

## 2012 Blue Drop Assessment Scorecards

### Institutional Information

Final Data Assessment Period:	Jan 2011 to Dec 2011
Province	Eastern Cape
Water Services Authority	Kouga Local Municipality
Water Services Provider	Kouga Local
Date	30-Nov-11
Location of assessment	Humansdorp, Kouga Municipal Offices



### Assessor's Overall Impression

Loerie, St. Francis Bay and Thornhill are supplied by Nelson Mandela Bay Metro. Humansdorp and Jeffreys Bay is partly supplied by the metro as well. The Kouga LM was represented by only one official. The overall management of the Drinking water quality in the Kouga LM is not up to standard and did not improve at all. The outcome from this assessment puts a question mark behind the 2010/11 assessment scores. It is worrying to note that the technical manager seems to be doing everything on his own.

### Systems Detail

#### Water Supply Systems Assessed

System Number	System Name	System Score (%)	Ops. Capacity (ML/D)	Municipal Blue Drop Score (%)
Water Supply System 1	Hankey	#REF!	2.10	#REF!
Water Supply System 2	Humansdorp	#REF!	3.50	#REF!
Water Supply System 3	Jeffreysbay	#REF!	3.40	#REF!
Water Supply System 4	Patensie	#REF!	1.80	#REF!
Water Supply System 5	Oysterbay	#REF!	2.00	#REF!
Water Supply System 6	Loerie	#REF!	0.23	#REF!
Water Supply System 7	St Francis Bay	#REF!	0.00	#REF!
Water Supply System 8	Thornhill	#REF!	0.00	#REF!

#### Assessor Information

Position	Name	Contact - phone	Contact - email
Lead Inspector	Sabelo Magaqana	0835698368	MagaqanaS@dwa.gov.za
Inspector	Maryna Niemand	0820766603	NiemandM@dwa.gov.za
Inspector	Gerhard J van Noordwyk	0828048605	JanseVanN@dwa.gov.za
Moderated By:		Date:	
Inspector	Tshilidzi Mathedimosa	073 706 3973	MathedimosT@dwa.gov.za

#### Municipal Representation

Position	Name	Contact - phone	Contact - email
Manager Water Services	Reg Botha	082 894 6582	rbotha@ec108.org.za

Total Treatment Capacity	13.03	
Municipal Blue Drop Score	#REF!	

Water Supply Systems / Plants under control of WSA but not Assessed + Short reason for not being assessed

Water Supply System 1				
Water Supply System 2				
Water Supply System 3				
Water Supply System 4				
Water Supply System 5				

#### Information on Water Services Intermediaries

Plant / System	me / Description and Location: Area of Supply	Owner	Capacity (ML/d)	Is their performance monitored by the WSA?
Water Supply System 1				
Water Supply System 2				
Water Supply System 3				
Water Supply System 4				

<b>Name of Water Treatment Facility or Facilities</b>		<b>Hankey WTW</b>	<b>Names of City/Towns/Villages served</b>	<b>Hankey Town, Weston suburb, Centerton, Phillipsville</b>	<b>Design Capacity (MI/d) (Or Yield if Borehole) (If more than one plant list combined volumes) (If supplied by bulk provider, please state SLA daily volume)</b>	<b>2.1 MI/d</b>
<b>Type of Process Technology applied at the plant/s</b>		<b>Type of technology applied</b>	<b>Pumping; Flocculation; Sedimentation; Chlorination &amp; Filtration Plus Adjustments (e.g. Stability; corrosion control)</b>		<b>Annual Average production (Operational) (MI/d)</b>	<b>0 MI/d</b>
		<b>If you selected "other" or "special treatment, please explain.</b>	<b>Not applicable</b>		<b>Peak Production on any day (MI/d)</b>	<b>0 MI/d</b>
<b>Location (Coordinates) S</b>		<b>Name of River or impoundment (if surface water)</b>	<b>Kouga Dam, extracting from Gamtoos irrigation board canal</b>		<b>Reported Water Losses (%)</b>	<b>0</b>
<b>E</b>		<b>Population Number Served by Supply System</b>	<b>5,000</b>		<b>Assessor's comment for Noting</b>	
<b>Name of 1st WSP involved in system</b>		<b>None</b>	<b>Role of first WSP? Quantitative information please.</b>	<b>Not applicable</b>		
<b>Name of 2nd WSP involved in system</b>		<b>None</b>	<b>Role of second WSP? Quantitative information please</b>	<b>Not applicable</b>		
<b>Name of 3rd WSP involved in system</b>		<b>None</b>	<b>Role of third WSP? Quantitative information please</b>	<b>Not applicable</b>		
<b>Blue Drop Criteria</b>	<b>Requirements</b>	<b>Sub-Requirements</b>	<b>Scoring Information</b>	<b>Assessor's Comment</b>	<b>Score</b>	<b>Final Score</b>
<b>(1) WATER SAFETY PLANNING</b>	<b>(1.1) WATER SAFETY PLANNING PROCESS</b>	<p>a.) The Water Safety Planning Process is steered by a group of people that includes the technical, financial and management staff of the municipality. Where a WSP arrangement exist the WSA and WSP should partake in this process.</p> <p>b.) There should be clear indication that the water services institution conducted a water safety planning process and not only drafted a document.</p> <p>c.) There should be clear reference to the specific water supply system at hand and not only global risk management measurements put in place.</p>	<p>&gt; Fully complying = 100%</p> <p>&gt; Complying only with B&amp;C = 0.7</p> <p>&gt; Complying only with A&amp;C = 0.6</p> <p>&gt; Complying only with A&amp;B = 0.5</p> <p>&gt; Complying only with one of the sub-requirements = 0.3</p>	<p>WSP 2 years ago compiled. Acknowledge that not all aspects are covered in WSP. It is a combined process for all systems and not specific. Risk assessment was done separately. Funding is a problem to appoint service providers to do the WSP. The Water Services Manager confirmed that it was a desktop study. Thus no scoring could be achieved for this sub-criteria.</p> <p><b>ModComm: This is a worrying situation but it should be noted that the appointment of a PSP could assist a lot but it would be more substantial should there be invested in additional human resources to ensure a sustained effective management of drinking water quality according to the risk based principles of a water safety planning process.</b></p> <p><b>NB! The Department notes that in 2010 a PSP b presented a Water Safety Plan on behalf of Kouga LM at a workshop in East London. Was this specific project not completed or deleivered? Extensive comment were given by the UK specialist that attended this workshop.</b></p>	<b>G</b>	<b>35</b>
	<b>(1.2) RISK ASSESSMENT</b>	<p>a.) The Risk Assessment must cover both treatment and reticulation .</p> <p>b.) The Water Services Institution (WSI) must provide information on findings of the Risk Assessment (and detail Risk Prioritisation method followed) for the specific water supply system including water resource quality. Format not important but it should be proven not to be a desktop study.</p> <p>c.) The Water Safety Planning process must include (adequate) Control Measures for each significant hazard or hazardous event identified.</p> <p>d.) A Water Quality Risk Assessment conducted for at least 80% of the SANS 241 list of determinands. This is to verify whether treatment technology is adequate to treat the raw water to comply with national standard level.</p>	<p>&gt; 100% complying with Requirement = 1</p> <p>&gt; Fully complying with process but not covering 1 risk element identified = 0.9</p> <p>&gt; Fully complying with process but not covering 2 or more risk elements identified = 0.8</p> <p>&gt; lacking control measures for which there is no plan in place =0.7</p> <p>&gt; WSP does not cover 1 of the following elements: Catchment, Treatment Works or Reticulation Risks = 0.6</p> <p>&gt; Partially complying with process in two elements and then not covering 2 or more risk elements identified = 0.5</p> <p>&gt; Further deduct points for: Risk Prioritisation not indicated = -0.2</p> <p>Full SANS 241 Analyses not included as part of the Risk Assessment = -0.2</p> <p>For any other major shortcoming identified = -0.2</p>	<p>Risk assessment was not done according to the sub-criteria specified thus no scoring can be given here</p>	<b>G</b>	


	1.3)	<p>a.) Prove <b>Operational Monitoring</b> is:</p> <p>i) Informed by the Risk Assessment</p> <p>ii) Required sites to monitor: Raw water, after filtration (per process unit) and final water.</p> <p>iii) Determinands: pH, turbidity and disinfectant residual</p> <p>iv) Frequency of analyses: at least once per shift (i.e. every 8 hours)</p> <p>v) Equipment used + Evidence of calibration (or any other means of ensuring credible readings for the past 3 years).</p>	<p>&gt; Fully complying = 100%</p> <p>&gt; Complying with 4/5 = 0.8</p> <p>&gt; Complying with 3/5 = 0.6</p> <p>&gt; Complying with 2/5 = 0.4</p> <p>&gt; Complying with 1/5 = 0.2</p> <p>Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.</p>	<p>Operational monitoring not informed by the risk assessment. The analysis is currently not done consistently. They do testing and some credit will be given here. It is concerning and this should be noted that the monitoring sheets were only introduced recently and it is generalised at all the Works. No calibration certificates could be made available during the assessment.</p> <p><b>ModComm: Please confirm/note which determinands are tested for, and at which points are being monitored. This could imply adherence to at least subcriteria (ii) and (iii). Therefore score is amended to "40%" from "10%". Revisit at Confirmation Session please.</b></p>	E	G
	RISK-BASED MONITORING PROGRAMME	<p>b.) Prove <b>Compliance Monitoring</b> is:</p> <p>i) Informed by the Risk Assessment.</p> <p>ii) Monitoring programme is registered on BDS.</p> <p>iii) Actual monitoring occur according to registered BDS monitoring programme (80%).</p> <p>iv) Required sites monitored: Water works final &amp; distribution network +</p> <p>Frequency of analyses: Water works final according SANS 241; distribution monthly.</p> <p>v) Coverage of population served must at least be 80%</p>	<p>&gt; Fully complying = 100%</p> <p>&gt; Complying with 4/5 = 0.8</p> <p>&gt; Complying with 3/5 = 0.6</p> <p>&gt; Complying with 2/5 = 0.4</p> <p>&gt; Complying with 1/5 = 0.2</p> <p>Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.</p>	<p>Compliance monitoring not informed by the Risk Assessment. Programme is registered on BDS, monitoring done at final water at works only, not covering 80% population</p>	E	
	1.4)	<p>a) Certificate of Accreditation for applicable methods OR Z-scores results (z-scores must be <math>\geq -2</math> &amp; <math>\leq 2</math> are acceptable) in a recognised Proficiency Testing Scheme.</p> <p>b) DWQ Data credibility on the BDS (Blue Drop Certified Data)</p>	<p>Complying with both requirements = 100%</p> <p>Comply only with (a) = 0.6</p> <p>Complying only with (b) more than 80% = 0.6</p> <p>Complying only with (b) &gt;60% &lt;80% = 0.4</p>	<p>Making use of National health Laboratory Services and data on BDS BD certified. This is questionable since the lab is for medical testing. ?????</p> <p><b>ModComm: Please note whether there would be any PTS participation.</b></p>	E	
	1.5)	<p><b>Protocol to specify:</b></p> <p>(1) alert levels,</p> <p>(2) response times,</p> <p>(3) required actions,</p> <p>(4) roles &amp; responsibilities,</p> <p>(5) communication vehicles and</p> <p>(6) must include response on possible risks identified in the Risk Assessment of the Water Safety Planning process</p> <p><b>Incident Register to include :</b></p> <p>(7) Date, location and description of incident</p> <p>(8) Action taken and date of resolution</p> <p>(9) Outcome of cause investigation</p>	<p>&gt; Fully complying = 1</p> <p>&gt; Complying with 8 of the 9 requirements = 0.9</p> <p>&gt; Complying with 7 of the 9 requirements = 0.85</p> <p>&gt; Complying with 6 of the 9 requirements = 0.75</p> <p>&gt; Complying with 5 or 4 of the 9 requirements = 0.5</p> <p>&gt; Complying with 3 or 2 of the 9 requirements = 0.25</p> <p>&gt; Complying with 1 of the 9 requirements = 0.15</p>	<p>Lack of communication between DoH and Kouga when failures occur. EHO officials are reluctant to resample after failure. Reg have a problem with the communication of failures between DoH and Kouga. Reg will include DoH in their incident management protocol. Incident management protocol only started about a month ago. Failure in November was communicated by word of mouth but no paper trail available to confirm this.</p>	G	
SAMPLER'S BONUS:	<p>To be eligible for this bonus, WSI's must provide proof of training of samplers or Sampling Quality Control measures (Name the Sampling Training Course, Duration, Service Provider, and detail of Attendees)</p> <p>1) Evidence of relevant sampling training that will ensure credibility of the sampling process; or</p> <p>2) Evidence of control measures to ensure sampling credibility</p>	<p>&gt;Complying with both requirements = 100%</p> <p>&gt;Complying with only 1 = 0.75</p> <p>&gt; If measures are in place but not fully effective then score = 0.5</p>	<p>No proof was submitted for samplers training. Sampling is done by EHO's. the PCs received training only on the use of the Hach equipment. No bonus is thus given.</p> <p><b>ModComm: Recognition for HACH training.</b></p>	A+		
(2) DWQ PROCESS MANAGEMENT & CONTROL  10	(2.1) WORKS CLASSIFICATION COMPLIANCE	<p>Works classified according to Regulation 2834 requirements. Evidence uploaded on BDS or Copy presented at the assessment.</p>	<p>&gt; Compliance = 100%</p>	<p>Class D Works, certification approved and certificate available on the BDS</p>	A+	E
	(2.2) PROCESS CONTROL REGISTRATION COMPLIANCE	<p>a) Process Controllers must be Registered according to Regulation 2834.</p> <p>b) The Process Controllers' Classification is complying with legislative requirements i.t.o.:</p> <p>i) Number of process Controllers</p> <p>ii) Complying with the required Classification levels.</p> <p>c) The Supervisor must comply with legislative requirements.</p>	<p>&gt; Fully complying = 100%</p> <p>&gt; Complying with all requirements for more than 70% of the Process Controllers = 70%</p> <p>&gt; All PCs registered but &gt;50% &lt;70% PCs complying with standards = 60%.</p> <p>&gt; Supervisor not complying but most PCs complying = 50%.</p> <p>&gt; Only Supervisor complying = 50%.</p>	<p>PCs registered on the BDS but don't comply with legislation. To be corrected on BDS. Only one Class V PC who is the the technical manager. <b>(ModComm: Does this manager serve as roaming Supervisor?)</b></p>	F	

	(2.3) AVAILABILITY OF WATER TREATMENT WORKS LOGBOOK	a) A logbook is in place to record all incidents at the water treatment works. b) Evidence is presented that the logbook process is being implemented. (It is NOT required to be implemented for the entire assessment period)	> Fully complying = 100% > Complying only with a) = 70%	Logbook implemented recently. Not used according to expectations	F	E
	PROCESS CONTROL BONUS	BONUS: Proof of Process Controller staff being subjected to relevant training the past 12 months	Name the Process Controlling Training Course, Duration, Service Provider, detail of Attendees > All information provided (>50% of PC staff subjected to training) = 1 > All information except accreditation (<50% of PC staff subjected to training) = 0,5 > Zero score if any other evidence is lacking	Proof uploaded on BDS on NQF training through LGSETA funding	D	
30	(3.1.1) DWQ COMPLIANCE (MICROBIOLOGICAL)	The Microbiological Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	>100 000 population served by the water supply system: 99% Microbiological Compliance =100% (1) ≥98 <99% micro compliance = 75% (0.75) ≥97 <98% micro compliance = 50% (0.5) ≥96 <97% micro compliance = 30% (0.3) <96% micro compliance = 0% (0) <100 000 population served by the water supply system: 97% Compliance =100% (1) ≥96 < 97% micro compliance = 75% (0.75) ≥95 < 96% micro compliance = 50% (0.5) ≥94 < 95% micro compliance = 30% (0.3) <94% micro compliance = 0% (0)	94.2 . E. coli as preferred determinand.	F	D
	(3.1.2) DWQ COMPLIANCE (CHEMICAL)	The Chemical Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme. a) Chemical - Acute Health: - Excellent Comp. (97% for <100 000) & (99% for >100 000) - Good Compliance (95% for 100 000) & (97% for >100 000) b) Chemical - Chronic Health: -Excellent Compliance (95% for <100 000) & (97% for 100 000) -Good Compliance (93% for <100 000) & (95% for 100 000)	>Excellence Compliance on both = 100% > Excellence in (a) & Good in (b) = 0.8 >Excellence in (b) and Good in (a) = 0.7 >Good compliance in both categories = 0.6 >Good compliance in (a) only = 0.4 >Good compliance in (b) only = 0.3	99.9 compliance ModComm: Please list determinands that are being tested and recorded compliance. Simply copy and past from BDS application. Due to the fact that it is evident that the Compliance monitoring is not done based upon a proper Risk Assessment for hazards, a full score cannot be applied and a score of 95% is recorded to compensate for this shortcoming.	A+	
	(3.2) RISK REFINED COMPLIANCE	The Compliance of all Determinands identified during the Risk Assessment Process to be included in the risk-defined monitoring programme, must comply with the requirements set in the SANS 241. a) Excellent Compliance (95% for <100 000 & 97% for >100 000) b) Good Compliance (93% for <100 000 & 95% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	No risk assessment based monitoring	G	
	(3.3) OPERATIONAL EFFICIENCY INDEX	The compliance of operational determinands as monitored at the Final Water sampling point must comply with the SANS 241 Requirements. a) Excellent Compliance (93% for <100 000 & 95% for >100 000) b) Good Compliance (90% for <100 000 & 93% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	There were some failures reported thus a full score cannot be awarded.	C	
	PENALTY (1): Data Difference	Should there be a difference between data available on BDS and that which is presented in hardcopy for verification the penalty will apply.		Data was verified as correct based on random comparison between the hard copy and the uploaded data.	0	
	PENALTY (2): <11 Months' Data	Less than 11 months data available to assess Microbiological and Chemical compliance		September data missing, explanation was that the Laboratory was not paid.	0	
	PENALTY (3) Notification Failure	If there is any significant (sustained) failure with no evidence of a Water Quality Alert Notice (Boil Water Notice) being issued, this penalty will apply.			0	

<p style="text-align: center;"><b>(4)</b></p> <p style="text-align: center;"><b>MANAGEMENT, ACCOUNTABILITY, &amp; LOCAL REGULATION</b></p> <p style="text-align: center;"><b>10</b></p>	<p style="text-align: center;"><b>(4.1)</b></p> <p style="text-align: center;"><b>MANAGEMENT COMMITMENT</b></p>	<p>Management's commitment to effective Drinking Water Quality Operations and Management should be portrayed by Proof of signature approval of the:</p> <p>a) Water Safety Plan; b) DWQ Monitoring Programme c) Water Treatment Plant Logbook d) Operations and Maintenance Budget e) Water Services Development Plan</p>	<p>&gt; Full Compliance = 100% &gt; 4/5 = 80% &gt; 3/5 = 60% &gt; 2/5 = 40% &gt; 1/5 = 20%</p>	<p>Only Logbook complying. The rest of the documents are not signed</p>	<b>G</b>	<b>D</b>
	<p style="text-align: center;"><b>(4.2)</b></p> <p style="text-align: center;"><b>PUBLICATION OF PERFORMANCE</b></p>	<p>Evidence should be provided on the various means of drinking water quality information made public to the constituencies supplied with drinking water from this specific water supply system.</p> <p>Forms of Publication: &gt;Newspaper publication &gt;Municipal Billing &gt;Annual Report &gt;Posters &amp; Pamphlets &gt;Population and Promotion of "My Water" &gt;Electronic Webpage</p> <p>The Water Services Authority must ensure that evidence of adequate marketing of Existing Blue Drop Certified water supply systems are presented during the audit.</p>	<p>&gt; Newspaper publication = 100% (1) &gt; Displayed on municipal Billing = 90% (0.9) &gt; Populating &amp; promoting "My Water" municipal information = 80% (0.8) &gt; Municipal Annual Report + Ward Committee Distribution &amp;/ Posters = 60% (0.6) &gt; Municipal Annual Report = 50% (0.5) &gt; Electronic (Web-page) Information = 40% (0.4) &gt; Should the municipality utilise two or more means of communication, 100% scoring will apply (1) &gt; Should it be a water supply system that is currently Blue Drop Certified, and no evidence can be given of Blue Drop marketing/awareness, a full score cannot be applied. Maximum score = 80% (0.8)</p>	<p>Public were made aware of the BD Report on Kouga website, printed on bill. Failure alerts are being communicated through radio medium. Breakage of pumps, announced that water carts with haylow, have public liaison officer,</p>	<b>A+</b>	
	<p style="text-align: center;"><b>(4.3)</b></p> <p style="text-align: center;"><b>SERVICE LEVEL AGREEMENT/ PERFORMANCE AGREEMENT</b></p>	<p>Should there be a institutional arrangement between Water Services Authority and Water Services Provider the it is essential that the legislatively required contract stipulate Service Level Agreements between the two entities. A copy of this document is required.</p> <p><b>OR</b></p> <p>Should the Water Services Authority fulfil the function of Water Services Provider as per Section 78 arrangements, then it is required that the responsible manager (official) have a Performance Agreement (Workplan) in place which stipulates Drinking Water Quality Management Responsibilities.</p>	<p>Fully complying = 100% &gt; Agreement in-place but with minor shortcomings = 0.75 &gt; Agreement in place but with significant Shortcomings = 0.5</p>	<p>Agreement in place with significant short comings. No agreement between irrigation board and WSA to commit to the water allocation as set out in the allocation letter. There has been a subsequent communication between the Gamtoos Irrigation Board and the WSA, however no clear indication on how to resolve the matter. Uploaded, water quota from the Gamtoos Waterscheme ( irrigation board) and is very old. The municipality promised to provide SDBIP (Service Development Business Implementation Plan) The allocation is not adequate as it does not bind the irrigation board in providing the allocated amount. The water allocation is under the 1956 Water Act. The municipality have an agreement with the Irrigation Board. <b>MOdComm: This agreement is important to secure water supply but evidence of responsible official's performance agreement or workplan to ensure the drinking water quality management responsibilities are institutionalised.</b></p>	<b>F</b>	
	<p style="text-align: center;"><b>(4.4)</b></p> <p style="text-align: center;"><b>SUBMISSION OF DWQ DATA</b></p>	<p>a) 12 months of data submitted on the Blue Drop System (BDS). WSI's must ensure that 12 months' sets of results are recorded on the BDS (DWA will only consider data available on the BDS) b) Note: All Compliance Monitoring test results are required to be submitted.</p>	<p>&gt; 12 months = 100% (1) &gt; 11 months = 50% (0.5) &gt; 10 months = 20% (0.2) &gt; &lt;10months = 0% (0)</p>	<p>September Data Missing</p>	<b>D</b>	
	<p style="text-align: center;"><b>Bonus:</b> Publication of Performance</p>	<p>Availing information on Drinking Water to relevant public in 3 or more forms listed.</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p style="text-align: center;"><b>Bonus:</b> Performance Agreement</p>	<p>Workplans of Process Controllers aligned to Operations and Maintenance Manual</p>	<p>Full score or "no" bonus</p>	<p>NO</p>	<b>0</b>	
	<p style="text-align: center;"><b>Penalty:</b> Submission of DWQ Data</p>	<p>Penalty will apply should the Department find proof during / post assessment that the WSI are guilty of an offence as per Section 82 of the Water Services Act, by only submitting partial information in order to present a false impression of DWQ Performance and/or compliance.</p>		<p>Verified the data submitted to be correct as per random checking</p>	<b>0</b>	
	<p style="text-align: center;"><b>(5)</b></p> <p style="text-align: center;"><b>ASSET MANAGEMENT</b></p>	<p style="text-align: center;"><b>(5.1)</b></p> <p style="text-align: center;"><b>ANNUAL PROCESS AUDIT</b></p>	<p>Process Audit Report on technical inspection/assessment of treatment facility and evidence of implementation of findings This process assessment should've been done within the 12-month assessment period</p>	<p>&gt; Fully complying (Technical report in-place and findings implementation proof/plan provided = 1 &gt; Report in place with evidence of findings implementation but with shortcomings = 0.75 &gt; Only Technical Report in-place = 0.5 &gt; A report is in place but with shortcomings = 0.25</p>	<p>Was done but proposed activities not implemented as yet and funding allocation will only be done in the new financial year. Done by Amathole Water Board, very detailed</p>	

15	(5.2) ASSET REGISTER	The Institution must present a complete Asset Register. The asset register must : a) detail relevant equipment and infrastructure b) indicate asset description c) location d) condition (remaining life) e) replacement value	> Full score (1) for proof of adequate Asset Register >comply with 4/5 = 0.8 >comply with 3/5 = 0.6 >comply with 2/5 = 0.4 >comply with 1/5 = 0.2 OR > If only a list of assets = 0.2	Current busy with new asset register. Ducharme was appointed to develop and 80% complete. Doubt if it will be ready by confirmation session. Currently uploaded register on BDS have a lot of shortcomings, old and outdated and can not be accepted therefore the 0 score	G
	(5.3) AVAILABILITY & COMPETENCE OF MAINTENANCE TEAM	a) The Institution must present evidence of a competent Maintenance Team (in form of Organogram; Contract or Invoice). Logbook with maintenance entries will serve as adequate evidence. b) Additional prove required on team competency (e.g. Qualification & Experience & Trade-test)	>Fully complying = 100% > Only complying with (a) = 0.6 > Only complying with (b) = 0.5	Uploaded the team which consist of the Artisan with a Trade Certificate for electrical maintenance. An organogram for mechanical team was also uploaded which consist of 4 Engineers as Project Mangers, CAD draughtsmen, 2 senior site supervisors, 3 Installations electricians(with wireman's certificates), 8 semi skilled artisans	A+
	(5.4) OPERATIONS & MAINTENANCE MANUAL	O&M manual to contain: a) civil, mechanical, electrical detail of plant, b) design capacity of plant, c) reference to drawings, d) operational schedules, maintenance schedules, e) process detail and control, f) instrumentation specification/type, g) fault finding, h) monitoring, i) pump curves, g) supportive appendices	> Fully complying = 100% > Complying with 9/10 = 90% > Complying with 8/10 = 80% > Complying with 7/10 = 70% > Complying with 6/10 = 60% > Complying with 5/10 = 50% > Complying with 4/10 = 40% > Complying with 3/10 = 30% > Complying with 2/10 = 20% > Complying with 1/10 = 10%  The inspector may deduct points for other shortcomings identified in the document. Should there be reason to believe that the document is a "cut & paste" job then a full score shall not apply (at most 75%)	Not available	G
	(5.5) OPERATIONS & MAINTENANCE BUDGET AND EXPENDITURE	The Institution must present credible evidence of: a) Maintenance Budget (as part of Operations Budget) b) Maintenance Expenditure (as part of the Operations Expenditure) c) Maintenance Expenditure should be more than 5% of the Operations Expenditure in Total for the preceding Financial Year.	> Fully complying = 100% > With available info expenditure percentage must be calculated; If less than 5% = 0.6 > Only complying with (a) = 0.4	Reg will get this and make it available on the BDS. The budget is not divided per system but overall for Kouga. Not sufficient proof submitted for calculation of the maintenance expenditure since the budget is not specific. It is proposed tho that the overall Operations budget for all the works be used to determine if the maintenance expenditure is more than 5%.	E
	(5.6) DESIGN CAPACITY vs.. OPERATIONAL CAPACITY	Proof to be submitted of the documented design capacity and documented daily operating capacity over the past 12 months Groundwater dependant systems must have an acceptable plan which stipulates abstraction patterns that will prevent aquifer damage Flow meters must be calibrated at least annually	> 1 = evidence of verified plant capacity/aquifer utilisation plan + daily flow measurements + calibrated flow meters + peak flows under design capacity. > 0.75 = evidence of verified plant capacity + daily flow measurements + peak flows under design capacity.	The WSDP document uploaded on the BDS does not fully address the requirements of this KPI, no daily flow measurements were uploaded or presented during the assessment.	G

95% - 100%	A+
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 water affairs Department Water Affairs REPUBLIC OF SOUTH AFRICA		<h2 style="text-align: center;">Humansdorp</h2>			 blue drop CERTIFICATION ENSURING WATER QUALITY REGULATION	
Name of Water Treatment Facility or Facilities		<b>Humansdorp WTW</b>	Names of City/Towns/Villages served	<b>Humansdorp, Kwanamzama, Kruisfontein</b>	Design Capacity (M/d) (Or Yield if Borehole) (If more than one plant list combined volumes) (If supplied by bulk provider, please state SLA daily volume)	<b>3.5 M/d</b>
Type of Process Technology applied at the plant/s		Type of technology applied	Pumping; Flocculation; Sedimentation; Chlorination & Filtration Plus Adjustments (e.g. Stability; corrosion control)		Annual Average production (Operational) (M/d)	<b>0 M/d</b>
		If you selected "other" or "special treatment, please explain.	Not applicable		Peak Production on any day (M/d)	<b>0 M/d</b>
Location (Coordinates) S			Name of River or impoundment (if surface water)	Fountains and NMB bulk	Reported Water Losses (%)	<b>0</b>
E			Population Number Served by Supply System	19,889	<b>Assessor's comment for Noting</b>	
Name of 1st WSP involved in system		Nelson Mandela Bay Municipality - Bulk	Role of first WSP? Quantative information please.	Bulk Supplier		
Name of 2nd WSP involved in system		None	Role of second WSP? Quantative information please	Not applicable		
Name of 3rd WSP involved in system		None	Role of third WSP? Quantitative information please	Not applicable		
Blue Drop Criteria	Requirements	Sub-Requirements	Scoring Information	Assessor's Comment	Score	Final Score
<b>(1)</b> <b>WATER SAFETY PLANNING</b>	<b>(1.1)</b> <b>WATER SAFETY PLANNING PROCESS</b>	<p>a.) The Water Safety Planning Process is steered by a group of people which includes the technical, financial and management staff of the municipality. Where a WSP arrangement exist the WSA and WSP should partake in this process.</p> <p>b.) There should be clear indication that the water services institution conducted a water safety planning process and not only drafted a document.</p> <p>c.) There should be clear reference to the specific water supply system at hand and not only global risk management measurements put in place.</p>	<p>&gt;Fully complying = 100%</p> <p>&gt; Complying only with B&amp;C = 0.7</p> <p>&gt; Complying only with A&amp;C = 0.6</p> <p>&gt; Complying only with A&amp;B = 0.5</p> <p>&gt; Complying only with one of the sub-requirements = 0.3</p>	WSP 2 years ago compiled. Acknowledge that not all aspects are covered in WSP. It is a combined process for all systems and not specific. Risk assessment was done separately. Funding is a problem to appoint service providers to do the WSPP. The Water Services Manager confirmed that it was a desktop study. Thus no scoring could be achieved for this sub-criteria.	<b>G</b>	
	<b>(1.2)</b> <b>RISK ASSESSMENT</b>	<p>a.) The Risk Assessment must cover both treatment and reticulation .</p> <p>b.) The Water Services Institution (WSI) must provide information on findings of the Risk Assessment (and detail Risk Prioritisation method followed) for the specific water supply system including water resource quality. Format not important but it should be proven not to be a desktop study.</p> <p>c.) The Water Safety Planning process must include (adequate) Control Measures for each significant hazard or hazardous event identified.</p> <p>d.) A Water Quality Risk Assessment conducted for at least 80% of the SANS 241 list of determinands. This is to verify whether treatment technology is adequate to treat the raw water to comply with national standard level.</p>	<p>&gt; 100% complying with Requirement = 1</p> <p>&gt; Fully complying with process but not covering 1 risk element identified = 0.9</p> <p>&gt; Fully complying with process but not covering 2 or more risk elements identified = 0.8</p> <p>&gt; lacking control measures for which there is no plan in place =0.7</p> <p>&gt; WSP does not cover 1 of the following elements: Catchment, Treatment Works or Reticulation Risks = 0.6</p> <p>&gt; Partially complying with process in two elements and then not covering 2 or more risk elements identified = 0.5</p> <p>&gt; Further deduct points for: Risk Prioritisation not indicated = -0.2</p> <p>Full SANS 241 Analyses not included as part of the Risk Assessment = -0.2</p> <p>For any other major shortcoming identified = -0.2</p>	Risk assessment was not done according to the sub-criteria specified thus no scoring can be given here	<b>G</b>	
<b>35</b>						



	1.3) <b>RISK-BASED MONITORING PROGRAMME</b>	a.) Prove <b>Operational Monitoring</b> is: i) Informed by the Risk Assessment ii) Required sites to monitor: Raw water, after filtration (per process unit) and final water. iii) Determinands: pH, turbidity and disinfectant residual iv) Frequency of analyses: at least once per shift (i.e. every 8 hours) v) Equipment used + Evidence of calibration (or any other means of ensuring credible readings for the past 3 years).	> Fully complying = 100% > Complying with 4/5 = 0.8 > Complying with 3/5 = 0.6 > Complying with 2/5 = 0.4 > Complying with 1/5 = 0.2  Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.	Operational monitoring not informed by the risk assessment. The analysis is currently not done consistently. They do testing and some credit will be given here. It is concerning and this should be noted that the monitoring sheets were only introduced recently and it is generalised at all the Works. No calibration certificates could be made available during the assessment.	E	G
		b.) Prove <b>Compliance Monitoring</b> is: i) Informed by the Risk Assessment. ii) Monitoring programme is registered on BDS. iii) Actual monitoring occur according to registered BDS monitoring programme (80%). iv) Required sites monitored: Water works final & distribution network + v) Frequency of analyses: Water works final according SANS 241; distribution monthly. vi) Coverage of population served must at least be 80%	> Fully complying = 100% > Complying with 4/5 = 0.8 > Complying with 3/5 = 0.6 > Complying with 2/5 = 0.4 > Complying with 1/5 = 0.2  Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.	Compliance monitoring not informed by the Risk Assessment. Programme is registered on BDS, monitoring done at final water at works only, not covering 80% population	E	
	1.4) <b>CREDIBILITY OF DWQ DATA</b>	a) Certificate of Accreditation for applicable methods OR Z-scores results (z-scores must be $\geq -2$ & $\leq 2$ are acceptable) in a recognised Proficiency Testing Scheme. b) DWQ Data credibility on the BDS (Blue Drop Certified Data)	Complying with both requirements = 100% Comply only with (a) = 0.6 Complying only with (b) more than 80% = 0.6 Complying only with (b) >60% <80% = 0.4	Making use of National health Laboratory Services and data on BDS BD certified. This is questionable since the lab is for medical testing. ?????	E	
	1.5) <b>INCIDENT MANAGEMENT</b>	<b>Protocol to specify:</b> (1) alert levels, (2) response times, (3) required actions, (4) roles & responsibilities, (5) communication vehicles and (6) must include response on possible risks identified in the Risk Assessment of the Water Safety Planning process <b>Incident Register to include :</b> (7) Date, location and description of incident (8) Action taken and date of resolution (9) Outcome of cause investigation	> Fully complying = 1 > Complying with 8 of the 9 requirements = 0.9 > Complying with 7 of the 9 requirements = 0.85 > Complying with 6 of the 9 requirements = 0.75 > Complying with 5 or 4 of the 9 requirements = 0.5 > Complying with 3 or 2 of the 9 requirements = 0.25 > Complying with 1 of the 9 requirements = 0.15	Lack of communication between DoH and Kouga when failures occur. EHO officials are reluctant to resample after failure. Reg have a problem with the communication of failures between DoH and Kouga. Reg will include DoH in their incident management protocol. Incident management protocol only started about a month ago. Failure in November was communicated by word of mouth but no paper trail available to confirm this.	G	
	<b>SAMPLER'S BONUS:</b>	To be eligible for this bonus, WSI's must provide proof of training of samplers or Sampling Quality Control measures (Name the Sampling Training Course, Duration, Service Provider, and detail of Attendees) 1) Evidence of relevant sampling training that will ensure credibility of the sampling process; or 2) Evidence of control measures to ensure sampling credibility	> Complying with both requirements = 100% > Complying with only 1 = 0.75 > If measures are in place but not fully effective then score = 0.5	No proof was submitted for samplers training. Sampling is done by EHO's. the PCs received training only on the use of the Hach equipment. No bonus is thus given.	0	
10 <b>(2) DWQ PROCESS MANAGEMENT &amp; CONTROL</b>	(2.1) <b>WORKS CLASSIFICATION COMPLIANCE</b>	Works classified according to Regulation 2834 requirements. Evidence uploaded on BDS or Copy presented at the assessment.	> Compliance = 100%	Class C works uploaded on BDS	A+	E
	(2.2) <b>PROCESS CONTROL REGISTRATION COMPLIANCE</b>	a) Process Controllers must be Registered according to Regulation 2834. b) The Process Controllers' Classification is complying with legislative requirements i.t.o.: i) Number of process Controllers ii) Complying with the required Classification levels. c) The Supervisor must comply with legislative requirements.	> Fully complying = 100% > Complying with all requirements for more than 70% of the Process Controllers = 70% > All PCs registered but >50% <70% PCs complying with standards = 60%. > Supervisor not complying but most PCs complying = 50%. > Only Supervisor complying = 50%.	PCs registered on the BDS but don't comply with legislation. To be corrected on BDS. Only one Class V PC who is the technical manager.	F	



	(2.3) AVAILABILITY OF WATER TREATMENT WORKS LOGBOOK	a) A logbook is in place to record all incidents at the water treatment works. b) Evidence is presented that the logbook process is being implemented. (It is NOT required to be implemented for the entire assessment period)	> Fully complying = 100% > Complying only with a) = 70%	Logbook implemented recently. Not used according to expectations	F	E
	PROCESS CONTROL BONUS	BONUS: Proof of Process Controller staff being subjected to relevant training the past 12 months	Name the Process Controlling Training Course, Duration, Service Provider, detail of Attendees > All information provided (>50% of PC staff subjected to training) = 1 > All information except accreditation (<50% of PC staff subjected to training) = 0,5 > Zero score if any other evidence is lacking	Proof uploaded on BDS on NQF training through LGSETA funding ModComm: How many officials and what are they responsible for. Was the trainee relevant to their job description.	A+	

30 DRINKING WATER QUALITY COMPLIANCE	(3.1.1) DWQ COMPLIANCE (MICROBIOLOGICAL)	The Microbiological Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	>100 000 population served by the water supply system: 99% Microbiological Compliance = 100% (1) ≥98 <99% micro compliance = 75% (0.75) ≥97 <98% micro compliance = 50% (0.5) ≥96 <97% micro compliance = 30% (0.3) <96% micro compliance = 0% (0) <100 000 population served by the water supply system: 97% Compliance = 100% (1) ≥96 < 97% micro compliance = 75% (0.75) ≥95 < 96% micro compliance = 50% (0.5) ≥94 < 95% micro compliance = 30% (0.3) <94% micro compliance = 0% (0)	94.2 . E. coli as preferred determinand.	F	C
	(3.1.2) DWQ COMPLIANCE (CHEMICAL)	The Chemical Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme. a) Chemical - Acute Health: - Excellent Comp. (97% for <100 000) & (99% for >100 000) - Good Compliance (95% for 100 000) & (97% for >100 000) b) Chemical - Chronic Health: -Excellent Compliance (95% for <100 000) & (97% for 100 000) -Good Compliance (93% for <100 000) & (95% for 100 000)	>Excellence Compliance on both = 100% > Excellence in (a) & Good in (b) = 0.8 >Excellence in (b) and Good in (a) = 0.7 >Good compliance in both categories = 0.6 >Good compliance in (a) only = 0.4 >Good compliance in (b) only = 0.3	99.9 compliance ModComm: note previous notes made in this regard.	A+	
	(3.2) RISK REFINED COMPLIANCE	The Compliance of all Determinands identified during the Risk Assessment Process to be included in the risk-defined monitoring programme, must comply with the requirements set in the SANS 241. a) Excellent Compliance (95% for <100 000 & 97% for >100 000) b) Good Compliance (93% for <100 000 & 95% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	No risk assessment based monitoring	G	
	(3.3) OPERATIONAL EFFICIENCY INDEX	The compliance of operational determinands as monitored at the Final Water sampling point must comply with the SANS 241 Requirements. a) Excellent Compliance (93% for <100 000 & 95% for >100 000) b) Good Compliance (90% for <100 000 & 93% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	There were some failures reported thus a full score cannot be awarded.	C	
	PENALTY (1): Data Difference	Should there be a difference between data available on BDS and that which is presented in hardcopy for verification the penalty will apply.		Data was verified as correct based on random comparison between the hard copy and the uploaded data.	0	
	PENALTY (2): <11 Months' Data	Less than 11 months data available to assess Microbiological and Chemical compliance		September data missing, explanation was that the Laboratory was not paid.	0	
	PENALTY (3) Notification Failure	If there is any significant (sustained) failure with no evidence of a Water Quality Alert Notice (Boil Water Notice) being issued, this penalty will apply.			0	

<p style="text-align: center;"><b>(4)</b></p> <p style="text-align: center;"><b>MANAGEMENT, ACCOUNTABILITY, &amp; LOCAL REGULATION</b></p> <p style="text-align: center;"><b>10</b></p>	<p><b>(4.1)</b></p> <p><b>MANAGEMENT COMMITMENT</b></p>	<p>Management's commitment to effective Drinking Water Quality Operations and Management should be portrayed by Proof of signature approval of the:</p> <p><b>a)</b> Water Safety Plan; <b>b)</b> DWQ Monitoring Programme <b>c)</b> Water Treatment Plant Logbook <b>d)</b> Operations and Maintenance Budget <b>e)</b> Water Services Development Plan</p>	<p>&gt; Full Compliance = 100% &gt; 4/5 = 80% &gt; 3/5 = 60% &gt; 2/5 = 40% &gt; 1/5 = 20%</p>	<p>Only Logbook complying. The rest of the documents are not signed</p>	<b>G</b>	
	<p><b>(4.2)</b></p> <p><b>PUBLICATION OF PERFORMANCE</b></p>	<p>Evidence should be provided on the various means of drinking water quality information made public to the constituencies supplied with drinking water from this specific water supply system.</p> <p>Forms of Publication: &gt;Newspaper publication &gt;Municipal Billing &gt;Annual Report &gt;Posters &amp; Pamphlets &gt;Population and Promotion of "My Water" &gt;Electronic Webpage</p> <p>The Water Services Authority must ensure that evidence of adequate marketing of Existing Blue Drop Certified water supply systems are presented during the audit.</p>	<p>&gt; Newspaper publication = 100% (1) &gt; Displayed on municipal Billing = 90% (0.9) &gt; Populating &amp; promoting "My Water" municipal information = 80% (0.8) &gt; Municipal Annual Report + Ward Committee Distribution &amp;/ Posters = 60% (0.6) &gt; Municipal Annual Report = 50% (0.5) &gt; Electronic (Web-page) Information = 40% (0.4) &gt; Should the municipality utilise two or more means of communication, 100% scoring will apply (1) &gt; Should it be a water supply system that is currently Blue Drop Certified, and no evidence can be given of Blue Drop marketing/awareness, a full score cannot be applied. Maximum score = 80% (0.8)</p>	<p>Public were made aware of the BD Report on Kouga website, printed on bill. Failure alerts are being communicated through radio medium. Breakage of pumps, announced that water carts with haylow, have public liason officer,</p>	<b>A+</b>	
	<p><b>(4.3)</b></p> <p><b>SERVICE LEVEL AGREEMENT/ PERFORMANCE AGREEMENT</b></p>	<p>Should there be a institutional arrangement between Water Services Authority and Water Services Provider the it is essential that the legislatively required contract stipulate Service Level Agreements between the two entities. A copy of this document is required.</p> <p><b>OR</b></p> <p>Should the Water Services Authority fulfil the function of Water Services Provider as per Section 78 arrangements, then it is required that the responsible manager (official) have a Performance Agreement (Workpla) in place which stipulates Drinking Water Quality Management Responsibilities.</p>	<p>Fully complying = 100% &gt; Agreement in-place but with minor shortcomings = 0.75 &gt; Agreement in place but with significant Shortcomings = 0.5</p>	<p>Agreement in place with significant short comings. No agreement between irrigation board and WSA to commit to the water allocation as set out in the allocation letter. There has been a subsequent communication between the Gamtoos Irrigation Board and the WSA, however no clear indication on how to resolve the matter. Uploaded, water quota from the Gamtoos Waterscheme ( irrigation board) and is very old. The municipality promised to provide SDBIP (Service Development Business Implementation Plan) The allocation is not adequate as it does not bind the irrigation board in providing the allocated amount. The water allocation is under the 1956 Water Act. The municipality have an agreement with the Irrigation Board.</p>	<b>F</b>	
	<p><b>(4.4)</b></p> <p><b>SUBMISSION OF DWQ DATA</b></p>	<p><b>a)</b> 12 months of data submitted on the Blue Drop System (BDS). WSI's must ensure that 12 months' sets of results are recorded on the BDS (DWA will only consider data available on the BDS) <b>b)</b> Note: All Compliance Monitoring test results are required to be submitted.</p>	<p>&gt; 12 months = 100% (1) &gt; 11 months = 50% (0.5) &gt; 10 months = 20% (0.2) &gt; &lt;10months = 0% (0)</p>	<p>September Data Missing</p>	<b>D</b>	
	<p><b>Bonus:</b> Publication of Performance</p>	<p>Availing information on Drinking Water to relevant public in 3 or more forms listed.</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p><b>Bonus:</b> Performance Agreement</p>	<p>Workplans of Process Controllers aligned to Operations and Maintenance Manual</p>	<p>Full score or "no" bonus</p>	<p>NO</p>	<b>0</b>	
	<p><b>Penalty:</b> Submission of DWQ Data</p>	<p>Penalty will apply should the Department find proof during / post assessment that the WSI are guilty of an offence as per Section 82 of the Water Services Act, by only submitting partial information in order to present a false impression of DWQ Performance and/or compliance.</p>		<p>Verified the data submitted to be correct as per random checking</p>	<b>0</b>	
	<p><b>(5)</b></p> <p style="text-align: center;"><b>ASSET MANAGEMENT</b></p>	<p><b>(5.1)</b></p> <p><b>ANNUAL PROCESS AUDIT</b></p>	<p>Process Audit Report on technical inspection/assessment of treatment facility and evidence of implementation of findings This process assessment should've been done within the 12-month assessment period</p>	<p>&gt; Fully complying (Technical report in-place and findings implementation proof/plan provided = 1 &gt; Report in place with evidence of findings implementation but with shortcomings = 0.75 &gt; Only Technical Report in-place = 0.5 &gt; A report is in place but with shortcomings = 0.25</p>	<p>Was done but proposed activities not implemented as yet and funding allocation will only be done in the new financial year. Done by Amathole Water Board, very detailed</p>	

15	(5.2) ASSET REGISTER	The Institution must present a complete Asset Register. The asset register must : a) detail relevant equipment and infrastructure b) indicate asset description c) location d) condition (remaining life) e) replacement value	> Full score (1) for proof of adequate Asset Register >comply with 4/5 = 0.8 >comply with 3/5 = 0.6 >comply with 2/5 = 0.4 >comply with 1/5 = 0.2 OR > If only a list of assets = 0.2	Current busy with new asset register. Ducharme was appointed to develop and 80% complete. Doubt if it will be ready by confirmation session. Currently uploaded register on BDS have a lot of shortcomings, old and outdated and can not be accepted therefore the 0 score	G
	(5.3) AVAILABILITY & COMPETENCE OF MAINTENANCE TEAM	a) The Institution must present evidence of a competent Maintenance Team (in form of Organogram; Contract or Invoice). Logbook with maintenance entries will serve as adequate evidence. b) Additional prove required on team competency (e.g. Qualification & Experience & Trade-test)	>Fully complying = 100% > Only complying with (a) = 0.6 > Only complying with (b) = 0.5	Uploaded the team which consist of the Artisan with a Trade Certificate for electrical maintenance. An organogram for mechanical team was also uploaded which consist of 4 Engineers as Project Mangers, CAD draughtsmen, 2 seniour site supervisors, 3 Installations electricians(with wireman's certificates), 8 semi skilled artisans	A+
	(5.4) OPERATIONS & MAINTENANCE MANUAL	O&M manual to contain: a) civil, mechanical, electrical detail of plant, b) design capacity of plant, c) reference to drawings, d) operational schedules, maintenance schedules, e) process detail and control, f) instrumentation specification/type, g) fault finding, h) monitoring, i) pump curves, g) supportive appendices	> Fully complying = 100% > Complying with 9/10 = 90% > Complying with 8/10 = 80% > Complying with 7/10 = 70% > Complying with 6/10 = 60% > Complying with 5/10 = 50% > Complying with 4/10 = 40% > Complying with 3/10 = 30% > Complying with 2/10 = 20% > Complying with 1/10 = 10%  The inspector may deduct points for other shortcomings identified in the document. Should there be reason to believe that the document is a "cut & paste" job then a full score shall not apply (at most 75%)	Not available	G
	(5.5) OPERATIONS & MAINTENANCE BUDGET AND EXPENDITURE	The Institution must present credible evidence of: a) Maintenance Budget (as part of Operations Budget) b) Maintenance Expenditure (as part of the Operations Expenditure) c) Maintenance Expenditure should be more than 5% of the Operations Expenditure in Total for the preceding Financial Year.	> Fully complying = 100% > With available info expenditure percentage must be calculated; if less than 5% = 0.6 > Only complying with (a) = 0.4	Reg will get this and make it available on the BDS. The budget is not devided per system but overall for Kouga. Not sufficient proof submitted for calculation of the maintenance expenditure since the budget is not specific. It is proposed tho that the overall Operations budget for all the works be used to determine if the maintenance expenditure is more than 5%.	E
	(5.6) DESIGN CAPACITY vs.. OPERATIONAL CAPACITY	Proof to be submitted of the documented design capacity and documented daily operating capacity over the past 12 months Groundwater dependant systems must have an acceptable plan which stipulates abstraction patterns that will prevent aquifer damage Flow meters must be calibrated at least annually	> 1 = evidence of verified plant capacity/aquifer utilisation plan + daily flow measurements + calibrated flow meters + peak flows under design capacity. > 0.75 = evidence of verified plant capacity + daily	The WSDP document uploaded on the BDS does not fully address the requirements of this KPI, no daily flow measurements were uploaded or presented during the assessment.	G

F

95% - 100%

A+



	1.3) <b>RISK-BASED MONITORING PROGRAMME</b>	a.) Prove <b>Operational Monitoring</b> is: i) Informed by the Risk Assessment ii) Required sites to monitor: Raw water, after filtration (per process unit) and final water. iii) Determinands: pH, turbidity and disinfectant residual iv) Frequency of analyses: at least once per shift (i.e. every 8 hours) v) Equipment used + Evidence of calibration (or any other means of ensuring credible readings for the past 3 years).	> Fully complying = 100% > Complying with 4/5 = 0.8 > Complying with 3/5 = 0.6 > Complying with 2/5 = 0.4 > Complying with 1/5 = 0.2  Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.	Operational monitoring not informed by the risk assessment. The analysis is currently not done consistently. They do testing and some credit will be given here. It is concerning and this should be noted that the monitoring sheets were only introduced recently and it is generalised at all the Works. No calibration certificates could be made available during the assessment.	E	G
		b.) Prove <b>Compliance Monitoring</b> is: i) Informed by the Risk Assessment. ii) Monitoring programme is registered on BDS. iii) Actual monitoring occur according to registered BDS monitoring programme (80%). iv) Required sites monitored: Water works final & distribution network + v) Frequency of analyses: Water works final according SANS 241; distribution monthly. vi) Coverage of population served must at least be 80%	> Fully complying = 100% > Complying with 4/5 = 0.8 > Complying with 3/5 = 0.6 > Complying with 2/5 = 0.4 > Complying with 1/5 = 0.2  Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.	Compliance monitoring not informed by the Risk Assessment. Programme is registered on BDS, monitoring done at final water at works only, not covering 80% population	E	
	1.4) <b>CREDIBILITY OF DWQ DATA</b>	a) Certificate of Accreditation for applicable methods OR Z-scores results (z-scores must be $\geq -2$ & $\leq 2$ are acceptable) in a recognised Proficiency Testing Scheme. b) DWQ Data credibility on the BDS (Blue Drop Certified Data)	Complying with both requirements = 100% Comply only with (a) = 0.6 Complying only with (b) more than 80% = 0.6 Complying only with (b) >60% <80% = 0.4	Making use of National health Laboratory Services and data on BDS BD certified. This is questionable since the lab is for medical testing. ?????	E	
	1.5) <b>INCIDENT MANAGEMENT</b>	<b>Protocol to specify:</b> (1) alert levels, (2) response times, (3) required actions, (4) roles & responsibilities, (5) communication vehicles and (6) must include response on possible risks identified in the Risk Assessment of the Water Safety Planning process <b>Incident Register to include :</b> (7) Date, location and description of incident (8) Action taken and date of resolution (9) Outcome of cause investigation	> Fully complying = 1 > Complying with 8 of the 9 requirements = 0.9 > Complying with 7 of the 9 requirements = 0.85 > Complying with 6 of the 9 requirements = 0.75 > Complying with 5 or 4 of the 9 requirements = 0.5 > Complying with 3 or 2 of the 9 requirements = 0.25 > Complying with 1 of the 9 requirements = 0.15	Lack of communication between DoH and Kouga when failures occur. EHO officials are reluctant to resample after failure. Reg have a problem with the communication of failures between DoH and Kouga. Reg will include DoH in their incident management protocol. Incident management protocol only started about a month ago. Failure in November was communicated by word of mouth but no paper trail available to confirm this.	G	
	<b>SAMPLER'S BONUS:</b>	To be eligible for this bonus, WSI's must provide proof of training of samplers or Sampling Quality Control measures (Name the Sampling Training Course, Duration, Service Provider, and detail of Attendees) 1) Evidence of relevant sampling training that will ensure credibility of the sampling process; or 2) Evidence of control measures to ensure sampling credibility	> Complying with both requirements = 100% > Complying with only 1 = 0.75 > If measures are in place but not fully effective then score = 0.5	No proof was submitted for samplers training. Sampling is done by EHO's. the PCs received training only on the use of the Hach equipment. No bonus is thus given.	0	
10 <b>(2) DWQ PROCESS MANAGEMENT &amp; CONTROL</b>	(2.1) <b>WORKS CLASSIFICATION COMPLIANCE</b>	Works classified according to Regulation 2834 requirements. Evidence uploaded on BDS or Copy presented at the assessment.	> Compliance = 100%	Class D	A+	G
	(2.2) <b>PROCESS CONTROL REGISTRATION COMPLIANCE</b>	a) Process Controllers must be Registered according to Regulation 2834. b) The Process Controllers' Classification is complying with legislative requirements i.t.o.: i) Number of process Controllers ii) Complying with the required Classification levels. c) The Supervisor must comply with legislative requirements.	> Fully complying = 100% > Complying with all requirements for more than 70% of the Process Controllers = 70% > All PCs registered but >50% <70% PCs complying with standards = 60%. > Supervisor not complying but most PCs complying = 50%. > Only Supervisor complying = 50%.	PCs registered on the BDS but don't comply with legislation. To be corrected on BDS???	G	



	(2.3) AVAILABILITY OF WATER TREATMENT WORKS LOGBOOK	a) A logbook is in place to record all incidents at the water treatment works. b) Evidence is presented that the logbook process is being implemented. (It is NOT required to be implemented for the entire assessment period)	> Fully complying = 100% > Complying only with a) = 70%	Logbook implemented recently. Not used according to expectations	F	G
	PROCESS CONTROL BONUS	BONUS: Proof of Process Controller staff being subjected to relevant training the past 12 months	Name the Process Controlling Training Course, Duration, Service Provider, detail of Attendees > All information provided (>50% of PC staff subjected to training) = 1 > All information except accreditation (<50% of PC staff subjected to training) = 0,5 > Zero score if any other evidence is lacking	Proof uploaded on BDS on NQF training through LGSETA funding	A+	
30	(3.1.1) DWQ COMPLIANCE (MICROBIOLOGICAL)	The Microbiological Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	>100 000 population served by the water supply system: 99% Microbiological Compliance =100% (1) ≥98 <99% micro compliance = 75% (0.75) ≥97 <98% micro compliance = 50% (0.5) ≥96 <97% micro compliance = 30% (0.3) <96% micro compliance = 0% (0) <100 000 population served by the water supply system: 97% Compliance =100% (1) ≥96 < 97% micro compliance = 75% (0.75) ≥95 < 96% micro compliance = 50% (0.5) ≥94 < 95% micro compliance = 30% (0.3) <94% micro compliance = 0% (0)	ModComm: ??	G	G
	(3.1.2) DWQ COMPLIANCE (CHEMICAL)	The Chemical Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme. a) Chemical - Acute Health: - Excellent Comp. (97% for <100 000) & (99% for >100 000) - Good Compliance (95% for 100 000) & (97% for >100 000) b) Chemical - Chronic Health: -Excellent Compliance (95% for <100 000) & (97% for 100 000) -Good Compliance (93% for <100 000) & (95% for 100 000)	>Excellence Compliance on both = 100% > Excellence in (a) & Good in (b) = 0.8 >Excellence in (b) and Good in (a) = 0.7 >Good compliance in both categories = 0.6 >Good compliance in (a) only = 0.4 >Good compliance in (b) only = 0.3	ModComm: ??	G	
	(3.2) RISK REFINED COMPLIANCE	The Compliance of all Determinands identified during the Risk Assessment Process to be included in the risk-defined monitoring programme, must comply with the requirements set in the SANS 241. a) Excellent Compliance (95% for <100 000 & 97% for >100 000) b) Good Compliance (93% for <100 000 & 95% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)		G	
	(3.3) OPERATIONAL EFFICIENCY INDEX	The compliance of operational determinands as monitored at the Final Water sampling point must comply with the SANS 241 Requirements. a) Excellent Compliance (93% for <100 000 & 95% for >100 000) b) Good Compliance (90% for <100 000 & 93% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)		G	
	PENALTY (1): Data Difference	Should there be a difference between data available on BDS and that which is presented in hardcopy for verification the penalty will apply.			0	
	PENALTY (2): <11 Months' Data	Less than 11 months data available to assess Microbiological and Chemical compliance			0	
	PENALTY (3) Notification Failure	If there is any significant (sustained) failure with no evidence of a Water Quality Alert Notice (Boil Water Notice) being issued, this penalty will apply.			0	

<p style="text-align: center;"><b>(4)</b></p> <p style="text-align: center;"><b>MANAGEMENT, ACCOUNTABILITY, &amp; LOCAL REGULATION</b></p> <p style="text-align: center;"><b>10</b></p>	<p style="text-align: center;"><b>(4.1)</b></p> <p style="text-align: center;"><b>MANAGEMENT COMMITMENT</b></p>	<p>Management's commitment to effective Drinking Water Quality Operations and Management should be portrayed by Proof of signature approval of the:</p> <p>a) Water Safety Plan; b) DWQ Monitoring Programme c) Water Treatment Plant Logbook d) Operations and Maintenance Budget e) Water Services Development Plan</p>	<p>&gt; Full Compliance = 100% &gt; 4/5 = 80% &gt; 3/5 = 60% &gt; 2/5 = 40% &gt; 1/5 = 20%</p>	<p>Only Logbook complying</p>	<b>G</b>	
	<p style="text-align: center;"><b>(4.2)</b></p> <p style="text-align: center;"><b>PUBLICATION OF PERFORMANCE</b></p>	<p>Evidence should be provided on the various means of drinking water quality information made public to the constituencies supplied with drinking water from this specific water supply system.</p> <p>Forms of Publication: &gt;Newspaper publication &gt;Municipal Billing &gt;Annual Report &gt;Posters &amp; Pamphlets &gt;Population and Promotion of "My Water" &gt;Electronic Webpage</p> <p>The Water Services Authority must ensure that evidence of adequate marketing of Existing Blue Drop Certified water supply systems are presented during the audit.</p>	<p>&gt; Newspaper publication = 100% (1) &gt; Displayed on municipal Billing = 90% (0.9) &gt; Populating &amp; promoting "My Water" municipal information = 80% (0.8) &gt; Municipal Annual Report + Ward Committee Distribution &amp;/ Posters = 60% (0.6) &gt; Municipal Annual Report = 50% (0.5) &gt; Electronic (Web-page) Information = 40% (0.4) &gt; Should the municipality utilise two or more means of communication, 100% scoring will apply (1) &gt; Should it be a water supply system that is currently Blue Drop Certified, and no evidence can be given of Blue Drop marketing/awareness, a full score cannot be applied. Maximum score = 80% (0.8)</p>	<p>Public were made aware of the BD Report on Kouga website, printed on bill. Failure alerts are being communicated through radio medium. Breakage of pumps, announced that water carts with haylow, have public liaison officer,</p>	<b>A+</b>	
	<p style="text-align: center;"><b>(4.3)</b></p> <p style="text-align: center;"><b>SERVICE LEVEL AGREEMENT/ PERFORMANCE AGREEMENT</b></p>	<p>Should there be a institutional arrangement between Water Services Authority and Water Services Provider the it is essential that the legislatively required contract stipulate Service Level Agreements between the two entities. A copy of this document is required.</p> <p><b>OR</b></p> <p>Should the Water Services Authority fulfil the function of Water Services Provider as per Section 78 arrangements, then it is required that the responsible manager (official) have a Performance Agreement (Workpla) in place which stipulates Drinking Water Quality Management Responsibilities.</p>	<p>Fully complying = 100% &gt; Agreement in-place but with minor shortcomings = 0.75 &gt; Agreement in place but with significant Shortcomings = 0.5</p>	<p>Agreement in place with significant short comings. No agreement between irrigation board and WSA to commit to the water allocation as set out in the allocation letter. There has been a subsequent communication between the Gamtoos Irrigation Board and the WSA, however no clear indication on how to resolve the matter. Uploaded, water quota from the Gamtoos Waterscheme ( irrigation board) and is very old. The municipality promised to provide SDBIP (Service Development Business Implementation Plan) The allocation is not adequate as it does not bind the irrigation board in providing the allocated amount. The water allocation is under the 1956 Water Act. The municipality have an agreement with the Irrigation Board.</p>	<b>F</b>	
	<p style="text-align: center;"><b>(4.4)</b></p> <p style="text-align: center;"><b>SUBMISSION OF DWQ DATA</b></p>	<p>a) 12 months of data submitted on the Blue Drop System (BDS). WSI's must ensure that 12 months' sets of results are recorded on the BDS (DWA will only consider data available on the BDS) b) Note: All Compliance Monitoring test results are required to be submitted.</p>	<p>&gt; 12 months = 100% (1) &gt; 11 months = 50% (0.5) &gt; 10 months = 20% (0.2) &gt; &lt;10months = 0% (0)</p>		<b>G</b>	
	<p style="text-align: center;"><b>Bonus:</b> Publication of Performance</p>	<p>Availing information on Drinking Water to relevant public in 3 or more forms listed.</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p style="text-align: center;"><b>Bonus:</b> Performance Agreement</p>	<p>Workplans of Process Controllers aligned to Operations and Maintenance Manual</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p style="text-align: center;"><b>Penalty:</b> Submission of DWQ Data</p>	<p>Penalty will apply should the Department find proof during / post assessment that the WSI are guilty of an offence as per Section 82 of the Water Services Act, by only submitting partial information in order to present a false impression of DWQ Performance and/or compliance.</p>			<b>0</b>	
	<p style="text-align: center;"><b>(5)</b></p> <p style="text-align: center;"><b>ASSET MANAGEMENT</b></p>	<p style="text-align: center;"><b>(5.1)</b></p> <p style="text-align: center;"><b>ANNUAL PROCESS AUDIT</b></p>	<p>Process Audit Report on technical inspection/assessment of treatment facility and evidence of implementation of findings This process assessment should've been done within the 12-month assessment period</p>	<p>&gt; Fully complying (Technical report in-place and findings implementation proof/plan provided = 1 &gt; Report in place with evidence of findings implementation but with shortcomings = 0.75 &gt; Only Technical Report in-place = 0.5 &gt; A report is in place but with shortcomings = 0.25</p>	<p>Was done but proposed activities not implemented as yet and funding allocation will only be done in the new financial year. Done by Amathole Water Board, very detailed</p>	



15	(5.2) ASSET REGISTER	The Institution must present a complete Asset Register. The asset register must : a) detail relevant equipment and infrastructure b) indicate asset description c) location d) condition (remaining life) e) replacement value	> Full score (1) for proof of adequate Asset Register > comply with 4/5 = 0.8 > comply with 3/5 = 0.6 > comply with 2/5 = 0.4 > comply with 1/5 = 0.2 OR > If only a list of assets = 0.2	Current busy with new asset register. Ducharme was appointed to develop and 80% complete. Doubt if it will be ready by confirmation session. Currently uploaded register on BDS have a lot of shortcomings, old and outdated and can not be accepted therefore the 0 score	G
	(5.3) AVAILABILITY & COMPETENCE OF MAINTENANCE TEAM	a) The Institution must present evidence of a competent Maintenance Team (in form of Organogram; Contract or Invoice). Logbook with maintenance entries will serve as adequate evidence. b) Additional prove required on team competency (e.g. Qualification & Experience & Trade-test)	> Fully complying = 100% > Only complying with (a) = 0.6 > Only complying with (b) = 0.5	????? Can not access BDS	G
	(5.4) OPERATIONS & MAINTENANCE MANUAL	O&M manual to contain: a) civil, mechanical, electrical detail of plant, b) design capacity of plant, c) reference to drawings, d) operational schedules, maintenance schedules, e) process detail and control, f) instrumentation specification/type, g) fault finding, h) monitoring, i) pump curves, j) supportive appendices	> Fully complying = 100% > Complying with 9/10 = 90% > Complying with 8/10 = 80% > Complying with 7/10 = 70% > Complying with 6/10 = 60% > Complying with 5/10 = 50% > Complying with 4/10 = 40% > Complying with 3/10 = 30% > Complying with 2/10 = 20% > Complying with 1/10 = 10%  The inspector may deduct points for other shortcomings identified in the document. Should there be reason to believe that the document is a "cut & paste" job then a full score shall not apply (at most 75%)	Not available	G
	(5.5) OPERATIONS & MAINTENANCE BUDGET AND EXPENDITURE	The Institution must present credible evidence of: a) Maintenance Budget (as part of Operations Budget) b) Maintenance Expenditure (as part of the Operations Expenditure) c) Maintenance Expenditure should be more than 5% of the Operations Expenditure in Total for the preceding Financial Year.	> Fully complying = 100% > With available info expenditure percentage must be calculated; if less than 5% = 0.6 > Only complying with (a) = 0.4	Reg will get this and make it available on the BDS. The budget is not divided per system but overall for Kouga. Not sufficient proof submitted for calculation of the maintenance expenditure since the budget is not specific. It is proposed tho that the overall Operations budget for all the works be used to determine if the maintenance expenditure is more than 5%.	G
	(5.6) DESIGN CAPACITY vs.. OPERATIONAL CAPACITY	Proof to be submitted of the documented design capacity and documented daily operating capacity over the past 12 months Groundwater dependant systems must have an acceptable plan which stipulates abstraction patterns that will prevent aquifer damage Flow meters must be calibrated at least annually	> 1 = evidence of verified plant capacity/aquifer utilisation plan + daily flow measurements + calibrated flow meters + peak flows under design capacity. > 0.75 = evidence of verified plant capacity + daily	flow meter readings, recently being implemented, used to take the readings once a month. Need to upload the info on the BDS	F

95% - 100%	A+
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 water affairs Department Water Affairs REPUBLIC OF SOUTH AFRICA		Jeffreysbay			 blue drop CERTIFICATION drinking water quality REGULATION	
Name of Water Treatment Facility or Facilities		Jeffrey's Bay WTW	Names of City/Towns/Villages served	Jeffreys Bay, Kabeljous and Paradise beach and Ashton Bay	Design Capacity (Ml/d) (Or Yield if Borehole) (If more than one plant list combined volumes) (If supplied by bulk provider, please state SLA daily volume)	3.4 Ml/d
Type of Process Technology applied at the plant/s		Type of technology applied	Pumping, Filtration & Chlorination		Annual Average production (Operational) (Ml/d)	0 Ml/d
		If you selected "other" or "special treatment, please explain.	Not applicable		Peak Production on any day (Ml/d)	0 Ml/d
Location (Coordinates) S	33°37' 04.00"	Name of River or impoundment (if surface water)	Borehole = 40%, 60% Nelson Mandela Metro		Reported Water Losses (%)	0
E	19°06' 02.00"	Population Number Served by Supply System	30000, seasonal influx during December		Assessor's comment for Noting	
Name of 1st WSP involved in system	Nelson Mandela Bay Metro	Role of first WSP? Quantative information please.	Bulk supply			
Name of 2nd WSP involved in system	None	Role of second WSP? Quantative information please	Not applicable			
Name of 3rd WSP involved in system	None	Role of third WSP? Quantitative information please	Not applicable			
Blue Drop Criteria	Requirements	Sub-Requirements	Scoring Information	Assessor's Comment	Score	Final Score
(1) WATER SAFETY PLANNING	(1.1) WATER SAFETY PLANNING PROCESS	<p>a.) The Water Safety Planning Process is steered by a group of people which includes the technical, financial and management staff of the municipality. Where a WSP arrangement exist the WSA and WSP should partake in this process.</p> <p>b.) There should be clear indication that the water services institution conducted a water safety planning process and not only drafted a document.</p> <p>c.) There should be clear reference to the specific water supply system at hand and not only global risk management measurements put in place.</p>	<p>&gt;Fully complying = 100%</p> <p>&gt; Complying only with B&amp;C = 0.7</p> <p>&gt; Complying only with A&amp;C = 0.6</p> <p>&gt; Complying only with A&amp;B = 0.5</p> <p>&gt; Complying only with one of the sub-requirements = 0.3</p>	WSP 2 years ago compiled. Acknowledge that not all aspects are covered in WSP. It is a combined process for all systems and not specific. Risk assessment was done separately. Funding is a problem to appoint service providers to do the WSPP. The Water Services Manager confirmed that it was a desktop study. Thus no scoring could be achieved for this sub-criteria.	G	
	(1.2) RISK ASSESSMENT	<p>a.) The Risk Assessment must cover both treatment and reticulation .</p> <p>b.) The Water Services Institution (WSI) must provide information on findings of the Risk Assessment (and detail Risk Prioritisation method followed) for the specific water supply system including water resource quality. Format not important but it should be proven not to be a desktop study.</p> <p>c.) The Water Safety Planning process must include (adequate) Control Measures for each significant hazard or hazardous event identified.</p> <p>d.) A Water Quality Risk Assessment conducted for at least 80% of the SANS 241 list of determinands. This is to verify whether treatment technology is adequate to treat the raw water to comply with national standard level.</p>	<p>&gt; 100% complying with Requirement = 1</p> <p>&gt; Fully complying with process but not covering 1 risk element identified = 0.9</p> <p>&gt; Fully complying with process but not covering 2 or more risk elements identified = 0.8</p> <p>&gt; lacking control measures for which there is no plan in place =0.7</p> <p>&gt; WSP does not cover 1 of the following elements: Catchment, Treatment Works or Reticulation Risks = 0.6</p> <p>&gt; Partially complying with process in two elements and then not covering 2 or more risk elements identified = 0.5</p> <p>&gt; Further deduct points for: Risk Prioritisation not indicated = -0.2</p> <p>Full SANS 241 Analyses not included as part of the Risk Assessment = -0.2</p> <p>For any other major shortcoming identified = -0.2</p>	Risk assessment was not done according to the sub-criteria specified thus no scoring can be given here	G	
35						

	RISK-BASED MONITORING PROGRAMME	1.3) a.) Prove <b>Operational Monitoring</b> is: i) Informed by the Risk Assessment ii) Required sites to monitor: Raw water, after filtration (per process unit) and final water. iii) Determinands: pH, turbidity and disinfectant residual iv) Frequency of analyses: at least once per shift (i.e. every 8 hours) v) Equipment used + Evidence of calibration (or any other means of ensuring credible readings for the past 3 years).	> Fully complying = 100% > Complying with 4/5 = 0.8 > Complying with 3/5 = 0.6 > Complying with 2/5 = 0.4 > Complying with 1/5 = 0.2  Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.	Operational monitoring not informed by the risk assessment. The analysis is currently not done consistently. They do testing and some credit will be given here. It is concerning and this should be noted that the monitoring sheets were only introduced recently and it is generalised at all the Works. No calibration certificates could be made available during the assessment.	E	G
		b.) Prove <b>Compliance Monitoring</b> is: i) Informed by the Risk Assessment. ii) Monitoring programme is registered on BDS. iii) Actual monitoring occur according to registered BDS monitoring programme (80%). iv) Required sites monitored: Water works final & distribution network + Frequency of analyses: Water works final according SANS 241; distribution monthly. v) Coverage of population served must at least be 80%	> Fully complying = 100% > Complying with 4/5 = 0.8 > Complying with 3/5 = 0.6 > Complying with 2/5 = 0.4 > Complying with 1/5 = 0.2  Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.	Compliance monitoring not informed by the Risk Assessment. Programme is registered on BDS, monitoring done at final water at works only, not covering 80% population	E	
	1.4) CREDIBILITY OF DWQ DATA	a) Certificate of Accreditation for applicable methods OR Z-scores results (z-scores must be $\geq -2$ & $\leq 2$ are acceptable) in a recognised Proficiency Testing Scheme. b) DWQ Data credibility on the BDS (Blue Drop Certified Data)	Complying with both requirements = 100% Comply only with (a) = 0.6 Complying only with (b) more than 80% = 0.6 Complying only with (b) >60% <80% = 0.4	Making use of National health Laboratory Services and data on BDS BD certified. This is questionable since the lab is for medical testing. ?????	E	
	1.5) INCIDENT MANAGEMENT	<b>Protocol to specify:</b> (1) alert levels, (2) response times, (3) required actions, (4) roles & responsibilities, (5) communication vehicles and (6) must include response on possible risks identified in the Risk Assessment of the Water Safety Planning process <b>Incident Register to include :</b> (7) Date, location and description of incident (8) Action taken and date of resolution (9) Outcome of cause investigation	> Fully complying = 1 > Complying with 8 of the 9 requirements = 0.9 > Complying with 7 of the 9 requirements = 0.85 > Complying with 6 of the 9 requirements = 0.75 > Complying with 5 or 4 of the 9 requirements = 0.5 > Complying with 3 or 2 of the 9 requirements = 0.25 > Complying with 1 of the 9 requirements = 0.15	Lack of communication between DoH and Kouga when failures occur. EHO officials are reluctant to resample after failure. Reg have a problem with the communication of failures between DoH and Kouga. Reg will include DoH in their incident management protocol. Incident management protocol only started about a month ago. Failure in November was communicated by word of mouth but no paper trail available to confirm this.	G	
	SAMPLER'S BONUS:	To be eligible for this bonus, WSI's must provide proof of training of samplers or Sampling Quality Control measures (Name the Sampling Training Course, Duration, Service Provider, and detail of Attendees) 1) Evidence of relevant sampling training that will ensure credibility of the sampling process; or 2) Evidence of control measures to ensure sampling credibility	> Complying with both requirements = 100% > Complying with only 1 = 0.75 > If measures are in place but not fully effective then score = 0.5	No proof was submitted for samplers training. Sampling is done by EHO's. the PCs received training only on the use of the Hach equipment. No bonus is thus given.	0	
10	(2) DWQ PROCESS MANAGEMENT & CONTROL	(2.1) WORKS CLASSIFICATION COMPLIANCE	Works classified according to Regulation 2834 requirements. Evidence uploaded on BDS or Copy presented at the assessment.	> Compliance = 100%	C	A+
	(2.2) PROCESS CONTROL REGISTRATION COMPLIANCE	a) Process Controllers must be Registered according to Regulation 2834. b) The Process Controllers' Classification is complying with legislative requirements i.t.o.: i) Number of process Controllers ii) Complying with the required Classification levels. c) The Supervisor must comply with legislative requirements.	> Fully complying = 100% > Complying with all requirements for more than 70% of the Process Controllers = 70% > All PCs registered but >50% <70% PCs complying with standards = 60%. > Supervisor not complying but most PCs complying = 50%. > Only Supervisor complying = 50%.	PCs registered on the BDS but don't comply with legislation. To be corrected on BDS. Only one Class V PC who is the technical manager.	F	E

	(2.3) AVAILABILITY OF WATER TREATMENT WORKS LOGBOOK	a) A logbook is in place to record all incidents at the water treatment works. b) Evidence is presented that the logbook process is being implemented. (It is NOT required to be implemented for the entire assessment period)	> Fully complying = 100% > Complying only with a) = 70%	Logbook implemented recently. Not used according to expectations	F	E
	PROCESS CONTROL BONUS	BONUS: Proof of Process Controller staff being subjected to relevant training the past 12 months	Name the Process Controlling Training Course, Duration, Service Provider, detail of Attendees > All information provided (>50% of PC staff subjected to training) = 1 > All information except accreditation (<50% of PC staff subjected to training) = 0,5 > Zero score if any other evidence is lacking	Proof uploaded on BDS on NQF training through LGSETA funding	A+	

30	(3) DRINKING WATER QUALITY COMPLIANCE	(3.1.1) DWQ COMPLIANCE (MICROBIOLOGICAL)	The Microbiological Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	>100 000 population served by the water supply system: 99% Microbiological Compliance =100% (1) ≥98 <99% micro compliance = 75% (0.75) ≥97 <98% micro compliance = 50% (0.5) ≥96 <97% micro compliance = 30% (0.3) <96% micro compliance = 0% (0) <100 000 population served by the water supply system: 97% Compliance =100% (1) ≥96 < 97% micro compliance = 75% (0.75) ≥95 < 96% micro compliance = 50% (0.5) ≥94 < 95% micro compliance = 30% (0.3) <94% micro compliance = 0% (0)	94.2 . E. coli as preferred determinand.	F	D
	(3.1.2) DWQ COMPLIANCE (CHEMICAL)	The Chemical Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	a) Chemical - Acute Health: - Excellent Comp. (97% for <100 000) & (99% for >100 000) - Good Compliance (95% for 100 000) & (97% for >100 000) b) Chemical - Chronic Health: -Excellent Compliance (95% for <100 000) & (97% for 100 000) -Good Compliance (93% for <100 000) & (95% for 100 000)	>Excellence Compliance on both = 100% > Excellence in (a) & Good in (b) = 0.8 >Excellence in (b) and Good in (a) = 0.7 >Good compliance in both categories = 0.6 >Good compliance in (a) only = 0.4 >Good compliance in (b) only = 0.3	99.9 compliance ModComm: ? Same applies.	A+	
	(3.2) RISK REFINED COMPLIANCE	The Compliance of all Determinands identified during the Risk Assessment Process to be included in the risk-defined monitoring programme, must comply with the requirements set in the SANS 241.	a) Excellent Compliance (95% for <100 000 & 97% for >100 000) b) Good Compliance (93% for <100 000 & 95% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	No risk assessment based monitoring	G	
	(3.3) OPERATIONAL EFFICIENCY INDEX	The compliance of operational determinands as monitored at the Final Water sampling point must comply with the SANS 241 Requirements.	a) Excellent Compliance (93% for <100 000 & 95% for >100 000) b) Good Compliance (90% for <100 000 & 93% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	There were some failures reported thus a full score cannot be awarded.	C	
	PENALTY (1): Data Difference	Should there be a difference between data available on BDS and that which is presented in hardcopy for verification the penalty will apply.			Data was verified as correct based on random comparison between the hard copy and the uploaded data.	0	
	PENALTY (2): <11 Months' Data	Less than 11 months data available to assess Microbiological and Chemical compliance			September data missing, explanation was that the Laboratory was not paid.	0	
	PENALTY (3) Notification Failure	If there is any significant (sustained) failure with no evidence of a Water Quality Alert Notice (Boil Water Notice) being issued, this penalty will apply.				0	



<p style="text-align: center;"><b>(4)</b></p> <p style="text-align: center;"><b>MANAGEMENT, ACCOUNTABILITY, &amp; LOCAL REGULATION</b></p> <p style="text-align: center;"><b>10</b></p>	<p><b>(4.1)</b></p> <p style="text-align: center;"><b>MANAGEMENT COMMITMENT</b></p>	<p>Management's commitment to effective Drinking Water Quality Operations and Management should be portrayed by Proof of signature approval of the:</p> <p>a) Water Safety Plan; b) DWQ Monitoring Programme c) Water Treatment Plant Logbook d) Operations and Maintenance Budget e) Water Services Development Plan</p>	<p>&gt; Full Compliance = 100% &gt; 4/5 = 80% &gt; 3/5 = 60% &gt; 2/5 = 40% &gt; 1/5 = 20%</p>	<p>Only Logbook complying. The rest of the documents are not signed</p>	<b>G</b>	
	<p><b>(4.2)</b></p> <p style="text-align: center;"><b>PUBLICATION OF PERFORMANCE</b></p>	<p>Evidence should be provided on the various means of drinking water quality information made public to the constituencies supplied with drinking water from this specific water supply system.</p> <p>Forms of Publication: &gt;Newspaper publication &gt;Municipal Billing &gt;Annual Report &gt;Posters &amp; Pamphlets &gt;Population and Promotion of "My Water" &gt;Electronic Webpage</p> <p>The Water Services Authority must ensure that evidence of adequate marketing of Existing Blue Drop Certified water supply systems are presented during the audit.</p>	<p>&gt; Newspaper publication = 100% (1) &gt; Displayed on municipal Billing = 90% (0.9) &gt; Populating &amp; promoting "My Water" municipal information = 80% (0.8) &gt; Municipal Annual Report + Ward Committee Distribution &amp;/ Posters = 60% (0.6) &gt; Municipal Annual Report = 50% (0.5) &gt; Electronic (Web-page) Information = 40% (0.4) &gt; Should the municipality utilise two or more means of communication, 100% scoring will apply (1) &gt; Should it be a water supply system that is currently Blue Drop Certified, and no evidence can be given of Blue Drop marketing/awareness, a full score cannot be applied. Maximum score = 80% (0.8)</p>	<p>Public were made aware of the BD Report on Kouga website, printed on bill. Failure alerts are being communicated through radio medium. Breakage of pumps, announced that water carts with haylow, have public liason officer,</p>	<b>A+</b>	
	<p><b>(4.3)</b></p> <p style="text-align: center;"><b>SERVICE LEVEL AGREEMENT/ PERFORMANCE AGREEMENT</b></p>	<p>Should there be a institutional arrangement between Water Services Authority and Water Services Provider the it is essential that the legislatively required contract stipulate Service Level Agreements between the two entities. A copy of this document is required.</p> <p><b>OR</b></p> <p>Should the Water Services Authority fulfil the function of Water Services Provider as per Section 78 arrangements, then it is required that the responsible manager (official) have a Performance Agreement (Workpla) in place which stipulates Drinking Water Quality Management Responsibilities.</p>	<p>Fully complying = 100% &gt; Agreement in-place but with minor shortcomings = 0.75 &gt; Agreement in place but with significant Shortcomings = 0.5</p>	<p>Agreement in place with significant short comings. No agreement between irrigation board and WSA to commit to the water allocation as set out in the allocation letter. There has been a subsequent communication between the Gamtoos Irrigation Board and the WSA, however no clear indication on how to resolve the matter. Uploaded, water quota from the Gamtoos Waterscheme ( irrigation board) and is very old. The municipality promised to provide SDBIP (Service Development Business Implementation Plan) The allocation is not adequate as it does not bind the irrigation board in providing the allocated amount. The water allocation is under the 1956 Water Act. The municipality have an agreement with the Irrigation Board.</p>	<b>F</b>	
	<p><b>(4.4)</b></p> <p style="text-align: center;"><b>SUBMISSION OF DWQ DATA</b></p>	<p>a) 12 months of data submitted on the Blue Drop System (BDS). WSI's must ensure that 12 months' sets of results are recorded on the BDS (DWA will only consider data available on the BDS) b) Note: All Compliance Monitoring test results are required to be submitted.</p>	<p>&gt; 12 months = 100% (1) &gt; 11 months = 50% (0.5) &gt; 10 months = 20% (0.2) &gt; &lt;10months = 0% (0)</p>	<p>Septemehr Data Missing</p>	<b>D</b>	
	<p><b>Bonus:</b> Publication of Performance</p>	<p>Availing information on Drinking Water to relevant public in 3 or more forms listed.</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p><b>Bonus:</b> Performance Agreement</p>	<p>Workplans of Process Controllers aligned to Operations and Maintenance Manual</p>	<p>Full score or "no" bonus</p>	<p>NO</p>	<b>0</b>	
	<p><b>Penalty:</b> Submission of DWQ Data</p>	<p>Penalty will apply should the Department find proof during / post assessment that the WSI are guilty of an offence as per Section 82 of the Water Services Act, by only submitting partial information in order to present a false impression of DWQ Performance and/or compliance.</p>		<p>Verified the data submitted to be correct as per random checking</p>	<b>0</b>	
	<p><b>(5)</b></p> <p style="text-align: center;"><b>ASSET MANAGEMENT</b></p>	<p><b>(5.1)</b></p> <p style="text-align: center;"><b>ANNUAL PROCESS AUDIT</b></p>	<p>Process Audit Report on technical inspection/assessment of treatment facility and evidence of implementation of findings This process assessment should've been done within the 12-month assessment period</p>	<p>&gt; Fully complying (Technical report in-place and findings implementation proof/plan provided = 1 &gt; Report in place with evidence of findings implementation but with shortcomings = 0.75 &gt; Only Technical Report in-place = 0.5 &gt; A report is in place but with shortcomings = 0.25</p>	<p>Was done but proposed activities not implemented as yet and funding allocation will only be done in the new financial year. Done by Amathole Water Board, very detailed</p>	

15	(5.2) ASSET REGISTER	The Institution must present a complete Asset Register. The asset register must : a) detail relevant equipment and infrastructure b) indicate asset description c) location d) condition (remaining life) e) replacement value	> Full score (1) for proof of adequate Asset Register >comply with 4/5 = 0.8 >comply with 3/5 = 0.6 >comply with 2/5 = 0.4 >comply with 1/5 = 0.2 OR > If only a list of assets = 0.2	Current busy with new asset register. Ducharme was appointed to develop and 80% complete. Doubt if it will be ready by confirmation session. Currently uploaded register on BDS have a lot of shortcomings, old and outdated and can not be accepted therefore the 0 score	G
	(5.3) AVAILABILITY & COMPETENCE OF MAINTENANCE TEAM	a) The Institution must present evidence of a competent Maintenance Team (in form of Organogram; Contract or Invoice). Logbook with maintenance entries will serve as adequate evidence. b) Additional prove required on team competency (e.g. Qualification & Experience & Trade-test)	>Fully complying = 100% > Only complying with (a) = 0.6 > Only complying with (b) = 0.5	Uploaded the team which consist of the Artisan with a Trade Certificate for electrical maintenance. An organogram for mechanical team was also uploaded which consist of 4 Engineers as Project Mangers, CAD draughtsmen, 2 seniour site supervisors, 3 Installations electricians(with wireman's certificates), 8 semi skilled artisans	A+
	(5.4) OPERATIONS & MAINTENANCE MANUAL	O&M manual to contain: a) civil, mechanical, electrical detail of plant, b) design capacity of plant, c) reference to drawings, d) operational schedules, maintenance schedules, e) process detail and control, f) instrumentation specification/type, g) fault finding, h) monitoring, i) pump curves, g) supportive appendices	> Fully complying = 100% > Complying with 9/10 = 90% > Complying with 8/10 = 80% > Complying with 7/10 = 70% > Complying with 6/10 = 60% > Complying with 5/10 = 50% > Complying with 4/10 = 40% > Complying with 3/10 = 30% > Complying with 2/10 = 20% > Complying with 1/10 = 10%  The inspector may deduct points for other shortcomings identified in the document. Should there be reason to believe that the document is a "cut & paste" job then a full score shall not apply (at most 75%)	Not available	G
	(5.5) OPERATIONS & MAINTENANCE BUDGET AND EXPENDITURE	The Institution must present credible evidence of: a) Maintenance Budget (as part of Operations Budget) b) Maintenance Expenditure (as part of the Operations Expenditure) c) Maintenance Expenditure should be more than 5% of the Operations Expenditure in Total for the preceding Financial Year.	> Fully complying = 100% > With available info expenditure percentage must be calculated; if less than 5% = 0.6 > Only complying with (a) = 0.4	Reg will get this and make it available on the BDS. The budget is not devided per system but overall for Kouga. Not sufficient proof submitted for calculation of the maintenance expenditure since the budget is not specific. It is proposed tho that the overall Operations budget for all the works be used to determine if the maintenance expenditure is more than 5%.	E
	(5.6) DESIGN CAPACITY vs.. OPERATIONAL CAPACITY	Proof to be submitted of the documented design capacity and documented daily operating capacity over the past 12 months Groundwater dependant systems must have an acceptable plan which stipulates abstraction patterns that will prevent aquifer damage Flow meters must be calibrated at least annually	> 1 = evidence of verified plant capacity/aquifer utilisation plan + daily flow measurements + calibrated flow meters + peak flows under design capacity. > 0.75 = evidence of verified plant capacity + daily	The WSDP document uploaded on the BDS does not fully address the requirements of this KPI, no daily flow measurements were uploaded or presented during the assessment.	G

F

95% - 100%

A+

 water affairs Department: Water Affairs REPUBLIC OF SOUTH AFRICA		Oysterbay			 blue drop CERTIFICATION drinking water quality REGULATION	
Name of Water Treatment Facility or Facilities		Oysterbay	Names of City/Towns/Villages served	Oysterbay, Umzamuwethu	Design Capacity (M/d) (Or Yield if Borehole) (If more than one plant list combined volumes) (If supplied by bulk provider, please state SLA daily volume)	0 M/d
Type of Process Technology applied at the plant/s		Type of technology applied	Other, Assessor to provide additional information in cell immediately below		Annual Average production (Operational) (M/d)	0 M/d
		If you selected "other" or "special treatment, please explain.	Chemical dosing, flocculation in the filtration system, ozone to settle out iron and manganese (oxidation process), chlorine gas for sterilisation		Peak Production on any day (M/d)	0 M/d
Location (Coordinates) S	33°37' 04.00"	Name of River or impoundment (if surface water)	2 boreholes, depending on demand and dune fountains		Reported Water Losses (%)	0
E	19°06' 02.00"	Population Number Served by Supply System	2,500		Assessor's comment for Noting	
Name of 1st WSP involved in system	None	Role of first WSP? Quantative information please.	Not applicable			
Name of 2nd WSP involved in system	None	Role of second WSP? Quantative information please	Not applicable			
Name of 3rd WSP involved in system	None	Role of third WSP? Quantitative information please	Not applicable			
Blue Drop Criteria	Requirements	Sub-Requirements	Scoring Information	Assessor's Comment	Score	Final Score
(1) WATER SAFETY PLANNING	(1.1) WATER SAFETY PLANNING PROCESS	<p>a.) The Water Safety Planning Process is steered by a group of people which includes the technical, financial and management staff of the municipality. Where a WSP arrangement exist the WSA and WSP should partake in this process.</p> <p>b.) There should be clear indication that the water services institution conducted a water safety planning process and not only drafted a document.</p> <p>c.) There should be clear reference to the specific water supply system at hand and not only global risk management measurements put in place.</p>	<p>&gt;Fully complying = 100%</p> <p>&gt; Complying only with B&amp;C = 0.7</p> <p>&gt; Complying only with A&amp;C = 0.6</p> <p>&gt; Complying only with A&amp;B = 0.5</p> <p>&gt; Complying only with one of the sub-requirements = 0.3</p>	WSP 2 years ago compiled. Acknowledge that not all aspects are covered in WSP. It is a combined process for all systems and not specific. Risk assessment was done separately. Funding is a problem to appoint service providers to do the WSPP. The Water Services Manager confirmed that it was a desktop study. Thus no scoring could be achieved for this sub-criteria.	G	G
	35	(1.2) RISK ASSESSMENT	<p>a.) The Risk Assessment must cover both treatment and reticulation .</p> <p>b.) The Water Services Institution (WSI) must provide information on findings of the Risk Assessment (and detail Risk Prioritisation method followed) for the specific water supply system including water resource quality. Format not important but it should be proven not to be a desktop study.</p> <p>c.) The Water Safety Planning process must include (adequate) Control Measures for each significant hazard or hazardous event identified.</p> <p>d.) A Water Quality Risk Assessment conducted for at least 80% of the SANS 241 list of determinands. This is to verify whether treatment technology is adequate to treat the raw water to comply with national standard level.</p>	<p>&gt; 100% complying with Requirement = 1</p> <p>&gt; Fully complying with process but not covering 1 risk element identified = 0.9</p> <p>&gt; Fully complying with process but not covering 2 or more risk elements identified = 0.8</p> <p>&gt; lacking control measures for which there is no plan in place =0.7</p> <p>&gt; WSP does not cover 1 of the following elements: Catchment, Treatment Works or Reticulation Risks = 0.6</p> <p>&gt; Partially complying with process in two elements and then not covering 2 or more risk elements identified = 0.5</p> <p>&gt; Further deduct points for: Risk Prioritisation not indicated = -0.2</p> <p>Full SANS 241 Analyses not included as part of the Risk Assessment = -0.2</p> <p>For any other major shortcoming identified = -0.2</p>	Risk assessment was not done according to the sub-criteria specified thus no scoring can be given here	



	1.3) RISK-BASED MONITORING PROGRAMME	<p>a.) Prove <b>Operational Monitoring</b> is:</p> <ul style="list-style-type: none"> <li>i) Informed by the Risk Assessment</li> <li>ii) Required sites to monitor: Raw water, after filtration (per process unit) and final water.</li> <li>iii) Determinands: pH, turbidity and disinfectant residual</li> <li>iv) Frequency of analyses: at least once per shift (i.e. every 8 hours)</li> <li>v) Equipment used + Evidence of calibration (or any other means of ensuring credible readings for the past 3 years).</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Fully complying = 100%</li> <li>&gt; Complying with 4/5 = 0.8</li> <li>&gt; Complying with 3/5 = 0.6</li> <li>&gt; Complying with 2/5 = 0.4</li> <li>&gt; Complying with 1/5 = 0.2</li> </ul> <p>Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.</p>	Operational monitoring not informed by the risk assessment. The analysis is currently not done consistently. They do testing and some credit will be given here. It is concerning and this should be noted that the monitoring sheets were only introduced recently and it is generalised at all the Works. No calibration certificates could be made available during the assessment.	E	G
		<p>b.) Prove <b>Compliance Monitoring</b> is:</p> <ul style="list-style-type: none"> <li>i) Informed by the Risk Assessment.</li> <li>ii) Monitoring programme is registered on BDS.</li> <li>iii) Actual monitoring occur according to registered BDS monitoring programme (80%).</li> <li>iv) Required sites monitored: Water works final &amp; distribution network +</li> <li>Frequency of analyses: Water works final according SANS 241; distribution monthly.</li> <li>v) Coverage of population served must at least be 80%</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Fully complying = 100%</li> <li>&gt; Complying with 4/5 = 0.8</li> <li>&gt; Complying with 3/5 = 0.6</li> <li>&gt; Complying with 2/5 = 0.4</li> <li>&gt; Complying with 1/5 = 0.2</li> </ul> <p>Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.</p>	Compliance monitoring not informed by the Risk Assessment. Programme is registered on BDS, monitoring done at final water at works only, not covering 80% population	E	
	1.4) CREDIBILITY OF DWQ DATA	<p>a) Certificate of Accreditation for applicable methods OR Z-scores results (z-scores must be <math>\geq -2</math> &amp; <math>\leq 2</math> are acceptable) in a recognised Proficiency Testing Scheme.</p> <p>b) DWQ Data credibility on the BDS (Blue Drop Certified Data)</p>	<ul style="list-style-type: none"> <li>Complying with both requirements = 100%</li> <li>Comply only with (a) = 0.6</li> <li>Complying only with (b) more than 80% = 0.6</li> <li>Complying only with (b) &gt;60% &lt;80% = 0.4</li> </ul>	Making use of National health Laboratory Services and data on BDS BD certified. This is questionable since the lab is for medical testing. ?????	E	
	1.5) INCIDENT MANAGEMENT	<p><b>Protocol to specify:</b></p> <ul style="list-style-type: none"> <li>(1) alert levels,</li> <li>(2) response times,</li> <li>(3) required actions,</li> <li>(4) roles &amp; responsibilities,</li> <li>(5) communication vehicles and</li> <li>(6) must include response on possible risks identified in the Risk Assessment of the Water Safety Planning process</li> </ul> <p><b>Incident Register to include :</b></p> <ul style="list-style-type: none"> <li>(7) Date, location and description of incident</li> <li>(8) Action taken and date of resolution</li> <li>(9) Outcome of cause investigation</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Fully complying = 1</li> <li>&gt; Complying with 8 of the 9 requirements = 0.9</li> <li>&gt; Complying with 7 of the 9 requirements = 0.85</li> <li>&gt; Complying with 6 of the 9 requirements = 0.75</li> <li>&gt; Complying with 5 or 4 of the 9 requirements = 0.5</li> <li>&gt; Complying with 3 or 2 of the 9 requirements = 0.25</li> <li>&gt; Complying with 1 of the 9 requirements = 0.15</li> </ul>	Lack of communication between DoH and Kouga when failures occur. EHO officials are reluctant to resample after failure. Reg have a problem with the communication of failures between DoH and Kouga. Reg will include DoH in their incident management protocol. Incident management protocol only started about a month ago. Failure in November was communicated by word of mouth but no paper trail available to confirm this.	G	
	SAMPLER'S BONUS:	To be eligible for this bonus, WSI's must provide proof of training of samplers or Sampling Quality Control measures (Name the Sampling Training Course, Duration, Service Provider, and detail of Attendees)	<ul style="list-style-type: none"> <li>&gt;Complying with both requirements = 100%</li> <li>&gt;Complying with only 1 = 0.75</li> <li>&gt; If measures are in place but not fully effective then score = 0.5</li> </ul>	No proof was submitted for samplers training. Sampling is done by EHO's. the PCs received training only on the use of the Hach equipment. No bonus is thus given.	0	
10 <b>(2)</b> DWQ PROCESS MANAGEMENT & CONTROL	2.1) WORKS CLASSIFICATION COMPLIANCE	Works classified according to Regulation 2834 requirements. Evidence uploaded on BDS or Copy presented at the assessment.	> Compliance = 100%	D	A+	G
	2.2) PROCESS CONTROL REGISTRATION COMPLIANCE	<p>a) Process Controllers must be Registered according to Regulation 2834.</p> <p>b) The Process Controllers' Classification is complying with legislative requirements i.t.o.:</p> <ul style="list-style-type: none"> <li>i) Number of process Controllers</li> <li>ii) Complying with the required Classification levels.</li> </ul> <p>c) The Supervisor must comply with legislative requirements.</p>	<ul style="list-style-type: none"> <li>&gt; Fully complying = 100%</li> <li>&gt; Complying with all requirements for more than 70% of the Process Controllers = 70%</li> <li>&gt; All PCs registered but &gt;50% &lt;70% PCs complying with standards = 60%.</li> <li>&gt; Supervisor not complying but most PCs complying = 50%.</li> <li>&gt; Only Supervisor complying = 50%.</li> </ul>	PCs registered on the BDS but don't comply with legislation. To be corrected on BDS???	G	

	(2.3) AVAILABILITY OF WATER TREATMENT WORKS LOGBOOK	a) A logbook is in place to record all incidents at the water treatment works. b) Evidence is presented that the logbook process is being implemented. (It is NOT required to be implemented for the entire assessment period)	> Fully complying = 100% > Complying only with a) = 70%	Logbook implemented recently. Not used according to expectations	F	G
	PROCESS CONTROL BONUS	BONUS: Proof of Process Controller staff being subjected to relevant training the past 12 months	Name the Process Controlling Training Course, Duration, Service Provider, detail of Attendees > All information provided (>50% of PC staff subjected to training) = 1 > All information except accreditation (<50% of PC staff subjected to training) = 0,5 > Zero score if any other evidence is lacking	Proof uploaded on BDS on NQF training through LGSETA funding	D	
30 DRINKING WATER QUALITY COMPLIANCE	(3.1.1) DWQ COMPLIANCE (MICROBIOLOGICAL)	The Microbiological Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	>100 000 population served by the water supply system: 99% Microbiological Compliance =100% (1) ≥98 <99% micro compliance = 75% (0.75) ≥97 <98% micro compliance = 50% (0.5) ≥96 <97% micro compliance = 30% (0.3) <96% micro compliance = 0% (0) <100 000 population served by the water supply system: 97% Compliance =100% (1) ≥96 < 97% micro compliance = 75% (0.75) ≥95 < 96% micro compliance = 50% (0.5) ≥94 < 95% micro compliance = 30% (0.3) <94% micro compliance = 0% (0)	94.2 . E. coli as preferred determinand.	F	D
	(3.1.2) DWQ COMPLIANCE (CHEMICAL)	The Chemical Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme. a) Chemical - Acute Health: - Excellent Comp. (97% for <100 000) & (99% for >100 000) - Good Compliance (95% for 100 000) & (97% for >100 000) b) Chemical - Chronic Health: -Excellent Compliance (95% for <100 000) & (97% for 100 000) -Good Compliance (93% for <100 000) & (95% for 100 000)	>Excellence Compliance on both = 100% > Excellence in (a) & Good in (b) = 0.8 >Excellence in (b) and Good in (a) = 0.7 >Good compliance in both categories = 0.6 >Good compliance in (a) only = 0.4 >Good compliance in (b) only = 0.3	99.9 compliance	A+	
	(3.2) RISK REFINED COMPLIANCE	The Compliance of all Determinands identified during the Risk Assessment Process to be included in the risk-defined monitoring programme, must comply with the requirements set in the SANS 241. a) Excellent Compliance (95% for <100 000 & 97% for >100 000) b) Good Compliance (93% for <100 000 & 95% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	No risk assessment based monitoring	G	
	(3.3) OPERATIONAL EFFICIENCY INDEX	The compliance of operational determinands as monitored at the Final Water sampling point must comply with the SANS 241 Requirements. a) Excellent Compliance (93% for <100 000 & 95% for >100 000) b) Good Compliance (90% for <100 000 & 93% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	There were some failures reported thus a full score cannot be awarded.	C	
	PENALTY (1): Data Difference	Should there be a difference between data available on BDS and that which is presented in hardcopy for verification the penalty will apply.		Data was verified as correct based on random comparison between the hard copy and the uploaded data.	0	
	PENALTY (2): <11 Months' Data	Less than 11 months data available to assess Microbiological and Chemical compliance		September data missing, explanation was that the Laboratory was not paid.	0	
	PENALTY (3) Notification Failure	If there is any significant (sustained) failure with no evidence of a Water Quality Alert Notice (Boil Water Notice) being issued, this penalty will apply.			0	



<p style="text-align: center;"><b>(4)</b></p> <p style="text-align: center;"><b>MANAGEMENT, ACCOUNTABILITY, &amp; LOCAL REGULATION</b></p> <p style="text-align: center;"><b>10</b></p>	<p><b>(4.1)</b></p> <p><b>MANAGEMENT COMMITMENT</b></p>	<p>Management's commitment to effective Drinking Water Quality Operations and Management should be portrayed by Proof of signature approval of the:</p> <p>a) Water Safety Plan; b) DWQ Monitoring Programme c) Water Treatment Plant Logbook d) Operations and Maintenance Budget e) Water Services Development Plan</p>	<p>&gt; Full Compliance = 100% &gt; 4/5 = 80% &gt; 3/5 = 60% &gt; 2/5 = 40% &gt; 1/5 = 20%</p>	<p>Only Logbook complying</p>	<p><b>G</b></p>	
	<p><b>(4.2)</b></p> <p><b>PUBLICATION OF PERFORMANCE</b></p>	<p>Evidence should be provided on the various means of drinking water quality information made public to the constituencies supplied with drinking water from this specific water supply system.</p> <p>Forms of Publication: &gt;Newspaper publication &gt;Municipal Billing &gt;Annual Report &gt;Posters &amp; Pamphlets &gt;Population and Promotion of "My Water" &gt;Electronic Webpage</p> <p>The Water Services Authority must ensure that evidence of adequate marketing of Existing Blue Drop Certified water supply systems are presented during the audit.</p>	<p>&gt; Newspaper publication = 100% (1) &gt; Displayed on municipal Billing = 90% (0.9) &gt; Populating &amp; promoting "My Water" municipal information = 80% (0.8) &gt; Municipal Annual Report + Ward Committee Distribution &amp;/ Posters = 60% (0.6) &gt; Municipal Annual Report = 50% (0.5) &gt; Electronic (Web-page) Information = 40% (0.4) &gt; Should the municipality utilise two or more means of communication, 100% scoring will apply (1) &gt; Should it be a water supply system that is currently Blue Drop Certified, and no evidence can be given of Blue Drop marketing/awareness, a full score cannot be applied. Maximum score = 80% (0.8)</p>	<p>Public were made aware of the BD Report on Kouga website, printed on bill. Failure alerts are being communicated through radio medium. Breakage of pumps, announced that water carts with haylow, have public liason officer,</p>	<p><b>A+</b></p>	
	<p><b>(4.3)</b></p> <p><b>SERVICE LEVEL AGREEMENT/ PERFORMANCE AGREEMENT</b></p>	<p>Should there be a institutional arrangement between Water Services Authority and Water Services Provider the it is essential that the legislatively required contract stipulate Service Level Agreements between the two entities. A copy of this document is required.</p> <p><b>OR</b></p> <p>Should the Water Services Authority fulfil the function of Water Services Provider as per Section 78 arrangements, then it is required that the responsible manager (official) have a Performance Agreement (Workpla) in place which stipulates Drinking Water Quality Management Responsibilities.</p>	<p>Fully complying = 100% &gt; Agreement in-place but with minor shortcomings = 0.75 &gt; Agreement in place but with significant Shortcomings = 0.5</p>	<p>Agreement in place with significant short comings. No agreement between irrigation board and WSA to commit to the water allocation as set out in the allocation letter. There has been a subsequent communication between the Gamtoos Irrigation Board and the WSA, however no clear indication on how to resolve the matter. Uploaded, water quota from the Gamtoos Waterscheme ( irrigation board) and is very old. The municipality promised to provide SDBIP (Service Development Business Implementation Plan) The allocation is not adequate as it does not bind the irrigation board in providing the allocated amount. The water allocation is under the 1956 Water Act. The municipality have an agreement with the Irrigation Board.</p>	<p><b>F</b></p>	
	<p><b>(4.4)</b></p> <p><b>SUBMISSION OF DWQ DATA</b></p>	<p>a) 12 months of data submitted on the Blue Drop System (BDS). WSI's must ensure that 12 months' sets of results are recorded on the BDS (DWA will only consider data available on the BDS) b) Note: All Compliance Monitoring test results are required to be submitted.</p>	<p>&gt; 12 months = 100% (1) &gt; 11 months = 50% (0.5) &gt; 10 months = 20% (0.2) &gt; &lt;10months = 0% (0)</p>	<p>Septemehr Data Missing</p>	<p><b>D</b></p>	
	<p><b>Bonus:</b> Publication of Performance</p>	<p>Availing information on Drinking Water to relevant public in 3 or more forms listed.</p>	<p>Full score or "no" bonus</p>		<p><b>0</b></p>	
	<p><b>Bonus:</b> Performance Agreement</p>	<p>Workplans of Process Controllers aligned to Operations and Maintenance Manual</p>	<p>Full score or "no" bonus</p>	<p>NO</p>	<p><b>0</b></p>	
	<p><b>Penalty:</b> Submission of DWQ Data</p>	<p>Penalty will apply should the Department find proof during / post assessment that the WSI are guilty of an offence as per Section 82 of the Water Services Act, by only submitting partial information in order to present a false impression of DWQ Performance and/or compliance.</p>		<p>Verified the data submitted to be correct as per random checking</p>	<p><b>0</b></p>	
	<p><b>(5)</b></p> <p style="text-align: center;"><b>ASSET MANAGEMENT</b></p>	<p><b>(5.1)</b></p> <p><b>ANNUAL PROCESS AUDIT</b></p>	<p>Process Audit Report on technical inspection/assessment of treatment facility and evidence of implementation of findings This process assessment should've been done within the 12-month assessment period</p>	<p>&gt; Fully complying (Technical report in-place and findings implementation proof/plan provided = 1 &gt; Report in place with evidence of findings implementation but with shortcomings = 0.75 &gt; Only Technical Report in-place = 0.5 &gt; A report is in place but with shortcomings = 0.25</p>	<p>Was done but proposed activities not implemented as yet and funding allocation will only be done in the new financial year. Done by Amathole Water Board, very detailed</p>	

15	(5.2) ASSET REGISTER	The Institution must present a complete Asset Register. The asset register must : a) detail relevant equipment and infrastructure b) indicate asset description c) location d) condition (remaining life) e) replacement value	> Full score (1) for proof of adequate Asset Register >comply with 4/5 = 0.8 >comply with 3/5 = 0.6 >comply with 2/5 = 0.4 >comply with 1/5 = 0.2 OR > If only a list of assets = 0.2	Current busy with new asset register. Ducharme was appointed to develop and 80% complete. Doubt if it will be ready by confirmation session. Currently uploaded register on BDS have a lot of shortcomings, old and outdated and can not be accepted therefore the 0 score	G
	(5.3) AVAILABILITY & COMPETENCE OF MAINTENANCE TEAM	a) The Institution must present evidence of a competent Maintenance Team (in form of Organogram; Contract or Invoice). Logbook with maintenance entries will serve as adequate evidence. b) Additional prove required on team competency (e.g. Qualification & Experience & Trade-test)	>Fully complying = 100% > Only complying with (a) = 0.6 > Only complying with (b) = 0.5	Uploaded the team which consist of the Artisan with a Trade Certificate for electrical maintenance. An organogram for mechanical team was also uploaded which consist of 4 Engineers as Project Mangers, CAD draughtsmen, 2 seniour site supervisors, 3 Installations electricians(with wireman's certificates), 8 semi skilled artisans	A+
	(5.4) OPERATIONS & MAINTENANCE MANUAL	O&M manual to contain: a) civil, mechanical, electrical detail of plant, b) design capacity of plant, c) reference to drawings, d) operational schedules, maintenance schedules, e) process detail and control, f) instrumentation specification/type, g) fault finding, h) monitoring, i) pump curves, g) supportive appendices	> Fully complying = 100% > Complying with 9/10 = 90% > Complying with 8/10 = 80% > Complying with 7/10 = 70% > Complying with 6/10 = 60% > Complying with 5/10 = 50% > Complying with 4/10 = 40% > Complying with 3/10 = 30% > Complying with 2/10 = 20% > Complying with 1/10 = 10%  The inspector may deduct points for other shortcomings identified in the document. Should there be reason to believe that the document is a "cut & paste" job then a full score shall not apply (at most 75%)	Not available	G
	(5.5) OPERATIONS & MAINTENANCE BUDGET AND EXPENDITURE	The Institution must present credible evidence of: a) Maintenance Budget (as part of Operations Budget) b) Maintenance Expenditure (as part of the Operations Expenditure) c) Maintenance Expenditure should be more than 5% of the Operations Expenditure in Total for the preceding Financial Year.	> Fully complying = 100% > With available info expenditure percentage must be calculated; if less than 5% = 0.6 > Only complying with (a) = 0.4	Reg will get this and make it available on the BDS. The budget is not devided per system but overall for Kouga. Not sufficient proof submitted for calculation of the maintenance expenditure since the budget is not specific. It is proposed tho that the overall Operations budget for all the works be used to determine if the maintenance expenditure is more than 5%.	E
	(5.6) DESIGN CAPACITY vs.. OPERATIONAL CAPACITY	Proof to be submitted of the documented design capacity and documented daily operating capacity over the past 12 months Groundwater dependant systems must have an acceptable plan which stipulates abstraction patterns that will prevent aquifer damage Flow meters must be calibrated at least annually	> 1 = evidence of verified plant capacity/aquifer utilisation plan + daily flow measurements + calibrated flow meters + peak flows under design capacity. > 0.75 = evidence of verified plant capacity + daily	The WSDP document uploaded on the BDS does not fully address the requirements of this KPI, no daily flow measurements were uploaded or presented during the assessment.	G

F

95% - 100%

A+

 water affairs Department: Water Affairs REPUBLIC OF SOUTH AFRICA		<b>Loerie</b>			 blue drop CERTIFICATION drinking water quality REGULATION	
Name of Water Treatment Facility or Facilities		Loerie WTW - Water provided by Nelson Mandela Metro	Names of City/Towns/Villages served	Loerie	Design Capacity (M/d) (Or Yield if Borehole) (If more than one plant list combined volumes) (If supplied by bulk provider, please state SLA daily volume)	0 M/d
Type of Process Technology applied at the plant/s		Type of technology applied	Pumping, Filtration & Chlorination		Annual Average production (Operational) (M/d)	0 M/d
		If you selected "other" or "special treatment, please explain.	Not applicable		Peak Production on any day (M/d)	0 M/d
Location (Coordinates) S			Name of River or impoundment (if surface water)	Loerie Dam	Reported Water Losses (%)	0
E			Population Number Served by Supply System	8,000	<b>Assessor's comment for Noting</b>  Kouga only do monitoring in distribution and final	
Name of 1st WSP involved in system		None	Role of first WSP? Quantative information please.	Not applicable		
Name of 2nd WSP involved in system		None	Role of second WSP? Quantative information please	Not applicable		
Name of 3rd WSP involved in system		None	Role of third WSP? Quantitative information please	Not applicable		
Blue Drop Criteria	Requirements	Sub-Requirements	Scoring Information	Assessor's Comment	Score	Final Score
<b>(1)</b> <b>WATER SAFETY PLANNING</b>  <b>35</b>	<b>(1.1)</b> <b>WATER SAFETY PLANNING PROCESS</b>	<b>a.)</b> The Water Safety Planning Process is steered by a group of people which includes the technical, financial and management staff of the municipality. Where a WSP arrangement exist the WSA and WSP should partake in this process. <b>b.)</b> There should be clear indication that the water services institution conducted a water safety planning process and not only drafted a document. <b>c.)</b> There should be clear reference to the specific water supply system at hand and not only global risk management measurements put in place.	>Fully complying = 100% > Complying only with B&C = 0.7 > Complying only with A&C = 0.6 > Complying only with A&B = 0.5 > Complying only with one of the sub-requirements = 0.3	WSP 2 years ago compiled. Acknowledge that not all aspects are covered in WSP. It is a combined process for all systems and not specific. Risk assessment was done separately. Funding is a problem to appoint service providers to do the WSPP. The Water Services Manager confirmed that it was a desktop study. Thus no scoring could be achieved for this sub-criteria. <b>ModComm: NMM will assessed seprately and and reported as such but will be used to amalgamate the weighted score for final score determination subsequent to Confirmation Assessment for this entire system.</b>	G	
	<b>(1.2)</b> <b>RISK ASSESSMENT</b>	<b>a.)</b> The Risk Assessment must cover both treatment and reticulation . <b>b.)</b> The Water Services Institution (WSI) must provide information on findings of the Risk Assessment (and detail Risk Prioritisation method followed) for the specific water supply system including water resource quality. Format not important but it should be proven not to be a desktop study. <b>c.)</b> The Water Safety Planning process must include (adequate) Control Measures for each significant hazard or hazardous event identified. <b>d.)</b> A Water Quality Risk Assessment conducted for at least 80% of the SANS 241 list of determinands. This is to verify whether treatment technology is adequate to treat the raw water to comply with national standard level.	> 100% complying with Requirement = 1 > Fully complying with process but not covering 1 risk element identified = 0.9 > Fully complying with process but not covering 2 or more risk elements identified = 0.8 > lacking control measures for which there is no plan in place =0.7 > WSP does not cover 1 of the following elements: Catchment, Treatment Works or Reticulation Risks = 0.6 > Partially complying with process in two elements and then not covering 2 or more risk elements identified = 0.5 > Further deduct points for: Risk Prioritisation not indicated = -0.2  Full SANS 241 Analyses not included as part of the Risk Assessment = -0.2 For any other major shortcoming identified = -0.2	Risk assessment was not done according to the sub-criteria specified thus no scoring can be given here	G	

	1.3) <b>RISK-BASED MONITORING PROGRAMME</b>	a.) Prove <b>Operational Monitoring</b> is: i) Informed by the Risk Assessment ii) Required sites to monitor: Raw water, after filtration (per process unit) and final water. iii) Determinands: pH, turbidity and disinfectant residual iv) Frequency of analyses: at least once per shift (i.e. every 8 hours) v) Equipment used + Evidence of calibration (or any other means of ensuring credible readings for the past 3 years).	> Fully complying = 100% > Complying with 4/5 = 0.8 > Complying with 3/5 = 0.6 > Complying with 2/5 = 0.4 > Complying with 1/5 = 0.2  Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.	Operational monitoring not informed by the risk assessment. The analysis is currently not done consistently. They do testing and some credit will be given here. It is concerning and this should be noted that the monitoring sheets were only introduced recently and it is generalised at all the Works. No calibration certificates could be made available during the assessment.	E	G
		b.) Prove <b>Compliance Monitoring</b> is: i) Informed by the Risk Assessment. ii) Monitoring programme is registered on BDS. iii) Actual monitoring occur according to registered BDS monitoring programme (80%). iv) Required sites monitored: Water works final & distribution network + Frequency of analyses: Water works final according SANS 241; distribution monthly. v) Coverage of population served must at least be 80%	> Fully complying = 100% > Complying with 4/5 = 0.8 > Complying with 3/5 = 0.6 > Complying with 2/5 = 0.4 > Complying with 1/5 = 0.2  Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.	Compliance monitoring not informed by the Risk Assessment. Programme is registered on BDS, monitoring done at final water at works only, not covering 80% population	E	
	1.4) <b>CREDIBILITY OF DWQ DATA</b>	a) Certificate of Accreditation for applicable methods OR Z-scores results (z-scores must be $\geq -2$ & $\leq 2$ are acceptable) in a recognised Proficiency Testing Scheme. b) DWQ Data credibility on the BDS (Blue Drop Certified Data)	Complying with both requirements = 100% Comply only with (a) = 0.6 Complying only with (b) more than 80% = 0.6 Complying only with (b) >60% <80% = 0.4	Making use of National health Laboratory Services and data on BDS BD certified. This is questionable since the lab is for medical testing. ?????	E	
	1.5) <b>INCIDENT MANAGEMENT</b>	<b>Protocol to specify:</b> (1) alert levels, (2) response times, (3) required actions, (4) roles & responsibilities, (5) communication vehicles and (6) must include response on possible risks identified in the Risk Assessment of the Water Safety Planning process <b>Incident Register to include :</b> (7) Date, location and description of incident (8) Action taken and date of resolution (9) Outcome of cause investigation	> Fully complying = 1 > Complying with 8 of the 9 requirements = 0.9 > Complying with 7 of the 9 requirements = 0.85 > Complying with 6 of the 9 requirements = 0.75 > Complying with 5 or 4 of the 9 requirements = 0.5 > Complying with 3 or 2 of the 9 requirements = 0.25 > Complying with 1 of the 9 requirements = 0.15	Lack of communication between DoH and Kouga when failures occur. EHO officials are reluctant to resample after failure. Reg have a problem with the communication of failures between DoH and Kouga. Reg will include DoH in their incident management protocol. Incident management protocol only started about a month ago. Failure in November was communicated by word of mouth but no paper trail available to confirm this.	G	
	<b>SAMPLER'S BONUS:</b>	To be eligible for this bonus, WSI's must provide proof of training of samplers or Sampling Quality Control measures (Name the Sampling Training Course, Duration, Service Provider, and detail of Attendees) 1) Evidence of relevant sampling training that will ensure credibility of the sampling process; or 2) Evidence of control measures to ensure sampling credibility	> Complying with both requirements = 100% > Complying with only 1 = 0.75 > If measures are in place but not fully effective then score = 0.5	No proof was submitted for samplers training. Sampling is done by EHO's. the PCs received training only on the use of the Hach equipment. No bonus is thus given.	0	
10 <b>(2) DWQ PROCESS MANAGEMENT &amp; CONTROL</b>	(2.1) <b>WORKS CLASSIFICATION COMPLIANCE</b>	Works classified according to Regulation 2834 requirements. Evidence uploaded on BDS or Copy presented at the assessment.	> Compliance = 100%	NA. Bulk Water Supplied by Nelson Mandela Metro	G	G
	(2.2) <b>PROCESS CONTROL REGISTRATION COMPLIANCE</b>	a) Process Controllers must be Registered according to Regulation 2834. b) The Process Controllers' Classification is complying with legislative requirements i.t.o.: i) Number of process Controllers ii) Complying with the required Classification levels. c) The Supervisor must comply with legislative requirements.	> Fully complying = 100% > Complying with all requirements for more than 70% of the Process Controllers = 70% > All PCs registered but >50% <70% PCs complying with standards = 60%. > Supervisor not complying but most PCs complying = 50%. > Only Supervisor complying = 50%.	NA. Bulk Water Supplied by Nelson Mandela Metro	G	

	(2.3) AVAILABILITY OF WATER TREATMENT WORKS LOGBOOK	a) A logbook is in place to record all incidents at the water treatment works. b) Evidence is presented that the logbook process is being implemented. (It is NOT required to be implemented for the entire assessment period)	> Fully complying = 100% > Complying only with a) = 70%	NA. Bulk Water Supplied by Nelson Mandela Metro	G	G
	PROCESS CONTROL BONUS	BONUS: Proof of Process Controller staff being subjected to relevant training the past 12 months	Name the Process Controlling Training Course, Duration, Service Provider, detail of Attendees > All information provided (>50% of PC staff subjected to training) = 1 > All information except accreditation (<50% of PC staff subjected to training) = 0,5 > Zero score if any other evidence is lacking	NA. Bulk Water Supplied by Nelson Mandela Metro	0	



30 DRINKING WATER QUALITY COMPLIANCE	(3.1.1) DWQ COMPLIANCE (MICROBIOLOGICAL)	The Microbiological Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	>100 000 population served by the water supply system: 99% Microbiological Compliance =100% (1) ≥98 <99% micro compliance = 75% (0.75) ≥97 <98% micro compliance = 50% (0.5) ≥96 <97% micro compliance = 30% (0.3) <96% micro compliance = 0% (0) <100 000 population served by the water supply system: 97% Compliance =100% (1) ≥96 < 97% micro compliance = 75% (0.75) ≥95 < 96% micro compliance = 50% (0.5) ≥94 < 95% micro compliance = 30% (0.3) <94% micro compliance = 0% (0)	94.2 . E. coli as preferred determinand.	F	C
	(3.1.2) DWQ COMPLIANCE (CHEMICAL)	The Chemical Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme. a) Chemical - Acute Health: - Excellent Comp. (97% for <100 000) & (99% for >100 000) - Good Compliance (95% for 100 000) & (97% for >100 000) b) Chemical - Chronic Health: -Excellent Compliance (95% for <100 000) & (97% for 100 000) -Good Compliance (93% for <100 000) & (95% for 100 000)	>Excellence Compliance on both = 100% > Excellence in (a) & Good in (b) = 0.8 >Excellence in (b) and Good in (a) = 0.7 >Good compliance in both categories = 0.6 >Good compliance in (a) only = 0.4 >Good compliance in (b) only = 0.3	99.9 compliance	A+	
	(3.2) RISK REFINED COMPLIANCE	The Compliance of all Determinands identified during the Risk Assessment Process to be included in the risk-defined monitoring programme, must comply with the requirements set in the SANS 241. a) Excellent Compliance (95% for <100 000 & 97% for >100 000) b) Good Compliance (93% for <100 000 & 95% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	No risk assessment based monitoring	G	
	(3.3) OPERATIONAL EFFICIENCY INDEX	The compliance of operational determinands as monitored at the Final Water sampling point must comply with the SANS 241 Requirements. a) Excellent Compliance (93% for <100 000 & 95% for >100 000) b) Good Compliance (90% for <100 000 & 93% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	There were some failures reported thus a full score cannot be awarded.	C	
	PENALTY (1): Data Difference	Should there be a difference between data available on BDS and that which is presented in hardcopy for verification the penalty will apply.		Data was verified as correct based on random comparison between the hard copy and the uploaded data.	0	
	PENALTY (2): <11 Months' Data	Less than 11 months data available to assess Microbiological and Chemical compliance		September data missing, explanation was that the Laboratory was not paid.	0	
	PENALTY (3) Notification Failure	If there is any significant (sustained) failure with no evidence of a Water Quality Alert Notice (Boil Water Notice) being issued, this penalty will apply.			0	



<p style="text-align: center;"><b>(4)</b></p> <p style="text-align: center;"><b>MANAGEMENT, ACCOUNTABILITY, &amp; LOCAL REGULATION</b></p> <p style="text-align: center;"><b>10</b></p>	<p><b>(4.1)</b></p> <p style="text-align: center;"><b>MANAGEMENT COMMITMENT</b></p>	<p>Management's commitment to effective Drinking Water Quality Operations and Management should be portrayed by Proof of signature approval of the:</p> <p>a) Water Safety Plan; b) DWQ Monitoring Programme c) Water Treatment Plant Logbook d) Operations and Maintenance Budget e) Water Services Development Plan</p>	<p>&gt; Full Compliance = 100% &gt; 4/5 = 80% &gt; 3/5 = 60% &gt; 2/5 = 40% &gt; 1/5 = 20%</p>	<p>Responsibility of WSP. Kouga WSDP submitted but not signed. Nelson Mandela Bay Metro should be considered by their Inspector Team.</p>	<b>G</b>	
	<p><b>(4.2)</b></p> <p style="text-align: center;"><b>PUBLICATION OF PERFORMANCE</b></p>	<p>Evidence should be provided on the various means of drinking water quality information made public to the constituencies supplied with drinking water from this specific water supply system.</p> <p>Forms of Publication: &gt;Newspaper publication &gt;Municipal Billing &gt;Annual Report &gt;Posters &amp; Pamphlets &gt;Population and Promotion of "My Water" &gt;Electronic Webpage</p> <p>The Water Services Authority must ensure that evidence of adequate marketing of Existing Blue Drop Certified water supply systems are presented during the audit.</p>	<p>&gt; Newspaper publication = 100% (1) &gt; Displayed on municipal Billing = 90% (0.9) &gt; Populating &amp; promoting "My Water" municipal information = 80% (0.8) &gt; Municipal Annual Report + Ward Committee Distribution &amp;/ Posters = 60% (0.6) &gt; Municipal Annual Report = 50% (0.5) &gt; Electronic (Web-page) Information = 40% (0.4) &gt; Should the municipality utilise two or more means of communication, 100% scoring will apply (1) &gt; Should it be a water supply system that is currently Blue Drop Certified, and no evidence can be given of Blue Drop marketing/awareness, a full score cannot be applied. Maximum score = 80% (0.8)</p>	<p>Public were made aware of the BD Report on Kouga website, printed on bill. Failure alerts are being communicated through radio medium. Breakage of pumps, announced that water carts with haylow, have public liaison officer,</p>	<b>A+</b>	
	<p><b>(4.3)</b></p> <p style="text-align: center;"><b>SERVICE LEVEL AGREEMENT/ PERFORMANCE AGREEMENT</b></p>	<p>Should there be a institutional arrangement between Water Services Authority and Water Services Provider the it is essential that the legislatively required contract stipulate Service Level Agreements between the two entities. A copy of this document is required.</p> <p><b>OR</b></p> <p>Should the Water Services Authority fulfil the function of Water Services Provider as per Section 78 arrangements, then it is required that the responsible manager (official) have a Performance Agreement (Workpla) in place which stipulates Drinking Water Quality Management Responsibilities.</p>	<p>Fully complying = 100% &gt; Agreement in-place but with minor shortcomings = 0.75 &gt;Agreement in place but with significant Shortcomings = 0.5</p>	<p>A Bulk Water Supply and Purchase agreement is in draft with Nelson Mandela Bay Metro, not signed. This need to be referred to Legal (Contracts, MZ) to assist the finalisation process</p>	<b>G</b>	
	<p><b>(4.4)</b></p> <p style="text-align: center;"><b>SUBMISSION OF DWQ DATA</b></p>	<p>a) 12 months of data submitted on the Blue Drop System (BDS). WSI's must ensure that 12 months' sets of results are recorded on the BDS (DWA will only consider data available on the BDS) b) Note: All Compliance Monitoring test results are required to be submitted.</p>	<p>&gt; 12 months = 100% (1) &gt; 11 months = 50% (0.5) &gt; 10 months = 20% (0.2) &gt; &lt;10months = 0% (0)</p>		<b>G</b>	
	<p><b>Bonus:</b> Publication of Performance</p>	<p>Availing information on Drinking Water to relevant public in 3 or more forms listed.</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p><b>Bonus:</b> Performance Agreement</p>	<p>Workplans of Process Controllers aligned to Operations and Maintenance Manual</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p><b>Penalty:</b> Submission of DWQ Data</p>	<p>Penalty will apply should the Department find proof during / post assessment that the WSI are guilty of an offence as per Section 82 of the Water Services Act, by only submitting partial information in order to present a false impression of DWQ Performance and/or compliance.</p>			<b>0</b>	
	<p><b>(5)</b></p> <p style="text-align: center;"><b>ASSET MANAGEMENT</b></p>	<p><b>(5.1)</b></p> <p style="text-align: center;"><b>ANNUAL PROCESS AUDIT</b></p>	<p>Process Audit Report on technical inspection/assessment of treatment facility and evidence of implementation of findings This process assessment should've been done within the 12-month assessment period</p>	<p>&gt; Fully complying (Technical report in-place and findings implementation proof/plan provided = 1 &gt; Report in place with evidence of findings implementation but with shortcomings = 0.75 &gt; Only Technical Report in-place = 0.5 &gt; A report is in place but with shortcomings = 0.25</p>	<p>Responsibility of Nelson Mandela Bay Metro as WSP</p>	

<b>15</b>	<b>(5.2)</b> <b>ASSET REGISTER</b>	The Institution must present a complete Asset Register. The asset register must : <b>a)</b> detail relevant equipment and infrastructure <b>b)</b> indicate asset description <b>c)</b> location <b>d)</b> condition (remaining life) <b>e)</b> replacement value	> Full score (1) for proof of adequate Asset Register >comply with 4/5 = 0.8 >comply with 3/5 = 0.6 >comply with 2/5 = 0.4 >comply with 1/5 = 0.2 <b>OR</b> > If only a list of assets = 0.2	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	<b>G</b>
	<b>(5.3)</b> <b>AVAILABILITY &amp; COMPETENCE OF MAINTENANCE TEAM</b>	<b>a)</b> The Institution must present evidence of a competent Maintenance Team (in form of Organogram; Contract or Invoice). Logbook with maintenance entries will serve as adequate evidence. <b>b)</b> Additional prove required on team competency (e.g. Qualification & Experience & Trade-test)	>Fully complying = 100% > Only complying with <b>(a)</b> = 0.6 > Only complying with <b>(b)</b> = 0.5	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.4)</b> <b>OPERATIONS &amp; MAINTENANCE MANUAL</b>	O&M manual to contain: <b>a)</b> civil, mechanical, electrical detail of plant, <b>b)</b> design capacity of plant, <b>c)</b> reference to drawings, <b>d)</b> operational schedules, maintenance schedules, <b>e)</b> process detail and control, <b>f)</b> instrumentation specification/type, <b>g)</b> fault finding, <b>h)</b> monitoring, <b>i)</b> pump curves, <b>g)</b> supportive appendices	> Fully complying = 100% > Complying with 9/10 = 90% > Complying with 8/10 = 80% > Complying with 7/10 = 70% > Complying with 6/10 = 60% > Complying with 5/10 = 50% > Complying with 4/10 = 40% > Complying with 3/10 = 30% > Complying with 2/10 = 20% > Complying with 1/10 = 10%  The inspector may deduct points for other shortcomings identified in the document. Should there be reason to believe that the document is a "cut & paste" job then a full score shall not apply (at most 75%)	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.5)</b> <b>OPERATIONS &amp; MAINTENANCE BUDGET AND EXPENDITURE</b>	The Institution must present credible evidence of: <b>a)</b> Maintenance Budget (as part of Operations Budget) <b>b)</b> Maintenance Expenditure (as part of the Operations Expenditure) <b>c)</b> Maintenance Expenditure should be more than 5% of the Operations Expenditure in Total for the preceding Financial Year.	> Fully complying = 100% > With available info expenditure percentage must be calculated; if less than 5% = 0.6 > Only complying with <b>(a)</b> = 0.4	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.6)</b> <b>DESIGN CAPACITY vs.. OPERATIONAL CAPACITY</b>	Proof to be submitted of the documented design capacity and documented daily operating capacity over the past 12 months Groundwater dependant systems must have an acceptable plan which stipulates abstraction patterns that will prevent aquifer damage Flow meters must be calibrated at least annually	> 1 = evidence of verified plant capacity/aquifer utilisation plan + daily flow measurements + calibrated flow meters + peak flows under design capacity. > 0.75 = evidence of verified plant capacity + daily	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	

95% - 100%	<b>A+</b>
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 water affairs Department Water Affairs REPUBLIC OF SOUTH AFRICA		St Francis Bay			 blue drop CERTIFICATION <small>drinking water quality REGULATION</small>	
Name of Water Treatment Facility or Facilities		Churchill Bulk supply pipeline from NMBMM	Names of City/Towns/Villages served	St. Francis Bay, Cape St. Francis, Sea Vista	Design Capacity (M/d) (Or Yield if Borehole) <i>(If more than one plant list combined volumes) (If supplied by bulk provider, please state SLA daily volume)</i>	0 Ml/d
Type of Process Technology applied at the plant/s		Type of technology applied	Pumping, Filtration & Chlorination		Annual Average production (Operational) (M/d)	
		If you selected "other" or "special treatment, please explain.	Not applicable		Peak Production on any day (M/d)	0 Ml/d
Location (Coordinates) S		Name of River or impoundment (if surface water)	Chrchill Pipeline		Reported Water Losses (%)	0
E		Population Number Served by Supply System	2,341		Assessor's comment for Noting	
Name of 1st WSP involved in system	None	Role of first WSP? Quantative information please.	Not applicable		Bulk connection off the Churchill pipeline. All water demand comes from the metro. regulated by control demand system	
Name of 2nd WSP involved in system	None	Role of second WSP? Quantative information please	Not applicable			
Name of 3rd WSP involved in system	None	Role of third WSP? Quantitative information please	Not applicable			
Blue Drop Criteria	Requirements	Sub-Requirements	Scoring Information	Assessor's Comment	Score	Final Score
(1) WATER SAFETY PLANNING	(1.1) WATER SAFETY PLANNING PROCESS	<p>a.) The Water Safety Planning Process is steered by a group of people which includes the technical, financial and management staff of the municipality. Where a WSP arrangement exist the WSA and WSP should partake in this process.</p> <p>b.) There should be clear indication that the water services institution conducted a water safety planning process and not only drafted a document.</p> <p>c.) There should be clear reference to the specific water supply system at hand and not only global risk management measurements put in place.</p>	<p>&gt;Fully complying = 100%</p> <p>&gt; Complying only with B&amp;C = 0.7</p> <p>&gt; Complying only with A&amp;C = 0.6</p> <p>&gt; Complying only with A&amp;B = 0.5</p> <p>&gt; Complying only with one of the sub-requirements = 0.3</p>	<p>WSP 2 years ago compiled. Acknowledge that not all aspects are covered in WSP. It is a combined process for all systems and not specific. Risk assessment was done separately. Funding is a problem to appoint service providers to do the WSPP. The Water Services Manager confirmed that it was a desktop study. Thus no scoring could be achieved for this sub-criteria.</p> <p>ModComm: NMM will assessed seprately and and reported as such but will be used to amalgamate the weighted score for final score determination subsequent to Confirmation Assessment for this entire system.</p>	G	
	(1.2) RISK ASSESSMENT	<p>a.) The Risk Assessment must cover both treatment and reticulation .</p> <p>b.) The Water Services Institution (WSI) must provide information on findings of the Risk Assessment (and detail Risk Prioritisation method followed) for the specific water supply system including water resource quality. Format not important but it should be proven not to be a desktop study.</p> <p>c.) The Water Safety Planning process must include (adequate) Control Measures for each significant hazard or hazardous event identified.</p> <p>d.) A Water Quality Risk Assessment conducted for at least 80% of the SANS 241 list of determinands. This is to verify whether treatment technology is adequate to treat the raw water to comply with national standard level.</p>	<p>&gt; 100% complying with Requirement = 1</p> <p>&gt; Fully complying with process but not covering 1 risk element identified = 0.9</p> <p>&gt; Fully complying with process but not covering 2 or more risk elements identified = 0.8</p> <p>&gt; lacking control measures for which there is no plan in place =0.7</p> <p>&gt; WSP does not cover 1 of the following elements: Catchment, Treatment Works or Reticulation Risks = 0.6</p> <p>&gt; Partially complying with process in two elements and then not covering 2 or more risk elements identified = 0.5</p> <p>&gt; Further deduct points for: Risk Prioritisation not indicated = -0.2</p> <p>Full SANS 241 Analyses not included as part of the Risk Assessment = -0.2</p> <p>For any other major shortcoming identified = -0.2</p>	<p>Risk assessment was not done according to the sub-criteria specified thus no scoring can be given here</p>	G	
35						



	RISK-BASED MONITORING PROGRAMME	1.3)	<p>a.) Prove <b>Operational Monitoring</b> is:</p> <p>i) Informed by the Risk Assessment</p> <p>ii) Required sites to monitor: Raw water, after filtration (per process unit) and final water.</p> <p>iii) Determinands: pH, turbidity and disinfectant residual</p> <p>iv) Frequency of analyses: at least once per shift (i.e. every 8 hours)</p> <p>v) Equipment used + Evidence of calibration (or any other means of ensuring credible readings for the past 3 years).</p>	<p>&gt; Fully complying = 100%</p> <p>&gt; Complying with 4/5 = 0.8</p> <p>&gt; Complying with 3/5 = 0.6</p> <p>&gt; Complying with 2/5 = 0.4</p> <p>&gt; Complying with 1/5 = 0.2</p> <p>Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.</p>	Operational monitoring not informed by the risk assessment. The analysis is currently not done consistently. They do testing and some credit will be given here. It is concerning and this should be noted that the monitoring sheets were only introduced recently and it is generalised at all the Works. No calibration certificates could be made available during the assessment.	E	G
		<p>b.) Prove <b>Compliance Monitoring</b> is:</p> <p>i) Informed by the Risk Assessment.</p> <p>ii) Monitoring programme is registered on BDS.</p> <p>iii) Actual monitoring occur according to registered BDS monitoring programme (80%).</p> <p>iv) Required sites monitored: Water works final &amp; distribution network +</p> <p>Frequency of analyses: Water works final according SANS 241; distribution monthly.</p> <p>v) Coverage of population served must at least be 80%</p>	<p>&gt; Fully complying = 100%</p> <p>&gt; Complying with 4/5 = 0.8</p> <p>&gt; Complying with 3/5 = 0.6</p> <p>&gt; Complying with 2/5 = 0.4</p> <p>&gt; Complying with 1/5 = 0.2</p> <p>Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.</p>	Compliance monitoring not informed by the Risk Assessment. Programme is registered on BDS, monitoring done at final water at works only, not covering 80% population	E		
	CREDIBILITY OF DWQ DATA	1.4)	<p>a) Certificate of Accreditation for applicable methods OR Z-scores results (z-scores must be <math>\geq -2</math> &amp; <math>\leq 2</math> are acceptable) in a recognised Proficiency Testing Scheme.</p> <p>b) DWQ Data credibility on the BDS (Blue Drop Certified Data)</p>	<p>Complying with both requirements = 100%</p> <p>Comply only with (a) = 0.6</p> <p>Complying only with (b) more than 80% = 0.6</p> <p>Complying only with (b) &gt;60% &lt;80% = 0.4</p>	Making use of National health Laboratory Services and data on BDS BD certified. This is questionable since the lab is for medical testing. ?????	E	
	INCIDENT MANAGEMENT	1.5)	<p><b>Protocol to specify:</b></p> <p>(1) alert levels,</p> <p>(2) response times,</p> <p>(3) required actions,</p> <p>(4) roles &amp; responsibilities,</p> <p>(5) communication vehicles and</p> <p>(6) must include response on possible risks identified in the Risk Assessment of the Water Safety Planning process</p> <p><b>Incident Register to include :</b></p> <p>(7) Date, location and description of incident</p> <p>(8) Action taken and date of resolution</p> <p>(9) Outcome of cause investigation</p>	<p>&gt; Fully complying = 1</p> <p>&gt; Complying with 8 of the 9 requirements = 0.9</p> <p>&gt; Complying with 7 of the 9 requirements = 0.85</p> <p>&gt; Complying with 6 of the 9 requirements = 0.75</p> <p>&gt; Complying with 5 or 4 of the 9 requirements = 0.5</p> <p>&gt; Complying with 3 or 2 of the 9 requirements = 0.25</p> <p>&gt; Complying with 1 of the 9 requirements = 0.15</p>	Lack of communication between DoH and Kouga when failures occur. EHO officials are reluctant to resample after failure. Reg have a problem with the communication of failures between DoH and Kouga. Reg will include DoH in their incident management protocol. Incident management protocol only started about a month ago. Failure in November was communicated by word of mouth but no paper trail available to confirm this.	G	
	SAMPLER'S BONUS:		<p>To be eligible for this bonus, WSI's must provide proof of training of samplers or Sampling Quality Control measures (Name the Sampling Training Course, Duration, Service Provider, and detail of Attendees)</p> <p>1) Evidence of relevant sampling training that will ensure credibility of the sampling process; or</p> <p>2) Evidence of control measures to ensure sampling credibility</p>	<p>&gt;Complying with both requirements = 100%</p> <p>&gt;Complying with only 1 = 0.75</p> <p>&gt; If measures are in place but not fully effective then score = 0.5</p>	No proof was submitted for samplers training. Sampling is done by EHO's. the PCs received training only on the use of the Hach equipment. No bonus is thus given.	0	
10	(2) DWQ PROCESS MANAGEMENT & CONTROL	(2.1) WORKS CLASSIFICATION COMPLIANCE	Works classified according to Regulation 2834 requirements. Evidence uploaded on BDS or Copy presented at the assessment.	> Compliance = 100%	NA. Bulk Water Supplied by Nelson Mandela Metro	G	G
		(2.2) PROCESS CONTROL REGISTRATION COMPLIANCE	<p>a) Process Controllers must be Registered according to Regulation 2834.</p> <p>b) The Process Controllers' Classification is complying with legislative requirements i.t.o.:</p> <p>i) Number of process Controllers</p> <p>ii) Complying with the required Classification levels.</p> <p>c) The Supervisor must comply with legislative requirements.</p>	<p>&gt; Fully complying = 100%</p> <p>&gt; Complying with all requirements for more than 70% of the Process Controllers = 70%</p> <p>&gt; All PCs registered but &gt;50% &lt;70% PCs complying with standards = 60%.</p> <p>&gt; Supervisor not complying but most PCs complying = 50%.</p> <p>&gt; Only Supervisor complying = 50%.</p>	NA. Bulk Water Supplied by Nelson Mandela Metro	G	

	(2.3) AVAILABILITY OF WATER TREATMENT WORKS LOGBOOK	a) A logbook is in place to record all incidents at the water treatment works. b) Evidence is presented that the logbook process is being implemented. (It is NOT required to be implemented for the entire assessment period)	> Fully complying = 100% > Complying only with a) = 70%	NA. Bulk Water Supplied by Nelson Mandela Metro	G	G
	PROCESS CONTROL BONUS	BONUS: Proof of Process Controller staff being subjected to relevant training the past 12 months	Name the Process Controlling Training Course, Duration, Service Provider, detail of Attendees > All information provided (>50% of PC staff subjected to training) = 1 > All information except accreditation (<50% of PC staff subjected to training) = 0,5 > Zero score if any other evidence is lacking	NA. Bulk Water Supplied by Nelson Mandela Metro	0	
30	(3.1.1) DWQ COMPLIANCE (MICROBIOLOGICAL)	The Microbiological Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	>100 000 population served by the water supply system: 99% Microbiological Compliance =100% (1) ≥98 <99% micro compliance = 75% (0.75) ≥97 <98% micro compliance = 50% (0.5) ≥96 <97% micro compliance = 30% (0.3) <96% micro compliance = 0% (0) <100 000 population served by the water supply system: 97% Compliance =100% (1) ≥96 < 97% micro compliance = 75% (0.75) ≥95 < 96% micro compliance = 50% (0.5) ≥94 < 95% micro compliance = 30% (0.3) <94% micro compliance = 0% (0)	94.2 . E. coli as preferred determinand.	F	D
	(3.1.2) DWQ COMPLIANCE (CHEMICAL)	The Chemical Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme. a) Chemical - Acute Health: - Excellent Comp. (97% for <100 000) & (99% for >100 000) - Good Compliance (95% for 100 000) & (97% for >100 000) b) Chemical - Chronic Health: -Excellent Compliance (95% for <100 000) & (97% for 100 000) -Good Compliance (93% for <100 000) & (95% for 100 000)	>Excellence Compliance on both = 100% > Excellence in (a) & Good in (b) = 0.8 >Excellence in (b) and Good in (a) = 0.7 >Good compliance in both categories = 0.6 >Good compliance in (a) only = 0.4 >Good compliance in (b) only = 0.3	99.9 compliance	A+	
	(3.2) RISK REFINED COMPLIANCE	The Compliance of all Determinands identified during the Risk Assessment Process to be included in the risk-defined monitoring programme, must comply with the requirements set in the SANS 241. a) Excellent Compliance (95% for <100 000 & 97% for >100 000) b) Good Compliance (93% for <100 000 & 95% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	No risk assessment based monitoring	G	
	(3.3) OPERATIONAL EFFICIENCY INDEX	The compliance of operational determinands as monitored at the Final Water sampling point must comply with the SANS 241 Requirements. a) Excellent Compliance (93% for <100 000 & 95% for >100 000) b) Good Compliance (90% for <100 000 & 93% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	There were some failures reported thus a full score cannot be awarded.	C	
	PENALTY (1): Data Difference	Should there be a difference between data available on BDS and that which is presented in hardcopy for verification the penalty will apply.		Data was verified as correct based on random comparison between the hard copy and the uploaded data.	0	
	PENALTY (2): <11 Months' Data	Less than 11 months data available to assess Microbiological and Chemical compliance		September data missing, explanation was that the Laboratory was not paid.	0	
	PENALTY (3) Notification Failure	If there is any significant (sustained) failure with no evidence of a Water Quality Alert Notice (Boil Water Notice) being issued, this penalty will apply.			0	

<p style="text-align: center;"><b>(4)</b></p> <p style="text-align: center;"><b>MANAGEMENT, ACCOUNTABILITY, &amp; LOCAL REGULATION</b></p> <p style="text-align: center;"><b>10</b></p>	<p style="text-align: center;"><b>(4.1)</b></p> <p style="text-align: center;"><b>MANAGEMENT COMMITMENT</b></p>	<p>Management's commitment to effective Drinking Water Quality Operations and Management should be portrayed by Proof of signature approval of the:</p> <p>a) Water Safety Plan; b) DWQ Monitoring Programme c) Water Treatment Plant Logbook d) Operations and Maintenance Budget e) Water Services Development Plan</p>	<p>&gt; Full Compliance = 100% &gt; 4/5 = 80% &gt; 3/5 = 60% &gt; 2/5 = 40% &gt; 1/5 = 20%</p>	<p>Responsibility of WSP. Kouga WSDP submitted but not signed. Nelson Mandela Bay Metro should be considered by their Inspector Team.</p>	<b>G</b>	<b>F</b>
	<p style="text-align: center;"><b>(4.2)</b></p> <p style="text-align: center;"><b>PUBLICATION OF PERFORMANCE</b></p>	<p>Evidence should be provided on the various means of drinking water quality information made public to the constituencies supplied with drinking water from this specific water supply system.</p> <p>Forms of Publication: &gt;Newspaper publication &gt;Municipal Billing &gt;Annual Report &gt;Posters &amp; Pamphlets &gt;Population and Promotion of "My Water" &gt;Electronic Webpage</p> <p>The Water Services Authority must ensure that evidence of adequate marketing of Existing Blue Drop Certified water supply systems are presented during the audit.</p>	<p>&gt; Newspaper publication = 100% (1) &gt; Displayed on municipal Billing = 90% (0.9) &gt; Populating &amp; promoting "My Water" municipal information = 80% (0.8) &gt; Municipal Annual Report + Ward Committee Distribution &amp;/ Posters = 60% (0.6) &gt; Municipal Annual Report = 50% (0.5) &gt; Electronic (Web-page) Information = 40% (0.4) &gt; Should the municipality utilise two or more means of communication, 100% scoring will apply (1) &gt; Should it be a water supply system that is currently Blue Drop Certified, and no evidence can be given of Blue Drop marketing/awareness, a full score cannot be applied. Maximum score = 80% (0.8)</p>	<p>Public were made aware of the BD Report on Kouga website, printed on bill. Failure alerts are being communicated through radio medium. Breakage of pumps, announced that water carts with haylow, have public liaison officer,</p>	<b>A+</b>	
	<p style="text-align: center;"><b>(4.3)</b></p> <p style="text-align: center;"><b>SERVICE LEVEL AGREEMENT/ PERFORMANCE AGREEMENT</b></p>	<p>Should there be a institutional arrangement between Water Services Authority and Water Services Provider the it is essential that the legislatively required contract stipulate Service Level Agreements between the two entities. A copy of this document is required.</p> <p><b>OR</b></p> <p>Should the Water Services Authority fulfil the function of Water Services Provider as per Section 78 arrangements, then it is required that the responsible manager (official) have a Performance Agreement (Workpla) in place which stipulates Drinking Water Quality Management Responsibilities.</p>	<p>Fully complying = 100% &gt; Agreement in-place but with minor shortcomings = 0.75 &gt;Agreement in place but with significant Shortcomings = 0.5</p>	<p>A Bulk Water Supply and Purchase agreement is in draft with Nelson Mandela Bay Metro, not signed. This need to be referred to Legal (Contracts, MZ) to assist the finalisation process</p>	<b>G</b>	
	<p style="text-align: center;"><b>(4.4)</b></p> <p style="text-align: center;"><b>SUBMISSION OF DWQ DATA</b></p>	<p>a) 12 months of data submitted on the Blue Drop System (BDS). WSI's must ensure that 12 months' sets of results are recorded on the BDS (DWA will only consider data available on the BDS) b) Note: All Compliance Monitoring test results are required to be submitted.</p>	<p>&gt; 12 months = 100% (1) &gt; 11 months = 50% (0.5) &gt; 10 months = 20% (0.2) &gt; &lt;10months = 0% (0)</p>		<b>G</b>	
	<p style="text-align: center;"><b>Bonus:</b> Publication of Performance</p>	<p>Availing information on Drinking Water to relevant public in 3 or more forms listed.</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p style="text-align: center;"><b>Bonus:</b> Performance Agreement</p>	<p>Workplans of Process Controllers aligned to Operations and Maintenance Manual</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p style="text-align: center;"><b>Penalty:</b> Submission of DWQ Data</p>	<p>Penalty will apply should the Department find proof during / post assessment that the WSI are guilty of an offence as per Section 82 of the Water Services Act, by only submitting partial information in order to present a false impression of DWQ Performance and/or compliance.</p>			<b>0</b>	
	<p style="text-align: center;"><b>(5)</b></p> <p style="text-align: center;"><b>ASSET MANAGEMENT</b></p>	<p style="text-align: center;"><b>(5.1)</b></p> <p style="text-align: center;"><b>ANNUAL PROCESS AUDIT</b></p>	<p>Process Audit Report on technical inspection/assessment of treatment facility and evidence of implementation of findings This process assessment should've been done within the 12-month assessment period</p>	<p>&gt; Fully complying (Technical report in-place and findings implementation proof/plan provided = 1 &gt; Report in place with evidence of findings implementation but with shortcomings = 0.75 &gt; Only Technical Report in-place = 0.5 &gt; A report is in place but with shortcomings = 0.25</p>	<p>Responsibility of Nelson Mandela Bay Metro as WSP</p>	

<b>15</b>	<b>(5.2)</b> <b>ASSET REGISTER</b>	The Institution must present a complete Asset Register. The asset register must : <b>a)</b> detail relevant equipment and infrastructure <b>b)</b> indicate asset description <b>c)</b> location <b>d)</b> condition (remaining life) <b>e)</b> replacement value	> Full score (1) for proof of adequate Asset Register >comply with 4/5 = 0.8 >comply with 3/5 = 0.6 >comply with 2/5 = 0.4 >comply with 1/5 = 0.2 <b>OR</b> > If only a list of assets = 0.2	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	<b>G</b>
	<b>(5.3)</b> <b>AVAILABILITY &amp; COMPETENCE OF MAINTENANCE TEAM</b>	<b>a)</b> The Institution must present evidence of a competent Maintenance Team (in form of Organogram; Contract or Invoice). Logbook with maintenance entries will serve as adequate evidence. <b>b)</b> Additional prove required on team competency (e.g. Qualification & Experience & Trade-test)	>Fully complying = 100% > Only complying with <b>(a)</b> = 0.6 > Only complying with <b>(b)</b> = 0.5	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.4)</b> <b>OPERATIONS &amp; MAINTENANCE MANUAL</b>	O&M manual to contain: <b>a)</b> civil, mechanical, electrical detail of plant, <b>b)</b> design capacity of plant, <b>c)</b> reference to drawings, <b>d)</b> operational schedules, maintenance schedules, <b>e)</b> process detail and control, <b>f)</b> instrumentation specification/type, <b>g)</b> fault finding, <b>h)</b> monitoring, <b>i)</b> pump curves, <b>g)</b> supportive appendices	> Fully complying = 100% > Complying with 9/10 = 90% > Complying with 8/10 = 80% > Complying with 7/10 = 70% > Complying with 6/10 = 60% > Complying with 5/10 = 50% > Complying with 4/10 = 40% > Complying with 3/10 = 30% > Complying with 2/10 = 20% > Complying with 1/10 = 10%  The inspector may deduct points for other shortcomings identified in the document. Should there be reason to believe that the document is a "cut & paste" job then a full score shall not apply (at most 75%)	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.5)</b> <b>OPERATIONS &amp; MAINTENANCE BUDGET AND EXPENDITURE</b>	The Institution must present credible evidence of: <b>a)</b> Maintenance Budget (as part of Operations Budget) <b>b)</b> Maintenance Expenditure (as part of the Operations Expenditure) <b>c)</b> Maintenance Expenditure should be more than 5% of the Operations Expenditure in Total for the preceding Financial Year.	> Fully complying = 100% > With available info expenditure percentage must be calculated; if less than 5% = 0.6 > Only complying with <b>(a)</b> = 0.4	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.6)</b> <b>DESIGN CAPACITY vs.. OPERATIONAL CAPACITY</b>	Proof to be submitted of the documented design capacity and documented daily operating capacity over the past 12 months Groundwater dependant systems must have an acceptable plan which stipulates abstraction patterns that will prevent aquifer damage Flow meters must be calibrated at least annually	> 1 = evidence of verified plant capacity/aquifer utilisation plan + daily flow measurements + calibrated flow meters + peak flows under design capacity. > 0.75 = evidence of verified plant capacity + daily	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	

95% - 100%	<b>A+</b>
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 water affairs Department: Water Affairs REPUBLIC OF SOUTH AFRICA		Thornhill			 blue drop CERTIFICATION drinking water quality REGULATION	
Name of Water Treatment Facility or Facilities		Summit Chelsea Pipeline NMBMM	Names of City/Towns/Villages served	Thornhill	Design Capacity (M/d) (Or Yield if Borehole) (If more than one plant list combined volumes) (If supplied by bulk provider, please state SLA daily volume)	0 M/d
Type of Process Technology applied at the plant/s		Type of technology applied	Pumping, Filtration & Chlorination		Annual Average production (Operational) (M/d)	
		If you selected "other" or "special treatment, please explain.	Not applicable		Peak Production on any day (M/d)	0 M/d
Location (Coordinates) S			Name of River or impoundment (if surface water)	Summit Chelsea Pipeline	Reported Water Losses (%)	0
E			Population Number Served by Supply System	1,865	Assessor's comment for Noting	
Name of 1st WSP involved in system		None	Role of first WSP? Quantative information please.	Not applicable		
Name of 2nd WSP involved in system		None	Role of second WSP? Quantative information please	Not applicable		
Name of 3rd WSP involved in system		None	Role of third WSP? Quantitative information please	Not applicable		
Blue Drop Criteria	Requirements	Sub-Requirements	Scoring Information	Assessor's Comment	Score	Final Score
(1) WATER SAFETY PLANNING  35	(1.1) WATER SAFETY PLANNING PROCESS	<p>a.) The Water Safety Planning Process is steered by a group of people which includes the technical, financial and management staff of the municipality. Where a WSP arrangement exist the WSA and WSP should partake in this process.</p> <p>b.) There should be clear indication that the water services institution conducted a water safety planning process and not only drafted a document.</p> <p>c.) There should be clear reference to the specific water supply system at hand and not only global risk management measurements put in place.</p>	<p>&gt;Fully complying = 100%</p> <p>&gt; Complying only with B&amp;C = 0.7</p> <p>&gt; Complying only with A&amp;C = 0.6</p> <p>&gt; Complying only with A&amp;B = 0.5</p> <p>&gt; Complying only with one of the sub-requirements = 0.3</p>	<p>WSP 2 years ago compiled. Acknowledge that not all aspects are covered in WSP. It is a combined process for all systems and not specific. Risk assessment was done separately. Funding is a problem to appoint service providers to do the WSPP. The Water Services Manager confirmed that it was a desktop study. Thus no scoring could be achieved for this sub-criteria.</p> <p>ModComm: NMM will assessed seprately and and reported as such but will be used to amalgamate the weighted score for final score determination subsequent to Confirmation Assessment for this entire system.</p>	G	G
	(1.2) RISK ASSESSMENT	<p>a.) The Risk Assessment must cover both treatment and reticulation .</p> <p>b.) The Water Services Institution (WSI) must provide information on findings of the Risk Assessment (and detail Risk Prioritisation method followed) for the specific water supply system including water resource quality. Format not important but it should be proven not to be a desktop study.</p> <p>c.) The Water Safety Planning process must include (adequate) Control Measures for each significant hazard or hazardous event identified.</p> <p>d.) A Water Quality Risk Assessment conducted for at least 80% of the SANS 241 list of determinands. This is to verify whether treatment technology is adequate to treat the raw water to comply with national standard level.</p>	<p>&gt; 100% complying with Requirement = 1</p> <p>&gt; Fully complying with process but not covering 1 risk element identified = 0.9</p> <p>&gt; Fully complying with process but not covering 2 or more risk elements identified = 0.8</p> <p>&gt; lacking control measures for which there is no plan in place =0.7</p> <p>&gt; WSP does not cover 1 of the following elements: Catchment, Treatment Works or Reticulation Risks = 0.6</p> <p>&gt; Partially complying with process in two elements and then not covering 2 or more risk elements identified = 0.5</p> <p>&gt; Further deduct points for: Risk Prioritisation not indicated = -0.2</p> <p>Full SANS 241 Analyses not included as part of the Risk Assessment = -0.2</p> <p>For any other major shortcoming identified = -0.2</p>	<p>Risk assessment was not done according to the sub-criteria specified thus no scoring can be given here</p>	G	



	RISK-BASED MONITORING PROGRAMME	1.3)	<p>a.) Prove <b>Operational Monitoring</b> is:</p> <ul style="list-style-type: none"> <li>i) Informed by the Risk Assessment</li> <li>ii) Required sites to monitor: Raw water, after filtration (per process unit) and final water.</li> <li>iii) Determinands: pH, turbidity and disinfectant residual</li> <li>iv) Frequency of analyses: at least once per shift (i.e. every 8 hours)</li> <li>v) Equipment used + Evidence of calibration (or any other means of ensuring credible readings for the past 3 years).</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Fully complying = 100%</li> <li>&gt; Complying with 4/5 = 0.8</li> <li>&gt; Complying with 3/5 = 0.6</li> <li>&gt; Complying with 2/5 = 0.4</li> <li>&gt; Complying with 1/5 = 0.2</li> </ul> <p>Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.</p>	Operational monitoring not informed by the risk assessment. The analysis is currently not done consistently. They do testing and some credit will be given here. It is concerning and this should be noted that the monitoring sheets were only introduced recently and it is generalised at all the Works. No calibration certificates could be made available during the assessment.	E	G
		<p>b.) Prove <b>Compliance Monitoring</b> is:</p> <ul style="list-style-type: none"> <li>i) Informed by the Risk Assessment.</li> <li>ii) Monitoring programme is registered on BDS.</li> <li>iii) Actual monitoring occur according to registered BDS monitoring programme (80%).</li> <li>iv) Required sites monitored: Water works final &amp; distribution network +</li> <li>Frequency of analyses: Water works final according SANS 241; distribution monthly.</li> <li>v) Coverage of population served must at least be 80%</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Fully complying = 100%</li> <li>&gt; Complying with 4/5 = 0.8</li> <li>&gt; Complying with 3/5 = 0.6</li> <li>&gt; Complying with 2/5 = 0.4</li> <li>&gt; Complying with 1/5 = 0.2</li> </ul> <p>Should there be any other shortcoming identified during the assessment a further -0.2 will apply with good motivation.</p>	Compliance monitoring not informed by the Risk Assessment. Programme is registered on BDS, monitoring done at final water at works only, not covering 80% population	E		
	CREDIBILITY OF DWQ DATA	1.4)	<p>a) Certificate of Accreditation for applicable methods OR Z-scores results (z-scores must be <math>\geq -2</math> &amp; <math>\leq 2</math> are acceptable) in a recognised Proficiency Testing Scheme.</p> <p>b) DWQ Data credibility on the BDS (Blue Drop Certified Data)</p>	<p>Complying with both requirements = 100%</p> <p>Comply only with (a) = 0.6</p> <p>Complying only with (b) more than 80% = 0.6</p> <p>Complying only with (b) &gt;60% &lt;80% = 0.4</p>	Making use of National health Laboratory Services and data on BDS BD certified. This is questionable since the lab is for medical testing. ?????	G	
	INCIDENT MANAGEMENT	1.5)	<p><b>Protocol to specify:</b></p> <ul style="list-style-type: none"> <li>(1) alert levels,</li> <li>(2) response times,</li> <li>(3) required actions,</li> <li>(4) roles &amp; responsibilities,</li> <li>(5) communication vehicles and</li> <li>(6) must include response on possible risks identified in the Risk Assessment of the Water Safety Planning process</li> </ul> <p><b>Incident Register to include :</b></p> <ul style="list-style-type: none"> <li>(7) Date, location and description of incident</li> <li>(8) Action taken and date of resolution</li> <li>(9) Outcome of cause investigation</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Fully complying = 1</li> <li>&gt; Complying with 8 of the 9 requirements = 0.9</li> <li>&gt; Complying with 7 of the 9 requirements = 0.85</li> <li>&gt; Complying with 6 of the 9 requirements = 0.75</li> <li>&gt; Complying with 5 or 4 of the 9 requirements = 0.5</li> <li>&gt; Complying with 3 or 2 of the 9 requirements = 0.25</li> <li>&gt; Complying with 1 of the 9 requirements = 0.15</li> </ul>	Lack of communication between DoH and Kouga when failures occur. EHO officials are reluctant to resample after failure. Reg have a problem with the communication of failures between DoH and Kouga. Reg will include DoH in their incident management protocol. Incident management protocol only started about a month ago. Failure in November was communicated by word of mouth but no paper trail available to confirm this.	G	
	SAMPLER'S BONUS:			<p>To be eligible for this bonus, WSI's must provide proof of training of samplers or Sampling Quality Control measures (Name the Sampling Training Course, Duration, Service Provider, and detail of Attendees)</p> <ul style="list-style-type: none"> <li>1) Evidence of relevant sampling training that will ensure credibility of the sampling process; or</li> <li>2) Evidence of control measures to ensure sampling credibility</li> </ul>	<ul style="list-style-type: none"> <li>&gt; Complying with both requirements = 100%</li> <li>&gt; Complying with only 1 = 0.75</li> <li>&gt; If measures are in place but not fully effective then score = 0.5</li> </ul>	No proof was submitted for samplers training. Sampling is done by EHO's. the PCs received training only on the use of the Hach equipment. No bonus is thus given.	0
10	(2) DWQ PROCESS MANAGEMENT & CONTROL	(2.1) WORKS CLASSIFICATION COMPLIANCE	Works classified according to Regulation 2834 requirements. Evidence uploaded on BDS or Copy presented at the assessment.	> Compliance = 100%	NA. Bulk Water Supplied by Nelson Mandela Metro	G	G
		(2.2) PROCESS CONTROL REGISTRATION COMPLIANCE	<p>a) Process Controllers must be Registered according to Regulation 2834.</p> <p>b) The Process Controllers' Classification is complying with legislative requirements i.t.o.:</p> <ul style="list-style-type: none"> <li>i) Number of process Controllers</li> <li>ii) Complying with the required Classification levels.</li> </ul> <p>c) The Supervisor must comply with legislative requirements.</p>	<ul style="list-style-type: none"> <li>&gt; Fully complying = 100%</li> <li>&gt; Complying with all requirements for more than 70% of the Process Controllers = 70%</li> <li>&gt; All PCs registered but &gt;50% &lt;70% PCs complying with standards = 60%.</li> <li>&gt; Supervisor not complying but most PCs complying = 50%.</li> <li>&gt; Only Supervisor complying = 50%.</li> </ul>	NA. Bulk Water Supplied by Nelson Mandela Metro	G	

	(2.3) AVAILABILITY OF WATER TREATMENT WORKS LOGBOOK	a) A logbook is in place to record all incidents at the water treatment works. b) Evidence is presented that the logbook process is being implemented. (It is NOT required to be implemented for the entire assessment period)	> Fully complying = 100% > Complying only with a) = 70%	NA. Bulk Water Supplied by Nelson Mandela Metro	F	G
	PROCESS CONTROL BONUS	BONUS: Proof of Process Controller staff being subjected to relevant training the past 12 months	Name the Process Controlling Training Course, Duration, Service Provider, detail of Attendees > All information provided (>50% of PC staff subjected to training) = 1 > All information except accreditation (<50% of PC staff subjected to training) = 0,5 > Zero score if any other evidence is lacking	NA. Bulk Water Supplied by Nelson Mandela Metro	A+	

30 DRINKING WATER QUALITY COMPLIANCE	(3.1.1) DWQ COMPLIANCE (MICROBIOLOGICAL)	The Microbiological Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme.	>100 000 population served by the water supply system: 99% Microbiological Compliance =100% (1) ≥98 <99% micro compliance = 75% (0.75) ≥97 <98% micro compliance = 50% (0.5) ≥96 <97% micro compliance = 30% (0.3) <96% micro compliance = 0% (0) <100 000 population served by the water supply system: 97% Compliance =100% (1) ≥96 < 97% micro compliance = 75% (0.75) ≥95 < 96% micro compliance = 50% (0.5) ≥94 < 95% micro compliance = 30% (0.3) <94% micro compliance = 0% (0)	94.2 . E. coli as preferred determinand.	F	D
	(3.1.2) DWQ COMPLIANCE (CHEMICAL)	The Chemical Quality of water supply must comply with the South African National Standard (SANS241) as per the Excellent Requirements set by the Blue Drop Programme. a) Chemical - Acute Health: - Excellent Comp. (97% for <100 000) & (99% for >100 000) - Good Compliance (95% for 100 000) & (97% for >100 000) b) Chemical - Chronic Health: -Excellent Compliance (95% for <100 000) & (97% for 100 000) -Good Compliance (93% for <100 000) & (95% for 100 000)	>Excellence Compliance on both = 100% > Excellence in (a) & Good in (b) = 0.8 >Excellence in (b) and Good in (a) = 0.7 >Good compliance in both categories = 0.6 >Good compliance in (a) only = 0.4 >Good compliance in (b) only = 0.3	99.9 compliance	A+	
	(3.2) RISK REFINED COMPLIANCE	The Compliance of all Determinands identified during the Risk Assessment Process to be included in the risk-defined monitoring programme, must comply with the requirements set in the SANS 241. a) Excellent Compliance (95% for <100 000 & 97% for >100 000) b) Good Compliance (93% for <100 000 & 95% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	No risk assessment based monitoring	G	
	(3.3) OPERATIONAL EFFICIENCY INDEX	The compliance of operational determinands as monitored at the Final Water sampling point must comply with the SANS 241 Requirements. a) Excellent Compliance (93% for <100 000 & 95% for >100 000) b) Good Compliance (90% for <100 000 & 93% for >100 000)	>Excellence = 100% (1) >Good = 60% (0.6)	There were some failures reported thus a full score cannot be awarded.	C	
	PENALTY (1): Data Difference	Should there be a difference between data available on BDS and that which is presented in hardcopy for verification the penalty will apply.		Data was verified as correct based on random comparison between the hard copy and the uploaded data.	0	
	PENALTY (2): <11 Months' Data	Less than 11 months data available to assess Microbiological and Chemical compliance		September data missing, explanation was that the Laboratory was not paid.	0	
	PENALTY (3) Notification Failure	If there is any significant (sustained) failure with no evidence of a Water Quality Alert Notice (Boil Water Notice) being issued, this penalty will apply.			0	

<p style="text-align: center;"><b>(4)</b></p> <p style="text-align: center;"><b>MANAGEMENT, ACCOUNTABILITY, &amp; LOCAL REGULATION</b></p> <p style="text-align: center;"><b>10</b></p>	<p><b>(4.1)</b></p> <p style="text-align: center;"><b>MANAGEMENT COMMITMENT</b></p>	<p>Management's commitment to effective Drinking Water Quality Operations and Management should be portrayed by Proof of signature approval of the:</p> <p>a) Water Safety Plan; b) DWQ Monitoring Programme c) Water Treatment Plant Logbook d) Operations and Maintenance Budget e) Water Services Development Plan</p>	<p>&gt; Full Compliance = 100% &gt; 4/5 = 80% &gt; 3/5 = 60% &gt; 2/5 = 40% &gt; 1/5 = 20%</p>	<p>Responsibility of WSP. Kouga WSDP submitted but not signed. Nelson Mandela Bay Metro should be considered by their Inspector Team.</p>	<b>G</b>	
	<p><b>(4.2)</b></p> <p style="text-align: center;"><b>PUBLICATION OF PERFORMANCE</b></p>	<p>Evidence should be provided on the various means of drinking water quality information made public to the constituencies supplied with drinking water from this specific water supply system.</p> <p>Forms of Publication: &gt;Newspaper publication &gt;Municipal Billing &gt;Annual Report &gt;Posters &amp; Pamphlets &gt;Population and Promotion of "My Water" &gt;Electronic Webpage</p> <p>The Water Services Authority must ensure that evidence of adequate marketing of Existing Blue Drop Certified water supply systems are presented during the audit.</p>	<p>&gt; Newspaper publication = 100% (1) &gt; Displayed on municipal Billing = 90% (0.9) &gt; Populating &amp; promoting "My Water" municipal information = 80% (0.8) &gt; Municipal Annual Report + Ward Committee Distribution &amp;/ Posters = 60% (0.6) &gt; Municipal Annual Report = 50% (0.5) &gt; Electronic (Web-page) Information = 40% (0.4) &gt; Should the municipality utilise two or more means of communication, 100% scoring will apply (1) &gt; Should it be a water supply system that is currently Blue Drop Certified, and no evidence can be given of Blue Drop marketing/awareness, a full score cannot be applied. Maximum score = 80% (0.8)</p>	<p>Public were made aware of the BD Report on Kouga website, printed on bill. Failure alerts are being communicated through radio medium. Breakage of pumps, announced that water carts with haylow, have public liaison officer,</p>	<b>A+</b>	
	<p><b>(4.3)</b></p> <p style="text-align: center;"><b>SERVICE LEVEL AGREEMENT/ PERFORMANCE AGREEMENT</b></p>	<p>Should there be a institutional arrangement between Water Services Authority and Water Services Provider the it is essential that the legislatively required contract stipulate Service Level Agreements between the two entities. A copy of this document is required.</p> <p><b>OR</b></p> <p>Should the Water Services Authority fulfil the function of Water Services Provider as per Section 78 arrangements, then it is required that the responsible manager (official) have a Performance Agreement (Workpla) in place which stipulates Drinking Water Quality Management Responsibilities.</p>	<p>Fully complying = 100% &gt; Agreement in-place but with minor shortcomings = 0.75 &gt;Agreement in place but with significant Shortcomings = 0.5</p>	<p>A Bulk Water Supply and Purchase agreement is in draft with Nelson Mandela Bay Metro, not signed. This need to be referred to Legal (Contracts, MZ) to assist the finalisation process</p>	<b>G</b>	
	<p><b>(4.4)</b></p> <p style="text-align: center;"><b>SUBMISSION OF DWQ DATA</b></p>	<p>a) 12 months of data submitted on the Blue Drop System (BDS). WSI's must ensure that 12 months' sets of results are recorded on the BDS (DWA will only consider data available on the BDS) b) Note: All Compliance Monitoring test results are required to be submitted.</p>	<p>&gt; 12 months = 100% (1) &gt; 11 months = 50% (0.5) &gt; 10 months = 20% (0.2) &gt; &lt;10months = 0% (0)</p>		<b>G</b>	
	<p><b>Bonus:</b> Publication of Performance</p>	<p>Availing information on Drinking Water to relevant public in 3 or more forms listed.</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p><b>Bonus:</b> Performance Agreement</p>	<p>Workplans of Process Controllers aligned to Operations and Maintenance Manual</p>	<p>Full score or "no" bonus</p>		<b>0</b>	
	<p><b>Penalty:</b> Submission of DWQ Data</p>	<p>Penalty will apply should the Department find proof during / post assessment that the WSI are guilty of an offence as per Section 82 of the Water Services Act, by only submitting partial information in order to present a false impression of DWQ Performance and/or compliance.</p>			<b>0</b>	
	<p style="text-align: center;"><b>(5)</b></p> <p style="text-align: center;"><b>ASSET MANAGEMENT</b></p>	<p><b>(5.1)</b></p> <p style="text-align: center;"><b>ANNUAL PROCESS AUDIT</b></p>	<p>Process Audit Report on technical inspection/assessment of treatment facility and evidence of implementation of findings This process assessment should've been done within the 12-month assessment period</p>	<p>&gt; Fully complying (Technical report in-place and findings implementation proof/plan provided = 1 &gt; Report in place with evidence of findings implementation but with shortcomings = 0.75 &gt; Only Technical Report in-place = 0.5 &gt; A report is in place but with shortcomings = 0.25</p>	<p>Responsibility of Nelson Mandela Bay Metro as WSP</p>	

<b>15</b>	<b>(5.2)</b> <b>ASSET REGISTER</b>	The Institution must present a complete Asset Register. The asset register must : <b>a)</b> detail relevant equipment and infrastructure <b>b)</b> indicate asset description <b>c)</b> location <b>d)</b> condition (remaining life) <b>e)</b> replacement value	> Full score (1) for proof of adequate Asset Register >comply with 4/5 = 0.8 >comply with 3/5 = 0.6 >comply with 2/5 = 0.4 >comply with 1/5 = 0.2 <b>OR</b> > If only a list of assets = 0.2	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	<b>G</b>
	<b>(5.3)</b> <b>AVAILABILITY &amp; COMPETENCE OF MAINTENANCE TEAM</b>	<b>a)</b> The Institution must present evidence of a competent Maintenance Team (in form of Organogram; Contract or Invoice). Logbook with maintenance entries will serve as adequate evidence. <b>b)</b> Additional prove required on team competency (e.g. Qualification & Experience & Trade-test)	>Fully complying = 100% > Only complying with <b>(a)</b> = 0.6 > Only complying with <b>(b)</b> = 0.5	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.4)</b> <b>OPERATIONS &amp; MAINTENANCE MANUAL</b>	O&M manual to contain: <b>a)</b> civil, mechanical, electrical detail of plant, <b>b)</b> design capacity of plant, <b>c)</b> reference to drawings, <b>d)</b> operational schedules, maintenance schedules, <b>e)</b> process detail and control, <b>f)</b> instrumentation specification/type, <b>g)</b> fault finding, <b>h)</b> monitoring, <b>i)</b> pump curves, <b>g)</b> supportive appendices	> Fully complying = 100% > Complying with 9/10 = 90% > Complying with 8/10 = 80% > Complying with 7/10 = 70% > Complying with 6/10 = 60% > Complying with 5/10 = 50% > Complying with 4/10 = 40% > Complying with 3/10 = 30% > Complying with 2/10 = 20% > Complying with 1/10 = 10%  The inspector may deduct points for other shortcomings identified in the document. Should there be reason to believe that the document is a "cut & paste" job then a full score shall not apply (at most 75%)	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.5)</b> <b>OPERATIONS &amp; MAINTENANCE BUDGET AND EXPENDITURE</b>	The Institution must present credible evidence of: <b>a)</b> Maintenance Budget (as part of Operations Budget) <b>b)</b> Maintenance Expenditure (as part of the Operations Expenditure) <b>c)</b> Maintenance Expenditure should be more than 5% of the Operations Expenditure in Total for the preceding Financial Year.	> Fully complying = 100% > With available info expenditure percentage must be calculated; if less than 5% = 0.6 > Only complying with <b>(a)</b> = 0.4	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	
	<b>(5.6)</b> <b>DESIGN CAPACITY vs.. OPERATIONAL CAPACITY</b>	Proof to be submitted of the documented design capacity and documented daily operating capacity over the past 12 months Groundwater dependant systems must have an acceptable plan which stipulates abstraction patterns that will prevent aquifer damage Flow meters must be calibrated at least annually	> 1 = evidence of verified plant capacity/aquifer utilisation plan + daily flow measurements + calibrated flow meters + peak flows under design capacity. > 0.75 = evidence of verified plant capacity + daily	Responsibility of Nelson Mandela Bay Metro as WSP	<b>G</b>	

95% - 100%	<b>A+</b>
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