



WCPP11/2

# Wes-Kaapse Provinsiale Parlement Western Cape Provincial Parliament IPalamente yePhondo leNtshona Koloni

## REPORT OF THE SOCIAL CLUSTER VISIT WEEK TO THE KNYSNA AND KANNALAND MUNICIPALITIES FROM 30 JANUARY TO 3 FEBRUARY 2023

### 1. Introduction

The Social Cluster Visit Week is a key mechanism established by the Western Cape Provincial Parliament to achieve its constitutional oversight mandate in the province. It is intended to ensure that Members of the Provincial Parliament, through its standing committees, continuously keep abreast of developments and delivery issues in the province. It also affords the opportunity to undertake oversight visits and to interact with communities in order to get first-hand information on the needs and challenges that are confronting people. These oversight visit weeks also allow the delegation to visit projects that are implemented by various government departments in the province. This Visit Week afforded the Social Cluster's standing committees the opportunity to visit the Knysna and Kannaland Municipalities. The following standing committees were part of the Social Cluster Visit Week:

Standing Committee on Health;  
Standing Committee on Education;  
Standing Committee on Social Development.  
Standing Committee on Community Safety, Cultural Affairs and Sport; and  
Standing Committee on the Premier and Constitutional Matters.

#### 1.1 The delegation

The delegation of the Social Cluster Visit Week included the following Members:

Bosman, G (DA) (Leader of the delegation)  
BakuBaku-Vos, NG (ANC)  
Bans, AP (ANC)  
Fry, C (DA)  
Kama, M (ANC)  
Plato D (DA)  
Pretorius G (DA)  
Sayed, MK (ANC)  
Windvogel, R (ANC)

### 2. Oversight visit to the Knysna Provincial Hospital on Monday, 30 January 2023

The delegation resolved to conduct a visit to the Knysna Provincial Hospital (the Hospital) as a follow-up visit to the Social Cluster Visit Week to the Bitou municipal area in September 2022. The aim of the visit to the Hospital was to firstly, assess the mental health services it offers, to the communities of the greater Bitou Municipal area. Secondly, the delegation conducted the visit to investigate the extent of the reported mental health challenges at the Hospital, specifically, the shortage of bed space and the challenges with the referral process of mental health patients to mental health institutions across the province. Furthermore, the delegation aimed to investigate the alleged high child mortality rate at the Hospital.

On arrival, the Bitou Health District Management welcomed the delegation. After brief introductions, the delegation conducted a walkabout of the facility. The delegation visited the maternity ward, paediatric ward, general wards for both males and females, and the seclusion room for mental health patients. Dr Potgieter briefed the delegation after the walkabout.

## **2.1 Salient points pertaining to the oversight visit**

- 2.1.1 Knysna Provincial Hospital has an allocation of 90 beds. Due to the shortage of beds and space, mental patients are admitted with other patients in general wards, and this poses a danger to staff and other patients.
- 2.1.2 Psychiatry acute patients are admitted for 72-hour observation and sedation under the Mental Health Act, 2002 (No. 17 of 2002). After 72 hours, patients are discharged back to their communities with medication once they are stable, and if they are not stable, they are referred to the George Hospital for further treatment.
- 2.1.3 The George hospital has 20 beds allocated to mental health patients, and the hospital services the whole Garden route and Central Karoo.
- 2.1.4 The Knysna Provincial Hospital does not have specialists for mental health other than Family Physicians. All mental health specialists are based in George.
- 2.1.5 The delegation was informed that post-COVID-19, schizophrenia diagnoses decreased from 37% in the 2017/2018 financial year to 31% between 2019-2022, due to underreporting. Mood disorders increased from 9% to 15%. Furthermore, substance abuse-related admissions at Knysna Provincial Hospital have increased from 8 to 15%.
- 2.1.6 Between January to December 2022, the total number of mental health patients who were admitted at the Knysna Provincial Hospital was 309, around 25 patients or more per month.
- 2.1.7 The headcount of psychiatric admission in Primary Health Care facilities in the Bitou Municipal areas was approximately, 3989 between January to December 2022.
- 2.1.8 The Department reported that the hospital was grappling with the readmission of psychiatric patients due to substance abuse and other social ills. The hospital has four seclusion rooms for severe psychiatric patients.
- 2.1.9 An Action Drug Abuse Committee consisting of government departments and local Municipality has been established in Knysna to combat the challenge of drugs and alcohol abuse.
- 2.1.10 The hospital has 22 maternity beds and six neonatal beds. In addition, 16 beds have been allocated for parents whose children are admitted to the hospital.
- 2.1.11 Each shift has four staff members and two midwives in the maternity wards. The departmental officials indicated that they would like to be provided with Eclectic Midwives and train them to assist in various communities in the subdistrict.
- 2.1.12 The Department reported that an average of 250 babies per month were born at the Knysna Provincial Hospital.
- 2.1.13 The Department reported that the neonatal stats at the Knysna Provincial Hospital in the last six months was 15.7% for the perinatal mortality rate, 4.6% for the neonatal mortality rate, and 12.4% for the stillbirth rate. The Department reported that compared to national statistics, the Hospital fared satisfactorily. The national statistics reflected 36% for the perinatal mortality rate and 11% for the neonatal mortality rate.
- 2.1.14 The Department reported that 10.8% of the deliveries at the Knysna Provincial Hospital were by teenage girls who are younger than 19 years. The hospital transfers around two to three babies per month to Groote Schuur Hospital for further care.
- 2.1.15 The average length of stay for normal patients was less than three days, whilst the length of stay for psychotic patients was up to seven days before they are referred to the George Hospital for further treatment.
- 2.1.16 In terms of maternity, challenges such as increased expectations from the public for a more personalised approach were reported.

- 2.1.17 The closure of the private hospital labour ward at the end of January 2023 increased demand on the maternity ward allocated to the public.
- 2.1.18 The delegation was informed that private home births were on the increase in the subdistrict.

## **2.2 Reported mental health challenges in the Garden route health subdistrict.**

- 2.2.1 It was reported that mental health patients do not follow up on their medical appointments at the Primary Health Care level in the subdistrict.
- 2.2.2 Communities find it difficult to look after patients once they are discharged from the hospital. It was reported that the goal of the Department is to treat mental health patients at the primary healthcare level and in their communities.
- 2.2.3 The increase in mental health cases due to social ills presents a burden on health facilities.
- 2.2.4 There are no designated wards for mental health patients at the Knysna Provincial Hospital. It was reported that mental health patients are admitted with other patients in the general ward, and this poses a danger to the other patients and staff members.
- 2.2.5 Staff are not fully equipped to look after aggressive mental patients in general wards.
- 2.2.6 Inadequate security at the Hospital was highlighted as a challenge and this poses danger to staff and patients.
- 2.2.7 It was reported that the seclusion rooms for mental health patients were not compliant with expected standards.
- 2.2.8 There is a lack of facility for mental health patients in the Garden route subdistrict. This results in the admission of mental patients to the general ward which poses danger to other patients.
- 2.2.9 There is difficulty in the referral of mental health patients, due to service pressure in the Cape Metropolitan area.
- 2.2.10 There is no long-term stay facility in the Garden route health subdistrict for mental health patients.
- 2.2.11 The Hospital is not exempted from the load-shedding, and it relies on two generators that break often. The Hospital battles to absorb the cost of diesel to fuel the generators.
- 2.2.12 There was a shortage of Emergency Medical Services (EMS) vehicles and staff in the subdistrict.

## **2.3 Input from Ms M Mngomezulu**

Ms M Mngomezulu, cofounder of the Native Roots, Shelters for Homeless Adults in Plettenberg Bay gave input during the meeting. She highlighted several concerns. These include:

- 2.3.1 The poor treatment of mental health patients at the Knysna Provincial Hospital and other health facilities in the subdistrict.
- 2.3.2 The decanting of mental health patients as a national policy was reported as a major problem that needs to be struck out of the health system.
- 2.3.3 The stigma around the mental health of drug addicts was highlighted as a problem in health facilities across the subdistrict.
- 2.3.4 The high default rate of mental patients in the subdistrict was reported as a challenge.
- 2.3.5 Ms Mngomezulu alleged that psychiatric patients are denied treatment and are turned away by nurses at the Knysna Provincial Hospital. She added that homeless people are not given equal treatment in some health facilities.
- 2.3.6 Ms Mngomezulu alleged that there was obstetric violence at the Knysna Provincial Hospital that resulted in the high mortality rate of babies. She alleged that some of the death cases that happened at the Hospital are registered under George Hospital and this was a concern. Ms Mngomezulu requested that a thorough investigation be conducted on this matter.
- 2.3.7 There is a cross border challenge for the communities of Covie to access health care services in the Garden Route.

The departmental officials who were in attendance responded to the allegations made by Ms Mngomezulu. They informed the delegation that the matter was reported to Minister N Mbombo. She investigated the allegations and concluded the report, however, there were no findings on the allegations made by Ms Mngomezulu.

#### **2.4 Briefing on the child health care services in the Primary Health Care facilities in the Garden route health subdistrict**

- 2.4.1 The child health presentation covered immunisation, nutrition, and Tuberculosis (TB) programmes.
- 2.4.2 The delegation was informed that the use of the Knysna Hospital Electronic Birth registers at Primary Health Care facilities across the subdistrict was a major success and the subdistrict used the Community Orientated Primary Care platform as a vehicle to identify unimmunised children.
- 2.4.3 The subdistrict also uses data at the Primary Health Care level to set targets for practitioners.
- 2.4.4 Some of the immunisation challenges that were reported include, cross border migration to and from the Eastern Cape; unreliable addresses in informal settlements, dwellings, and newly developing areas, and immunisation targets that do not correlate with actual births in specific geographic areas.
- 2.4.5 Not receiving regular birth notifications from the private and home birthing sector was also highlighted as a major challenge.
- 2.4.6 Post Covid-19 the hospital staff have experienced low resilience, lack of drive, commitment, and compassion. The low staff morale resulted in increased absenteeism. The staff contingent has not grown proportionally to the increase in the subdistrict's population.
- 2.4.7 In terms of the nutrition programme, there are two dedicated dieticians who provide services to the Knysna and Bitou subdistricts. The dieticians form part of the Community Orientated Primary Care and Community outreach. These dieticians focus largely on the first 1000 days of child nutrition.
- 2.4.8 The Bitou Clinics are supported by the Nutrition Advisor once a week per facility and regular audits of the nutrition programme at all health facilities were conducted for the upskilling of staff.
- 2.4.9 Some of the challenges that were highlighted with regards to this programme include inadequate cooperation of parents to give consent for a child to get either immunisation vitamin A or deworming.
- 2.4.10 The majority of foreigners do not have reliable Road to Health (RTH) books where the latest dosage could be monitored and follow-up on appointments was reported as a major challenge due to unreliable addresses.
- 2.4.11 It was also reported that the increasing burden of poverty in various communities was worsening nutrition and the shortage of soup kitchens in communities also decreased.
- 2.4.12 The delegation was informed that social services were overburdened and sometimes also struggle with resources and demand. In addition, the challenge of child social grants misuse and the shortage of child support centres in the subdistrict were highlighted as major challenges.
- 2.4.13 With regards to the TB programme, it was reported that the TB case finding increased post-COVID-19 in both adults and children, and there was an increase in multi-drug resistant TB.
- 2.4.14 There was an increase in identifying hotspots in communities by Community Health Care Workers. There was also an increase in door-to-door outreach initiatives planned in hotspot areas.
- 2.4.15 There was an increase in the screening rate of TB at all facilities in the subdistrict.
- 2.4.16 Some of the challenges that were reported regarding the TB programme include neglected pathology and that there is still room to improve TB screening.
- 2.4.17 The defaulter rate remains a concern and homeless TB patients remain difficult to track and trace.

## **2.5 Requests for information**

The delegation requested the Department of Health to submit the requested information on or before Monday, 13 March 2023.

- 2.5.1 Report on the investigation instituted by the Department on the alleged obstetric violence at the Knysna Provincial Hospital.
- 2.5.2 Detailed information on the progress made by the Department to address the shortage of EMS vehicles and shortfall in the subdistrict.

## **2.6 Recommendations**

The delegation recommended that,

- 2.6.1 The provincial Department of Health should engage the national Department of Health to ensure that mental health specialists are appointed at the Knysna District Hospital, permanently, or on a rotational basis.
- 2.6.2 The Department looks at addressing the inadequate space and infrastructure challenges for mental health patients at the Knysna Provincial Hospital.
- 2.6.3 The Department of Local Government consider a joint approach to address the concerns of infrastructure of mental health services and facilities at the Knysna Provincial Hospital.
- 2.6.4 The Department of Local Government should engage with the Knysna Municipality, to capacitate the Knysna Hospital with specialists to deal with mental health treatment to avoid having to refer patients elsewhere, and/or discharge patients earlier than needed. The Hospital requires specialists and space to accommodate such patients. The Department should also consider the possibility to expand the current infrastructure to deal with such patients at other health institutions that are already capacitated to accommodate mental health patients.

## **2.7 Resolution**

The delegation resolved that,

- 2.7.1 The Standing Committee on Health should invite the Department of Health to brief the Committee on the state of mental health of staff in health facilities across the province and the support provided to staff by the Department.

## **3 Briefing on the NHI Pilot Project in Kannaland**

- 3.1.1 The delegation was informed that the National Health Insurance (NHI) Sessional appointments in Kannaland started in 2020 to address the service needs and there was no blueprint for the NHI.
- 3.1.2 The NHI continues with funding to hire private doctors on contract in the Kannaland sub-district.
- 3.1.3 The service providers that are contracted through the NHI Pilot Project must get approval to provide services and must meet certain standards from the office of the Health Standards.
- 3.1.4 Calitzdorp was traditionally serviced by two private doctors, but they no longer render medical services.
- 3.1.5 The Department reported on the benefits of the NHI Pilot Project in Kannaland. Key components included available health services, and the additional capacity that allows people from Calitzdorp access to services.

- 3.1.6 Through the NHI Sessional appointments, residents can access the services of a dentist and a dentist assistant, once a week, in Ladismith. Residents can access the services of a medical officer, in Calitzdorp, once a week.
- 3.1.7 For the 2021/22 financial year, the dentist provided services to 580 patients, and 591 in 2022/23. The dentist assistant assisted 751 patients in 2021/22 and 592 during 2022/23. The medical officer provided service to 2177 patients in 2021/22 and 2100 during 2022/23. Furthermore, specialists from George Hospital conducts outreach and support programme in Kannaland to improve access to specialist health services in outlying geographic areas.
- 3.1.8 The burden of diseases in Kannaland includes drug-sensitive tuberculosis, HIV, diabetes, hypertension, psychosis, and trauma.
- 3.1.9 The biggest challenge in Kannaland was to deal with the infrastructure projects as this relates to adequate and appropriate decanting of services at the Clinic and Hospital levels.
- 3.1.10 It was reported that Kannaland was aligned with the Oudtshoorn sub-district to improve system efficiencies, governance, and pool resources in a resource-constrained environment. In addition, collaborative efforts are implemented to improve the patient experience.
- 3.1.11 The Department reported a high absence rate of clinical staff, largely due to staff burnout. This proved to be a challenge for the subdistrict.
- 3.1.12 Kannaland has six total fixed health facilities, namely, one District Hospital, four fixed facilities, and one Satellite Clinic. In addition, the sub-district has four dental mobile clinics and there is no Community Day Centre.
- 3.1.13 It was reported that Alan Blyth District Hospital was the only district hospital, based in Kannaland Municipal area. The hospital was built on the hill and parking was reported as a challenge due to the location of the hospital.
- 3.1.14 The Alan Blyth District Hospital is a registered 30 beds, level 1 health facility that provides health services to approximately, 22 493 residents within the geographical boundaries of the Kannaland Municipal sub-structure mostly rural areas.
- 3.1.15 Beds were allocated as follows at the Alan Blythe District Hospital, 13 beds were allocated to medical, six beds to maternity, four beds to pediatric, six beds to surgical, and one bed to psychiatric patients.
- 3.1.16 During the meeting, the delegation was informed that leadership instability at Kannaland Municipality and constant changes in the municipal leadership had a negative impact on the hospital. Some of the challenges at the Alan Blythe District Hospital that need urgent Municipality intervention, are water cuts, and problems with the water drainage system, fire brigade, and sewage system.
- 3.1.17 It was reported that there was no water at the Alan Blythe District Hospital and the sewage was spilling. The problems were reported to the Municipality and the hospital was still waiting for a response from the Municipality.

The delegation noted that there was success in terms of the NHI Pilot Project in the Kannaland sub-district, namely, increase staffing capacity in various health facilities, especially in clinics. However, there is uncertainty in terms of the policy.

#### **4. Oversight visit to the Calitzdorp Clinic on Tuesday, 31 January 2023**

Sister Labuschagne, the Nursing Manager, led the tour of the Clinic. The delegation opted for a walk-through oversight visit due to the size of the Clinic.

##### **4.1 Salient points pertaining to the oversight visit to the Calitzdorp Clinic**

- 4.1.1 The Calitzdorp Clinic was one of the first NHI Pilot Projects in the country.

- 4.1.2 The total staff complement for the Clinic is 10 and consists of two Clinical Nurse Practitioners, one Professional General Nurse, one Nursing Assistant, one staff nurse, one Pharmacy Assistant, one Health Promoter, two Clerks, and one Cleaner.
- 4.1.3 The position of the Operational Manager for the Clinic was vacant during the visit and the Operations Manager from Ladismith was acting at the Calitzdorp Clinic. It was reported that the post was advertised for the third time and the Department was struggling to fill the position due to a lack of suitable applicants because people do not want to work and live in rural areas.
- 4.1.4 During the 2021/22 financial year, the Clinic obtained a Platinum Ideal Clinic Status and there were no complaints received from patients. It was reported that when complaints are received, they are anonymous, and this makes it difficult to address the complaints with the patients and are mostly about staff attitude.
- 4.1.5 The Clinic has an effective appointment system in place and the average waiting period for patients visiting the Clinic is two and a half hours.
- 4.1.6 The Clinic serves an average of 70 patients per day with two nursing sisters; this means that each sister provides health services to 35 patients per day.
- 4.1.7 During the visit, the Clinic Committee was fully functional and operational.
- 4.1.8 It was reported that a mobile clinic from Calitzdorp Clinic services eight areas and the furthest route was 180 kilometers from Calitzdorp.
- 4.1.9 A doctor contracted through the NHI visits the Clinic four times per week for two hours, to attend to 18 to 20 chronic patients per day. A Dentist visits the Clinic once a month to provide dentistry services on appointment to 40 patients a day.
- 4.1.10 TB defaulter rate was reported as a challenge at the Clinic and the TB staff champion resigned.
- 4.1.11 It was reported that mental health was not a challenge at the Clinic and when patients present psychotic signs, they are transferred to the Alan Blyth District Hospital for 72-hour observation and after 72 hours patients are transferred to George or Oudtshoorn Hospitals.
- 4.1.12 An increase in the number of male suicide cases in Calitzdorp was highlighted. It was reported that six males committed suicide in Calitzdorp in January 2023, and the Department of Health was investigating the contributing factors behind the increase in suicide cases. The Department intends to learn early about the factors that contribute to suicide among men.
- 4.1.13 The delegation was informed that the emergency patients from the Calitzdorp Clinic were referred to Oudtshoorn Hospital and the waiting time for the ambulance was 20 to 30 minutes.
- 4.1.14 It was highlighted that sometimes Health Net does not have enough space to take patients to the hospital, fortunately, the Clinic has a good relationship with Calitzdorp EMS.
- 4.1.15 In terms of infrastructure, Calitzdorp Clinic will be getting major renovations since 1981. Areas that will be renovated include carports, a data capture room, a record room and waste storage.

## **4.2 Reported needs for the Calitzdorp Clinic**

- 4.2.1 The Clinic requires a Nurse Practitioner; the request was submitted to the district. If the Clinic can get a Nurse Practitioner, this will allow the Operational Manager to focus on her work.
- 4.2.2 During the visit, it was reported that the Clinic needs a Pharmacist because the Pharmacy Assistant cannot issue medical scripts and deal with the distribution of medication.
- 4.2.3 The Clinic needs solar power to mitigate the power challenges caused by load-shedding.

## **4.3 Recommendations**

The delegation recommended that the Department should:

- 4.3.1 Consider appointing a Clinical Nurse Practitioner and Pharmacist at the Calitzdorp Clinic as the Pharmacy Assistant is limited on what he can prescribe.
- 4.3.2 Provide psycho-social support for staff to address the staff's attitude towards patients.

4.3.3 Engage with Kannaland Municipality to assist the Alan Blyth District Hospital to improve cleaning, sanitation services and water supply for the clinics in the Kannaland Municipality. The Department of Local Government should also be requested to intervene urgently.

## **5. Engagement with the South African Police Service and the public on Tuesday, 31 January 2023**

The South African Police Service (SAPS) was represented by the Station Commanders for the Ladismith and Calitzdorp stations, as well as officials from its District Cluster for the Kannaland policing sectors.

### **Salient points pertaining to the engagement**

- 5.1.1 The briefing focused on capacity for staffing, vehicle fleet and infrastructure at the police stations servicing the Kannaland Municipality. Additionally, the briefing expanded on cases related to substance and alcohol abuse, domestic violence, and community relations. The public and the municipal representations were also afforded opportunities to engage on the above listed matters and any other safety concerns.
- 5.1.2 In terms of staffing capacity, the Calitzdorp SAPS has the 26 personnel in Visible Policing (VISPOL) unit, four detectives, and nine support staff units. This equates 39 personnel across those units. Ladismith has a staffing contingent of 69 VISPOL members, nine detectives and 13 support personnel.
- 5.1.3 The SAPS' vehicle fleet reflects that there are no vehicles allocated to the detective unit in Calitzdorp. The overall fleet allocation is four VISPOL vehicles and one for support staff. Ladismith however, has 17 VISPOL vehicles, five detective vehicles and two allocated to support staff.
- 5.1.4 The Calitzdorp SAPS has four holding cells, of which only two are in use. One holding cell is used as a storage facility and the other has structural damage. The Station comprises of a brick-and-mortar building with an adjacent mobile office. The Ladismith SAPS has six holding cells, of which two are not in use, with another two being used for storage. The Station also comprises of a mix of brick-and-mortar and mobile office structures.
- 5.1.5 Although both the Calitzdorp and Ladismith SAPS have security gates and perimeter lights in place, the Ladismith SAPS has registered its request with the National office for improved security infrastructure.
- 5.1.6 The Calitzdorp SAPS has five trained victim support volunteers who assist victims of reported domestic violence cases. Ladismith has 11 such volunteers. The services are availed on a 24/7 basis. Victim support coordinators are appointed at each of these police stations.
- 5.1.7 From April 2022 to early January 2023, the Calitzdorp SAPS recorded 263 domestic violence incidents, 70 domestic violence cases and 123 protection orders issued. During the same period, the Ladismith SAPS recorded 239 domestic violence incidents, 147 domestic violence cases and 114 protection orders issued.
- 5.1.8 The SAPS reported that contact crime, as well as domestic violence crimes, are often influenced by alcohol and substance abuse. The consumption and illicit trade of these substances pose significant challenges and are key contributors to contact crime.
- 5.1.9 The R62 passage is used as a corridor to transport drugs between the Western and Eastern Cape provinces. The SAPS highlighted that this route is problematic and requires intense monitoring.
- 5.1.10 The Kannaland Municipality has no formal gang structures.
- 5.1.11 Although there are several community-based activities to promote safety awareness, there remains a general reluctance from the community to report perpetrators for crimes committed.



- 5.1.12 The public and the municipal representation were afforded the opportunity to provide input. The input addressed concerns that the safety plan for the Kannaland Municipality was not effectively implemented, especially in rural areas. Additionally, the community emphasised that the SAPS is significantly under resourced in terms of staffing for both VISPOL services as well as on station level across shifts. The community also stated that there is an under resourcing of functional vehicles, especially for VISPOL services.
- 5.1.13 The community expressed concern that there is a need for youth development measures to deter youth, and school leavers, from engaging in criminal activities. The prevalence of drug and liquor outlets, truancy, and unemployment, are amongst the causative factors for the crime rates.
- 5.1.14 The Department of Community Safety acknowledged the need for improved implementation of its safety plan for the Kannaland Municipality. The Department also reported that there is a need for improved police reservist structures.

## **5.2 Requests for information**

The delegation requested the South African Police Service to provide:

- 5.2.1 An update on the vehicle fleet requests for the Garden Route Cluster District, per station.
- 5.2.2 An update on the plans to upgrade and/or repair the holding cell infrastructure for both the Ladismith and Calitzdorp police stations, as well as the plans for improved storage facilities for these stations.

The delegation requested that the Department of Community Safety: -

- 5.2.3 Presents on its implementation of the district safety plans, with a special focus on the Kannaland Municipality, especially its rural areas.
- 5.2.4 Provides a report on the impact of the Area Based Tasks teams allocated to the Kannaland Municipality for the 2021/22 financial year to date January 2023.
- 5.2.5 The delegation requested clarity on the role of the Municipal Safety Officers from Kannaland Municipality, including the payment structure for their services, and a breakdown of the intergovernmental relations with other law enforcement and policing structures.

The delegation requested the Department of Local Government to:

- 5.2.6 Provide the legislative processes and/or ethical management plan, guiding the appointment of persons to the position of municipal manager. And, if any, the criteria exempting the appointment of a convicted criminal to be appointed as a municipal manager.
- 5.2.7 Conduct an audit on the vetting processes for appointed municipal managers and staff. By way of context, the delegation noted with concern that the municipal manager at the time of the visit to the Kannaland Municipality, had been linked to acts of criminality.

## **5.3 Resolution**

- 5.3.1 The delegation resolved to invite the South African Police Service to present on SAPS staff establishments and plans to fill vacancies, and the turnaround times for filling these vacancies.

## **5.4 Recommendation**

The delegation recommended that the Department of Community Safety: -

- 5.4.1 Assists Community Police Forums regarding the implementation of its safety plan. The safety plan should include a social development intervention plan to improve the safety aspects in the area.

## **6. Oversight visit to Besige Bytjies Voorskool on Wednesday, 1 February 2023**

Mrs SA du Plessis, the Principal of the Besige Bytjies Voorskool Early Childhood Development (ECD) Centre, received and briefed the delegation.

### **6.1 Salient points pertaining to the visit**

Ms R Leukes, Director: Early Childhood Development, also briefed the delegation on the background and the basic functionality of the school. She reported that:

- 6.1.1. The Early Childhood Development Directorate was transferred from the Department of Social Development to the Western Cape Education Department (WCED) on 1 April 2022.
- 6.1.2. The WCED recorded 1599 registered sites in province in the third quarter.
- 6.1.3. To ensure that teachers were compliant, the WCED contracted the South Cape College to roll out the National Curriculum Framework. The roll out focused on the curriculum for the ages ranging from birth to four years. The rollout was extended to both registered and unregistered ECD sites.
- 6.1.4. The Social Sector Organisation (SSO) supports ECD with registration and to meet compliance standards.
- 6.1.5. The National Lottery (Lotto) funded the building of Besige Bytjies in 2016. International donors have since upgraded the facility three times. The WCED reported that between 2017 and 2022, 39 ECD facilities were upgraded. The WCED reported that its 2023 Conditional Grant allocation for ECDs will be used to build classes.
- 6.1.6. Besige Bytjies is part of the Klein Karoo Resource Centre (KKRC) programme which is aligned to the National Early Learning Development Strategy (NELDS).
- 6.1.7. Under the KKRC programme, all practitioners are trained on the NCF.
- 6.1.8. Besige Bytjies is a fully licensed facility with 146 children (ranging from two to six years of age); its certificate was issued in August 2022.
- 6.1.9. The facility feeds 84 children funded by the WCED. The WCED allocated R376 992 for the 2022/23 financial year, of which 40% will be used for nutrition. The facility produces its own vegetables to keep costs low.
- 6.1.10. The Die Heuvel Speelgroep project at Besige Bytjies is part of the Die Heuvel Trust which was established in 2011. A total of 448 children (between 2-6 years old) were enrolled in two grade R classes and 20 practitioners and assistants were hired for the project.
- 6.1.11. The school has several challenges. These include lower attendance during winter. The school reported that most learners do not have adequate or appropriate winter wear. The ECD is situated in a poor community and most parents struggle to pay the R50 monthly school fees. The school has intermittent restricted water supply.

### **6.2. Recommendations**

The delegation recommended that the Western Cape Education Department:

- 6.2.1. Investigates the usage of containers as classrooms. These structures are potential health and safety hazards due to the lack of installed air-conditioning systems.
- 6.2.2. Consider investigating alternative funding options for the school.

- 6.2.3. Assists Early Childhood Development centres with resources to be compliant according to the ECD Standard Operating Procedure.
- 6.2.4. Briefs the Standing Committee on Education on building capacity of ECDs.
- 6.2.5. Consider Increasing funding for the school to stop utilising asbestos-based material for classrooms, to construct a single, well capacitated building for the ECD. Kindly provide a 5-to-10-year plan for the school in respect of such infrastructure upgrades.
- 6.2.6. Assists with school registration in rural areas and consider utilizing local Non-profit organisations (NPOs) to assist.

### **6.3 Resolutions**

- 6.3.1. The delegation resolved that the WCED briefs the Standing Committee on Education on the transition of mandate of ECDs from the Department of Social Development to the WCED.
- 6.3.2. Engage the Kannaland Municipality to resolve the water supply interruptions at this facility.

### **6.4. Information Requested**

- 6.4.1 The delegation requested the Kannaland Municipality to submit a breakdown of the funding allocation from the WCED.

## **7. Oversight visit to Amalienstein Mission Complex on Wednesday, 1 February 2023**

Ms Marleen, a resident of Zoar who helps with the daily maintenance and activities at Amalienstein Church, welcomed the delegation. She also provided responses to the delegation's questions during the brief walk about.

### **7.1 Salient points pertaining to the visit**

- 7.1.1 The Amalienstein Church is categorised as a heritage site.
- 7.1.2 This year, 2023, marks the 170<sup>th</sup> anniversary of the Church being built.
- 7.1.3 The Church only holds Communion Services monthly. This is largely due to it not having a resident pastor to regularly lead this service, since 2019. The resident pastor post is therefore vacant.
- 7.1.4 The Church is largely still in its original state in terms of the actual build. That means, the wooden pews, gallery, flooring, and other larger structural components, are original.
- 7.1.5 The local community attends to the maintenance and repair of the Church.

### **7.2 Recommendations**

The delegation recommended that:

- 7.2.1 The Department of Cultural Affairs and Sport, as well as the Heritage Western Cape council, supports the Amalienstein Church to commemorate its 170-year anniversary.
- 7.2.2 Wesgro includes the Amalienstein Heritage Site on the provincial site tourism routes.

## **8 Oversight visit to Die Heuwel Speelskool on Wednesday, 1 February 2023**

Mr S Sneygans, the Principal of the ECD received and briefed the delegation.

### **8.1. Salient points pertaining to the visit**

- 8.1.1. Die Heuwel Speelskool was founded in 1999 with six learners by Mr and Mrs Cloete in Calitzdorp on their farm. The farm was later sold, and the learners were moved to the storage section of the Calitzdorp station.
- 8.1.2. There were 32 learners enrolled at the school when Mr Sneygans was appointed as the school principal. The school temporarily moved to Calitzdorp High School's sports grounds where the school was operating for a year.
- 8.1.3. The school also received donations of containers to be used as classrooms. This was not the ideal use for classrooms and within six months the first building was built. During the construction of the school, the high school was temporarily used.
- 8.1.4. The school moved into its first building in March 2012 with four classrooms and 75 learners. The first building was equipped with four classes, and each had its own toilets. Within a year the classes were all full and they needed another building. They approached donors and another year and a half later the second building was built.
- 8.1.5. The small kitchen in the first building was too small to feed the learners in both buildings. Therefore, they built a much larger kitchen where today they provide 348 learners with two meals a day.
- 8.1.7. The school has one special needs class with six learners.
- 8.1.8. The school does not have proper paving or a child-friendly area around the playground. This could be dangerous for learners.

## **8.2. Recommendations**

### **The delegation recommended that the WCED should:**

- 8.2.1. Consider installing grass and/or artificial turf and/or other appropriate material to create a playground area that is not just fully paved. This would improve health and safety features to make the schoolyard child friendly.
- 8.2.2. Liaise with the school regarding the school's funding model.
- 8.2.3. Consider collaborating with Wesgro to attract investments into schooling in areas such as Calitzdorp.

## **9. Oversight visit to the Calitzdorp High School on Thursday, 2 February 2023**

Mr M Le Roux, the Acting Principal of the school, received and briefed the delegation.

### **9.1. Salient points pertaining to the visit**

Mr Le Roux briefed the delegation on the basic functionality of the school. He reported that:

- 9.1.1. Calitzdorp High School is a combined school serving learners from Grades R to 12.
- 9.1.2. The Acting Principal reported on infrastructure projects and maintenance plans outlined for the 2022/23 and 2023/24 financial years.
- 9.1.3. The school has four non-educators who maintain the grounds of the school.
- 9.2.4. The hostel is supported by seven staff members.
- 9.1.5. The teacher to learner ratio was 38:1, but the agriculture class was about 78:1 during that subject period.
- 9.1.6. The total number of learners registered at the school as at 17 January 2023 was 735 learners, with a teacher-learner ratio of 37.1.
- 9.1.7. The school is a quintile 4 school but serves a community that is in a quintile 1 area. This is because the school cannot afford SGB posts due to the unemployment rate in the community surrounding the school.

- 9.1.8. The school has the Learner Transport Scheme (LTS) which transports 59 learners along the Gamka route and the Rietfontein route.
- 9.1.9. There is no MOD centre at the school.
- 9.1.10. The schools has basic safety measures in place.
- 9.1.11. As part of STEAMAC Science, Technology, Engineering, Arts, Mathematics and Coding (STEAMAC), Agricultural Management Practice and Agricultural Technology subject was added.
- 9.1.12. Additional STEAMAC subjects under Agricultural Technology are:
  - 9.1.12.1 Welding of various steel works.
  - 9.1.12.2. Materials required for agricultural technologies.

9.1.13. Below is the National Senior Certificate Results from 2013 to 2021:

<b>NSC RESULTS OVER THE YEARS 2013 -2021</b>			
<b>YEAR</b>	<b>Wrote</b>	<b>Passed</b>	<b>Pass rate</b>
2021	58	48	82.76%
2020	47	37	78.72%
2019	41	30	73.17%
2018	49	38	77.6%
2017	29	24	82.8%
2016	41	40	97.6%
2015	48	45	93.8%
2014	40	39	97.5%
2013	53	53	100%

- 9.1.14. With regards to the National School Nutrition Programme (NNS):
  - 9.1.14.1. The school has 735 learners, 95% of them come to school hungry. The school only can feed 240 learners.
  - 9.1.14.2. There are two staff members who are responsible for preparing all the food.
  - 9.1.14.3. Learners bunk class to get in line for food.
- 9.1.15. The School Governing Body (SGB) is functional.
- 9.1.16. With regards to computer Labs (broadband/WIFI):
  - 9.1.16.1. There are three computer rooms.
  - 9.1.16.2. The school utilises the WCED network.
- 9.1.17. The three computer labs have various problems with maintenance, outdated equipment, and load shedding, which makes teaching difficult.
- 9.1.18. Challenges raised by the school:
  - 9.1.18.1. The learner-teacher ratio is high.
  - 9.1.18.2. The learner-class ratio is high.
  - 9.1.18.3. Poor discipline in the school.
  - 9.1.18.4. Poor parental relationships with the school.
  - 9.1.18.5. The power failure during practical subjects, challenge to get Practical Assessment Task (PAT) completed.
  - 9.1.18.6. The adverse effects of Covid-19 (alternating groups) have left many gaps in the academy.
  - 9.1.18.7. Learners who "bunk" classes and do not realize the necessity around learning.
- 9.1.19. There are no unplaced learners.

## 9.2. Recommendations

The delegation recommended that the Western Cape Education Department:

- 9.2.1. Investigates the subject choices for learners, to make it easier access to tertiary institutions.
- 9.2.2. Addresses and resolves the number of learners per classroom if it is not in violation of legislation governing the size of classrooms.
- 9.2.3. Needs to investigate the possibility to capacitate the school with at least two more teachers in specialised subjects.

9.2.4. Consider alternative and more functional use of the tennis courts.

### **9.3. Information Requested**

The delegation requested that:

- 9.3.1. The WCED provides reasons for rejecting the school's application to amend its quintile categorisation.
- 9.3.2. The Department of Cultural Affairs and Sport to provide a report on the status of MOD centers in Gamka and Calitzdorp.
- 9.3.3. The Department of Social Development provides information on how the isiBindi programme is operating in the Calitzdorp community.
- 9.3.4. The WCED provides a safety and leadership audit of the school. The delegation noted that the school's playground facilities are not conducive for learner use.
- 9.3.5. The WCED to provide a copy of the school's Safety Plan.

## **10. Visit to the Social Development Service Office in Calitzdorp on Thursday, 2 February 2023**

Mr Ngonyama, the Social Work Manager for Oudtshoorn and Kannaland welcomed the delegation and led the presentation on the DSD programmes in Calitzdorp.

### **10.1 Salient points pertaining to the visit**

- 10.1.1 The delegation was informed that the main office of DSD in Kannaland subdistrict was in Ladismith and the Calitzdorp office was a service area office.
- 10.1.2 The Oudtshoorn District office served the Kannaland subdistrict until 2012. Previously, the Afrikaanse Christelike Vrouevereniging (ACVV) staff served the Calitzdorp area.
- 10.1.3 ACVV opted to closed in 2016 due to challenges such as office space, instability in ACVV's board, staff, and financial challenges.
- 10.1.4 The Calitzdorp Service Centre has three staff members that consist of two social workers and one social auxiliary worker and there are four vacancies for Social Auxiliary Workers in Calitzdorp.
- 10.1.5 The DSD staff members in the Calitzdorp service conducts generic work except for Social Crime Prevention Programme and Victim Empowerment Programme (VEP).
- 10.1.6 The caseload of social workers in Calitzdorp was reported to be 109 cases per social worker. compared to the norm of 60 cases per social worker, the current case load is considered to be substantial.
- 10.1.7 Kannaland is a vast area, social workers travel long distances to service clients and in the absence of social workers, interns play a critical role in Calitzdorp.
- 10.1.8 There is only one vehicle at the Calitzdorp Service Centre used by social workers to service all the areas.
- 10.1.9 The delegation noticed that the DSD services in Calitzdorp were rendered from a church building. It was reported that DSD was struggling to find office space in Calitzdorp, and the Municipality was requested to intervene and they promised to accommodate DSD in a library, however, the library was too small.
- 10.1.10 Due to the shortage of office space in Calitzdorp, DSD has been renting a church to provide services since March 2020. The delegation noticed that the church was not suitable for the DSD officials and clients.
- 10.1.11 DSD officials informed the delegation that the DSD Service Office in Calitzdorp was in urgent need of office space.

- 10.1.12 The DSD in Calitzdorp was working towards a family centered approach with specific focus in providing reintegration and aftercare services; continuing care, therapeutic, rehabilitation, and restorative services; protection and statutory services; social assistance and relief services; prevention and promotion services.
- 10.1.13 Social issues in Kannaland, especially in Calitzdorp are significantly concerning. These include consistent high levels of poverty and lack of necessities such as access to job opportunities, special needs schooling, health facilities, police services, child neglect, substance abuse, crime committed by youth and youth unemployment.
- 10.1.14 It was reported that Calitzdorp is surrounded by farming communities that are barely accessible with very few households in areas such as Groenfontein, Kruissrivier and Besemkop. In Besemkop, there was an increase in school dropout, high number of children on the streets, and in conflict with the law.
- 10.1.15 Substance abuse was reported to be prevalent in Kannaland subdistrict and a Local Drug Action Committee has been established. However, constant changes within the Municipality were affecting the programme.
- 10.1.16 The region has five CYCCs, one is state owned and four are managed by NPOs. Children in need of care get space but space for children with behavioral problems was reported as a challenge.
- 10.1.17 It was mentioned that children with behavioral problems are given letters by the school to give to parents and for parents to go to the school within seven days, but the children do not hand the letters to their parents and the children end up dropping out from school.
- 10.1.18 It was alleged that some of the school principals in the Kannaland subdistrict do not want to take the children with behavioral problem back to school. Social workers had to beg the School Governing Body for the re-admission of the children and majority of these children end up on the streets.
- 10.1.19 It was highlighted that there was a miscommunication between the schools, school social workers, and DSD social workers in the subdistrict with regards to children with behavioral problems. Members were informed that school principals are expelling children without discussing the children's conduct with social workers.
- 10.1.20 The Department reported that various interventions were implemented to address the challenge of street children in Kannaland subdistrict. The interventions include door to door campaigns to address school dropouts and street children; individual assessments, group sessions; individual engagements with children and families; referrals to school for readmission; youth at risk referrals to community development and integrated sports initiatives by SAPS to keep children off the streets.
- 10.1.21 The delegation was informed that since the closure of ACVV in Calitzdorp and Badisa in Ladismith, DSD officials had to take over their service areas, however, the DSD staff establishment has not changed, and no additional staff was allocated.

## **10.2 Challenges reported during the visit**

- 10.2.1 The inadequate office space and the structure of the church building housing the DSD was reportedly unsafe.
- 10.2.2 Due to challenge of office space, client confidentiality is compromised.
- 10.2.3 There is no waiting area for clients and no security services and this poses danger for clients and officials.
- 10.2.4 The DSD Calitzdorp Service Centre lacks overall resources.
- 10.2.5 During lockdown, DSD officials in Calitzdorp only conducted crises managements.
- 10.2.6 The absence of other stakeholders was highlighted as a challenge in Kannaland.
- 10.2.7 The case load of social workers was reported to be high in Kannaland subdistrict.
- 10.2.8 There is a shortage of vehicles for social workers who also have to travel long distances.
- 10.2.9 Children attended schooling in shifts during lockdown added to children not returning to school.

- 10.2.10 During the lockdown, unemployment was a real crisis in Calitzdorp, and it led to parents being resistant to DSD intervention services.
- 10.2.11 There are high levels of unemployment and poverty in Calitzdorp.
- 10.2.12 There are high levels of crime amongst youth and high levels of child neglect, child abuse and child exploitation.
- 10.2.13 There is a high number of children roaming the streets during school hours in Kannaland subdistrict, especially, in Calitzdorp. DSD officials indicated that stakeholders such as the Department of Education and the NGO sector need to work with DSD to improve the situation in the Kannaland subdistrict.
- 10.2.14 Early school dropouts across Kannaland were highlighted as a major challenge. In addition, it was reported that children with special needs were not identified early in the subdistrict. Furthermore, suspension of learners without proper protocol being followed, and the lack of alternative resources and programmes, such as drop-in centres, were highlighted.
- 10.2.15 There are no community-based prevention and early intervention programmes in Calitzdorp. In addition, the shortage of safety parents was reported as a challenge.
- 10.2.16 High percentage of children diverted and completing social crime prevention programme was reported, however, distance between communities and Child Youth Care Centre (CYCC) when children need to be placed was reported as a challenge, especially, for children displaying extreme behavioral challenges.
- 10.2.17 There is a long waiting period for children in conflict with the law at CYCCs. In addition, there is a waiting period at residential substances abuse programmes.
- 10.2.18 It was reported that children were not readmitted to schools in Kannaland after being released from CYCCs.
- 10.2.19 Limited to no structural opportunities for youth and food relief in farming areas were reported as a challenge due to scattered population in Kannaland.
- 10.2.20 Self-reporting amongst survivors of GBV was reported as limited. It was reported that GBV cases are not reported.
- 10.2.21 There is a long waiting list for admission of community members to rehabilitation and distances between office and rehabilitation centers was highlighted as a challenge.

### **10.3 Requests for information**

The delegation requested the Department of Social Development to submit the requested information on or before Monday, 13 March 2023.

- 10.3.1 A detailed report on the progress made to fill vacancies of social workers, social auxiliary workers and interns at the Calitzdorp Service Centre.
- 10.3.2 A report on the Department's plan of action to deploy social workers in rural areas and the criteria used to deploy social workers across all rural areas in the province, with specific focus on Calitzdorp.
- 10.3.3 A DSD Community Development and Social Intervention Plan for the Calitzdorp to alleviate poverty, unemployment, street children, and school dropouts.
- 10.3.4 The Standing Committee on Social Development to get the NCOP Report on its visit to Calitzdorp to study the findings of the NCOP in the area.

### **10.4 Recommendations**

The delegation recommended that:

- 10.4.1 The Department of Social Development consider allocating additional vehicles to the Calitzdorp Service Centre. This will assist social workers who need to travel long distances to service the farming communities.



- 10.4.2 The Local Municipality should consider availing the Calitzdorp Municipal Townhall to be converted to a multi-purpose centre where services would be made available under one roof for the people of Calitzdorp.
- 10.4.3 The Standing Committee on Social Development should conduct a follow up visit to the Kannaland Municipal area to engage relevant stakeholders. The stakeholders should include officials from the Local Municipality, the provincial Department of Social Development and its officials from Kannaland, the Western Cape Education Department and the South African Police Service, to address the challenges raised during the visit.
- 10.4.4 The Standing Committee on Social Development should schedule a briefing by the Department of Social Development, the Western Cape Education Department, the South African Police Service, Departments of Health, the Department of Community Safety, the Department of Local Government, the Department of Transport and Public Works, and Municipalities, to address social development issues in Calitzdorp. Through this multistakeholder engagements, the focus should be a whole of society approach to deal with social ills in Calitzdorp.
- 10.4.5 The provincial Department of Social Development liaises with the Department of Local Government to establish a suitable, capacitated, and functional office building for the DSD Calitzdorp Service Centre to render its services.

## **10.5 Resolution**

- 10.5.1 The delegation resolved to review all previous Cluster Visit Week resolutions and check what has been implemented.

## **11. Oversight visit to the Ladismith Library on Friday, 3 February 2023**

Mr J Mbanga, Department of Cultural Affairs and Sport, and Ms M van Heerden, Library Manager, welcomed the delegation.

### **Salient points pertaining to the visit**

- 11.1.1 The Ladismith Library forms part of a cluster of libraries in the Kannaland Municipality that includes sites in Bergsig, Calitzdorp, Hoeko, Vanwyksdorp and Zoar. Hoeko is the only library that does not have internet connectivity.
- 11.1.2 The Bergsig Library was recently upgraded to the value of R1 650 000, 00 via a conditional grant across the 2019/20 and 2020/21 financial years.
- 11.1.3 The Municipality appoints library staff, some of whom do not necessarily have the required qualifications for employ in library services. The Department of Cultural Affairs and Sport reportedly have no input in the recruitment process.
- 11.1.4 The Library has a senior Librarian, two Library Assistants, a library aid and a designated cleaner. The Senior Librarian also services the Calitzdorp, Zoar and Vanwyksdorp libraries.
- 11.1.5 The Library has a membership of 3606 persons.
- 11.1.6 The Library has several initiatives to engage various audiences from the local community. These include school holiday and after school programmes, literacy programmes, cyclical annual library week programmes, and arts and craft workshops. The Library also hosts book club and does outreach programmes with old age homes in the precinct.

## **11.2 Requests for information**

The delegation requested the Kannaland Municipality to submit, in accordance with the approved organogram:

- 11.2.1 The allocation of permanent and temporary posts for all libraries in the Municipality.

- 11.2.2 The number of posts that are filled and the number of vacant funded posts for all libraries in the Municipality.
- 11.2.3 The client to staff member ratio of all libraries in the Municipality. The number of staff allocated to the service areas of all libraries in the Municipality.
- 11.2.4 The qualifying criteria for incumbents of those positions and the number of staff qualified in terms of the approved criteria.

## **12. Oversight visit to the Ladismith E-Centre on Friday, 3 February 2023**

Mr K Groenewald from the Department of the Premier and Mr B Makier, the Centre Manager, presented to the delegation.

The Centre was officially launched in 2010 as the Ladismith E-Community Forum. The location was compact and unsafe and in April 2016, the E-Centre moved to Van Riebeeck Street in Ladismith. Minister Anton Bredell launched the E-Centre was launched in November 2016.

### **Salient points pertaining to the Ladismith E-Centre**

- 12.1.1 There are 10 user stations at the Ladismith E-Centre.
- 12.1.2 The E-Centre assists citizens to make use of computers, gives access to the internet, provides basic computer training, offers accredited e-skills training, and provides access to government information and services.
- 12.1.3 The E-Centre assists users with scanning and uploading documents for job applications.
- 12.1.4 Job seekers are also encouraged and assisted by the E-Centre staff to make use of the SA Youth.mobi programme for posts/learnerships which includes posts for teacher assistants and skill development training. Most job seekers also apply for their tax reference number via the South African Revenue Services as it is a requirement by businesses to have proof of tax registration when applying for work.
- 12.1.5 Parents also make use of the E-Centre to register their children for admissions to schools.
- 12.1.6 To promote youth development, the E-Centre partnered with two high schools to assist matriculants to apply for higher education and training at different institutions, to process learners with National Student Financial Aid Scheme (NSFAS) applications, to access previous examination papers and memos via the WCED website and to apply for the yearly PAY project.
- 12.1.7 Training consists of informal basic computer, E-Learner and ICT International Certificate in Digital Literacy (ICDL) training for all ages. The informal basic training covers computer fundamentals, using files and folders, an introductory Microsoft office course, and using internet and email services.
- 12.1.8 E-Learner training covers basic information technology, drawings, spreadsheets, presentations and web browsing.
- 12.1.9 ICDL training covers online essentials, spreadsheets, such as presentations and IT security.
- 12.1.10 All trainers are trained according to uniform standards for ICDL.
- 12.1.11 The operating hours of the E-Centre is from Monday to Friday from 08:00 to 16:30.
- 12.1.12 The E-Centre is in partnership with Kannaland Municipality, Department of Social Development in Ladismith, SASSA, Department of Labour in Oudtshoorn, NGOs such as Engedi Haven, Clorans Development (recycling and cleaning), Kannaland Local Football Association, Churches and the Community Worker Programme.
- 12.1.13 The staff at the E-Centre also offered to assist the community to register on the National Health System for vaccinations and the community also print their vaccine certificates free of charge.
- 12.1.14 The community also sought assistance from the E-Centre to register for the Social Relief Distress Grant of R350, this also included daily checking of application status, updating bank details and other information as required.

12.1.15 The E-Centre introduced a new service in the Covid-19 period, where they made video conferencing meetings via Google Meet and Microsoft Teams available to the community.

## **12.2 Challenges as reported by the Ladismith E-Centre**

- 12.2.1 The E-Centre does not have a generator, so services are not available in loadshedding.
- 12.2.2 The E-Centre space is small, and the training area is open; there is no privacy during training.
- 12.2.3 The E-Centre does not close for training resulting in disruption due to everyday users visiting the E-Centre.
- 12.2.4 The E-Centre needs an air conditioner due to becoming hot in summer and cold in winter.
- 12.2.5 Computer training groups do not always show up for class.

## **13. Visit to the SASSA Service Office in Ladismith on Friday, 3 February 2023**

Ms Nonkonyana, the South African Social Security Agency's (SASSA) Local Office Manager in Oudtshoorn, welcomed the delegation and led a walkabout at the SASSA Offices in Ladismith and briefed the delegation on SASSA programmes in Ladismith and Kannaland subdistrict. She indicated that the SASSA Eden Karoo District is one of the five SASSA districts in the Western Cape. There are three SASSA Local Offices in the Eden Karoo District, namely, George, Oudtshoorn, and Beaufort West Local Offices. The SASSA Kannaland Service Office, situated in Ladismith falls under the Oudtshoorn Local Office and it operates from the Kannaland Thusong Centre in Ladismith.

### **13.1 Salient points pertaining to the visit to the SASSA Offices in Ladismith**

- 13.1.1 The Kannaland Service Office in Ladismith serves a population of 24 767 persons from areas such as Ladismith, Nissenville, Kannaland NU, Zoar, Calitzdorp, and Van Wyksdorp.
- 13.1.2 It was reported that only one cash pay point is available in Kruis Rivier, which serves less than 35 beneficiaries, and this is the only area that does not have alternative payment facilities such as banks.
- 13.1.3 The SASSA staff in Kannaland are part of the staff establishment of the SASSA Oudtshoorn Local Office and five staff members are working in the Kannaland Service Office in Ladismith.
- 13.1.4 The staff complement at the SASSA Kannaland Service Office consists of one Senior Grant Administrator and four Grant Administrators. They provide all SASSA programmes that include applications for the SASSA Grants, beneficiaries, and SASSA Education Programme.
- 13.1.5 The Kannaland Service Office serves 20-40 clients on a busy day, mostly, Disability Grants applicants and fewer clients on normal days. Calitzdorp was reported to be a busy area and staff members from Ladismith also service the Calitzdorp area on two conservative days per week.
- 13.1.6 The inflow of SASSA clients in Calitzdorp was mostly to access the Child Grant, Old Age Grant, and Disability Grant.
- 13.1.7 All other grant applications can be done online; however, the Disability Application Grants are done at the Kannaland Service Office in Ladismith.
- 13.1.8 The delegation was informed that SASSA utilised municipal facilities for service delivery, however, some of the buildings are not conducive for use. SASSA has a lease agreement with the Kannaland Municipality to utilise the Kannaland Thusong Centre; SASSA also has a Memorandum of Understanding with the municipality to utilise the Calitzdorp Town Hall, however, the building is dilapidated and non-compliant with Occupational Health and Safety standards.
- 13.1.9 The Municipality granted SASSA temporary access to the newly renovated Bergsig Library in Calitzdorp for four days a month. A room was offered to SASSA, unfortunately, the one room in

the library was not conducive because SASSA clients had to stand outside. It was reported that SASSA was trying to get an office space in Calitzdorp.

- 13.1.10 It was reported that there was an agreement with the Department of Local Government to provide SASSA and DSD office space in Calitzdorp in a form of a Thusong Centre, unfortunately, the Municipality did not avail adequate building. The plan was to open a Thusong Centre in Calitzdorp to provide services in one centre.
- 13.1.11 The hall in Zoar was also vandalised and not conducive for utilization. SASSA has been allowed to utilise the Sports Center which is far from the community. In Kruis Rivier, the service point was closed, and there is no alternative venue apart from the school.
- 13.1.12 According to Social Grant System, by December 2022, the Kannaland Municipality issued payments to a total of 7 482 grant beneficiaries.
- 13.1.13 There are two SASSA pay points left in the whole of Kannaland and due to a low number of people using the SASSA pay points, SASSA was planning to close the pay points as they were not cost-effective.

### **13.2 Challenges reported during the visit to the SASSA Offices in Ladismith**

- 13.2.1 The municipal facilities in Zoar and Calitzdorp are dilapidated.
- 13.2.2 The ablution facilities for disabled persons are not in working order at the Thusong Centre.
- 13.2.3 The Kannaland Municipality's tax clearance status was not successfully verified since September 2022. This resulted in non-compliance with DSD requirements in Calitzdorp and Zoar.
- 13.2.4 Non-compliance with DSD requirements in Calitzdorp and Zoar by Kannaland Municipality starting from their tax clearance status that was not verified successfully since September 2022 although the office initiated the procurement process by June 2022.
- 13.2.5 There is a limitation of available medical practitioners for the George, Oudtshoorn, and Beaufort West areas. It was reported that SASSA was in the process of appointing more doctors for the areas.
- 13.2.6 The Kannaland Service Office in Ladismith does not have a server and this hampers the ability to work online.
- 13.2.7 Loadshedding and the lack of alternative power arrangements, hinder the workflow at the facilities.
- 13.2.8 There is a small number of Disability Grant applications received by SASSA in Kannaland.



**MR G BOSMAN, MPP**  
**LEADER OF THE SOCIAL CLUSTER VISIT WEEK DELEGATION**  
**DATE: 18 April 2023**