human remains free of any radiological material before the human remains referred to in paragraph (a) are released for cremation.

Disposal by burial at sea

38. (1) Burial of human remains at sea must take place no closer than three nautical miles (equivalent to 6 kilometers) from land and in water no less than 600 feet (equivalent to 200 metres) deep.

(2) The boat used to transport human remains of a person infected by an infectious disease must be decontaminated immediately after use.

(3) All necessary measures must be taken to ensure that the human remains sink to the bottom rapidly and permanently.

(4) Human remains ashes may be disposed of in or on ocean waters without regard to the depth limitations specified in subregulation (1): Provided that the burial

takes place within a distance of three (3) nautical miles (equivalent to six (6) kilometers) from land.

(5) Only flowers and wreaths consisting of materials that are readily decomposable in the marine environment may be disposed of under the general permit provided for in regulation 39 at the site at which the disposal of human remains is authorised.

Issuance of permit for burial at sea

- 39.** (1) (a) No person may bury at sea the body of a person who died in the Republic unless such burial has been permitted by the relevant health authority, on a prescribed form, the format of which is set out in Annexure A to these regulations.
- (b) An application for the permit referred to in paragraph (a) must be—
- (i) made in a prescribed form similar to Annexure B to these regulations;
 - (ii) signed by an executor or the nearest surviving relative of the deceased; and
 - (iii) accompanied by a declaration in accordance with Annexure C or a certificate in accordance with Annexure D, whatever the case may be, to these regulations.
- (c) If the application for a permit is made by a person other than the executor or the nearest relative of the deceased, that person must provide a satisfactory reason why the application is made by him or her and not made by the executor or the nearest surviving relative of the deceased.
- (2) (a) The relevant health authority may not issue a permit contemplated in subregulation (1)(a) unless the provisions of subregulation (1)(b)(i), (ii) and (iii) and (c) are complied with.
- (b) If the relevant health authority so directs, the applicant for a permit must obtain a confirmatory certificate signed by a medical practitioner

in accordance with Annexure E to these regulations and furnish such confirmatory certificate to the relevant health authority.

(3) A permit referred to in subregulation (1) (a) may not be issued for the burial at sea of the body of a person who is known to have left a written direction that his or her remains must not be buried at the sea or must be buried elsewhere than at sea.

(4) (a) A permit referred to in subregulation (1) (a) may not be issued unless the environmental health practitioner authorised to issue permits is satisfied that the coffin or container in which the body is to be buried is of a suitable construction and weighted in a satisfactory manner.

(b) In issuing the permit, the environmental health practitioner authorised to issue permits may impose a condition that the permit be issued on condition that the coffin or container be constructed and weighted as determined by the relevant health authority.

(5) If a body is buried at sea without compliance with any of the conditions set forth in the permit for the burial, the body is deemed to have been buried without such permit and may be exhumed by the relevant health authority for reburial or cremation at the owner's expense.

CHAPTER 7

EXHUMATION AND REBURIAL OF HUMAN REMAINS

Authorisation for exhumation of human remains

40. (1) No exhumation and reburial of human remains may take place unless authorised by —

- (a) the relevant health authority and permitted by the relevant municipality; or
- (b) a court order.

(2) An exhumation may not be authorised without a reburial permit issued by the relevant municipality in whose area the reburial will take place, or without a cremation permit, in cases where the exhumed body must be cremated.

(3) No person may exhume human remains, unless it is for the following purposes:

- (a) Removal from the original grave to a new grave acquired in the same cemetery;
- (b) removal for burial in another cemetery;
- (c) removal for cremation;
- (d) removal for forensic examination of the deceased;
- (e) transfer from a public grave to a private grave;
- (f) for legal reasons, such as crime related investigations;
- (g) for archeological reasons; or
- (h) for any other reason deemed necessary by a court.

(4) The relevant health authority may grant a permit for an exhumation on condition that the exhumation of the human remains may only be done by an undertaker with a valid certificate of competence issued by the relevant authority.

(5) An exhumation may be authorised only if the cause of death was not anthrax or similar disease capable of causing disease over period of time after burial.

Exhumation requirements

41. The following are the requirements for an exhumation:

- (a) The station commander must inform the Provincial Commissioner of the South African Police Service whenever an exhumation is to take place.
- (b) A member of the South African Police Service must always be present when an exhumation is conducted.
- (c) The area where an exhumation is conducted must be screened from the general public and must take place under the supervision of the environmental health practitioner.

- (d) The human remains must be placed in a non-transparent polythene body bag.
- (e) An undertaker must provide a leak proof container for the transportation of the exhumed human remains.
- (f) The grave must be guarded if it is going to be used for reburial of the exhumed human remains.
- (g) The grave must be disinfected after the cover soil has been replaced.

Reburial of human remains

42. The undertaker must register a reburial with the relevant municipality.

CHAPTER 8 GENERAL PROVISIONS

Delegation of powers

43. The Director-General may in writing delegate any duty or power imposed or conferred upon him or her by these Regulations to any official in the Department or assign any duty or power imposed or conferred upon him or her by these Regulations to any provincial department of Health or any municipality.

Offences

44. A person who contravenes a provision of these Regulations or allows such a contravention to take place is guilty of an offence and liable to an imprisonment not exceeding six years or a fine or both such a fine and imprisonment.

Transitional measures

45. (1) Anything done in terms of the repealed Regulations is deemed to have been done in terms of these Regulations.

(2) Any certificate, permit or authorisation issued in terms of the repealed Regulations that has not expired remains valid until its date of expiry.

Repeal of Regulations

46. The Regulations Relating to the Management of Human Remains, 2013 published in *Government Gazette* No.36473, Government Notice No. R.363 of 22 May 2013, are hereby repealed.

Short Title and Commencement

47. These Regulations are called the Regulations Relating to the Management of Human Remains, 2022 and come into force on the date of publication in the *Government Gazette*.

ANNEXURE A**Application forms and approval certificate for burial at sea****AUTHORITY TO BURY AT SEA IN TERMS OF REGULATION 39 (1) (a)**

Application has been made for the burial at sea of the remains of:

(Name)-----

(Address)-----

And whereas I have satisfied myself that all the requirements of the regulations under section (90) (1) of the National Health Act 2003, (Act No. 61 of 2003), have been complied with, that the cause of death has been definitely ascertained, and that there exists no reason for any further inquiry or examination;

I hereby give permission for the burial at sea of the said remains.

(Signature)-----

(Designation)-----

(Date)-----

Place----- Official stamp -----

ANNEXURE B**APPLICATION FOR PERMISSION TO BURY A BODY AT SEA WITH STATUTORY
DECLARATION IN TERMS OF REGULATION 39 (1) (b).**

I (name of applicant)-----

Address-----

apply to the Director-General for permission to have buried at sea the remains of —

(Name of deceased)-----

(Address)-----

(Occupation)-----

(Age)-----

(Marital status) married, widow, or unmarried-----

The true answers to the questions set out below are as follows:

1. Are you an executor or the nearest surviving relative of the deceased?-----

2. If not, state your relationship to the deceased -----

3. The reason(s) why the application is made by yourself and not by an executor of the
deceased estate or the nearest surviving relative of the deceased -----

4. Did the deceased leave any written directions regarding how his or her remains must be disposed of? If so, what?-----

5. Have close relatives of the deceased been informed of the proposed burial at sea?
 Yes/No -----

(the term "close relative" as here used includes widow or widower, parents, children above the age of 16 years, and any other relative usually residing with the deceased)

Has any relative of the deceased expressed any objection to the proposed burial at sea? If so, on what grounds?-----

6. What was the date and time of the death of the deceased?-----

7. Where (place) did the deceased die?-----

(Give address and say whether own residence, lodgings, hotel, hospital, nursing home, etc.)

8. Have you any reason to suspect that the death was due to anything other than natural causes? If so, what are those reasons? -----

9. Give the names and addresses of the ordinary medical attendant of the deceased-----

10. Give the names and addresses of the medical practitioners who attended to the deceased during his last illness-----

I do hereby solemnly and sincerely declare that the information stated above is true, and to the best of my knowledge and belief no material information has been omitted, and I make this solemn declaration* conscientiously believing it to be true.

(Signature)----- Declared at -----the -----
-----day of-----before me:

(Signature)-----

*This declaration must be made before a justice of the peace or a commissioner of oaths.

.....

Official stamp: commissioner of oaths

ANNEXURE C**DECLARATION BY MEDICAL PRACTITIONER IN TERMS OF REGULATION 39(2) (b)(iii)**

I am informed that an application is about to be made for the burial at sea of the remains of:

(Name of deceased)-----

(Address)-----

(Occupation)-----

Having attended the deceased before death and seen and identified the body after death, I give the following answers to the questions set out below:

1. On what date and at what time did the deceased die?-----

2. Where did the deceased die?-----

3. Are you a relative of the deceased? If so, state the relationship-----

4. Do you have, so far as you are aware, any pecuniary interest in the death of the deceased? -----

5. Were you the ordinary medical attendant of the deceased? If so, for how long?-----

6. Did you attend to the deceased during his or her last illness? If so, for how long?-----

7. When did you last see the deceased alive?----- (say how many days or hours before death).

8. How soon after death did you see the body of the deceased, and what examination did you make on the body?-----

9. What was the cause of death?----- (primary/secondary). (specify the disease, injury, etc, and if possible, distinguish the primary from the secondary cause as in the death certificate).
10. Is there any other cause which contributed to or accelerated the death of the deceased? If so, state it, and if there is more than one cause, state them all-----

11. What was the mode of death? (syncope, coma, exhaustion, convulsions, etc.)-----

12. What was its duration in days, hours, or minutes?-----

13. State whether the answers to the last two questions are the result of your own observations, or are based on statements made by others. If based on statements made by others, say by whom?-----

14. Did the deceased undergo any operation during the final illness or within a year before his or her death? If so, what was its nature, and who performed it?-----

15. By whom was the deceased nursed during his or her last illness? (Give names, and say whether professional nurse, relative, etc... . If the illness was a long one, this question must be answered with reference to the period of four weeks before the death)-----

16. Who was,if anyone, present at the time the deceased died?-----

17. In view of the knowledge of the deceased`s habits and constitution, do you feel any
doubt whatever as to the nature of the disease or the cause of death?-----

18. Do you know, or have you any reason to suspect, that the death of the deceased was
due, directly or indirectly, to violence, poison, privation or neglect? -----

19. Do you have any reason to believe that a further examination of the deceased`s body is
desirable?-----

20. Did you issue the certificate required for registration of death?-----

I hereby certify that the answers given above are true and accurate to the best of my
knowledge and belief, that there is no circumstances known to me which can give rise to
any suspicion that the death was due wholly or in part to any other cause than disease
or accident and that there is no circumstance known to me which makes it undesirable
that the body must be buried at sea.

(signature) ----- (Date) ----- (Place)-----

(Address)-----

(Registered qualifications)-----

ANNEXURE D**CERTIFICATE AFTER POST-MORTEM EXAMINATION IN TERMS OF REGULATION
39(2)(b)(iii)**

I hereby certify that I made a post-mortem examination of the remains of:

(Name)-----

(Address)-----

The result of the examination is as follows:-

I am satisfied that the cause of death was-----

And that there is no reason *for making any toxicological analysis or** for the holding of an inquest.

(Signature)-----

(Address)-----

(Registered qualifications)-----

(Date)-----

(Place)-----

*The words in *italics* must be omitted where a toxicological analysis has been made and its result is stated in this certificate or in a certificate attached to it.

ANNEXURE E

CONFIRMATORY MEDICAL CERTIFICATE IN TERMS OF REGULATION 39(2)(b)

I have examined the foregoing medical certificate, and have made a personal inquiry as stated in my answers to the questions below:-

1. Have you seen the body of the deceased?-----

2. Have you carefully examined the body externally?-----

3. Have you made a post-mortem examination?-----

4. Have you seen and questioned the medical practitioner who gave the above certificate?

5. Have you seen and questioned any other medical practitioner who attended the deceased?-----

6. Have you seen and questioned any person who nursed the deceased during his or her last illness, or was present at the time of the death of the deceased?-----

7. Have you seen and questioned any of the relatives of the deceased? -----

8. Have you seen and questioned any other person?-----

(On the answers to questions 5, 6, 7 and 8, give names and addresses of persons seen and say whether you saw them alone).

I am satisfied that the cause of death was-----and
I certify that I know of no circumstances which can give rise to any suspicion that
death was due wholly or in part to any other cause than disease/accident-----
-----and that there is no circumstance of any sort known to me which makes it
undesirable that the body be buried at sea.

(signature) -----

(Address)-----

(Registered qualifications)-----

(Date) -----

(Place)-----

ANNEXURE F**CHECKLIST FOR CONVEYANCE OF HUMAN REMAINS IN TERMS OF CHAPTER 4 OF REGULATIONS**

- (1) Documents needed for importation (non-infectious)
- (a) The following documents must be provided for the importation of human remains: A death certificate, identity document or passport, embalming certificate, letter from the family member requesting importation, and a covering letter from either the Embassy or the undertaker that includes the following:
- (i) Name of deceased;
 - (ii) date of death;
 - (iii) cause of death;
 - (iv) country of death;
 - (v) place of burial; and
 - (vi) full contact numbers including codes.
- (b) If the documents are not in English, a certified translation must be attached.
- (2) Documents needed for importation (infectious)
- (a) The following documents must be provided for the importation of human remains: A death certificate, identity document or passport, embalming certificate, autopsy report, letter from the family member requesting importation, and a covering letter from either the Embassy or the undertaker that includes the following:
- (i) Name of deceased;
 - (ii) date of death;
 - (iii) cause of death;
 - (iv) country of death;
 - (v) place of burial; and
 - (vi) full contact numbers including codes.
- (b) If the documents are not in English, a certified translation must be attached.

Exportation of human remains**(1) Documents needed for exportation (non-infectious)**

(a) The following documents must be provided for the exportation of human remains: A death certificate, identity document, passport, embalming certificate, letter from the family member requesting exportation and a covering letter from either the Embassy or the undertaker that includes the following:

- (i) Name of deceased;
- (ii) date of death;
- (iii) cause of death;
- (iv) country of death;
- (v) place of burial; and
- (vi) full contact numbers including codes.

(b) If the documents are not in English, a certified translation must be attached.

(2) Documents needed for exportation (infectious)

(a) The following documents must be provided for the exportation of human remains: A death certificate, identity document, passport, embalming certificate, letter from the family member requesting exportation and a covering letter from either the Embassy or the undertaker that includes the following:

- (i) Name of deceased;
- (ii) date of death;
- (iii) cause of death;
- (iv) country of death;
- (v) place of burial; and
- (vi) full contact numbers including codes.

(b) If the documents are not in English, a certified translation must be attached.

Transit through South Africa - human remains**(1) Documents needed in the case of a transit through South Africa**

- (a) The following documents must be provided in respect of human remains in transit through the Republic for exportation: A death certificate, identity document, passport, embalming certificate, letter from the family member requesting importation and a covering letter from either the Embassy or the undertaker that includes the following:
- (i) Name of deceased;
 - (ii) date of death;
 - (iii) cause of death;
 - (iv) country of death;
 - (v) place of burial; and
 - (vi) full contact numbers including codes.
- (b) If the documents are not in English, a certified translation must be attached.

Exhumation and importation or exportation of human remains

(1) Documents needed for exhumation and exportation.

- (a) The following documents must be provided for exhumation and exportation of human remains: A death certificate, identity document, passport, embalming certificate, letter from the family member requesting exportation and a covering letter from either the Embassy or the undertaker that includes the following:
- (i) Name of deceased;
 - (ii) date of death;
 - (iii) cause of death;
 - (iv) country of death;
 - (v) place of burial; and
 - (vi) full contact numbers including codes.

(b) If the documents are not in English, a certified translation must be attached.

(2) Documents needed for exhumation and importation:

- (a) A covering letter from either the Embassy or undertaker, that includes the following:

- (i) Name of deceased;
 - (ii) date of death
 - (iii) place of burial
 - (iv) place of reburial (**including grave numbers**); and
 - (v) full contact numbers including correct codes for phone and fax.
- (b) Death Certificate (**If body is over 20 years in grave, no death certificate is required**)
- (c) Letter from a family member requesting exhumation.
- (d) If graves are on a privately owned ground, a letter from the owner granting permission for the burial or exhumation of the body is required.
- (e) If the documents are not in English, a certified translation must be attached.

Unknown Graves

- (a) Request from Company or undertakers must include the following:
- (i) Place of grave;
 - (ii) copies of the newspaper advertisement advertising the discovery of the grave (the advertisement must run for two weeks);
 - (iii) place of reburial;
 - (iv) if graves are on a private owned ground, a letter of from the owner granting permission for the burial or exhumation of the body is required; and
 - (v) full contact number including correct codes.
- (b) If the documents are not in English, a certified translation must be attached.

Documents needed for exhumation and cremation:

The following documents are required for exhumation and cremation:

- (1) Identity document or passport;
- (2) death certificate;
- (3) letter from the family member requesting exhumation and cremation;
- (4) if the grave is on a privately owned ground, a letter from the owner granting permission for the exhumation of the body; and
- (5) a covering letter from the undertaker that must include the following:
 - (a) Name of deceased;
 - (b) date of death;

- (c) cause of death;
 - (d) place of burial (including grave number); and
 - (e) full contact numbers including codes.
- (6) If the documents are not in English, a certified translation must be attached.

ANNEXURE G

CERTIFICATE

NO:.....

CERTIFICATE OF COMPETENCE FOR FUNERAL UNDERTAKERS PREMISES OR MORTUARIES IN TERMS OF REGULATION 5.

FUNERAL UNDERTAKERS PREMISES/MORTUARY

Name _____

Address

OWNER/PERSON IN CHARGE

Name _____

Identity number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

CERTIFICATION AND RESTRICTION

It is hereby certified that the above mentioned premises complies with the provisions of these regulations.

RESTRICTIONS, CONDITIONS OR STIPULATION

ENVIRONMENTAL HEALTH PRACTITIONER

NAME:

PLACE:

DATE:

**** THIS CERTIFICATE IS NOT TRANSFERABLE****

ANNEXURE H

CHECKLIST FOR ISSUING CERTIFICATE OF COMPETENCE IN TERMS OF REGULATIONS 5 AND 6.

The following areas must be checked for compliance. All facilities must also be checked to ascertain that they are in a working order.

1.

AREAS OF FOCUS	COMPLY	NOT COMPLY	COMMENTS
A preparation room for the preparation of human remains.			
Change-rooms , separate for each gender, for the use of the employees employed at such premises.			
Refrigeration facilities for the refrigeration of human remains.			
Facilities for the washing and cleaning of utensils and equipment inside the building.			
Facilities for the cleaning of vehicles on the premises.			
Facilities for the loading and unloading of human remains as contemplated in regulation 3.			
Comply with all the requirements mentioned in regulations 10 and 11.			

ANNEXURE I

APPLICATION AND AUTHORISATION FORM TO IMPORT/EXPORT HUMAN REMAINS IN TERMS OF REGULATION 23

Authorisation

number:.....

WHEREAS application has been made for the importation/exportation of the remains of:

Name _____ of _____ the deceased.....

Address.....
.....

Place _____ of death.....
.....

Cause _____ of death.....
.....

Country _____ and _____ place _____ of burial.....

Declaration of whether the human remains are infectious or non-infectious.....

AND WHEREAS I have satisfied myself that all the requirements of these regulations and any other relevant legislation have been complied with, and that there exists no reason for any further enquiry or examination.

I hereby give permission for the importation/exportation of the said human remains from(Country) to the REPUBLIC OF SOUTH AFRICA/COUNTRY OF DESTINATION on condition that the human remains are embalmed and sealed in an airtight container and placed in a sturdy non-transparent coffin.

Any
conditions.....
other
.....
...

(Signature).....
(Designation).....
(Date).....

DEPARTMENT OF HEALTH

NO. 1880

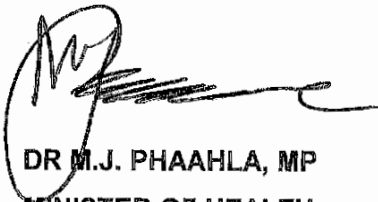
15 March 2022

NATIONAL HEALTH ACT, 2003 (ACT NO. 61 OF 2003)

REGULATIONS RELATING TO ENVIRONMENTAL HEALTH

The Minister of Health intends, in terms of section 90(1)(a), (n) and (w) of the National Health Act, 2003 (Act No. 61 of 2003), to make the regulations in the Schedule hereto.

Interested persons are invited to submit within 30 days from the date of publication of this Notice substantiated comments or representations on the proposed Regulations to the Director-General, Department of Health, Private Bag X 828, Pretoria, 0001 (for the attention of the Chief Directorate: Environmental Health & Port Health Services), by fax to: 012- 395 8802, attention: Mr Murdock Ramathuba, or by e-mail to: murdock.ramathuba@health.gov.za.



DR M.J. PHAAHLA, MP
MINISTER OF HEALTH

DATE: 14/03/2022

SCHEDULE**CHAPTER 1**

1. Definitions

CHAPTER 2**POWERS OF ENVIRONMENTAL HEALTH PRACTITIONER**

2. Environmental Health inspections
3. Environmental health investigations
4. Abatement of a public environmental health nuisance or hazard
5. Procedure in respect of conditions requiring immediate remedying
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7. Seizure of items
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11. Removal of waste
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13. Air Pollution
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15. Control of vermin and vectors

PREMISES

16. Overcrowding in Premises
17. Norms and Standards for Environmental Health
18. Permit in respect of private sewage works

SANITATION

19. Maintenance and operation of sewage works on private premises
20. Compulsory connection to municipal sewage system

21. Prohibition against the erection or installation of non-waterborne sanitation facilities in or under the same roof as a premises
22. Use of septic tanks for waste liquids in areas without sewers
23. Hygiene requirements and maintenance of sanitation facilities and drainage systems
24. Provision of Sanitation at Public Gatherings
25. Environmental health requirements for use of premises
26. Offensive Trades

CHAPTER 4 ENFORCEMENT

27. Defect in form of notice or order under this Regulation.
28. Service of documents
29. Exemption
30. Appeal
31. Offences and Penalties
32. Short title and commencement

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SCHEDULE 2: OFFENSIVE TRADES IN RESPECT OF REGULATION 29

Annexure A

Annexure B

Annexure C

Annexure D

Annexure E

CHAPTER 1 DEFINITIONS

Definitions

1. In these Regulations any word or expression to which a meaning has been assigned in the Act, shall have such meaning and, unless the context otherwise indicates—

“compliance notice” means a notice as set out in section 82 of the Act;

“Environmental Health Practitioner” means a person registered in terms of section 34 of the Health Professions Act, 1974 (Act No. 56 of 1974) who performs the functions contemplated in Annexure A to the Regulations defining the scope of the profession of environmental health practitioners (Government Notice No. R. 888 of 26 April 1991);

“environmental health nuisance” refers to the use of any premises or place in a manner which creates conditions that significantly increase the risk of a public health hazard occurring or which compromises any aspect of public health to an extent that is more than trivial or insignificant and includes any—

- (a) stream, pool, pond, marsh, ditch, gutter, watercourse, cistern, water closet, earth closet, urinal, cesspool, cesspit, drain, sewer, dung pit, slop tank, ash heap or dung heap that is foul and is offensive and dangerous to health;
- (b) stable, kraal, shed, run or premises used for the keeping of animals which is offensive or dangerous to health;
- (c) accumulation of refuse, offal, manure or other matter which is dangerous to health;
- (d) public building which is so unsafe that it is dangerous to health;
- (e) occupied dwelling without sufficient potable water within a reasonable distance from it;
- (f) industrial or business premises which are not kept in a clean state and free from offensive smells or are not properly ventilated and are overcrowded and dangerous to the health of the persons working on the premises;
- (g) industrial or business premises that emits offensive smells or effluvia which are dangerous to health;
- (h) other situation or state of affairs deemed to be a nuisance by the Environmental Health Practitioner; and

- (i) other situation or state of affairs which an Environmental Health Practitioner may consider as such;

“health risk” means that one or more exposures to a hazardous substance may damage the health of the exposed person;

“municipality” means a municipality established in terms of section 12 of the Local Government: Municipal Structures Act, 2000 (Act No. 27 of 2000);

“occupier” in relation to premises means any person who is entitled to occupy the premises or is managing the premises on behalf of another person and includes the agent of any such person if he or she is absent from the Republic or his or her whereabouts is unknown.

“owner” of any premises, means—

- (a) the person in whose name the premises is registered or if he or she is deceased or incapacitated the administrator of his or her estate; or
- (b) in the case where the premises are registered under a notarial lease, the lessee; or
- (c) where the premises is registered in the name of a juristic person, the secretary or manager, or director or member, or the managing body or committee of such juristic person;

“pollution” means the discharge into the environment of any substance or matter, whether liquid, gas or solid, that may on contact with a human cause harm or endanger human health;

“public health hazard” means any actual threat to public health, and includes—

- (a) unsanitary conditions;
- (b) conditions which make it easier for a communicable disease to spread;
- (c) conditions which make food or drink, including water for domestic consumption, unhygienic or unsafe to drink or eat; and
- (d) conditions which allows pests or parasites to infest any place or body of water where they may affect public health;

“relevant authority” refers to the municipal or provincial department exercising powers in terms of by-law, provincial or national legislation;

“seizure” means removing items from the premises and taking control until all necessary procedures have been performed;

“the Act” means the National Health Act, 2003 (Act No. 61 of 2003); and

“waste” means waste as defined in the National Environmental Management: Waste Act, 2008 (Act No. 59 of 2008).

CHAPTER 2 POWERS OF ENVIRONMENTAL HEALTH PRACTITIONER

Environmental health inspections

2. (1) An Environmental Health Practitioner must upon entering any premises for the purpose of an inspection, present his or her identification card, announce the purpose of the visit and may search the premises, unless there are reasonable grounds to believe that such announcement might defeat the purpose of the search.

(2) An Environmental Health Practitioner may—

- (a) in writing, or verbally demand that the owner or occupier of a premises, submit to him or her any book, document or object that must be kept or displayed in terms of the Act or that relates to any matter provided for by the Act that is in the custody or under control of the owner or occupier;
- (b) make extracts from or copy from any book, or document referred to in paragraph (a) in the presence of the owner or occupier;
- (c) question the person referred to in paragraph (a) with regard to any matter provided for in the Act, and obtain information regarding any activity or process or entry in a book or document referred to in paragraph (a): Provided that if the questioning takes place in the presence of a police official the Environmental Health Practitioner must advise the person of his or her rights to a legal representative;
- (d) for the purpose of combating a communicable disease, immediately demand any information from the person referred to in paragraph (a) or from any other person who has at any time been on or in such premises, in any format contemplated in paragraph (a);
- (e) in the presence of the owner or the occupier, examine any process, product, material or substance that is found or is suspected to be used, or destined or intended for use which constitutes an environmental health nuisance or is likely to cause an environmental health nuisance or is detrimental to health;

CONTINUES ON PAGE 130 OF BOOK 2

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AIDS HELPLINE: 0800-0123-22 Prevention is the cure

- (f) in the presence of the owner or occupier, open, test or, photograph any material, products, objects or substance which constitutes an environmental health nuisance or is likely to cause an environmental health nuisance or is detrimental to health;
 - (g) in the presence of the owner or occupier, examine any appliance, product, material, item, object, substance or related matter that is found in or on such premises, and that is used, or is suspected to be used, or intended for use for the manufacture, treatment, packing, marking, labelling, storage, conveyance of any product, object, substance or related matter or in connection with any other operation or activity and open any package or container of such appliance, product, material, item, object or substance; and
 - (h) in the presence of the owner or occupier, take samples of such appliance, product, material, item, object, substance or related matter or any substance that is relevant to the inspection, for the purpose of testing or analysing it if he or she has reason to suspect that such object or product is unsound or unfit for human use.
- (3)
- (a) If the owner or occupier is not present on the premises, a sample contemplated in subregulation (2)(h) must be taken in the presence of any other adult person as a witness.
 - (b) If an owner or occupier is present at the taking of the sample, the Environmental Health Practitioner must ascertain from him or her whether he or she requires a part of such sample for examination or analysis.
 - (c) An Environmental Health Practitioner must, if an owner or occupier requires a part of such sample as contemplated in paragraph (b), without delay, divide the sample in such a manner as its nature permits in the presence of the owner or occupier into two separate parts (as near as identical as possible) and where division of the product is not possible, three products from the same batch may be taken for sampling.
 - (d) A sample must be packed and sealed by the Environmental Health Practitioner in the presence of such owner or occupier be, and marked with—
 - (i) an identification number allocated by the Environmental Health Practitioner;

- (ii) concise details regarding the contents and the nature of the examination or analysis required;
 - (iii) the date on which the sample was taken; and
 - (iv) the name and work address of the Environmental Health Practitioner.
 - (e) An Environmental Health Practitioner must issue a receipt for any item taken from the premises.
 - (f) The results of the analysis of the samples taken may be provided to the owner or occupier of the premises.
- (4) An Environmental Health Practitioner may be accompanied by any person reasonably required to assist him or her in conducting the investigation and inspection.
- (5) An Environmental Health Practitioner must discuss any deficiencies found during conducting the inspection with the owner or occupier and may issue a compliance notice to the owner or occupier to take the necessary remedial action to minimize, remove, or rectify the deficiencies.

Environmental health investigations

3. (1) An Environmental Health Practitioner may—
- (a) inspect any premises, document, book or record or any written or electronic information, specimen, article or substance—
 - (i) which may be relevant; or
 - (ii) to which the Act relates,and question the owner or occupier with regard to these matters;
 - (b) copy or make extracts from, any document, book or record or any written or electronic information referred to in paragraph (a) or remove such document, book, record or written or electronic information in order to make copies or extracts thereof;
 - (c) order the owner or occupier to produce or deliver to a place specified by the Environmental Health Practitioner, any document, book or record or any written or electronic information, specimen, article or substance referred to in paragraph (a) for inspection;

- (d) question the owner or occupier about any specimen, article, substance or other item which, on reasonable suspicion, may have been used in—
 - (i) the commission of an offence in terms of the Act or these Regulations;
 - (ii) breaching the Act;
 - (iii) breaching a term or condition, restriction of a license or other document required by the Act or Regulations to operate or practice a specific activity regulated by the Act or regulations,and if necessary remove such specimen, article, substance or other item;
 - (e) take photographs or make audio-visual recordings of anything or any person that is relevant for the purpose of an investigation;
 - (f) take samples;
 - (g) remove any waste or other matter deposited or discharged in contravention of the Act or term or condition, restriction of a license or other document required by the Act or Regulations to operate or practice a specific activity regulated by the Act or Regulations;
 - (h) for the purpose of combating a communicable disease, demand information relating to the potential disease from the owner or occupier, or any employee on the premises or the person responsible for such condition;
 - (i) examine any process, product, material or substance that is found or is suspected to be used or intended for use which constitutes an environmental health nuisance or is likely to cause an environmental health nuisance or is detrimental to health;
 - (j) open, test, photograph any material, products objects or substance which constitutes an environmental health nuisance or is likely to cause an environmental health nuisance or is detrimental to health; and
 - (k) dig or bore into soil.
- (2) An Environmental Health Practitioner must—
- (a) provide a written receipt for any item removed from the premises in terms of subregulation (1)(c); and
 - (b) return any item removed from the premises in terms of subregulation (1)(c) within a reasonable time or at the conclusion of any relevant environmental investigation.

Abatement of a public health hazard or environmental health nuisance

4. (1) If an Environmental Health Practitioner is of the opinion that any activity being conducted on any premises—
- (a) poses or is likely to pose a danger to human health; or
 - (b) that such activity causes or is likely to cause an environmental health nuisance; or
 - (c) is hazardous, he or she may issue a written compliance notice on Form EHR3 in Annexure C to the owner or occupier of such premises to eliminate or abate such danger, health hazard or environmental health nuisance on the premises within the period specified in the compliance notice.
- (2) A compliance notice shall be served on the owner or occupier of the premises concerned by hand or by registered mail or left on a conspicuous place at the premises.
- (3) If the owner or occupier contemplated in subregulation (1) fails to comply with the notice within the specified period, the Environmental Health Practitioner may, at the cost of the said owner or occupier take all reasonable and necessary measures to remove, eliminate or reduce such danger, environmental health nuisance or hazard.
- (4) If an Environmental Health Practitioner is of the opinion that the owner or occupier of the premises concerned has complied with the compliance notice he or she may issue a compliance certificate on Form EHR4 in Annexure D.

Procedure in respect of conditions requiring immediate remedy

5. (1) Where a compliance notice in terms of regulation 4(1) was issued and if an Environmental Health Practitioner is of the opinion that conditions exist which are —
- (a) dangerous or harmful or likely to be dangerous or harmful to health; or
 - (b) likely to favour the spread or impede the eradication of a communicable disease; and

- (c) requires an immediate remedy, he or she must order the owner or occupier to remedy the condition within a specified period.
- (2) An Environmental Health Practitioner must notify the relevant authority if an owner or occupier fails to comply with an order issued under subregulation (1).
- (3) The relevant authority must hire a service provider to undertake the necessary remedial actions and may recover the costs incurred from the owner or occupier of the premises.
- (4) If an owner or occupier fails to comply with an order issued under subregulation (1) an Environmental Health Practitioner must issue an instruction to him or her to cease operations until the situation has been remedied.

Confiscation of items

- 6. (1) An Environmental Health Practitioner may, pending the examination or analysis of a sample, on Form EHR1 in Annexure A indicate the items on the premises that are an environmental health nuisance or may cause an environmental health nuisance or maybe hazardous to health and the environment and may confiscate the items on the premises or any other premises for a period not exceeding 60 days.
- (2) The Form referred to in subregulation (1) must be handed to the owner or occupier of the premises.
- (3) The Environmental Health Practitioner who confiscated the items or any other Environmental Health Practitioner working for the same authority may release the items before expiry of the specified period or may extend the period for which the items must remain in his or her possession.
- (4) No person may, without the written permission of an Environmental Health Practitioner referred to in sub regulation (3) remove any items confiscated in terms of this regulation from the place where it is stored.

Seizure of items

7. (1) An Environmental Health Practitioner may by written order on Form EHR2 in Annexure B seize the items listed in that Form if after the—
- (a) examination of the items he or she is satisfied that it constitutes an environmental health nuisance or may cause an environmental health nuisance or that it is or maybe detrimental to health and environment; or
 - (b) examination or analysis of a sample obtained in terms of regulation (2(2)(h) or 3(1)(f) it appears that the item concerned constitutes an environmental health nuisance or may cause an environmental health nuisance or that it is or maybe detrimental to health and environment.
- (2) An Environmental Health Practitioner must dispose of all seized items in accordance with section 87 of the Act.

Inspection and investigation report

8. An Environmental Health Practitioner may, after conducting an inspection or an investigation referred to in regulations 2 and 3, within seven days after the date of the inspection or the conclusion of the investigation compile an inspection report on Form EHR5 in Annexure E and deliver it to the owner or occupier of the premises concerned.

CHAPTER 3

COMPLIANCE REQUIREMENTS FOR OWNERS AND OCCUPIERS

Prohibition on causing public health hazard or environmental health nuisance

9. (1) No person may cause or allow on any premises, any public health hazard or environmental health nuisance, or cause or allow any condition that constitutes a public health hazard or environmental health nuisance or endangers human health.

- (2) Every owner or occupier of any premises shall take all reasonable measures to prevent that any condition that constitute a public health hazard or environmental health nuisance arise on his or her premises and shall take reasonable measures to reduce or eliminate such nuisance or danger.

ENVIRONMENTAL POLLUTION CONTROL

Dumping and littering

10. (1) No person may dispose of any waste in or on or near any premises, or any street, public thoroughfare, public road, or public place, that will create an environmental health nuisance or a public health hazard.
- (2) No person may dispose of any waste, including hazardous waste whether in liquid or solid form or any matter that may be deemed to be hazardous, offensive or dangerous to health on any premises or in any watercourse except in—
- (a) an area designated, approved or permitted for that purpose; or,
 - (b) an approved waste container.
- (3) Waste disposed of in a designated area or approved waste container may not cause a public health hazard or environmental health nuisance.
- (4) No person may use any waste, including building rubble, for the purposes of backfilling and land reclamation except with the written permission from a municipality.

Removal of waste

11. (1) Removal of waste from any premises shall be done in a manner that will not cause any public health hazard or environmental health nuisance that may endanger human health.

- (2) Any person who is in breach of subregulation (1), must, to the satisfaction of an Environmental Health Practitioner, remedy any public health hazard or environmental health nuisance that may endanger human health, or any damage caused to the environment or a water course as a result of such breach.
- (3) A vehicle used for the removal of waste must be designed and constructed in a manner that prevents spillage of waste whilst in transit.
- (4) No person may dispose of any hazardous waste in a manner that creates a danger or poses a health risk or hazard.
- (5) No person may dispose of mining waste in a manner that may lead to the destruction of ecosystems which may impact negatively on human health.

Noise Pollution

12. (1) No person may on any premises make noise at a level that causes a disturbance and causes a noise nuisance which may be harmful to human health.
- (2) Noise levels on any premises must comply with the Noise Control Regulations made in terms of the Environmental Conservation Act, 1989 (Act No.73 of 1989).

Air Pollution

13. (1) No person may on any premises burn any waste or any other matter except—
 - (a) on premises designated for the purpose of burning waste; or;
 - (b) in a waste container designated for such burning of waste provided that the emission or discharge of any ash, grit, soot or smoke from any chimney or

appliance or from any other means, in a manner or in quantity that may not pose a danger or be injurious to health; or

- (c) where authorised by designated official and in compliance with applicable waste management legislation.
- (2) No person may on any premises discharge dust into the atmosphere in a manner or in quantities that may endanger human health.
- (3) For the purpose of this regulation, **designated official** means waste management officers as designated in section 10 of National Environmental Management Act: Waste Act, 2008 (Act No. 59 of 2008).

Pollution of water

- 14. (1) Subject to subregulation (2), no person may discharge into any water supply system or watercourse any chemical, pesticide, sewage, acid mine drainage or any other matter which may endanger human life.
- (2) In order to combat snails, insects, pathogenic organisms in any water supply system or water course and to prevent the spread of waterborne diseases a relevant authority may be authorised to take the necessary preventative measures.

PREMISES

Control of vermin and vectors

- 15. (1) No owner or occupier of any premises may allow the breeding or infestation of vectors or other vermin on the premises.
- (2) Where a premises have been infested with vectors or other vermin the owner or occupier of the premises must take all reasonable measures to—
 - (a) exterminate the vectors or vermin to prevent the creation of a public health hazard or environmental health nuisance; and
 - (b) prevent the re-occurrence of such infestation.

- (3) Extermination conducted in terms of subregulation (2) must be undertaken in compliance with the Fertilizers, Farm Feeds, Agricultural Remedies and Stock Remedies Act, 1947 (Act No. 36 of 1947).

Overcrowding in Premises

16. No person may allow overcrowding on any premises that creates conditions which may cause an environmental health nuisance or endanger human health.

Norms and Standards for Environmental Health

17. (1) No one may operate any premises listed in Schedule 1 without a Health certificate issued by the Municipality.
 - (2) The health certificate referred to in subregulation (1) must be issued in compliance with environmental health requirements, as set out in the norms and standards for environmental health annexed to these regulations as schedule 1.
 - (3) An owner or occupier of any premises listed in Schedule 1 must ensure that the premises complies with the requirements of the Norms and Standards for Environmental Health.
 - (4) The owner or occupier of a premises referred to in subregulation (1) must ensure that any activity on the premises does not cause a public health hazard or environmental health nuisance or endanger human health.
 - (5) The owner or occupier of a premises referred to in subregulation (1) must ensure that the premises is used in accordance with the health certificate issued.

Permit in respect of private sewage works

18. (1) No person may provide any service for the removal or disposal of sewage on any private premises except where a permit has been issued by the relevant municipality.
- (2) No person may, on any private premises, install, alter, re-site, operate or maintain any septic tank, filter installation or other works for the disposal of sewage in or on such premises except where a permit has been issued by the relevant municipality.

SANITATION**Maintenance and operation of sewage works on private premises**

19. (1) Any person operating a private sewage works on any premises must ensure that the private sewage works is maintained in a manner that do not constitute a public health hazard, environmental health nuisance, or endangers human health.
- (2) The disposal of any sewage or wastewater from private sewage works must be done in a manner that does not cause a public health hazard, environmental health nuisance, or endangers human health.

Compulsory connection to municipal sewage system

20. (1) Every owner or occupier of any premises to which a municipal sewage service is available, must ensure that all wastewater drainage pipes from any bath, wash basin, toilet, shower, washing machine or kitchen sink is connected to the municipal sewer in an approved manner.
- (2) Grey water should be stored and used in a manner that does not constitute an environmental health nuisance and may not be used for human consumption unless treated.

- (3) Harvested rainwater must be stored and used in a manner that does not cause an environmental health nuisance.

Prohibition against the erection or installation of non-waterborne sanitation facilities

21. (1) Non waterborne sanitation facilities, approved by relevant authority must be installed so as not to cause pollution of any water sources or the environment or to cause any public health hazard, environmental health nuisance, or endanger human health.
- (2) Sewage must be removed from non-waterborne sanitation facilities with as little as possible human contact and in a manner that does not cause a public health hazard, environmental health nuisance, or endangers human health or the environment.
- (3) The sewage removed from non-waterborne sanitation facilities must be disposed of in a manner that does not cause a public health hazard, environmental health nuisance or endangers human health or pollutes the environment.

Use of septic tanks for liquid waste in areas without sewers

22. (1) The owner or occupier of any premises on which a septic tank is used to collect and dispose of liquid waste must ensure that the tank is of adequate size as to contain the liquid waste produced on the premises.
- (2) Except if liquid waste can be disposed of without causing contamination of water sources or creating an environmental health nuisance, premises referred to in subregulation (1) must be equipped with—
- (a) an overhead tank placed in a manner that ensure that its contents is gravity fed into any municipal waste removal vehicles; or (b) an adequate filter, pump and indicator, with outlet pipes constructed and placed in a manner that allows the tank to be easily emptied.

- (3) No person may discharge any urine or human excrement into any tank used for the disposal of liquid waste on any premises.

Hygiene requirements and maintenance of sanitation facilities and drainage systems

- 23.** Every owner or occupier of any premises must ensure that every toilet facility or drainage system on the premises is kept clean and in a sanitary condition at all times and free from any obstruction and must ensure that the toilet facility or drainage system is maintained in a good state of repair, and does not constitute a public health hazard, environmental health nuisance or endangers human health.

Provision of sanitation at public gatherings

- 24.** (1) Any person who holds any meeting, performance or any other event must, in accordance with the National Environmental Health Norms and Standards, for the duration of the event, make available a sufficient number of toilets and hand wash basins to accommodate the persons attending the event.
- (2) The person holding a meeting, performance or any other event must ensure that the toilets contemplated in subregulation (1) are kept free from any obstruction and are in a condition that does not constitute a public health hazard or environmental health nuisance.

Environmental health requirements for use of premises

- 25.** The use of a premises must be in line with the requirements as set out in Norms and Standards Schedule 1 and other applicable legislation, for prevention of a public health hazard or environmental health nuisance.

Offensive trades

26. (1) No person may conduct any activity listed in Schedule 2 on any premises, except where a permit authorising such activity has been issued by the relevant municipality.
- (2) Every owner or occupier of a premises referred to in subregulation (1) must ensure—
- (a) that the listed activity is conducted in a manner that does not cause a public health hazard, environmental health nuisance or endangers human health;
 - (b) that the premises are maintained in a clean, hygienic and good condition at all times; and
 - (c) that the listed activity does not generate dangerous or offensive gases, fumes, vapours or dust that cause a public health hazard, environmental health nuisance or endangers human health.

CHAPTER 4
ENFORCEMENT (GENERAL PROVISIONS)

Defect in form of notice or order under these Regulations

27. No defect in the form of any notice or order issued under the Act or these Regulations invalidates any action taken in terms of such notice or order or creates grounds for an exception in any legal proceedings arising from the notice or order: Provided that the defective notice or order contains all the particulars necessary to enable compliance with the notice or order.

Service of documents

28. Any notice, order or other document issued under this Act is deemed to be duly served if—
- (a) delivered by registered post at the last-known postal address of the person concerned;
 - (b) delivered by hand to the person concerned; and

- (c) Sent electronically to the last known e-mail address.

Exemption

29. (1) A municipality may in writing exempt any person from complying with all or with part of the provisions of these Regulations, if in the opinion of the municipality the exemption shall not cause a public health hazard, environmental health nuisance or endanger human health.
- (2) An exemption contemplated in subregulation (1) may be granted subject to the conditions determined by the municipality and shall be valid for the period stated therein.

Appeal

30. Any person who feels aggrieved by a decision of a relevant authority made in terms of these regulations may appeal to the relevant executing authority.

Offences and Penalties

31. (1) Any person who—
- (a) fails to comply with a provision of these Regulations; or
 - (b) submits inaccurate, false or misleading information in connection with any matter required to be submitted in terms of these Regulations,
- is guilty of an offence.
- (2) Anyone convicted of an offence in terms of sub-regulation (1) is liable to a fine or to a term of imprisonment not exceeding two years or to both such fine and such imprisonment.

Short title

32. These Regulations are called the Regulations Relating to Environmental Health, 2022.

SCHEDULE 1:**LIST OF PREMISES REFERRED TO IN REGULATION 17**

1. Child care centres
2. Nursing homes
3. Maternity homes
4. Homes for the aged
5. Initiation schools
6. Accommodation establishments
7. Beauty salons
8. Swimming pools and spa baths
9. Dry cleaning and laundry establishments
10. Funeral undertakers premises
11. Mortuaries
12. Crematoriums
13. Food premises
14. Premises used for keeping of animals and poultry

SCHEDULE 2:**OFFENSIVE TRADES REFERRED TO IN REGULATION 26**

1. Panel beating or spray painting;
2. Operating a waste recycling plant including oil and petroleum product recycling;
3. Scrap yard or scrap metal dealing;
4. Parchment making;
5. Sintering of sulphurous materials;
6. Viscose works;
7. Ore or mineral smelting, calcining, puddling or rolling of iron or other metal, conversion of pig iron into cast iron, reheating, tempering, hardening, forging, conversion or compounding of carbon with iron or other metals;
8. Works for the production of carbon disulphide, cellulose lacquer, cyan or its compounds, hot pitch or bitumen, pulverized fuel, peridine, liquid or gaseous sulphur dioxide or sulphur chlorides;
9. Works for the production of amyl acetate, aromatic ethers, butyric acid, caramel, enamelled wire, glass, hexamine, lampblack, B-naphthol, resin products, salicylic acid, sulphated organic compounds, sulphurous paints, ultramarine, zinc chloride or zinc oxide;
10. Bacon factories and meat-processing factories;
11. Food-processing factories;
12. Chemical works;
13. Dye works;
14. Breweries and distilleries;
15. Malt and yeast manufacturing works;
16. Sugar mills and sugar refineries;
17. Works or premises used for the storing or mixing of manure, super phosphate or fertilizers;
18. Fat-melting or tallow-melting works and any similar works or establishments for dealing with meat, bones, blood or offal, or with other organic matter derived from animals or poultry;
19. Works or premises used for the manufacture, storage or mixing of meal derived from fish, crustacean, poultry, meat offal from animals or poultry, or other organic matter derived from animals or poultry;

20. Works or premises used for storing, drying, preserving, or otherwise processing bones, horns, hoofs or other waste matter or excretions from animals or poultry;
21. Premises used for storing, sorting or dealing with hides and skins, or for fellmongery;
22. Tanning and leather-dressing works;
23. Slaughter houses or abattoirs and knackers' yards;
24. Glue or size factories;
25. Gut-scraping works;
26. Tripe-cleaning or tripe-boiling works;
27. Soap or candle works;
28. Wool-scouring or wool-washing works;
29. Processing of fish products;
30. Whaling stations, and premises or works used for storing or processing material derived from whales;
31. Paper mills or paper works;
32. Sawmills, wood bark grinding, chipping or extracting work, and destructors;
33. Landfill sites, sewage treatment and water purification plants and activities;
34. Crematoria;
35. Lead-smelting works;
36. Oil refineries and works concerned with the processing of products of petroleum refining;
37. Paint and varnish works;
38. Rubber works, including rethreading or motor vehicle tyres;
39. Brick-burning and lime-burning works;
40. Stone-crushing and stone-dressing works;
41. Asbestos works – any processes where asbestos is used, milled or handled;
42. Cement works;
43. Metallurgical works;
44. Reduction works and ore-dressing works;
45. Charcoal burning and brick burning;
46. Works or premises where sand or shot blasting or similar dust or grit producing processes is applied;
47. Dry cleaning establishments; and

48. The handling or storage of any substance or material which can lead to a public health hazard

Annexure A
EHR1
NATIONAL HEALTH ACT 61 OF 2003
REGULATIONS RELATING TO ENVIRONMENTAL HEALTH
ORDER FOR THE CONFISCATION OF ITEMS IN TERMS OF REGULATION 6(1)

An inspection/ examination carried out on (date).....by an Environmental Health Practitioner at the following premises

.....

revealed products that

may constitute an environmental health nuisance or may cause a public health hazard or environmental health nuisance or may be detrimental to health or the environment. In terms of these regulations the following items, material, substances, objects or products are hereby detained.

Item description	Quantity	Reason for detention	Remarks

Attach additional page for more items

Name of Environmental Health Practitioner:

HI No:

Signature:

Date:

Name of owner/ occupier/person in charge:

Signature :

Date:

Place :

Annexure B**EHR2**

(Health authority's letterhead and contact details)

**NATIONAL HEALTH ACT 61 OF 2003
REGULATIONS RELATING TO ENVIRONMENTAL HEALTH
ORDER FOR THE SEIZURE OF ITEMS IN TERMS OF REGULATION 7(1)**

An inspection or examination or analysis carried out on (date).....by an Environmental Health Practitioner at the following premises

..... revealed conditions which may constitute an environmental health nuisance or may cause a public health hazard or environmental health nuisance and may be detrimental to health or the environment.

In terms of these regulations the following items, material, substances, objects or products are hereby seized.

Item description	Quantity	Reason for seizure	Remarks

Attach additional page for more items

Name of Environmental Health Practitioner:

HI No:

Signature : **Date:**.....

Name of owner/ occupier/ person in charge:

Signature :

Date:

Annexure C

EHR3

(Health authority's letterhead and contact details)

**NATIONAL HEALTH ACT 61 OF 2003
REGULATIONS RELATING TO ENVIRONMENTAL HEALTH
COMPLIANCE NOTICE ISSUED IN TERMS OF REGULATION 4(1)**

Physical Address of Premises:

.....
.....

Person In Charge:

.....
.....

Person Responsible:

.....
.....

Postal Address:

.....
.....

An inspection or examination or analysis carried out on (date).....by an
Environmental Health Practitioner at the following premises

..... revealed conditions which may
constitute an environmental health nuisance or may cause a public health hazard or
environmental health nuisance and may be detrimental to health or the environment.

Below are the conditions observed during the inspection/ investigation:

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Actions/ Instruction to be taken:

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The above-mentioned actions/ Instructions must be complied with on/before (insert time frame / period:

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Failure to comply may lead to legal actions taken against you and you may be liable to a fine or imprisonment or both.

You have a right to appeal to this notice with the relevant Authority within 14 days from the date of delivery of this notice except in such conditions that require immediate remedying.

Environmental Health Practitioner: Signature
HI No:
Place:
Date Stamp

Annexure D

EHR4

(Health authority’s letterhead and contact details)

**NATIONAL HEALTH ACT 61 OF 2003
REGULATIONS RELATING TO ENVIRONMENTAL HEALTH
COMPLIANCE CERTIFICATE ISSUED IN TERMS OF REGULATION 4(4)**

Physical Address of Premises:

.....
.....

Person In Charge:

.....

..

Person Responsible:

.....

Postal Address:

.....

Name of Environmental Health Practitioner:

.....

Date of Inspection:

.....

It is hereby confirmed that the above-named premises was found to be compliant with the compliance order/ instruction of the compliance notice (date and reference no) the notice is hereby revoked.....

Environmental Health Practitioner: Signature

HI No:

Place:

Date Stamp:

Annexure E

EHR5

(Health authority's letterhead and contact details)

**NATIONAL HEALTH ACT 61 OF 2003
REGULATIONS RELATING TO ENVIRONMENTAL HEALTH
INSPECTION REPORT REFERRED TO IN REGULATION 8**

Physical Address of Premises:

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Person In Charge:

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Person Responsible:

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Postal Address:

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Name of Environmental Health Practitioner:

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Date of Inspection:

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Inspection report:

Findings:

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Contravention:

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Actions to be taken

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Failure to comply may lead to legal actions taken against you and you may be liable to a fine or imprisonment or both.

You have a right to appeal to this notice with the relevant Authority within 14 days from the date of delivery of this report except in such conditions that require immediate remedying.

Environmental Health Practitioner: Signature

HI No:

Place:

Date Stamp

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