



Western Cape  
Government

Agriculture

BETTER TOGETHER.

# Western Cape Compulsory Community Service (CCS) Annual Report 2018

Annual Report 2018

Compiled by Dr P.R Monareng and Dr M Oettle

Date: 4 February 2019

Edited by Drs A Parker ,V Henwood

## Introduction

*Disclaimer: This report is published on a quarterly basis for the purpose of providing up-to-date information regarding the activities of the Compulsory Community Service veterinarians in the Western Cape Province. Much of the information is therefore preliminary and should not be cited or utilised for publication.*

The monthly data is a collection of the data provided by the CCS vets in their monthly reports. Full participation of all CCS vets every month would render the most accurate data, however, this unfortunately is never the case as compliance is not 100% throughout the year. Chart 1 and 2 illustrate the degree of compliance across the entire country and specifically the Western Cape.

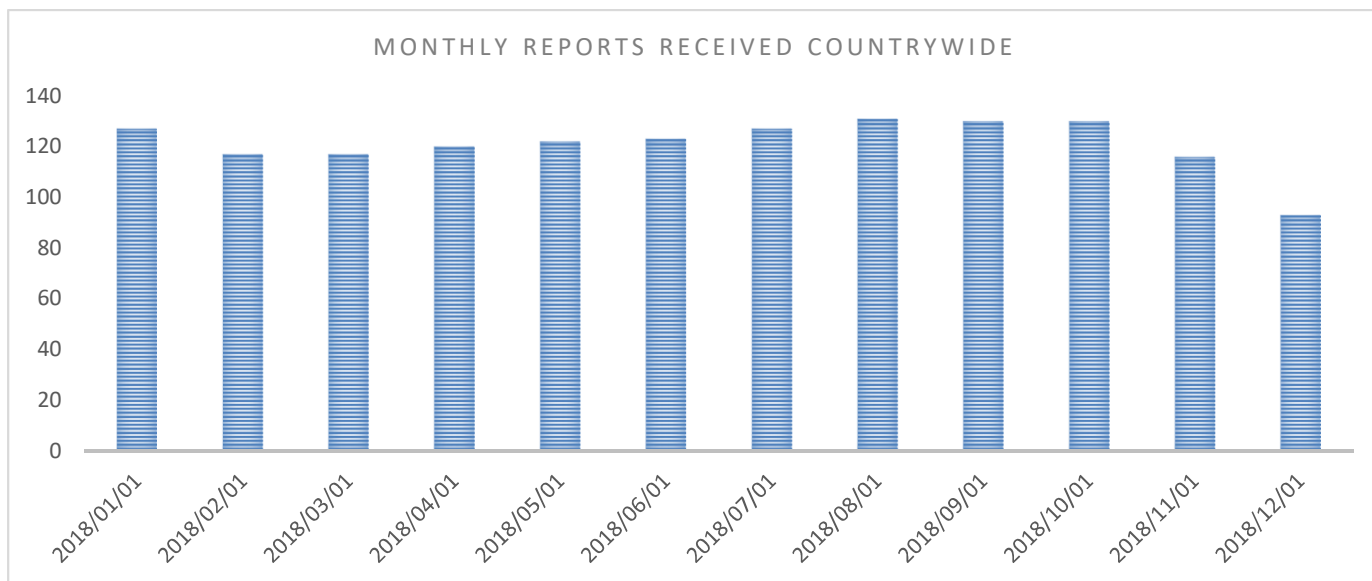


Chart 1: Monthly CCS reports received over the whole country for 2018

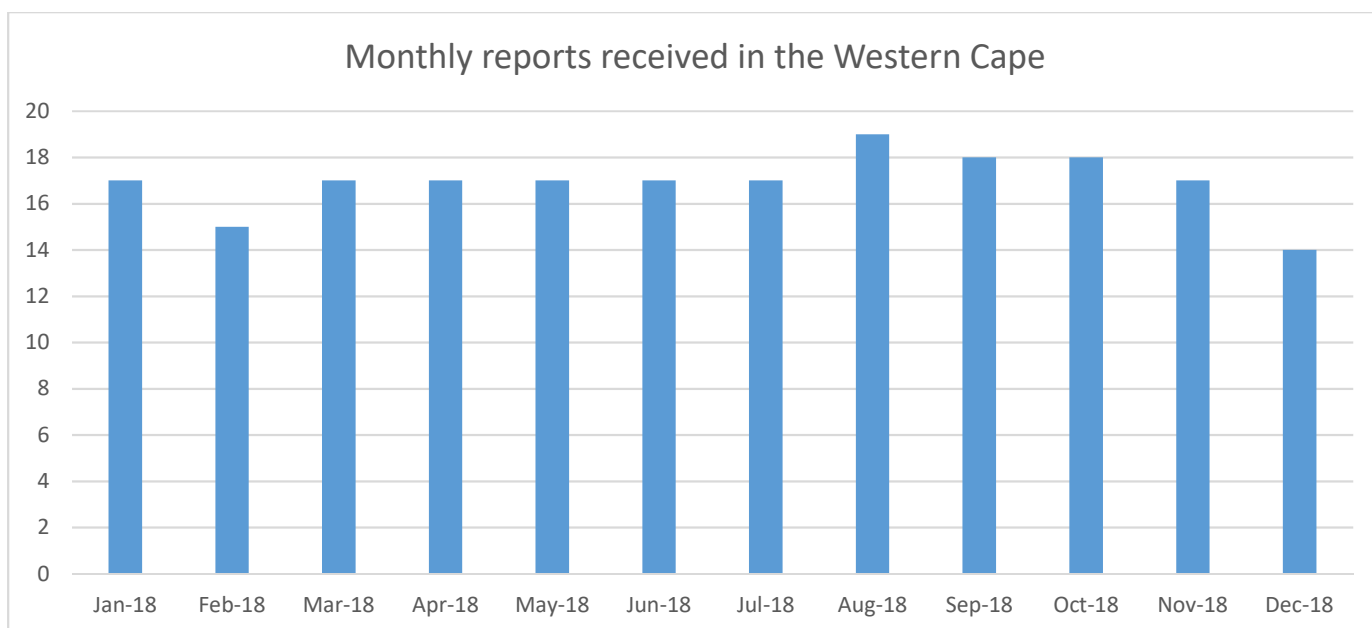


Chart 2: Monthly CCS reports received in the Western Cape in 2018

In the above charts it can be seen that December is a particularly bad month for reports, likely as it is the end of the year, many people take leave and the monthly report gets forgotten.

**Note: In May and June LimeSurvey was down and 2 surveys had to be submitted in July, this might have caused some confusion in the data as some veterinarians did not fill in the June survey.**



*Figure 1: The location of the CCS veterinarians within the Western Cape South Africa in 2018*

16 CCS veterinarians had been seconded to the Western Cape from the Department of Agriculture Forestry and Fisheries (DAFF) for the purpose of completing their Compulsory Community Service (CCS) year in 2018. These 16 veterinary posts can be described as follows:

- There were 6 veterinarians working in the sub-programme **Veterinary Public Health**; 5 stationed at export abattoirs and one stationed at the central office.
- There were 5 veterinarians working in the sub-programme **Animal Health**; 2 are stationed in Beaufort West, 2 in Worcester and one at the Boland state vet office.
- There were 3 veterinarians in the sub-programme **Export Control** assisting with export certification, CCS data management, PAPA licensing and audits for export approval of food producing establishments. All three of these vets spent 50% of their time in dedicated welfare clinics as well; two of these vets were also involved with epidemiology and PAPA licensing.
- There were 2 veterinarians stationed at the Stellenbosch **Provincial Veterinary Laboratory** primarily performing post-mortems and writing reports.
- There were 2 veterinarians stationed full time at **animal welfare** organisations doing primary animal health care and education.

All of the CCS veterinarians stationed within Veterinary Services in the Western Cape also provided primary animal health care and education for part of their time. On average, 50% of their work hours were spent with animal welfares.

## State Veterinary Services



Karlien Botha



Vanessa Salisbury



Bevin Meyer



Kelly Yui

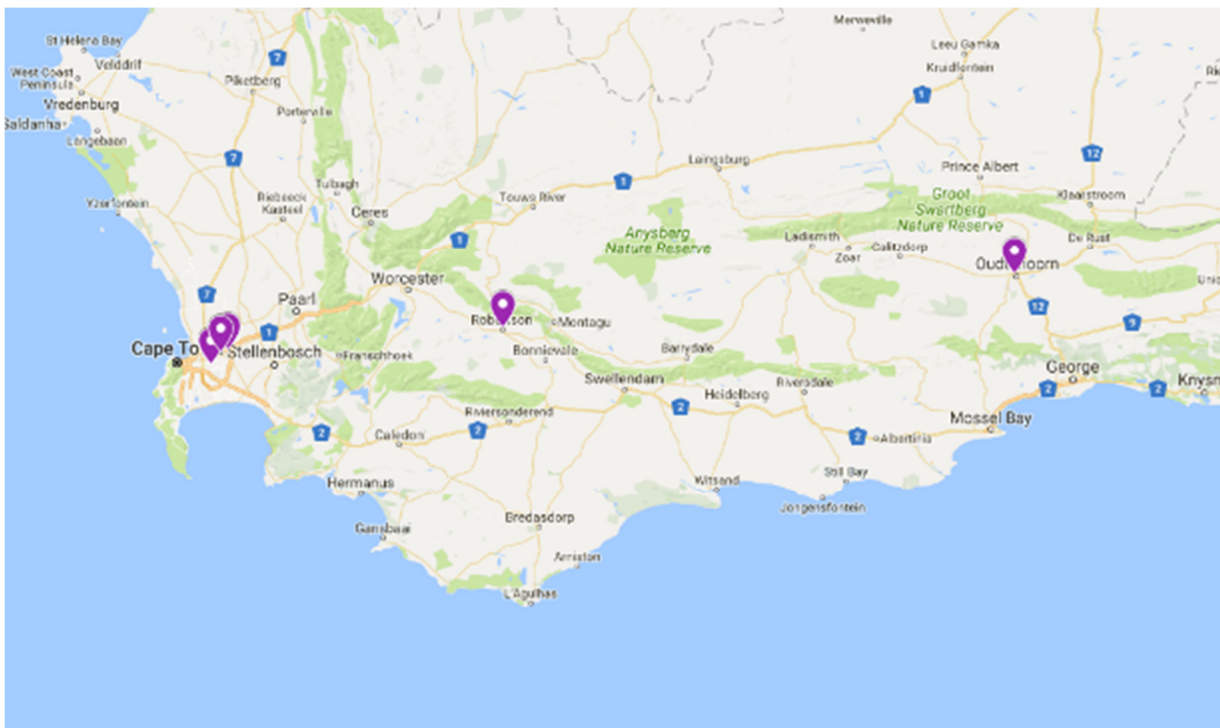


Nicola Scholms



Melissa Sussens

## Veterinary Public Health (VPH)



*Figure 2: location of Veterinary Public Health CCS vet posts in 2018*

The main responsibilities of the veterinarians in the VPH sub-programme were ante-mortem inspections, secondary meat inspections, veterinary supervision of the abattoir and improvement

of meat hygiene and animal welfare through training of abattoir personnel. The veterinarians were stationed at the red meat abattoirs that are export approved. Their presence has improved the accuracy and credibility of export certification to all trading partners of the Western Cape.

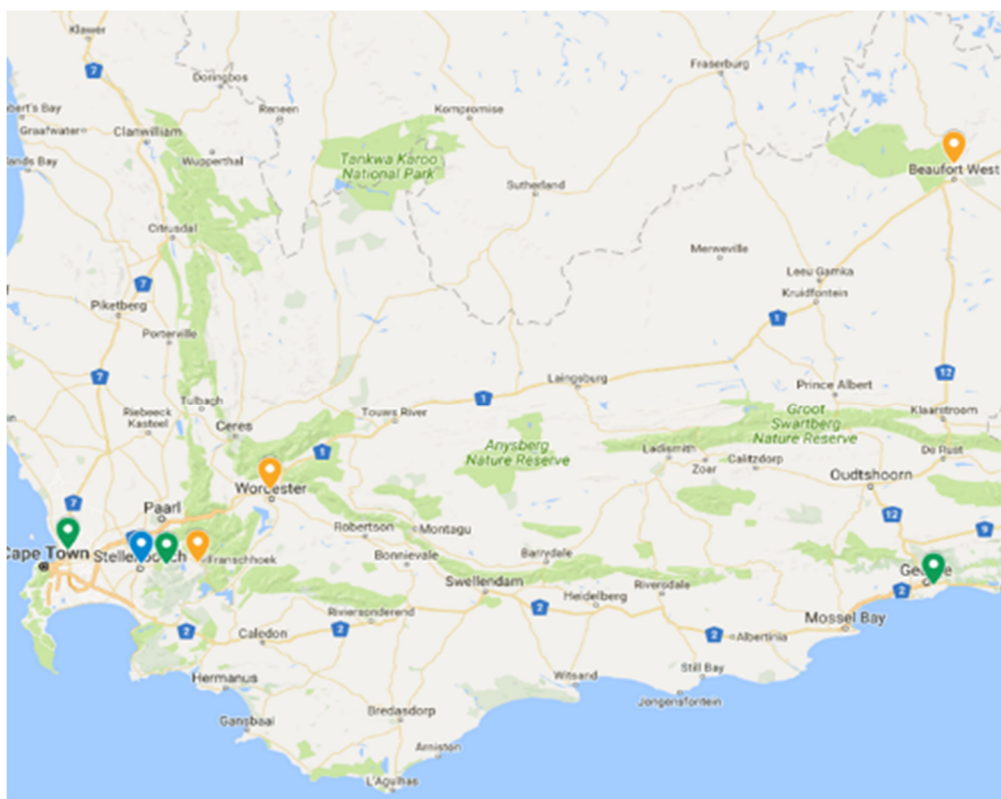
	<b>Detained carcasses inspected</b>	<b>Corrective actions planned or achieved on identified major and critical non-compliances</b>	<b>Abattoir audits/ HASS performed / inspections</b>	<b>Major and critical non-compliances identified</b>	<b>Condemnation certificates issued</b>
<b>Jan-18</b>		2		2	
<b>Feb-18</b>	7	4	1	4	5
<b>Mar-18</b>	5	2	1	2	3
<b>Apr-18</b>	2				1
<b>May-18</b>	1	2	1	8	
<b>Jun-18</b>	1	1		2	1
<b>Jul-18</b>		2	1	4	
<b>Aug-18</b>	1	13	1	14	
<b>Sep-18</b>	1	11	1	6	1
<b>Oct-18</b>		2		4	
<b>Nov-18</b>	1	1		2	
<b>Dec-18</b>		1		2	
<b>Grand Total</b>	<b>19</b>	<b>41</b>	<b>6</b>	<b>50</b>	<b>11</b>

Table 1: Abattoir data from the CCS veterinarians in the Western Cape for 2018

<u>Species</u>	<u>Reason for condemnation</u>
<b>Ostriches</b>	Air sacculitis
<b>Cattle</b>	Improper bleeding (pathological)
	Lymphadenitis
	Anaplasmosis
	Severe bruising
<b>Sheep</b>	Pyemia/abscessation
	Generalized Oedema
	Cachexia
	Fever
	Dead in pen/moribund
	Septicaemia
	Icterus
	Severe bruising
<b>Pigs</b>	Icterus
	Fever
	Ascarids
	Bruising
	Cachexia
	Pneumonia
	Arthritis
	Dead on arrival/injuries due to trauma
	Abscessation

Table 2: Most common reasons for condemnation in the Western Cape abattoirs in 2018

## Export Control



*Figure 3: Location of Export Control (Green), Animal Health (Orange) and Laboratory (Blue) Western Cape CCS veterinarians in 2018*



Prudence Monareng

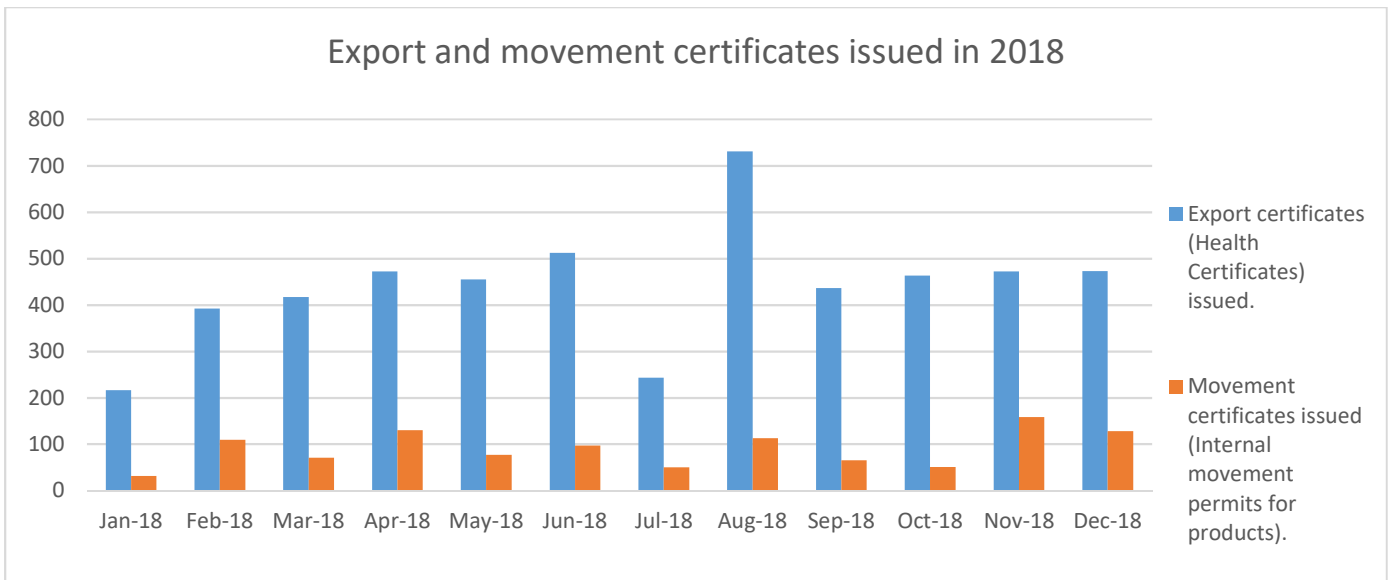


Karli Du Preez



Anouska Rixon

The main responsibilities of the veterinarians in the Export Control sub-programme were export certification, policy and system development, provision of information to clients and export establishment audits. The vets stationed at Elsenburg were also in charge of data analysis and report writing with regards to the CCS veterinary performance within the Western Cape. Occasional epidemiology reports were also written by the two CCS veterinarians stationed at the Elsenburg head office, where they assisted with PAPA (Performance Animal Protection Act) licensing. All of the veterinarians in charge of export control share 50% of their posts with welfare organisations in and around the area.



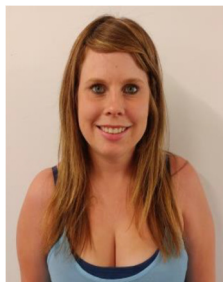
*Chart 3: Data records of the export certificates and movement certificates issued by the export control CCS veterinarians in the Western Cape in 2018*

January consisted mainly of training in order to ensure that the vets were adequately trained in order to correctly issue both export and movement certificates. In February and March we saw an increase in the number of export certificates issued and movement certificates as the CCS vets became more efficient. There was a sudden drop in July, with a spike in August. This was caused by Dr Bevin Meyer breaking her ankle, which kept her from some administration in July. Once she returned to duty she was restricted to paperwork in August, only returning to her welfare in September.

## Animal Health



Nellma Le Roux



Madré Rheeder



Jade Hilton

	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Grand Total
<b>Facilities inspected /audited</b>	7	6	18	3	4	3	5	1	3	3	6	2	61
<b>Establishment audit reports written</b>		3	17	1	4	2	3		1	1	5		37

*Table 3: Audit data from the Western Cape CCS veterinarians in 2018*

There was a spike in audits in March 2018, possibly due to the start of a new financial year.

The primary responsibilities of the veterinarians in the Animal Health sub-programme were animal welfare, disease surveillance, controlled animal disease outbreak control, herd testing and pregnancy scanning. In Beaufort West the CCS veterinarians brought valuable services to an area that truly benefited from the programme. With a mobile clinic, a much larger area could be covered, providing essential primary animal health care to the community.

The CCS veterinarians were greatly involved in controlling the Distemper outbreak in Oudtshoorn/George area in January/February 2018. They attempted to achieve control of this outbreak through euthanasia of clinical and suspect cases, as well as vaccination of healthy animals to prevent serious future outbreaks.

While that was the protocol in place to control an outbreak, this posed a challenge to the CCS veterinarians as the protocol at the welfare organisation in George is to treat suspected cases of Distemper with a course of tetracycline. Euthanasia is only performed if the animal's quality of life is poor. This protocol is in place because the organisation needs to maintain the trust of the community. If every animal that showed signs of distemper was euthanased, the community may begin to feel that the organisation is not working in the best interests of their animals. The cases that



were treated as such and not euthanased may have continued to infect other animals, perpetuating the disease and delaying the resolution of the outbreak.

Due to these factors, the outbreak took months to resolve but by the end of the year there were fewer Distemper cases reported than the previous years. The control through euthanasia of affected animals and vaccination created a buffer to prevent another outbreak for the next year.

A foster puppy program was started in Mdzananda Animal Clinic, Khayalitsha, by Dr Karli du Preez, which gained momentum over the course of the year and is now firmly established.

### Mobile State Services provided by CCS veterinarians

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
<b>Number of herd health visits to farms</b>	6	7	6		1	1	1	5		1	1		29
<b>Movement permits issued for live animals within SA</b>	7	10	3	3							4	1	28
<b>Dip tank activities attended</b>		4	1					1					6

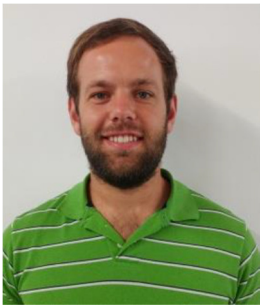
Table 4: Production mobile clinic data from the Western Cape CCS veterinarians for 2018

### Production animal vaccinations

	Feb-18	Mar-18	Aug-18	Sep-18	Nov-18	Grand Total
<b>Clostridium Spp. (Black quarter)</b>		80				80
<b>African horse sickness</b>				64		64
<b>Pulpy kidney</b>		80	600			680
<b>Anthrax</b>	99					99

Table 5: Production animal vaccinations given by Western Cape CCS veterinarians in 2018

## Laboratory



Meiring van der Merwe



Louie Genis

The primary responsibility of the veterinarians working at the Provincial Veterinary Laboratory (PVL) in Stellenbosch are performing post mortems, lab tests and reporting on diseases detected.

Tests run	Jan	Feb	Mar	Apr	Ma y	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Gr nd Tot al
Bovine viral diarrhoea		2											2
Brucella bovis		1		3		5		10	1	5			25
Chlamydomphila						1		2		1			4
Enzootic bovine leukemia		1						1					2
Newcastle disease				10				10					20
Sheep scab					1								1
Brucellosis spp.				3		5		10	1	5			24
Rose Bengal test (RBT)		1											1
Bacterial cultures/isolations		11		15		15		35	3	25			104
Leptospirosis		1											1
Johne's disease		48			1			2					51
Bluetongue		4											4
Avian influenza		8		20				10					38

*Table 6: Tests run at the Provincial Laboratory in the Western Cape in 2018. NOTE: There are other tests that are available but which were never used throughout the year, and thus they are not mentioned in this table.*

As can be seen from the above data, the Rose Bengal test for Brucella is not being used as much at the PVL as other Brucella tests.

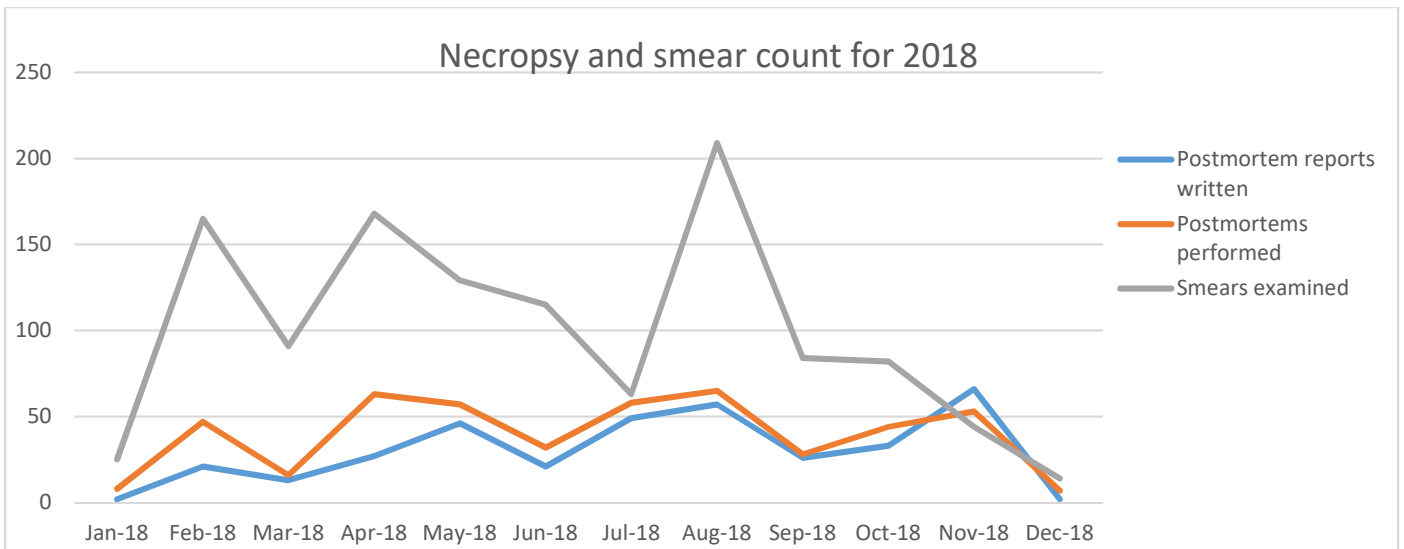


Chart 5: Amount of post mortems and smears examined at the Provincial Veterinary Laboratory in the Western Cape in 2018



Figure 4: Potbellied pig postmortem. Diagnosis- Urolithiasis one of which caused ureteral obstruction that resulted in overdistension and rupture of the bladder with concurrent acute haemorrhagic cystitis with a purulent component. Analysis of the uroliths revealed that they consisted of pure calcium carbonate (calcite).

## Primary Animal Health Care / Welfare work (fulltime CCS posts)



Elizna van den Berg



Carina Di Sibio

All of the CCS veterinarians were involved in primary animal health care and each veterinarian received a dedicated welfare post where they spent at least 50% of their time. Primary animal health care involves meeting the basic needs of an animal including preventative health care such as vaccinations and parasite control.

The main functions of the CCS veterinarians working in this area were primary animal health, medical and surgical treatment, vaccinations, mobile clinics, sterilisation campaigns and client education. Most of these treatments were provided at reduced or no costs as these communities are economically disadvantaged. People will always own animals regardless of their circumstances and the CCS veterinarians assisted in prevention suffering, disease and injury. The main emphasis was on education, especially for the younger generation as most problems encountered arose from ignorance, lack of education and understanding.

There were a large variety of welfares that have assisted the CCS programme from well-established multi-vet organisations to small organisations run by groups of volunteers. There were also a few private veterinary clinics which provided mentorship, facilities, equipment and consumables at their own cost to the CCS veterinarians that worked with them in 2018.

Without these partnerships the success of 2018 would not have been possible. This has been an excellent example of a functional **public-private partnership (PPP)**.

Most of the primary animal health care took place at welfare organisations which provided mentorship, facilities, equipment and consumables for the CCS veterinarians to use when assisting the public.

The figures below only reflect work done by the CCS veterinarian or under the direct supervision of the CCS veterinarian. These figures do however, include the work of all 16 CCS veterinarians and not just those in full-time welfare posts.



Figure 5 : Dr Anouska Rixon and the team at Animal Rescue Organization

## Small animal vaccinations

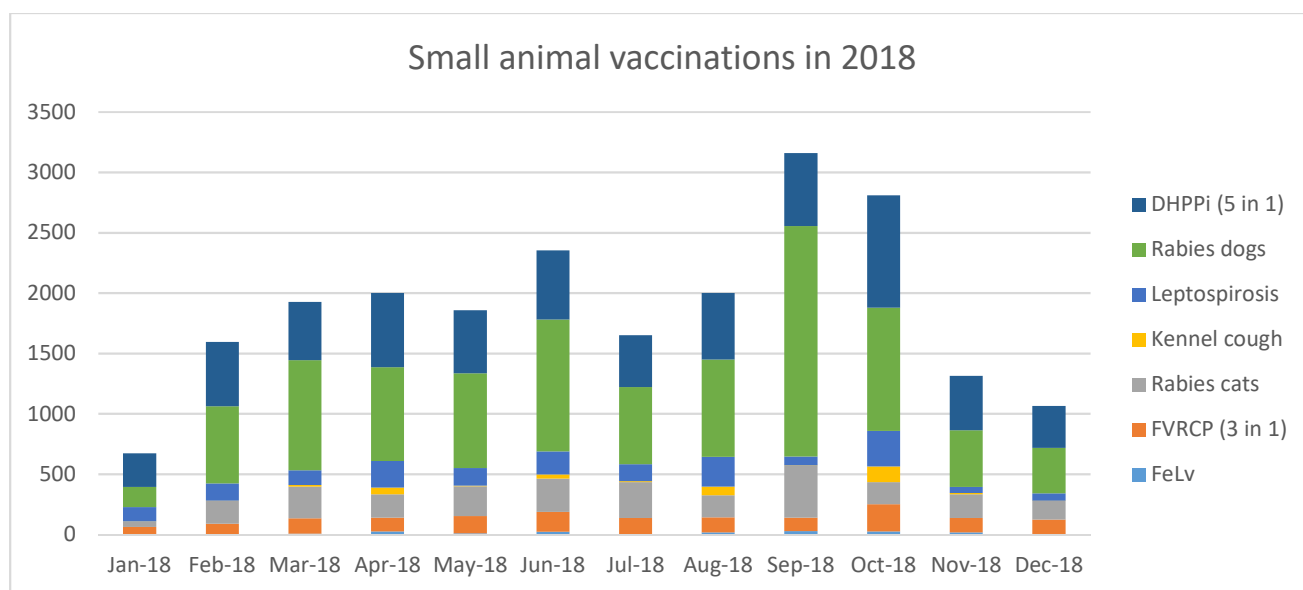


Chart 6: Small animal vaccinations done by CCS veterinarians in the Western Cape in 2018

The 5 in 1 vaccine was the most widely used vaccination in the Western Cape. Vaccination for Rabies is only given from 3 months of age, by which time many animals have already received one or two of their core vaccines. The protocol is to vaccinate puppies and kittens 3 times each with Rabies and 5 in 1 or 3 in 1 (for cats).

The Western Cape has to be strict in taking precautionary measures to control rabies to prevent it from spreading from other provinces.

There was a decline in reported vaccinations over December and January, possibly due to the holiday season and the decrease in monthly reports submitted. There is a smaller decline in winter (July-Aug), as people are less likely to bring their pets in for treatment in the cold weather.

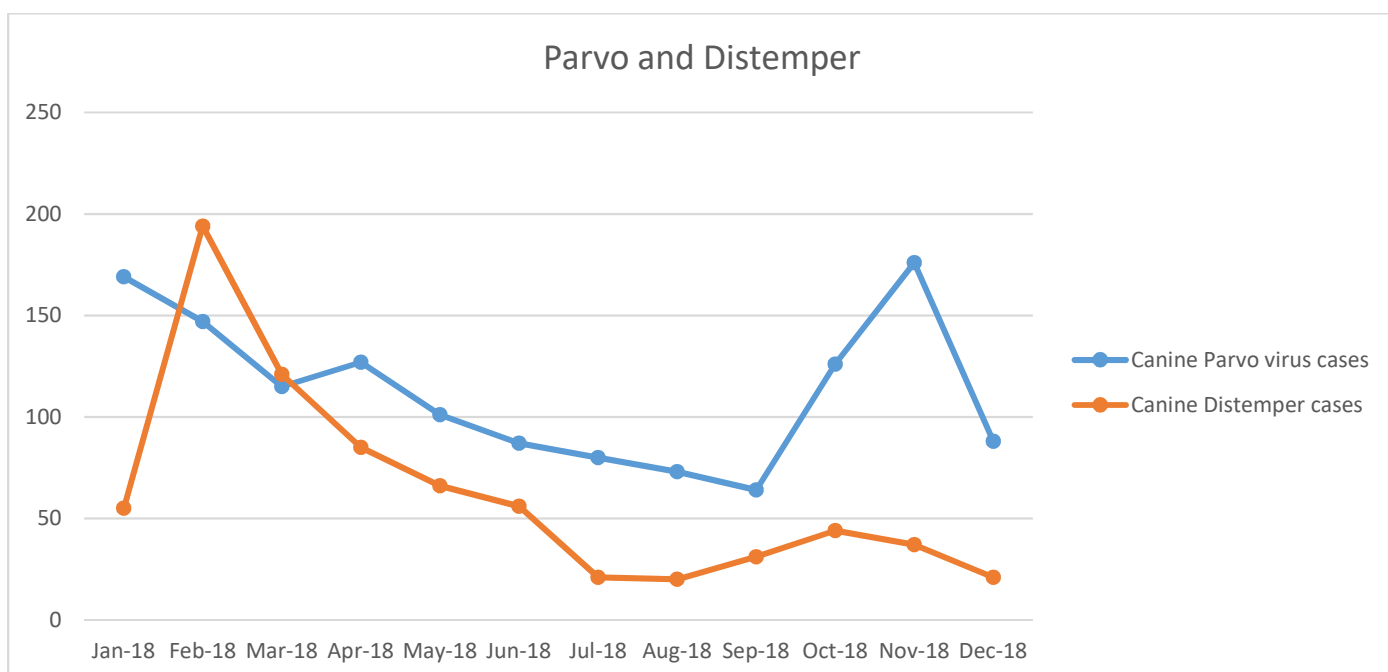
In 2018 there were more Rabies vaccines given to the animals in the Western Cape in 2018 than 5 in 1 or 3 in 1. This could be due to the Rabies outbreak in KZN which the Western Cape was trying to protect itself from as the province does not have a high incidence of Rabies. This demonstrates the efficacy of vaccination. Rabies vaccinations for cats and dogs are required by law and is free when provided for by the state.



*Figure 6 above: Dr Bevin Meyer at a Rabies vaccination campaign that took place over two weeks, covering all the areas around George. Approximately 8850 dogs and cats were vaccinated.*

## Other PAHC figures recorded

### Small animals



*Chart 7: Canine Parvovirus and Distemper cases seen by CCS veterinarians in the Western Cape in 2018*

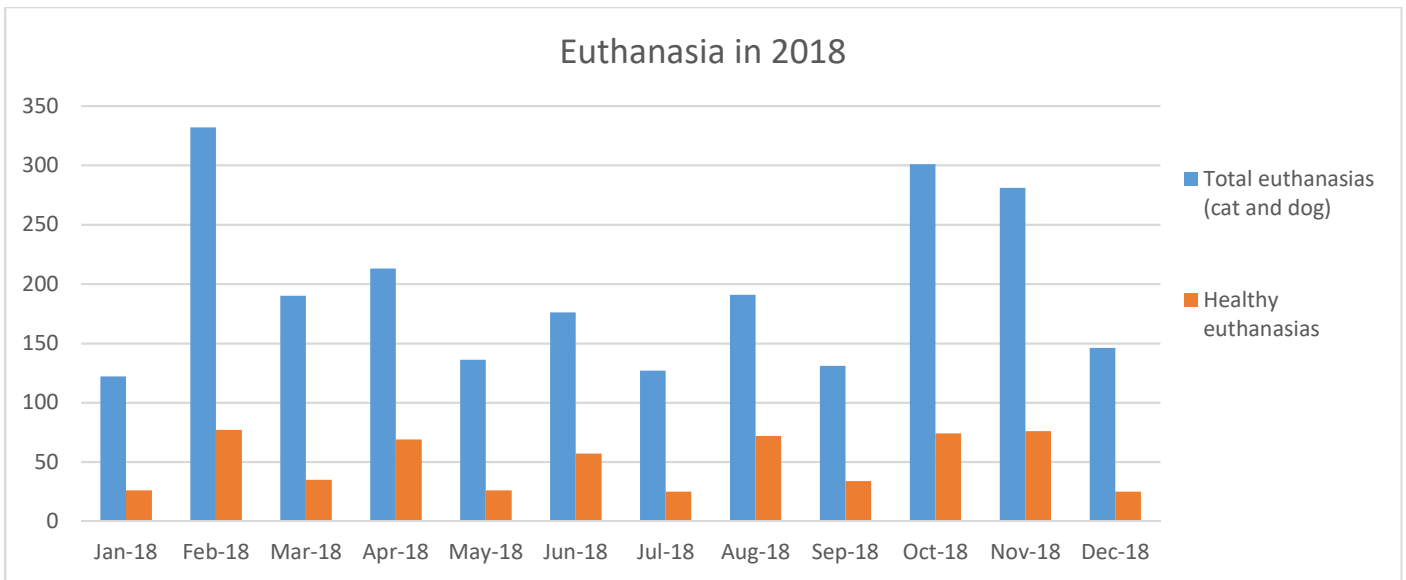
The incidence of Parvo virus peaked substantially from January to February and then numbers seem to have decreased steadily again until October, where the Parvovirus incidence peaked without the Distemper peak, until December, where the Parvovirus incidence was lower again. The winter months generally see a drop in the disease incidence, with a spike again as the temperatures start rising. The decrease in December is possibly due to the holiday season during which many CCS veterinarians took leave, decreasing the amount of animals seen; a decrease in the data received over December for the same reason; and the fact that many owners are not at home over this period and as such many diseases go unnoticed.

Many confounding factors may have been associated with this response and a proper study will need to be conducted in order to give evidence-based feedback for the above response demonstrated.

A canine distemper outbreak in Oudtshoorn resulted in a marked increase in the number of Distemper cases seen in February and a marked decrease in March due to prevention strategies such as the vaccination of clinically healthy dogs (at sterilisation clinics and mobile outreaches) and the euthanasia of clinically affected and suspected cases on a daily basis.



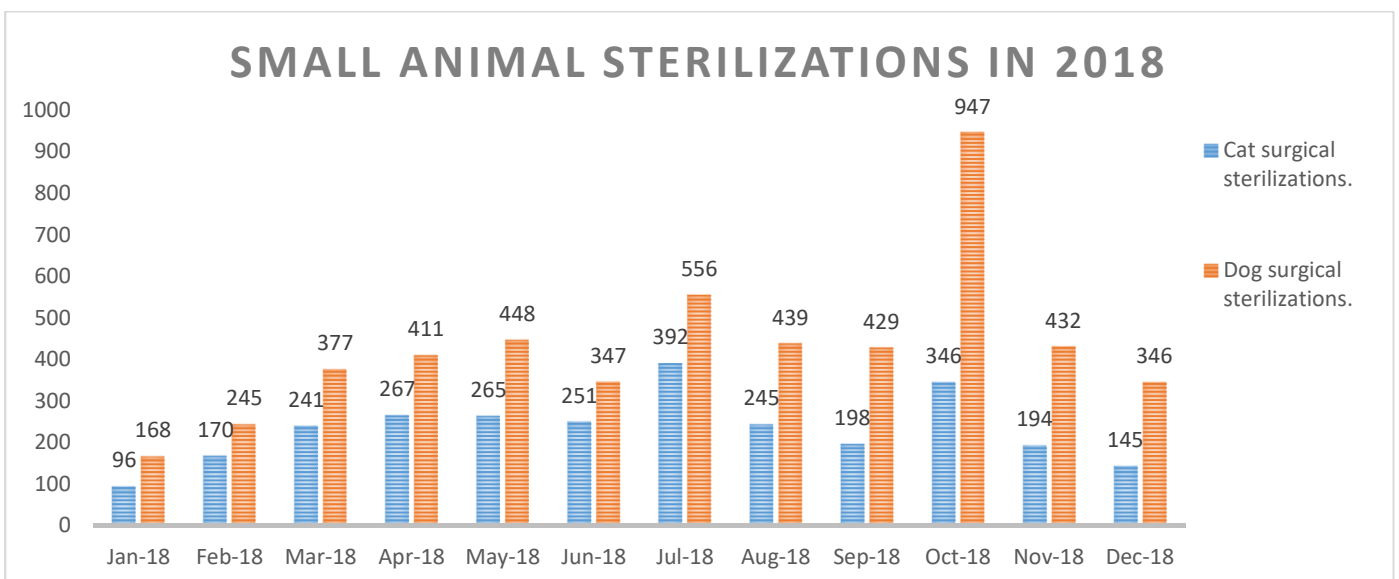
Figures 7, 8 & 9: Dr Karlien Botha participating in the control of canine distemper outbreak in Oudtshoorn.



*Chart 8: Number of euthanasias performed by CCS veterinarians in the Western Cape in 2018*

There were often when an animal is severely ill or injured and the most humane option is euthanasia. However, the dilemma that most welfare organisations face in South Africa is the ever increasing number of dogs that are unwanted, surrendered or confiscated. The only option left is then to euthanase as there are financial, time and facility constraints. Responsible pet ownership is promoted by educating owners that pets are a lifelong commitment that cost money and it is hoped that this approach will decrease the number of unwanted animals.

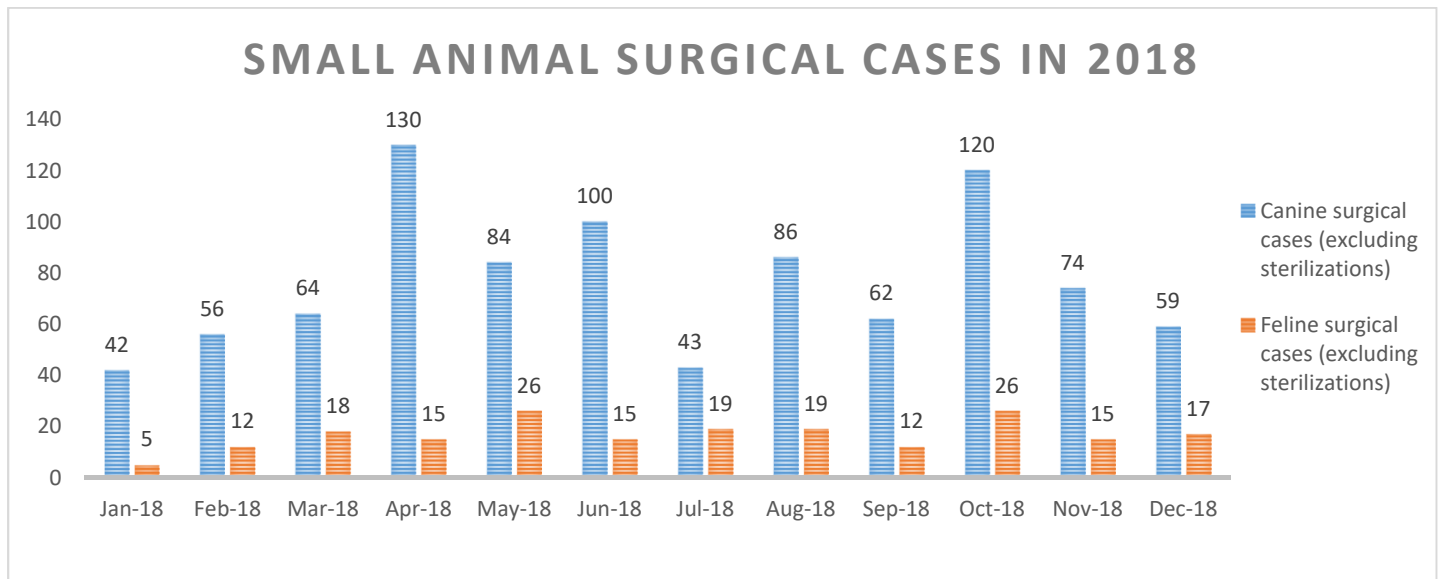
If local municipalities enforced the by-laws that require licensing of pets it would go a long way in helping to reduce the number of stray animals. Animals will be identifiable and traceable back to their families and additional funding to improve facilities and services would be available.



*Chart 9: The amount of small animal surgical sterilizations done by CCS veterinarians in the Western Cape in 2018*



There was a significant spike in the amount of canine sterilisations in October 2018. Many dogs get sterilized at around one year of age, which would correlate with the spring births from 2017. There could be many reasons for this which would need further investigation.



*Chart 10: Small animal surgical cases seen by the Western Cape CCS veterinarians in 2018, excluding the sterilizations.*



*Figure 10: Spay set-ups in mobile clinics and town halls (a) Dr Karlien Botha; (b) Dr Jade Hilton and Dr Madre Rheeder (c) Dr Melissa Sussens*



*Figure 11: Mobile clinic spay set up, ft Dr Bevin Meyer and Dr Karlien Botha in the background*

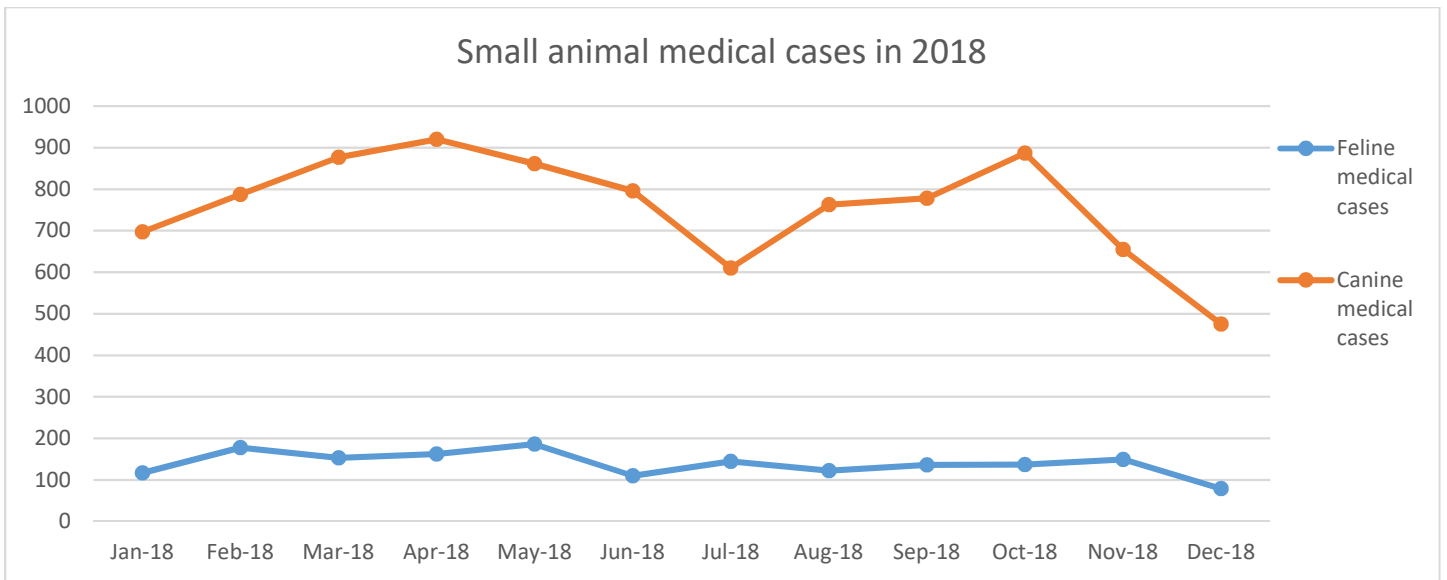


Chart 11: Small animal medical cases seen by the Western Cape CCS veterinarians in 2018



Figure 12: Brave - a pitbull in very poor condition that presented with a severe case of mange and an old fracture of his right femur that had healed in malunion. His owners gave him up because they didn't want an ugly dog. Brave was treated for his mange, fed a nutritious diet and placed in foster care.

## Production animals and equines

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
<b>Euthanasias of animals other than dogs and cats</b>	4	7	13	26	7	3	10	12	7	16	7		112
<b>Porcine surgical cases</b>			4	1	3			4		2	3		17
<b>Wildlife cases</b>		3	3	2	6	3	2	13	3	2	4	1	42
<b>Porcine medical cases</b>	5	24	4	5	2		15	16	5	2	15	20	113
<b>Animals darted.</b>	15	3	11			18							47
<b>Equine surgical cases</b>		1							3			1	5
<b>Equine medical cases</b>	4		1	13	4	5	5	10	6	5	1	3	57
<b>Small ruminant surgical cases</b>		1	3		15	15	7						41
<b>Small ruminant medical cases</b>	6	93	7	10	11	24	7	55	17	20	4		254
<b>Bovine medical cases</b>	8	3	1	43	22	11	9	21	32	17	12		179

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
<b>Bovine surgical cases</b>											2		2

Table 7: Production animal and equine case data for the Western Cape CCS veterinarians in 2018

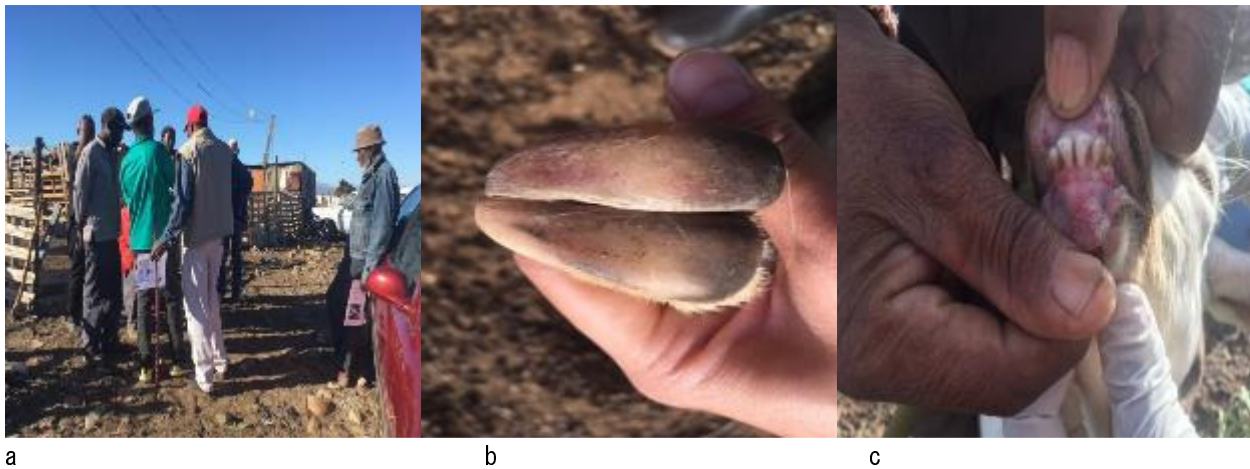


Figure 13: (a & b) Dr Kelly Yui in Zwelethemba diagnosed bruising of the hooves in goats due to having soft hooves and having to walk long distances for food. (c) A case of suspected Papilloma virus in a kid. Papules were scratched open and they resolved spontaneously.

The production animal figures were lower than the small animal figures as most of the CCS veterinarians had small animal welfare posts. Most of the production animal related work are handled by the animal health technicians. Complicated cases are generally taken directly to a private veterinarian. This unfortunately does not lead to accurate production data statistics for the province if only the CCS production figures are analysed.



Figure 14: An ostrich being restrained for an injection

### Mobile Clinics and areas assisted

Many of the CCS veterinarians were involved in mobile clinics with various welfare organisations.

The following areas (amongst others not recorded) were visited by the CCS vets using DAFF branded transport or the transport of the welfare organisation they were working with:

Oudtshoorn, Volmoed, Calitzdorp, Middelpaas, Waaikraal, Cape Town regions including Khayalitsha, Phillipi, Pelican Park, Grassy Park, the Cape Metropole and surrounds, Matjiesrivier, Blinkhokke, Kliplokasie, Schoemanshoek/Honde-eenheid pad, De Rust Dip, Sweep, De Hoop, Kamwyn/Homestead, Saag Jonker Greylands / Le mirage / Welbedacht, Kruisrivier, Zoar, Ladismith and Van Wyksdorp.

Many of these areas do not have a permanent veterinary service. Factors such as weather and insufficient advertising can negatively affect the outreach scope.



*Figure 15: Mobile clinic set up*

## Other primary animal health care activities

	Jan -18	Feb -18	Mar- 18	Apr -18	May -18	Jun -18	Jul -18	Aug -18	Sep -18	Oct -18	Nov- 18	Dec -18	Grand Total
<b>Other reports written</b>	6	13	29	7	16	37	58	6	16	4	5	3	200
<b>Client info sheets developed / reviewed</b>	10	19	13	7	39	21	64	13	32	12	15	10	255
<b>Community engagement activities: Other</b>	7	7	7	10	4	8	7	4	5	5	1	6	71
<b>Community engagement activities: Individual farmers</b>	2	3	4		11	11	6	15	22	13	6		93
<b>Community engagement activities: Schools</b>	1	1	7	4	3	1		6	9	3	6	2	43
<b>Community engagement activities: Farmer groups</b>		2	2	1			2	3		1	2		13
<b>Training attended</b>	17	6	4	4	1	1	5	6	2	1			47
<b>Training given</b>	19	17	13	14	7	21	45	19	11	6	7	8	187
<b>Meetings attended</b>	23	18	9	8	10	12	23	25	8	14	21	6	177
<b>Sterilisation campaigns organised/attended</b>	6	6	5	9	6	8	8	19	15	27	16	13	138
<b>Vaccination campaigns organised/attended</b>	7	6	3	13	5	7	11	5	8	12	11	7	95

Table 8: Other Primary Animal Health activities that the Western Cape CCS veterinarians participated in during 2018.

Community engagement is arguably one of the most important aspects of the CCS year. Education is key to changing the way our country views animals and human health – and that education starts with children in primary school. School talks are vital to the CCS program, and are especially important in conjunction with farmers days, so the children and their parents learn together.

Vaccination and sterilization campaigns are only an attempt to slow down an ever increasing problem that is already there, while education will prevent the problem from perpetuating itself.

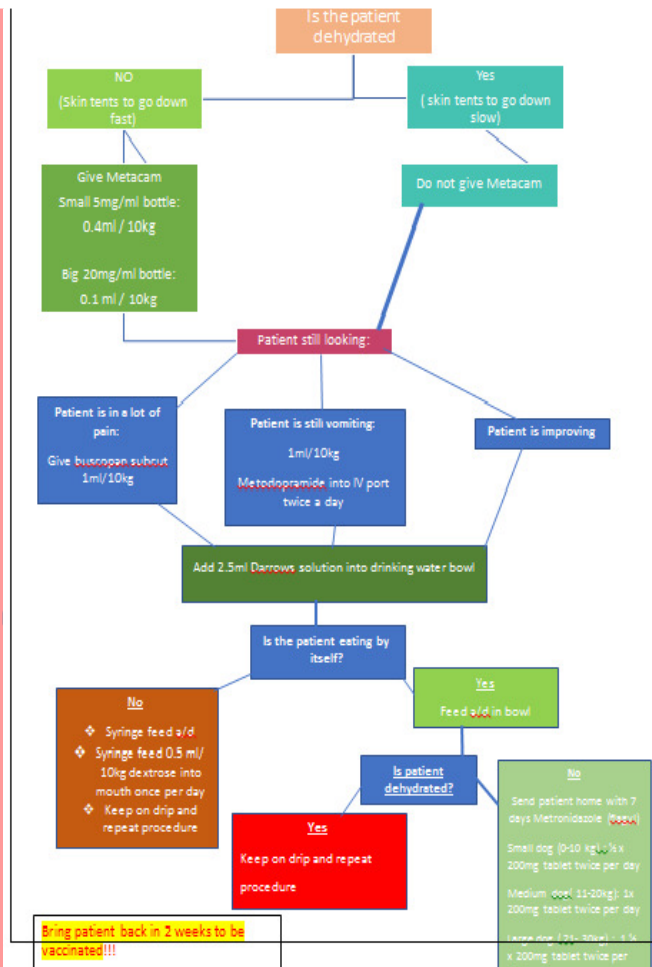
The training given was not only formal training in the form of courses or organized events; many CCS veterinarians mentioned that they had trained the staff at their clinics throughout the course of the year, providing staff with information sheets such as seen below, instructing them on the correct hygiene, surgical scrubbing and animal handling etc. This benefits not only the workers, but also the animals they handle, the clinic and the community.

Staff training at the abattoir is essential, as there are many non-compliances listed in abattoirs. This is often difficult to achieve, as the staff have been working a certain way for many years and find it difficult to take advice or orders from a newly qualified veterinarian.

## Parvo protocol for Mdzananda animal clinic, Khayalitsha

**Always do for every patient**

- ❖ Put on **Ringers lactate drip**  
\* **20ml Dextrose in drip**
- ❖ **Synulox subcut 0.5ml/10kg**
- ❖ **Cerenia subcut 1ml/10kg**
- ❖ **Deworm on first day**
  - Very small dog (0-5 kg): **Panacur 1ml/ 10 kg**
  - Small dog ( 6-10 kg ) : **½ triworm**
  - Medium dog( 11-15kg): **1 triworm**
  - Medium dog ( 16-20kg): **1 ½ triworm**
  - Large dog ( 21- 25kg) : **2 triworm**
  - Large dog (26-30kg): **2 ½ triworm**
- ❖ **Tricazole: 20ml/10kg into IV port twice per day.**
  - **NB! Give Very Very slowly. Over 5 minutes**
- ❖ **BCO**
  - Small dog ( 0-10 kg ) : **0.25ml**
  - Medium dog( 11-20kg): **0.5ml**
  - Large dog ( 21- 30kg) : **0.75ml**



## Community Engagement – Schools visited



Figure 16: Dr. Prudence Monareng inspiring upcoming Veterinarians at a career exhibition held in Makupula secondary school in Kayamandi Stellenbosch.



Figure 17: Dr Anouska Rixon at Dunoon primary school, addressing grade 6 and 7 students on primary animal health care and informing them about animal related careers available to them.



Figure 18: Career day in Zwelethemba- Dr Kelly Yui informing Matric students about the Veterinary field, the subjects they need to get into Veterinary school and how to apply.



Figure 19: Dr Madré Rheeder at the annual Beaufort West agricultural show held in March, in cooperation with the Western-Cape government and various representatives from Elsenburg. On the above picture Dr Rheeder is at the Veterinary service stall informing interested pupils about Veterinary science.



[Figure 20: Dr Karlien Botha addressing farmers about the management of common diseases during a drought at the Zoar Farmers day.](#)



[Figure 21: An innovative owner](#)

## Overview

January consisted mostly of training for many CCS veterinarians. Having a dedicated mentor was imperative for the new graduates to find their feet. By the end of the first quarter most people had settled in to their posts, gained confidence and the numbers of cases seen increased.

## Issues and Challenges

- At the George post there were 2 people sharing 3 posts (State Vet, SPCA and PDSA) and they found it was difficult to divide up time equally between all three posts. Each post would ideally require a full-time veterinarian. Communication channels between these sectors were not well established and it was difficult for the CCS veterinarians to integrate the individual ideas without causing conflict.
- Non-conformances at abattoirs, especially stunning incorrectly and overcrowding were the major problems at abattoirs. When any issues were raised by the CCS veterinarian there was a lack of compliance and respect from the staff at the abattoirs.
- There was a lack of follow-up for treatment of pets from the community – many owners do not bring their dogs back for stitch removal, treatments etc.



- Some of the split posts were far apart with no suitable accommodation nearby (e.g. Export control: Elsenburg to Cape Town; Milnerton to Philippi) – the CCS veterinarians have to spend a large portion of their day travelling to one or both of the posts. It would be preferred if the split posts were situated closer to each other.
- Some clinics have free services which lead to a resource strain and less respect for the work being done in communities. Charging a small amount leads owners to take better care of their animals and appreciate value of the service they receive.
- There were financial and resource constraints at some of the welfare clinics. At times, animals could not be treated accordingly due to lack of resources.
- There was no proper handover from one CCS group to the next. This wastes a lot of time in January for the next group of CCS veterinarians trying to adjust without adequate guidance. The CCS rotation should only be booked in the year preceding their CCS term and not at the start of their clinics in order to overlap with the CCS veterinarian handing over to them.
- There is a need for a production animal based CCS position in the Western Cape to treat the community livestock.
- Lack of education within communities with regards to animal welfare leads to animal abuse and neglect. Community engagement is critical.
- Language barriers are still major challenges for most CCS veterinarians.
- Overwhelming workload at certain posts - some posts require more veterinarians to operate efficiently (specifically Milnerton VECO and Philippi; George State Vet / PDSA / SPCA; PAPA licencing department).
- Substandard computer skills prolong completion of tasks. There is no formal training on how to use the computers and many people have never used the programs that are required.

## Thank you

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