Community Services & Health Infrastructure Plan 2019 -2034

Technical Report

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Executive Summary

The Community Services & Health Infrastructure Plan (CSHIP) is a Directorate infrastructure and investment plan, responding directly to the community/social services needs of the City's residents as efficiently, effectively and sustainably as possible. It is a guide for high level decision-making regarding infrastructure, including multi-year budgeting. A key objective is to align to the City's corporate strategies, policies and a plans. The plan addresses short and medium term priorities, while taking a long term view. As such, it addresses a 15-year time period and is to be reviewed every 5 years.

A principal informant of the plan is the legislative and policy context of the City. As such, the plan reflects upon the legislation, strategy and policy impacting the Directorate. The plan is guided by these, as well as seeking to support and positively influence the strategy instruments in future.

The unique and multi-layered context of the City of cape Town has also been a key informant. Urbanization, economic and environmental trends are fundamental in shaping the City, presenting numerous challenges to be grappled with. A quarter of the City's population is regarded as not having even the most basic means (very needy and needy). Varied and widespread personal and public health concerns are side by side with social ills in respect of crime, violence and substance abuse.

However, inherent opportunities are also presented by the City and its people. The City's social diversity, natural beauty, economic potential present opportunities for improving the lives of citizens and the growth and development of the City. This is possible if resources, infrastructure and programmes can be harnessed towards these opportunities in a way that will leverage positive change. Emphasis is placed on the necessity of improving the lives of citizens as the key lever to taking the City to greater heights as globally competitive city.

A rational planning approach is followed in the assessment of existing facilities and service provision in order to identify gaps in service delivery (quantitative and qualitative). The assessment of existing facilities and service provision includes service menu/core business and the associated facilities; quantitative research and analysis which reflects the current facility provision in relation to standards for provision and existing facilities, targeting backlog determination; qualitative analysis, underpinned by line departmental, operational information and intelligence.

It uncovers that key challenges relate to historic facility provision imbalances, as well as rapid expansion of residential areas (including informal settlements), particularly in low and lower to middle income brackets over the last number of decades. Growth has not been accompanied by sufficient development of social facilities and services, despite national policy discourse requiring integrated human settlements. Addressing this is key to spatial transformation required in the city and is highlighted in the City's spatial policy. While these disparities characterise existing urban areas, significant pressures to address new human settlement development also exist. Facility management, maintenance and vandalism are ongoing operational challenges that severely impact service provision and are prevalent in many areas of the City, threatening impact on service delivery severely.

Community Services & Health facilities are fundamental in providing opportunities to improve quality of life related to health, learning, recreation and social support that assist community development and social cohesion. Therefore, investment in social infrastructure and programmes must be prioritised and appropriately resourced.

Future investment in the social facilities will be guided by an integrated approach to planning and facility provision, aligning to City spatial priorities, while driving integration across

community/social services sectors and programmes. Future investment should focus on Precinct planning and development, upgrading/expanding existing facilities or developing new facilities in areas they are needed most, including new models of co-location and clustering, departmental strategies and programmes, as well as a focus on Informal Settlements.

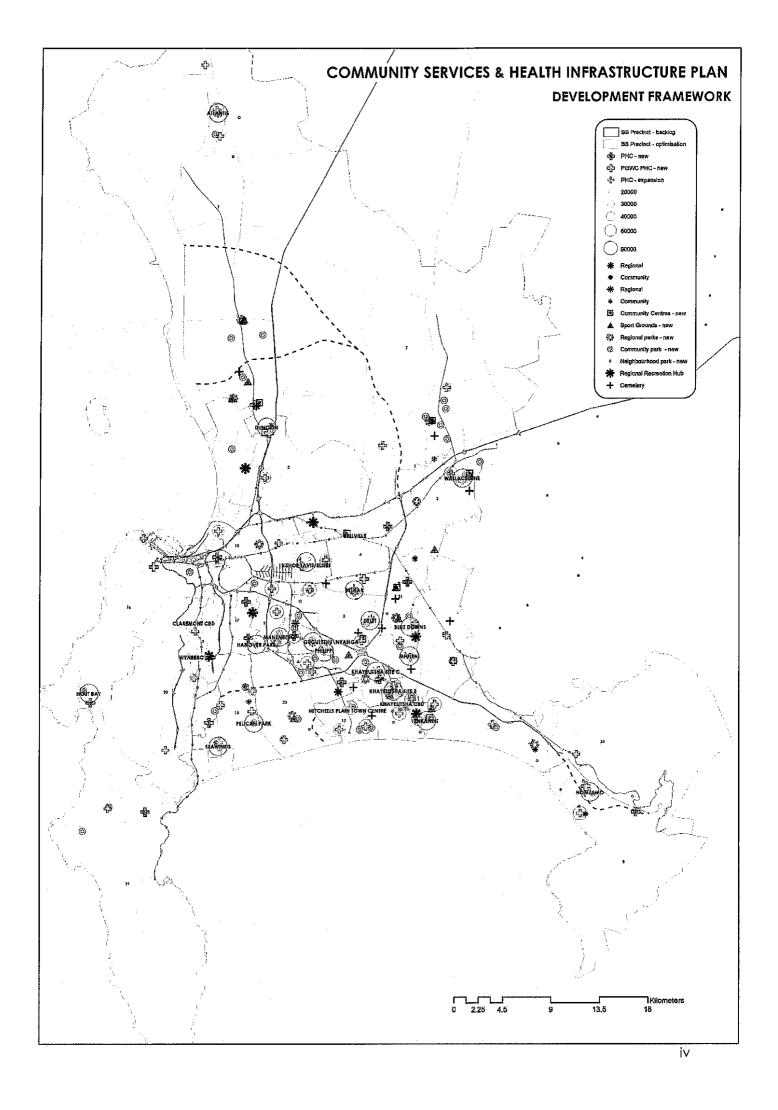
The CSHIP presents a Facility Development Framework (FDF) and Implementation Framework (IF) as the key proposals and means for intervention. It is estimated that R10 billion is required by 2035, in order to address current and future population needs, with close to R5 billion representing existing backlogs.

The basis for FDF and IF is the backlogs identified, as well as application of spatial planning in the identification of appropriate locations for required facilities. This should, in future, be supported by more detailed asset condition and functionality research that pursues the rationalisation and optimisation of existing facilities. This will support an asset management plan that better guides lifecycle management and maintenance of facilities in order to optimize the condition and impact of the key facilities in particular.

The interventions required in the development framework are numerous and require a framework for their phasing and prioritisation, which is the focus of the IF. It focuses on the best use of limited resources. It is underpinned by prioritising precincts and clusters of facilities, where the benefits of agglomeration can be realised by residents and departments alike. This includes the identification, profiling and prioritisation of precincts. It also sets out the processes for undertaking precinct planning and project execution in respect of Community Services & Health facilities in particular, in order to guide future planning, design and project execution related resourcing. Twenty-four precincts are prioritised as follows.

Con	Community Services & Health Precincts per Area			
	Area 1: North	Area 2: East	Area 3: Central	Area 4: South
Backlog	Atlantis Du Noon Hout Bay Wallacedene	Enkanini Khayelitsha Site B Khayelitsha Site C Mfuleni Nomzamo	Manenberg Nyanga/ Gugulethu Hanover Park Elsies River/Bishop Lavis Delft Blue Downs Belhar	Phillippi Seawinds Pelican Park
Optimisation		Khayelitsha CBD	Bellville	Mitchells Plain Town Centre Claremont CBD Wynberg CBD

The matrix sets out, on the basis of a consistent and clear set of criteria, ranking for each of the precincts. It provides clarity, for example on which are the highest priority precincts from a Community Services & Health perspective, the highest priorities from the perspective of City strategic alignment, as well as the highest ranked precinct in terms of the aforementioned combined/overall. It is clear from the matrix which specific facilities are required and specifics on how they are aligned to City strategy.



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1. Introduction

Planning for and implementing municipal infrastructure, including Community Services & Health infrastructure is the responsibility of local government and addressed in the municipalities Integrated Development Plan (IDP) and associated sector plans (DPLG, 2007). Sector Plans are key inputs to the IDP process.

The City of Cape Town's Organisational and Development Transformation Plan (ODTP) resulted in the creation of a Community Services & Health Directorate, comprising a suite of social services, including Health, Library and Information Services, Recreation and Parks, as well as Social Development and Early Childhood Development Departments.

2. Purpose

Sector plans can be defined as a "detailed planning exercise for that particular municipal service, dealing with municipal infrastructure for that sector and addressing the status quo/needs assessment, user profile, service levels, infrastructure and targets, financial issues, institutional and management aspects, resource aspects, including proposals, programmes or projects (DPLG, 2007).

As such, the purpose of this plan is to:

- Quantify and locate needs including assessing and articulating line departmental delivery capacity and challenges.
- Set out the Directorate's approach, tactical and implementation framework in respect of development priorities.
- Guide resource allocation including motivation for resource allocation, tools to guide a location of existing capital investment, as well as major repairs and maintenance.

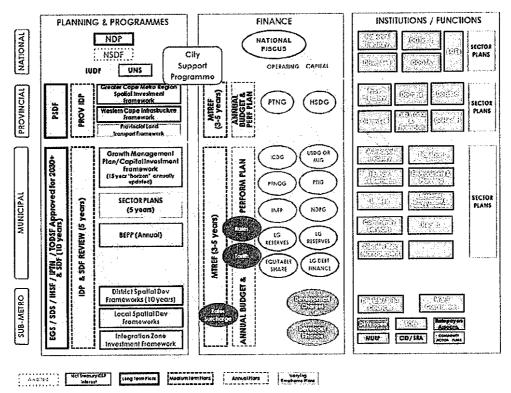


Figure 1: Conceptual Intergovernmental Planning and Resource Framework (CCT BEPP, 2017)

3. Legislative & Policy informants

3.1. National

3.1.1. National Development Plan

The National Development Plan emphasizes the need for nation building and social cohesion. It highlights the role of social infrastructure in the impacting or supporting key aspects of social cohesion, such as social inclusion, social mobility and social capital.

In this vein, the plan states the need for "Improving public services and spaces as well as building integrated housing and sport facilities in communities to ensure sharing of common spaces across race and class" (NDP, 2012).

3.1.2.The Integrated Urban Development Framework

The IUDF is government's policy position to guide the future growth and management of urban areas and states that it's key (intended) outcome is **spatial transformation**, in pursuit of 'making cities and human settlements inclusive, safe, resilient and sustainable'.

It identifies policy levers and priorities aimed at integrating and aligning investment to maximize the potential of urban areas, "by steering urban growth towards a sustainable growth model of **compact**, **connected and coordinated cities** and towns". It proposes transit-oriented and other urban planning strategies to yield desirable social, economic and environmental outcomes.

Policy lever 3, Integrated sustainable human settlements, is particularly pertinent to the community/social services and states that this should be driven by pursuit of "cities and towns that are liveable, integrated and multi-functional, in which all settlements are well connected to essential and social services, as well as to areas of work opportunities" (IUDF, 2016).

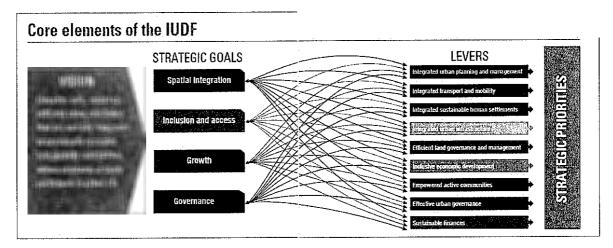


Figure 2: Elements of Integrated Urban Development Framework (National Treasury, 2016)

3.2. Provincial

The Western Cape Provincial Government articulates its strategic direction in its Provincial Strategy, which identifies five strategic goals, referred to as PSG 1-5.

Each of these is related to the social facilities and services in one way or another. The figure below indicates what each is the PSG's is, as well as highlighting (bold) the aspects of each which is most directly linked to the core business of the Community Services & Health Directorate.

There are clear links in respect of areas of common interest and where objectives are shared. These should be the subject of engagement and collaboration between the City and Provincial representatives in order to enhance service delivery and capitalise on possible synergies.

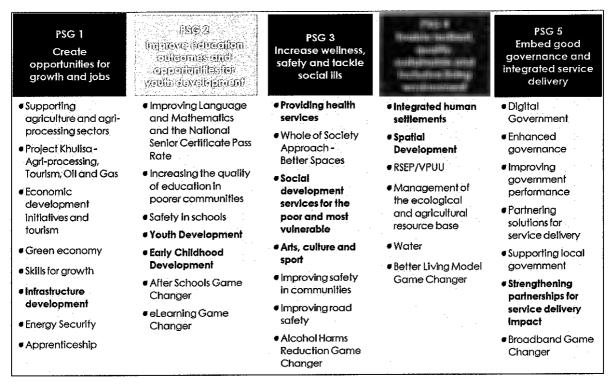


Figure 3: Provincial Strategic Goals (PGWC, 2014)

3.3. Local

3.3.1.Integrated Development Plan

The City's IDP articulates the key strategies of the City, giving direction to each directorate and department and providing residents clarity on the City's strategic intent, related interventions or programmes. It also reflects high level strategy informed by public input and key 'sector' inputs from each of the City's directorates. The CSHIP is both informed by the IDP and should be an informant to it in respect of Community Services & Health priorities.

The following Strategic Pillars are directly linked to Community Services & Health and inform the CSHIP:

- Within Strategic Focus Area 3 Caring City, Objective 3.1 is Excellence in Basic Service
 Delivery. Community Services & Health Facility Provision has been identified as key
 programme, in addition to Cemetery provision. It indicates that the City will "provide
 social facilities that are equitably distributed and of the required standard", which will
 be planned and developed "in a joint and integrated manner with internal and
 external partners; and in areas of greatest need" (IDP, p99).
- Furthermore, it is indicated that "the process will include seeking and maximizing external funding and partnership opportunities, safety and security crime prevention through environmental design, as well as the introduction of quick response and alarm systems and community mobilization and engagement to reduce vandalism and theft at social facilities" (IDP, p99).
- Within Strategic Focus Area 4 Inclusive City, Objective 4.1, Dense and Transit Oriented growth and development refers to the *Spatial Integration and Transformation Programme* (for socio-economic gain), citing the need to rationalize and cluster social facilities on corridors and TOD locations through demonstrated projects.
- Transformation Objective 4.3 is Building Integrated Communities. The Primary
 Healthcare Programme highlights the need for intergovernmental collaboration, as
 well as complying with national core standards and improving access to services. In
 addition, the Homeless People Programme, highlights the need for rehabilitation and
 support for those affected. Furthermore,

3.3.2. Economic Growth and Social Development Strategies

The Economic Growth Strategy is structured around five high-level objectives:

- Building an enabling institutional and regulatory environment (being a globally competitive city);
- Planning, building and maintaining infrastructure that supports economic growth (basic services, transport and ICT infrastructure etc.);
- Building an inclusive economy through job creation, skills development and small business support;
- Promoting and marketing business and investment to leverage trade and sector development; and
- Ensuring that the growth path is environmentally sustainable in the long-term.

The Social Development Strategy (SDS) recognises that social development interventions impact on the ability of individuals and communities to engage in economic activity. Conversely, economic growth is central to social development.

The SDS adopts a collaborative approach to social development whereby each directorate has a role in facilitating social development.

The five high-level objectives of the SDS are:

- Maximising income generating opportunities for people who are excluded or at risk of exclusion.
- Building and promoting safe households and communities.
- Supporting the most vulnerable through enhancing access to infrastructure and services.
- Promoting and foster social integration.
- Mobilising resources for social development.

3.3.3. Spatial Development Framework

The Cape Town Spatial Development Framework (CTSDF) guides urban development in the city, setting out a number of spatial and policy directives. One of the key objectives is spatial transformation to provide "access to more opportunities for more people".

The key spatial strategy in respect of community/social services facility provision is *Spatial strategy 1: Build an inclusive, integrated, vibrant city.* The sub-strategies and land use policy guidelines to be used in building an inclusive integrated and vibrant city are outlined below.

Policies 2 and 4 are key policies to the provision of Social Services:

- Policy 2: Ensure that development proposals provide an adequate and equitable distribution of social facilities, recreational space and public institutions
- Policy 4: Transform marginalised areas and informal settlements into economically and socially integrated neighbourhoods

The policy guidelines relating to each of these are key informants to the plan and should be pursued as far as possible.

The CTSDF further emphasizes the need to focus resources inwardly in support of intensification and prioritise investment in favour of sustainable job-generating economic growth over the medium-term. This is promoted in order to support other spatial development goals such as poverty reduction and social mobility, improving spatial equity and accessibility. It is also stated that achieving spatial transformation will require an intensification of land uses in areas supportive of Transit-Oriented Development (TOD).

In pursuit of spatial transformation, the CTSDF delineates Spatial Transformation Areas (STAs) and four localised 'unique' areas namely:

- An Urban Inner Core;
- Incremental Growth and Consolidation Areas;
- Discouraged Growth Areas;
- Critical Natural Areas;
- Unique Cases: Atlantis, Paardevlei, Philippi Agricultural Areas (PHA) and Swartklip.

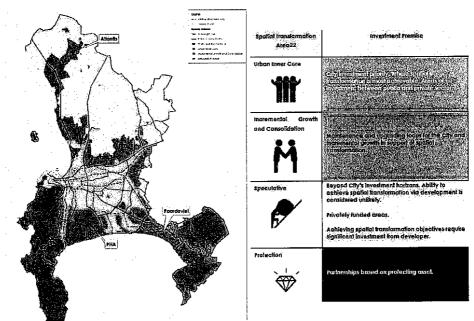


Figure 4: Cape Town Spatial Transformation Areas, (CTSDF, 2018)

3.3.4.Transit Oriented Development Strategy

The vision of the TOD Strategy is to "progressively move toward a compact, well connected, efficient, resilient urban form and movement system that is conducive to economic and social efficiency and equality whilst providing cost effective access and mobility, with the least possible negative impact on the environment". (CCT, 2016)

City's key commitments are to direct planning decisions and public investment towards a comprehensive Transit Oriented Development perspective that:

- Directs new development in the city to strategic locations in and around public transport infrastructure;
- Secures an appropriate mix of land uses and be inclusive in well-located areas;
- Establishes a high quality of public space that promotes the use of public transport and non-motorised transport modes.
- Utilises City and State-owned strategically located land holdings and partner the private sector to lead by example to achieve transit oriented development.

The policy has implications for Community Services & Health facilities in respect that it encourages their location in well located transport precincts such as around stations (rail and IRT), as well as public transport interchanges. It is also challenges conventional space provisions and infrastructure in the sense that it requires re-imagining the built forms and functioning of facilities and infrastructure.

4. Cape Town in context

4.1. People

Cape Town's population is approximately 4 million and continues to grow. The population has grown rapidly over the last number of decades but indications are that growth rates are decelerating. Notwithstanding this, it is projected that the City's population will grow to 4.5 million by the early 2030s.

The backlog of housing for the existing population is significant, with large numbers of informal settlements (including backyard dwellings) spread across the City. The City estimates that there are close to 200 000 informal dwellings (CTSDF, 2018).

The Socio-Economic Index prepared by the City finds that a total of 25.5% of all households live in 'very needy' and 'needy' sub-places, with the majority of the former incorporating informal settlements. The index comprises consolidated information on the Household Services Index, Education Index and Economic Index and assists in the identification of areas poverty, vulnerability and need exist, which should be prioritised for projects.



4.2. Economy

Figure 5: Cape Town Demographics (IDP, 2016)

Cape Town is the second largest urban economy in Africa, Demographics (IDP, 2016) generating gross geographic product of over R30 billion, driven largely by the services sector (76%). While growth of the economy is projected approximately 440 000 citizens are unemployed, with the rate of unemployment at 23%. The projected growth is in areas requiring skilled and semi-skilled labour, rather than unskilled workers. Economic activity and opportunity are concentrated in various nodes across the City. The CTDSF identifies nodes where growth

and opportunity exist in commercial, industrial and local business nodes. It also identifies social mobility nodes. These are important informants to community/social services provision. The informal economy is active and plays and important role in urban livelihoods in the City (CTSDF, 2018).

Community Services & Health and facilities provided by the City will both be impacted by and have the potential to impact economic growth in the future. Social development - including health, educational, physical and psychological advancements Will positively impact the economy through capable and productive labour. In turn, the resources generated by the City through its rates base required to sustain community/social services and are fundamentally impacted by health and arowth of the economy.

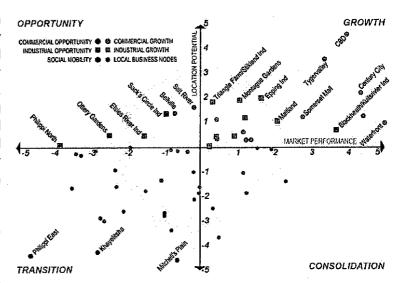


Figure 6: Classification of business nodes (CTSDF, 2018)

4.3. Environment

Cape Town's natural environment is one of its most valuable assets and supports much of the economic, social and biophysical systems and processes that make the City unique and desirable to live in.

The natural environment includes, "natural areas and active and passive recreation areas such as sports fields, parks, squares, detention ponds, servitudes, river corridors and road reserves. Benefits from the natural environment are derived in direct and indirect ways and the natural assets play an important role in shaping where and how the city has developed and will develop in the future" (CTSDF, 2018).

The key natural assets in the city include biodiversity conservation areas, ecological support areas, natural vegetation, terrestrial and freshwater aquatic habitats within the city's extensive network of rivers and wetlands, coastal areas and beaches which are important economic and recreational assets for the city, groundwater aquifers, agricultural and other sites and landscapes with scenic, recreational or place-making qualities.

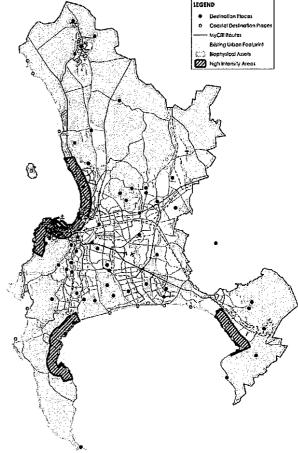


Figure 7: Cape Town's natural assets (CTSDF, 2018)

5. Existing Facilities and Services

Existing facilities and service provision has been assessed as a key informant in respect of gaps in service delivery (quantitative and qualitative). The assessment of existing facilities and service provision included:

- service menu/core business and the associated facilities;
- quantitative research¹ and analysis which reflects the current facility provision in relation to standards² for provision and existing facilities, targeting backlog determination;
- qualitative analysis, underpinned by line departmental, operational information and intelligence.

This section presents the high level findings of the research and identified areas of shortfall. It reflects the scale and extent of need in respect of infrastructure.

5.1. Health

City Health provides comprehensive Primary Health Care services (in partnership with Western Cape Provincial Government), as well as Environmental Health Services.

Personal Primary Health Care Services are rendered at 107 Clinics and focus on

- Reproductive and Women's Health programme
- TB control
- HIV/AIDS programme
- Adult curative: Chronic care at selected Community Day Centre (CDCs)
- Alcohol and Substance Abuse Programme

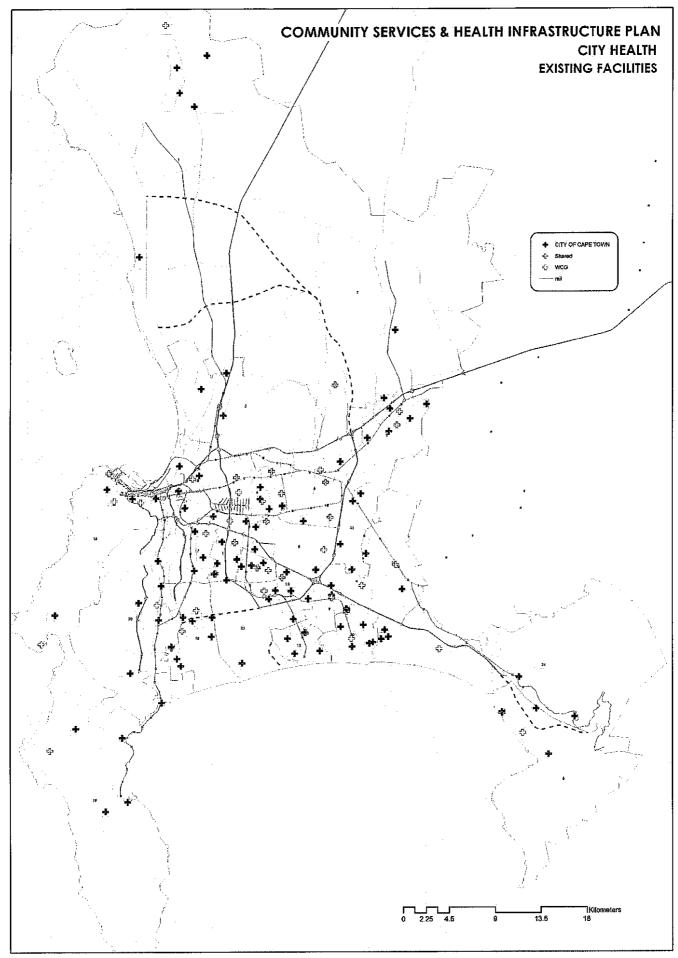
The core business of the City Health Department is the provision of Environmental Health Services, which includes **monitoring access to basic services** (waste management, taps and toilets) and subsequent health risks; monitoring of water quality; food safety; health surveillance of premises (Early Childhood Development ECD's) and government institutions; surveillance, investigation and activities to prevent outbreaks of communicable diseases; vector control; environmental pollution control; disposal of the dead and hazardous waste.

Operations and service delivery within the Public Health realm are faced with a **high burden of disease** (HIV/TB/STI, other infectious diseases, maternal & child health issues, non-communicable diseases) and trauma related conditions in vulnerable, densely populated & under resourced communities, including such as informal settlements.

From an infrastructure perspective, the department is impacted by **ageing facilities**, fleet and equipment. It also faces challenges meeting the mandatory Ideal clinic & National Core Standards, as well as the National Environmental Health Norms & Standards due to resource constraints. This is exacerbated by a history of underfunding from other spheres of government for services rendered.

² Summary Guidelines and Standards for the Planning of City of Cape Town Social Facilities and Recreational Spaces (3rd revision) 2014

¹ Forward Planning 2032: Social Facilities in Cape Town, 2014



Map 1: Existing Health facilities

5.2. Library and Information Services

Services are rendered at **104 Libraries** (2 City Wide; 22 Regional; 78 Community; 3 Mobile/Busses and include access to:

- Reading and reference materials, including books, newspapers, magazines and journals, as well as audio-visual materials (audiobooks, CDs, DVDs, etc.)
- Electronic resources (e-Resources), e.g. Britannica Online, as well as SmartCape (internet) and free Wi-Fi
- An information and referral service
- Reader's guidance to contribute to the development of and sustaining a culture of reading
- Block loans to community organisations, including primary schools and crèches
- Photocopying facilities
- Library halls and spaces for cultural and social interaction
- Study areas

The programmes run by the department include:

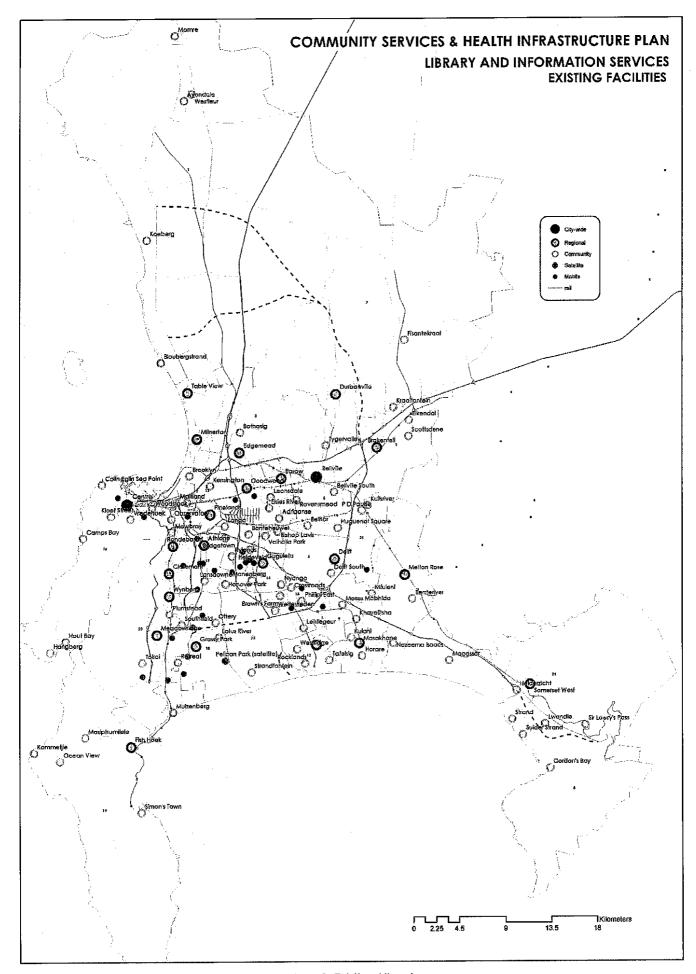
- Reading Programmes
- Story-telling sessions
- Book clubs
- Adult Outreach
- Teen Outreach
- Information Literacy
- Holiday programmes
- Library Orientation

In respect of the distribution and capacity of the existing facilities, the following has been identified in research and modelling conducted by the City³:

- Most people are within reach of a library at well under a 5km travel distance.
- There spatial mismatch in terms of capacity and services some areas are underserved.
- The significant backlogs in provision exist in the metropolitan south-east, as well as I the
 north-east areas of the City. The significant shortfall in the north western area of the City
 is being addressed through the provision of a new library which is under construction in
 Du Noon. A total of 10 new libraries are projected to be required by 2033, more than
 half of which reflect existing backlogs.
- 8 current community libraries have been identified as **requiring additional capacity** through expansion and upgrading.
- A further 9 existing community libraries require major upgrade/expansion or relocation
 in proximity in order to significantly increase capacity as the need has been identified
 for regional libraries given the empirical need given existing population numbers and
 anticipated growth.

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³ Forward Planning 2032: Social Facilities in Cape Town, 2014



Map 2: Existing Libraries

5.3. Recreation and Parks

The purpose of the Recreation & Parks Department is to ensure the delivery of recreational programmes, as well as the effective management and maintenance of amenities and parks to enable increased usage thereof. This includes the following facilities:

- 179 Sports Facilities (524 individual Sports Fields); 180 Indoor Centres
- 36 Swimming Pools and 28 Beaches
- 3571 Parks (13 Regional Parks) and 13 Resorts
- 8 Bath Houses
- 40 Cemeteries and 1 Crematorium
- 1333 Undeveloped POS; 1927 Hectares of Road Reserves; 354 Green Belts and 10 Biodiversity Areas.

The department undertakes the following programmes from its wide range of facilities:

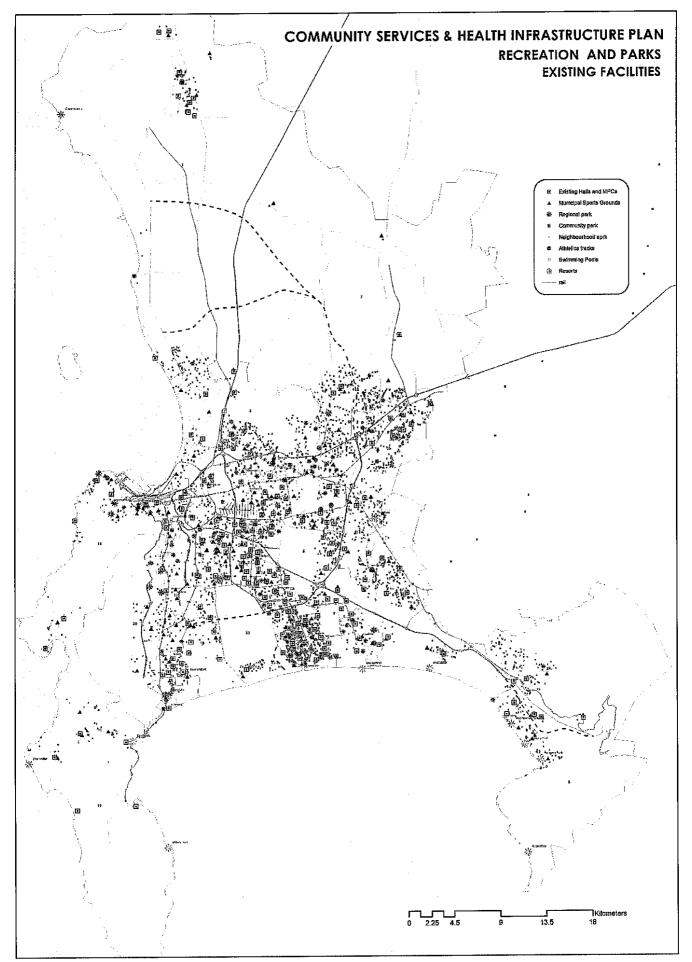
- Development programmes at Recreational facilities
- Learn to Swim
- Holiday Programmes
- Sport against Crime
- Events & Recreation Festivals
- Sport partnerships
- Tree Planting
- Arbor Month
- Water Saving

In respect of the distribution and capacity of the existing facilities, the following has been identified in research and modelling conducted by the City4:

- Existing municipal multicode sports grounds will only serve 79% of the population in 2032.
- Multi-purpose centres current service levels are at 85%, service levels decrease to 78% by 2032.
- Significant **backlog areas** exist and development of facilities is required in the metropolitan south-east, north-east and north-west, where population numbers have grown rapidly in the last two to three decades.
- In respect of parks and recreation amenities, there is spatial mismatch between supply
 and demand (population distribution / density) of developed park space, despite City
 wide overall supply being sufficient.
- 75 community or neighbourhood parks and 10 regional parks are required to address underserved areas by 2032. Many of these are required in respect of existing areas/backlogs which are also predominantly low income areas.
- Condition assessments of the departments immovable property⁵ found that key areas
 of concern are maintenance and functional suitability of facilities, specifically for
 community centre buildings and sport facility buildings.
- In respect of cemetery provision, there is a shortage of cemetery land to meet the
 existing demand, despite other interment alternatives such as cremation being
 provided. There is a severe lack of burial space in specific parts of the City, such as the
 metropolitan south-east

⁴ Forward Planning 2032: Social Facilities in Cape Town, 2014

⁵ Immovable Property Asset Performance Report, City of Cape Town, 2016 Community Services & Health Infrastructure Plan 2019



Map 3: Existing Recreation & Parks

5.4. Social Development and Early Childhood Development

The Social Development and Early Childhood Development Department (SD&ECD) is responsible for **improving** the **well-being** of all the citizens in the boundaries of the City of Cape Town, with the particular emphasis on **vulnerable** and **poverty stricken groups**, through the delivery and provision of community based social and early childhood development services, arts, culture and heritage programmes, facilities and developmental programmes.

The following programmes are undertaken by the department:

- Arts, Culture and Heritage promotion, support and development
- Vulnerable seniors and persons with disabilities
- Vulnerable women and children
- Street people programme
- Youth Development
- Substance Abuse
- Poverty Alleviation

In respect of facilities, the department is responsible for **34 Early Childhood Development Centres**. It aims to provide support and guidance hundreds of privately owned and managed ECDs which are commonly unregistered, have insufficient space or facilities to meet registration requirements and practitioners that are not adequately trained to effectively manage the facilities to best address community needs.

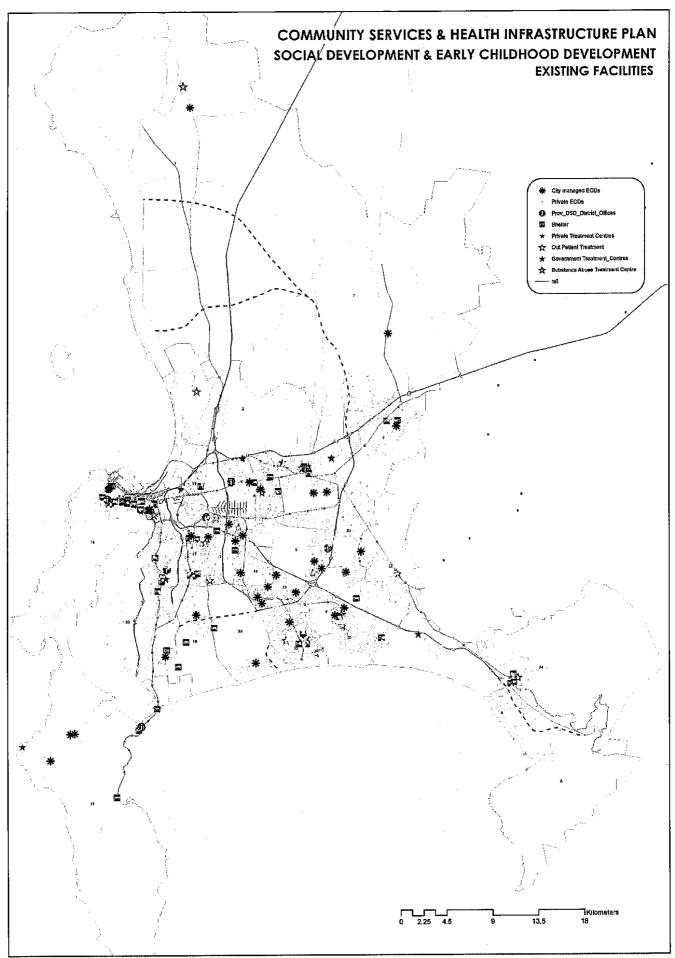
The department is also responsible for 11 Arts and Culture facilities across the city where communities are offered platforms for arts and cultural expression.

Street people and the associated social challenges are a key issue in respect of SDECD. The Safe Spaces project represents a pilot that has been implemented on the Foreshore as a secure space for street people/vulnerable groups to seek shelter. The facility is being monitored and an assessment of its success is likely to determine the extent of future roll-out of similar facilities.

The needs and challenges of Cape Town's **youth** (which forms 25% of the total population) are numerous, including low levels of education (40% have matric), high unemployment and poverty rate (86% of people between 15 and 19 years old receive Child Support Grants), exposure to substance abuse and violence. For these reasons, interventions are required that target the layered needs of the youth.

A network of other government and private community/social services facilities exists across the City including **shelters**, **treatment centres**, **DSD offices** and **youth facilities** form a network of support. SDECD is geared towards making connections and leveraging the variety of programmes and services offered.

There appears to be an insufficient number of facilities that address the abovementioned social challenges in a targeted and integrated manner.



Map 4: Existing SDECD

5.5. Community Services & Health Directorate trends

Key challenges relate to historic facility provision imbalances, as well as rapid expansion of residential areas (including informal settlements), particularly in low and lower to middle income brackets over the last number of decades. Growth has not been accompanied by sufficient development of social facilities and services, despite national policy discourse requiring integrated human settlements (see city historic growth map below). Addressing this is key to spatial transformation required in the city and highlighted in the City's spatial policy. While these disparities characterise existing urban areas, significant pressures to address new human settlement development also exist.

Facility management, maintenance and vandalism are ongoing operational challenges that severely impact service provision and are prevalent in many areas of the City. Recent studies undertaken by the City Property Management Department and line departments support this, highlighting in particular long term and significant maintenance backlogs and deteriorating facilities and infrastructure. It points towards the need to intervene in the area in order to identify new, innovative approaches to facility maintenance challenges.

The available budgets are not sufficient to address the full extent of needs in respect of standard facility provision. Innovative and pragmatic approaches will have to be adopted to address needs in the most efficient and impactful manner within the constraints that exist. New funding sources and mechanisms must be pursued actively.

In respect of vandalism, all too often community/social services infrastructure is a primary target. Numerous recent examples amount to millions of rands in damages. Even with significant efforts to mitigate the problem, there are areas where it persists. Security costs are extremely high in efforts to protect facilities.

The impact of the drought on facilities has also been severe, most notably for Recreation and Parks facilities where structured, formal sport has had to be cancelled, among other impacts.

Integration in the planning, design and management of facilities is a fundamental challenge. Opportunity exists to make better use of limited resources through collaborative, co-operative and integrated planning, design, development and in particular, management of Community Services & Health facilities. The benefits of agglomeration are not realised currently given the number of stand-alone facilities, as well as the separate management of facilities that area close to one another.

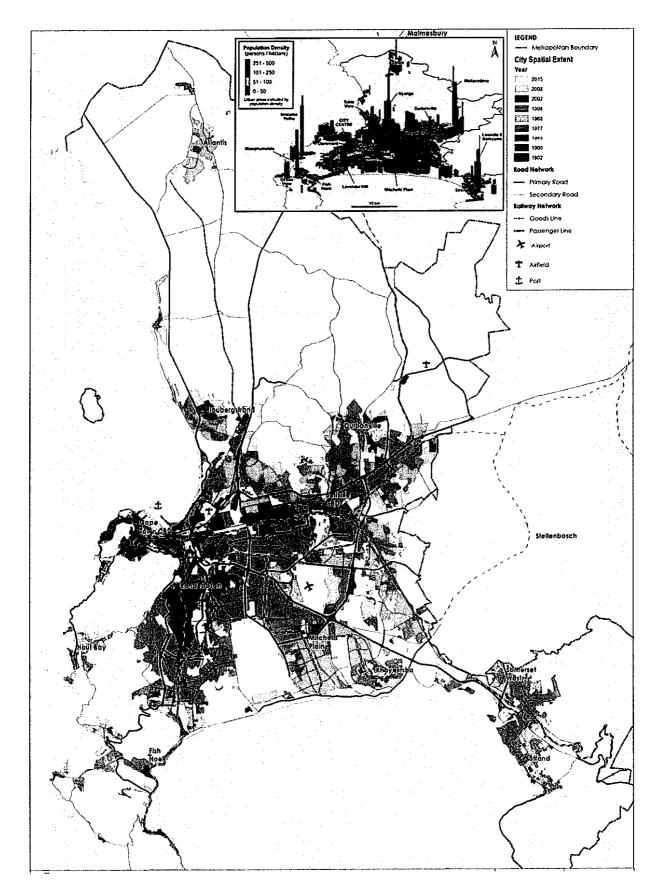


Figure 8: City Historic Growth (CTSDF, 2018)

6. Approach and Principles

Community Services & Health facilities are fundamental in providing opportunities to improve quality of life related to health, learning, recreation and social support that assist community development and social cohesion. Future investment in the social facilities will be guided by an **integrated approach** to planning and facility provision, aligning to City spatial priorities, while driving integration across community/social services sectors and programmes.

Future investment in social facilities should focus on:

- **Precinct planning** and **development**, driving investment in strategic locations which address greatest need as well as capitalise on other city infrastructure and development to maximise access and optimal functionality (TOD, HS, IS priorities).
- expanding capacity through upgrading/expanding existing facilities or developing new facilities in areas they are needed most.
- Developing **new models** of **co-location and clustering** as well as multi-level facilities by actively engaging with space allocation (erf sizes and building design).
- Key departmental strategies and programmes such as IT Modernisation, Water Resilience, Ideal Clinic Status & National Core Standards, Integrated Recreation and Parks facilities, Social Development & Early Childhood Development Centres and the Cemetery programme.
- A clear notion that developing new facilities on the outskirts of the city will exacerbate the backlog demand in the built-up part of the city.
- The provision of Community Services & Health to **Informal Settlements** will be aligned with targeted strategies and interventions of the Integrated Human Settlement Directorate (e.g. "Site and Service" programmes).

Community Services & Health and Integrated Human Settlements will jointly determine the localised basic needs of specific informal settlement where after services will be provided taking the local challenges of land ownership, zoning, land availability, private sector partners, NGO's in the community, community structures, budget availability, ongoing management and maintenance ext. into consideration.

Different "standardised social facilities provision models" must be developed, tested and will be further refined, adapting according to every locations challenges and realities. This approach is also part of the City's Human Settlement Strategy.

Collaborative planning to develop **new management models** for multi-use, multi-ownership social facilities sharing a (good) location (currently a component of the work being undertaken by the City's Optimisation Programme). There is a need to look at new institutional options for management of these facilities.

Cost containment and **revenue generation** for social facilities is to be pursued. This requires clear strategies and approaches. Careful location planning is required to reduce risks of vandalism. Citizen engagement should be prioritised and private sector partners should be sought.

In respect of projects undertaken by the Directorate, efforts are to be made to increase the number of work opportunities created for employment of unemployed job seekers where possible in support of public employment targeted towards economic inclusion.

7. Facility Development Framework

The development framework provides direction in respect of facilities required to address key gaps and target equitable, efficient service delivery on a metropolitan scale, across the Directorate.

The basis for this framework is the backlogs reflected in the preceding sections, as well as line departmental experience of operations and capacity pressures. While these are strong informants and guide the proposals of the development framework, further benefit will be derived from more detailed asset condition research and analysis. This will support an asset management plan that better guides lifecycle management and maintenance of facilities in order to optimize the condition and impact of the key facilities in particular.

7.1. Health

7.1.1.Strategic intent

The core business of the City Health Department is Environmental Health Services or Municipal Health Services (as defined in the Municipal Health Act 61 of 2003), as well as delivering Personal Primary Health Care (PPHC) Services. In respect of this infrastructure and facility planning, facilities delivering are the PPHC services are the focus.

City Health infrastructure planning and investment will be targeted towards:

- IT modernization to improve the quality of the service by improving the patient clinic interface, record management and reducing waiting periods. This is driven at a programme level and the system is being piloted with preparation underway to roll it out across the City incrementally.
- Incremental upgrading towards achievement of and **Ideal Clinic** status and ultimately National Core Standards at existing facilities.
- Optimisation of existing facilities, involving expansion and major upgrading of facilities that have insufficient capacity to serve the communities within which they are located.
 49 clinics have been identified as requiring expansion or upgrading.
- Development of new facilities in major backlog areas where the minimum standards for facility provision are not met. 15 new clinics are required to address existing backlogs and projected population growth.

The alignment and agreement in respect of Provincial and City priorities is key to efficiency and effectiveness of in delivery of health services. Targeted engagement is to be undertaken in pursuit thereof.

The anticipated cost to address the present and future infrastructure requirements is **R2.5 billion** at current costs, up to 2035, approximately half of which represent existing backlogs.

7.1.2.Ideal Clinics & National Core Standards

Ideal Clinics⁶ comprises a set of standards set by the National Department of Health, comprising various elements to support the promotion of health and prevention of illness at health facilities. It is a benchmark by which the optimal functioning of facilities is measured and City Health has prioritised striving towards Ideal Clinic status in all its facilities. In respect of

⁶ Ideal clinics are defined as having "good infrastructure, adequate staff, adequate medicine and supplies, good administrative processes and sufficient bulk supplies that use applicable clinical policies, protocols, guidelines, as well as partner stakeholder support, to ensure the provision of quality health services to the community" (Dept of Health, 2017).

infrastructure, specific requirements are to be met, including, physical space, essential equipment, storage areas for bulk supplies, as well as ICT infrastructure. Ideal clinic status represents advancement towards meeting National Core Standards, which City Health is also pursuit of.

In the City, a number of the 84 clinics managed by the City of Cape Town do not meet Ideal Clinic Status and these will be prioritised for upgrading related specifically towards IC status.

Prioritisation between these should be guided by:

- Key infrastructure absence/shortage: waiting areas, consultation rooms, pharmacies and storage rooms (medicines, consumables etc.).
- Facilities that are within or close to significant backlog areas (where new facilities are proposed).
- Whether the facility is under capacity/is identified below as one that requires expansion.

7.1.3. Expansions/major upgrades

The key driver of these expansions is optimisation in areas where demand exceeds supply and the existing facilities could be upgraded or expanded in order to address critically undercapacitated areas. Preferably, the facilities identified as ideal clinic/national core priorities should be expanded/upgraded first, including increasing capacity where possible.

The following 49 clinics facilities require intervention.

Table 1: Clinic expansion/upgrading

Name	Capacity	Name	Capacity
Bishop Lavis CDC	90000	Wallacedene clinic	60000
Crossroads CDC	90000	Weltevreden valley clinic	60000
Delft CHC	90000	Durbanville CDC	40000
Delft south clinic	90000	Eerste river clinic	40000
Guguletu clinic	90000	Fisantekraal clinic	40000
Gustrouw CDC*(r)	90000	Grassy Park CDC	40000
Heideveld CDC	90000	Lady Michaelis CDC*	40000
Inzame Zabantu CDC	90000	Lotus river clinic	40000
Khayelitsha (Site B) CHC *(r)	90000	Macassar CDC	40000
Kraaifontein CHC	90000	Blue downs clinic*	30000
Kuyasa CDC	90000	Brackenfell clinic	30000
Matthew Goniwe CDC*(r)	90000	Claremont clinic*(r)	30000
Michael Mapongwana CDC	90000	Dirkie Uys CDC	30000
Mitchell's Plain CHC	90000	Dr Ivan Toms clinic	30000
Saxon sea clinic	90000	Elsies river clinic	30000
Tafelsig CDC	90000	Green Point CDC	30000
Town 2 CDC	90000	Kleinvlei CDC*(r)	30000
Vanguard CHC	90000	Masiphumelele clinic*(r)	30000
Albow gardens clinic	60000	Pelican park satellite	30000
Bothasig clinic	60000	Protea park clinic	30000
Mfuleni CDC	60000	Somerset west clinic	30000
Nolungile CDC*(r)	60000	Strandfontein clinic	30000
Ravensmead CDC	60000	Westlake clinic	30000
Rocklands clinic	60000	Mamre CDC	20000
Seawinds clinic	60000	Uitsig Clinic	
Ikhwezi clinic			

Priorities for expansion of clinics in short and medium term have been identified as Albow Gardens, Factreton, Phumlani (Phillippi), Ocean view, Masiphumele, Kuyasa, Luvuyo, Sir Lowry's Pass, Uitsig, Delft South and St Vincent.

7.1.4.New facilities

These include facilities where entirely new facilities area required, as well as those where the relocation or complete redevelopment of an existing facility (on a new or existing site).

Agreement is to be reached between which of the required new facilities to be built by PGWC and which will be built by the City.

15 new clinics are required in the City of Cape Town to address backlogs and ancitipated population growth, which inloude:

 Hanover Park, Gugulethu CHC, New Stikland, New Blaauberg, New False Bay, Gordon's Bay, Swartklip, Lentegeur, Kuilsriver/Highbury, Elsies River, Dr Abdurahman CDC, Maitland CDC, Belhar, Retreat CHC, New Hout Bay CDC.

For the City of Cape Town, making provision for new clinics over 10-15 years is going to involve finding balance and recognising affordability of capital and operational costs associated. The cost of replacing a clinic or constructing a completely new one is capital intensive (approx. R40m).

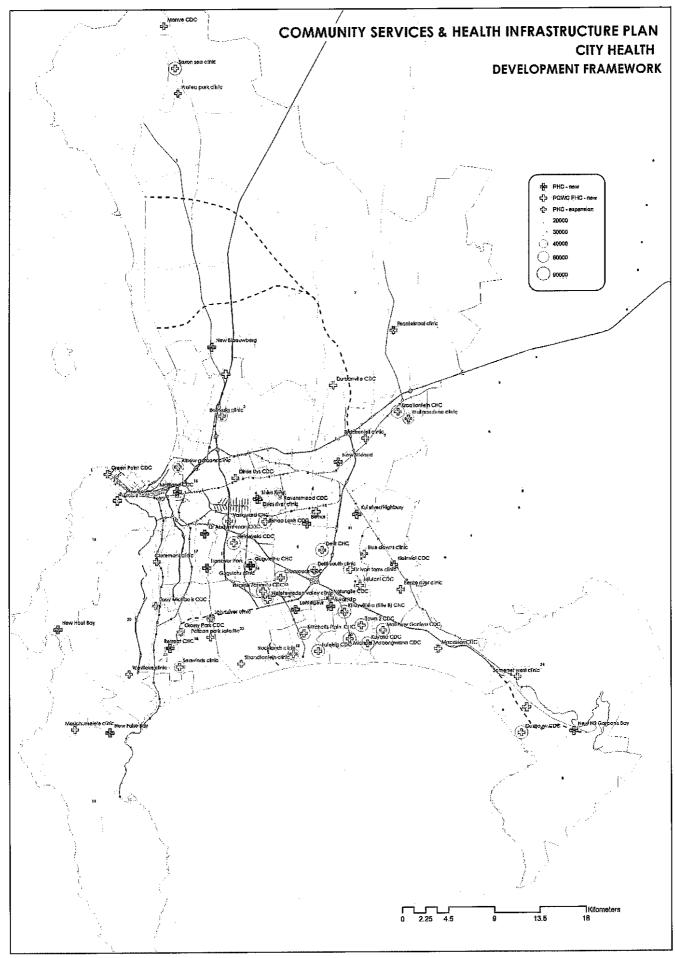
Completion of Pelican Park Clinic, Zakhele (replacement) and Fisantekraal are priorities for the MTREF. Planning for new facilities at Matthew Goniwe, Wallacedene, and Westlake clinics.

The PGWC has identified the following priorities:

New facilities:

- o KMP: Hanover Park CHC (90k), Gugulethu CHC(60k), Weltevreden CDC (60k)
- o SWSS: Hout Bay CDC (45k), Masiphumele (45k), Lotus River CDC (60k).
- o NTSS: Bloekombos CDC (60k); Fisantekraal CDC; Delft South CDC
- o KESS; Kleinvlei CDC; Site B Minor; Site B CDC refurbishment; Mfuleni CDC
- Replacement of facilities: Hanover Park CHC (new site); Gugulethu CDC1 rebuild on existing site; Gugulethu CDC 2 new facility (new site); Nyanga CDC; Weltevreden CDC; Masiphumele, Hout Bay; Langa CDC; Maitland CDC; Scottsdene CDC; Kraaifontein CDC; Bloekombos CDC; Wallacedene CDC; Parow CDC; Bellville CDC, Belhar CDC Delft CDC, Delft South CDC, Symphony Way CDC, Ruyterwacht CDC, Nolungile CDC, Mfuleni CDC
- Upgrades: Abdurahman CDC; Lenteguer; Retreat; Ocean View

It is envisaged that the PGWC will work collaboratively with the City towards aligning priorities and delivery in order to maximise impact of infrastructure investments.



Map 5: Proposed Health

7.2. Library and Information Services

7.2.1.Strategic Intent

The Department has highlighted as part of its overarching strategy the pursuit of:

- Additional revenue streams by targeting partnerships (eg Friends groups, CSI) such as those which have yielded positive contributions and outcomes in the past,
- Improving delivery through staffing strategies that target training and development, filling skills gaps, particularly in respect of scarce skill, as well as,
- Increasing efforts to promote the service and lobby for resources where opportunities exist (eg ward allocations, grants etc.)

In respect of infrastructural development and improvement, resources will need to be actively pursued in order to realise required development, which includes:

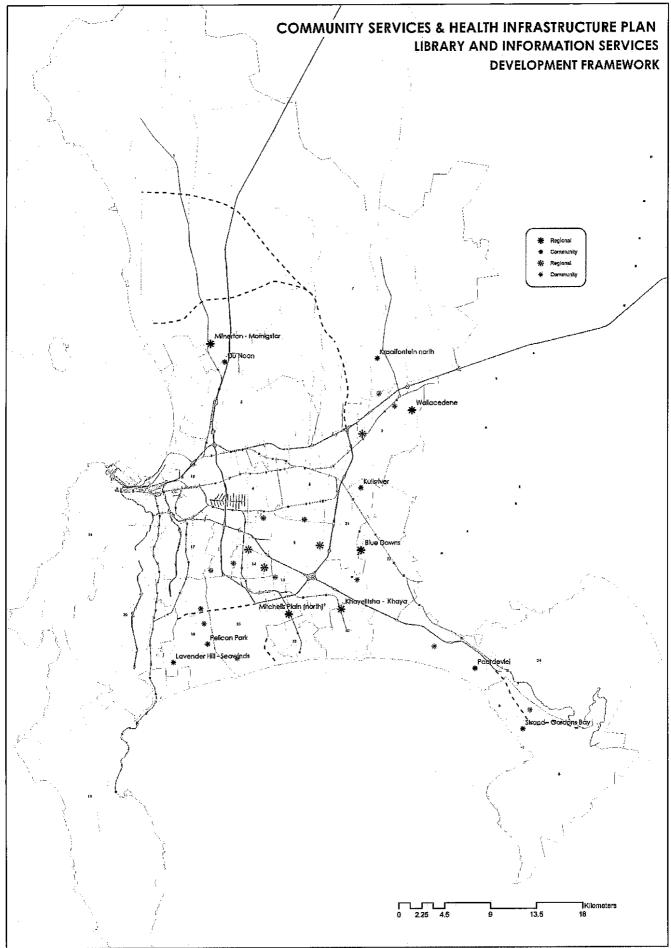
- New facilities and expansion, to address major facility backlogs within capital budget constraints. This involves construction of new library buildings (new or relocation) to address areas of highest need in the City. It also includes building on successes and expanding spaces in libraries where they are most needed and will have a significant impact on delivery of library services to underserved communities. Extending specific areas of libraries identified by the LIS Department, such as study areas, computer areas or flexible/multi-use spaces to facilitate community programmes. Interventions should ideally be within C&H Precincts and be associated with other planned or completed City investment.
- **Optimisation**, which may include increasing capacities in certain areas and reducing it in others, as well relocation of facilities into integrated developments.
- Hardening of facilities and improving security in areas where it is required and remains
 feasible to operate the library, rather than to relocate it.

The table below lists short and medium term facility upgrading and development proposals.

Table 2: Libraries - proposed new and upgrading

Short & Medium term priorities			
New /replacement		Upgrade/expansion	
1	Manenberg Regional Library*	Hanover Park Community Library	
2	Nyanga Regional Library*	Lwandle Community Library	
3	Blue Downs Regional Library	Delft Regional Library	
4	Wallacedene Regional Library	Mfuleni Community Library	
5	Seawinds Community Library	Bishop Lavis Community Library	
6	Khaya/Site B Regional Library	Gugulethu Regional Library	
7	Tableview North /Morningstar	Weltevreden Community Library	
8	Pelican Park Community Library	Mamre Community Library	
9	Mitchells Plain Regional Library		
*Relo	cation	,	

The anticipated cost to address the present and future infrastructure requirements is R2 billion at current costs, up to 2035, approximately half of which represent existing backlogs.



Map 6: Proposed Libraries

7.3. Recreation and Parks

7.3.1.Strategic intent

A **Water Resilience Programme** should underpin development of all facilities within Recreation and Parks.

The Integrated Facilities Programme, within which a driving principle is clustering facilities for resource efficiency, is an infrastructure development focus. The programme should enhance and optimise facility clusters comprising multi-use and multi-code facilities.

They should incorporate a range of facilities such as **multi-purpose centres/halls**, **athletics tracks** (to be informed by city wide athletics study), **sport grounds**, **synthetic pitches**, **pools** and so on. Within this programme, the following types of projects may be pursued. Stand-alone facilities should be avoided.

- Regional Hubs/Centres facilitate organized, formal sport and incorporate informal recreation and play. These facilities are regionally accessible and incorporate the following:
 - o Multi-code & multi-use facility: soccer, athletics, cricket, netball, rugby, hockey, swimming, cycling and tennis which meet federation standards.
 - Host major sporting events: should have existing, well-functioning infrastructure which is suitable for an upgrade. Ideally, the goal is to have minimal infrastructural investment.
 - o Collaboration between stakeholders: must strengthen existing programmes through collaboration between the City, federations, clubs, communities and organizations.
 - o Equitable distribution: located in a manner which takes into consideration population densities and dynamics, and access to the facility to all.
 - o 6 hubs identified include Vygieskraal, William Herbert, Blue Downs, Mandela Park, Theo Marais, Parow.
- Family Recreation Facilities has a broader focus on growing active lifestyles, informal recreation and encouraging participation, a cornerstone of national sports and recreation policy.

The **Optimisation Programme** should focus on the assessment and evaluation of facilities in respect of their current functioning and performance in active pursuit of improving outputs and value. This should be done by assessing relative costs and benefit in the daily operation of facilities, seeking out opportunities to maximize use and minimize costs. The following targeted projects are to be undertaken within the programme.

- Sports Ground optimisation utilising mechanisms provided by new Municipal Sports Facility Policy.
- Recreation facilities audit(s) & performance evaluation(s) Community Centres/Halls in particular
- Categorisation of parks categories are to guide capital investment as well a maintenance approach.
- Rationalisation of open space in areas of oversupply of public open space.

The **Cemetery Development Programme** is targeted towards the provision of adequate burial space within the city. Land and addressing the project pipeline and project packaging are key factors driving delivery. Larger cemeteries are targeted for development, as is the pursuit of infrastructure that supports alternative interment such as additional cremators. Atlantis, Welmoed and Tafelsig (long term) are key large scale projects. Additional cremator capacity at Maitland and Atlantis are also to be pursued.

7.3.2.Recreation

The following facility developments should be prioritised based on the backlogs identified, as well as planned locations for development/major upgrading of facilities:

- Synthetic Pitches: This programme will include full size, as well as 5-a-side synthetic
 pitches. It should form part of multi-code sportsground and be proximate to other
 facilities. A SAFA agreed list of facilities, regional recreation hub sties (as above) and
 partnership opportunities are to be pursued.
- Swimming Pools: In the wake of the drought that the City has faced over the last number of years, the Department adapted its approach to the provision of public pools. In future, pool provision will need to be circumspect. Supporting growth in participation in swimming is s key objective. Infrastructure upgrading is to occur at targeted facilities and should be focused on extending hours at those facilities, as well as community programmes such as 'learn to swim' programmes. Conditional risk assessments will need to be done at existing facilities to inform investment.

Upgrading may include interventions like covering pools to extend months and hours of use. Similarly, changes associated with pools being able to be utilised for competitive swimming (ie 25m & 50m pools). In certain instances, pool length needs to be adjusted, in other instances the depth or functionality adjustment may be required for learn to swim programmes.

- CS Centres in Informal Settlements: These centres are locations managed by R&P, out of which services of any of the CS&H Departments can be delivered, or community activities can take place, depending on the specific needs of the community. It is Linked to ECDs in IS which are operated by SDECD. They typically include a minor hall and outside play area. Important that inroads are made into the larger, more complex informal settlements together with the IS Department over the next 10yrs.
- Community Centres: Areas where facilties should be investigated include Makabeni Park; Enkanini Informal Settlement; Delft South Sports ground; Blue Ridge Sports Ground; Bellville sports ground; Melkbosstrand Development; Parklands Dumpsite; Belhar Greenbelt; Eerste Rivier Sports ground; Darwin Road Redevelopment; Du Noon Southern Sports ground;
- Multi-code Sport Grounds: Khayelitsha CBD & Mandela Park; Makabeni Park; Enkanini Informal Settlement; Silversands/Highgate; Theo Marais Sportsground; Hout bay sportsground; Belhar Greenbelt; Mfuleni Sports Ground; Bellville sports ground; Bishop Lavis Sports Ground are to be planned for and developed.

7.3.3.Parks

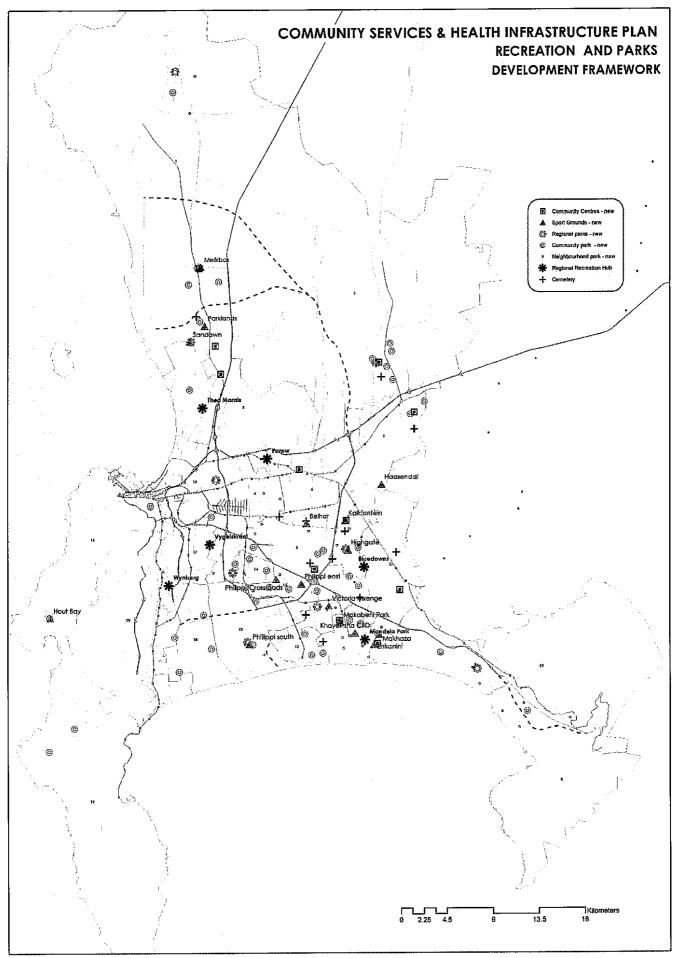
The following facility developments should be prioritised based on the backlogs identified, as well as planned locations for development/major upgrading of facilities:

• Park development: Ongoing investment required into existing regional parks, which are the premier public parks in the City. In addition, an integrated and equitably distributed network of parks with differentiated hierarchy should be built across the City.

• Rationalisation^Z of open spaces should be pursued on the basis of a clearly defined framework and should incorporate City wide identification of properties that could be rationalised.

The anticipated cost to address the present and future infrastructure requirements is R3.5 billion at current costs, up to 2035, approximately half of which represent existing backlogs.

⁷ City Parks Framework for Open Space Rationalisation, 2012



Map 7: Proposed Recreation & Parks

7.4. Social Development and ECD

7.4.1.Strategic intent

Programme delivery⁸ is key to executing the strategies of the department – infrastructure provision should focus on improving/enhancing the platforms for provision. The key departmental strategies include:

- Early Childhood Development (ECD)
- Youth Development (Social Inclusion)
- Substance Abuse, Strengthening Families and Game Changers
- Vulnerable Groups
- Poverty Reduction
- Street People
- Social and Situational Crime Prevention
- Arts and Culture

In pursuit of the high level strategies, the department is focused on:

- assisting with registration of facilities, construction of new ECDs on City-owned land, as
 well as training and capacity building of ECD practitioners, caregivers, parents and
 ECD forums.
- Identifying and pursuing opportunities for the provision of facilities targeted at **youth**, with a focus on **life skills** development and **job preparation**/entrepreneurial training.
- Assessing the impact of the pilot Safe Space which has been developed in the City, with the view to potential replication and further roll-out.

Infrastructure related interventions identified include:

- Improving access to facilities traditionally used for other purposes (programmes at clinics, halls, parks, libraries).
- Expanding/upgrading existing facilities that could with minimal upgrading significantly enhance delivery of services.
- Construct new facilities in key areas where need is identified and quantified.

7.4.2. Access and Expansion

The following is to be pursued in respect of access to existing facilities and buildings:

- Access to facilities such as halls, libraries and parks (open space) Recreation facilities
 and Library halls/meeting rooms which are not oversubscribed offer opportunities to
 extend the footprint of key awareness programmes run by SDECD.
- Expansion of existing CS&H facilities or City buildings can be repurposed to accommodate facilities.
- Supporting and facilitating registration and compliance to legislative requirements for better functioning (city leased ECDs in particular). This requires focused engagement with Property Management in pursuit of standardizing lease conditions in order to align with 'ideal/preferred' conditions.

Numerous partnership opportunities could be leveraged with organisations by developing new facilities on City property for management by Operators.

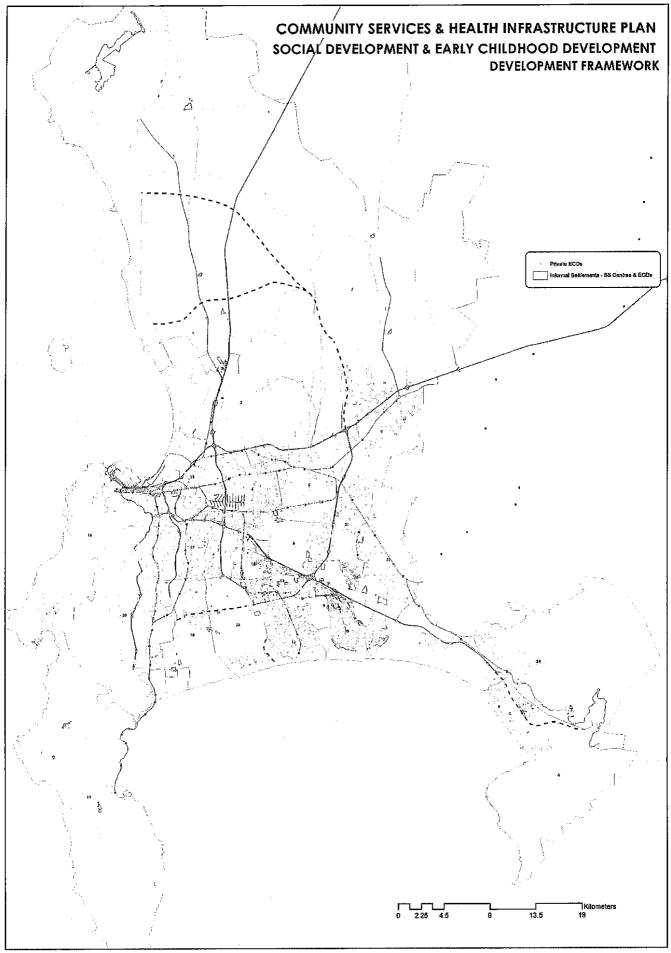
⁸ SDECD Strategic Plan 2017-2022 provides comprehensive detail on the strategies and programmes of the Department.

7.4.3. New Facilities

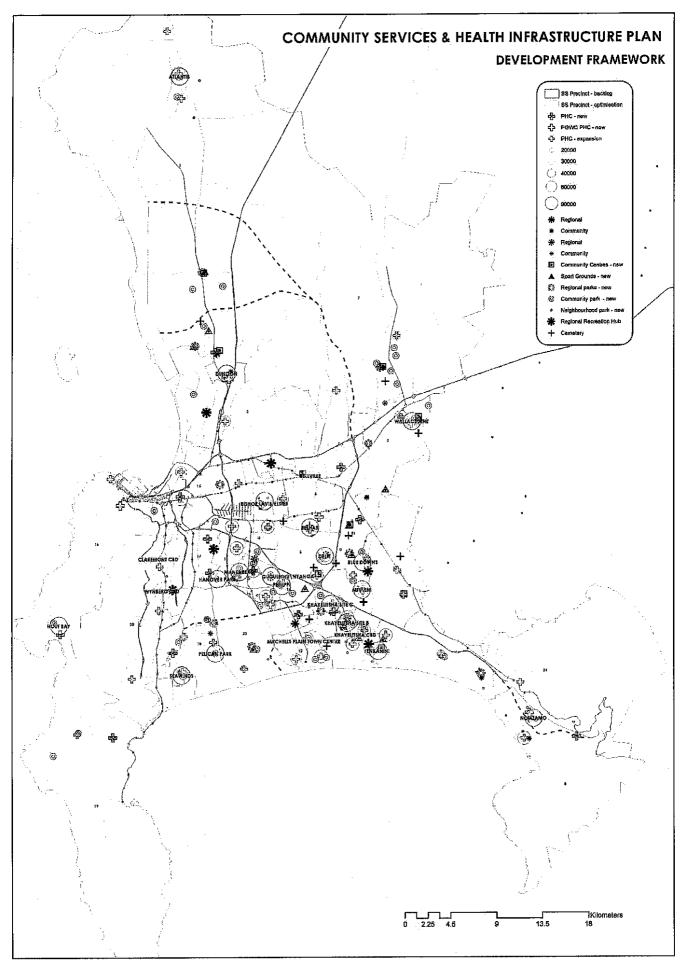
The emphasis for the construction of new facilities is on ECD provision in informal environments given the severity of need. Where possible these should be aligned to an IS Community Services & Health Centre. Identification of settlements for intervention is to occur in partnership and mutual agreement with the City's Informal Settlements Department.

- ECDs in informal Settlements: Early Childhood Development Centres within informal settlements will be linked to CS& H Centres in IS which are operated by R&P. They typically include 6-8 classrooms, an outside play area and space ancillary to ECD operations.
- Youth Centres: The provision of facilities for youth development may be pursued through conversion of existing City buildings, providing space for youth to participate in economic and social development related activities (eg. employment readiness, youth specific arts and culture activities).
- Safe Spaces: The provision of infrastructure for transition space for street people, to facilitate their transition from the street towards other accommodation alternatives (eg back to family, shelters etc). They include safe structures and sleeping facilities at which street people may overnight and have access to sleeping areas, ablutions and potable water. Social Development programmes are implemented in order to facilitate transition off the street. Stays are limited to 6 months.
- Arts and Culture: Improvements to existing Arts and Culture facilities at which community and cultural activities are undertaken. This also includes facilities such as the required storage facility for the Immovable Heritage Collection (Mayoral Collection).

The anticipated cost to address the present and future infrastructure requirements is R2 billion at current costs, up to 2035.



Map 8: Proposed SDECD



Map 9: Proposed Social Services - Composite

8. Implementation Framework: Community Services & Health Precincts

The interventions required in the development framework are numerous and require a framework for their phasing and prioritisation. The estimated cost for the facilities identified in the framework amount to R10 billion, R5billion of which reflects requirements to serve backlogs in existing communities.

The focus of this chapter is the approach to implementation of interventions, focusing on the best use of limited resources. It is underpinned by focusing on precincts and clusters of facilities, where the benefits of agglomeration can be realised by residents and departments alike. This includes the identification, profiling and prioritisation of precincts. It also sets out the processes for undertaking precinct planning and project execution in respect of Community Services & Health facilities in particular, in order to guide future planning, design and project execution related resourcing.

It should also be noted that the City's approach to precinct planning is not limited to Community Services & Health and that other Directorates and Departments have adopted similar approaches and identified focus areas. Every effort should be made to establish areas of alignment where the City stands to achieve the benefits of co-ordinated and simultaneous investment.

8.1. Strategic Intent

Precinct planning is underpinned by driving investment in strategic locations which address greatest need as well as capitalise on other city infrastructure and development, to maximise access and optimal functionality. It is also informed by addressing key departmental strategies and programmes within the Directorate.

The objectives that are pursued include:

- Focused planning and design towards spatially targeted interventions in areas of multisectoral and concentrated needs, to **address spatial legacy** of under-provision.
- Co-ordinating and aligning timing of investment within the social services, as well as that of other departments of the city, other spheres of government and the private sector in order to achieve meaningful gains and in the short to medium term.
- Optimise resource use by consolidating existing facilities in order to ensure operational and maintenance resources are utilized efficiently and effectively. An integrated urban management approach to facility management is fundamental.

In pursuit of these objectives, backlog precincts (concentrations of facility backlogs) as well as optimisation precincts (opportunities to consolidate and optimise facilities in development nodes identified in the City Spatial Development Framework) have been identified. The matrix rates the backlog precincts. These precincts should be the focus of investment but a number of other clusters (DSDP's 2012 – 'urban civic precincts') exist across the city and will remain key to provision of community/social services facilities.

8.1.1. Facility Clustering

The foundation of precinct planning in relation to community/social services facilities is the **principles** of **co-location** or **clustering**, in order to address:

 Resource scarcity which demands that public spaces and buildings be efficiently and ideally, for more than one purpose (multi-functionality and sharing).

- <u>Vandalism</u> and concerns around <u>safety</u> are_key challenges faced by public facilities
 which are exacerbated at stand-alone facilities. Shared services and resources
 improve safety through numbers of people using the facilities.
- Optimising space and facility use, as well as attracting <u>different users</u> at <u>different times</u>
 <u>of the day</u>. Activity and multiple users support <u>vibrant</u> and <u>safer</u> spaces.
- Integrated, shared and multi-use facilities support greater <u>efficiency</u> in term of the management and operations of those services.

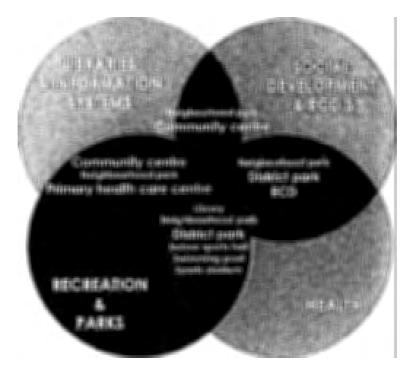


Figure 9: Clustering Social Services

8.1.2. Process and Deliverables

The stages involved in the precinct planning process include:

- Stage 1: aimed at refining and developing the brief that will form the basis for the precinct planning <u>programme</u>.
- Stages 2: involves understanding the <u>context</u> and establishing <u>community</u> <u>engagement</u> mechanisms.
- Stage 3: focus on the development of the <u>precinct plan</u>, through thorough contextual analysis and stakeholder engagements.
- Stage 4: is involves preparing the final product, a precinct plan, <u>public investment</u> <u>framework</u> and including land use planning applications.
- Stage 5 begins to define the social service infrastructure for development within key projects.

The intended deliverables/ outputs of precinct planning include:

- Precinct plan and <u>public investment framework</u> to provide guidance to the various line departments and stakeholders in terms of investment.
- Identify and support preparation of underutilised land for development through a land use authorization.
- Regularise land use in precinct.

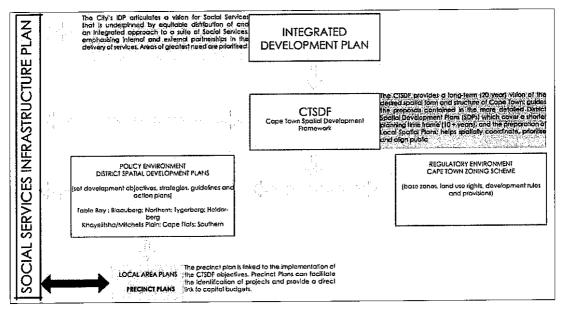


Figure 10: CSHIP in City Planning context

8.2. Identification and Prioritisation Matrix

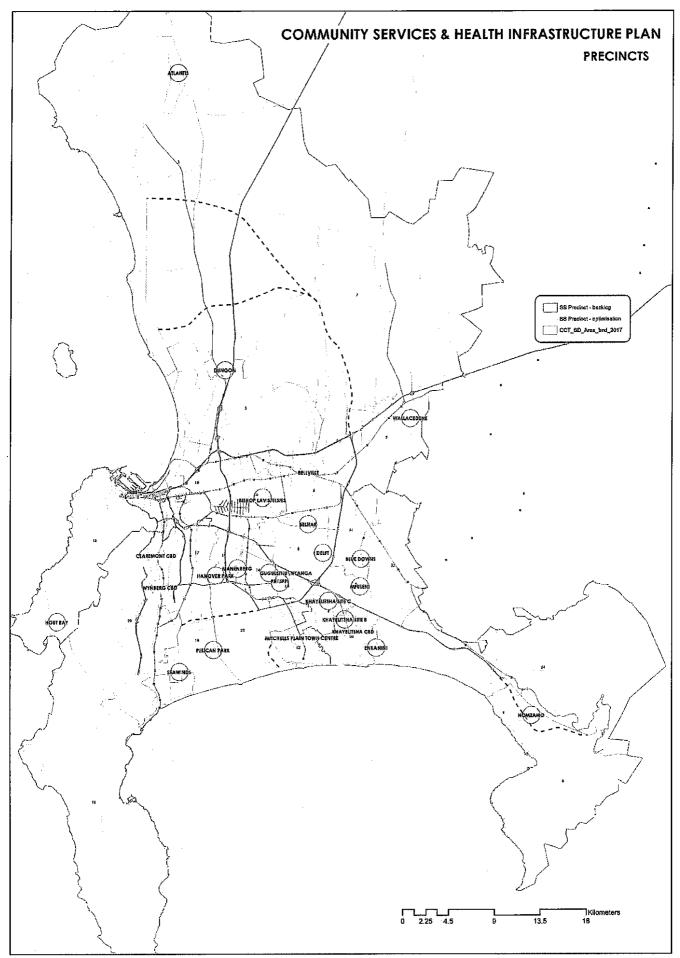
The Community Services & Health Precincts identification and prioritisation matrix is a rating tool that sets out the needs of the Directorate, as well as the alignment of these needs with City's spatial priorities (see annexure 1).

The matrix is a rating tool that scores need across all four Community Services & Health departments in specific precincts and then rates alignment with City strategy priorities. The latter is scored in four areas namely, spatial, economic, transport and human settlements. All backlog precincts are scored in the matrix.

Table 3: Community Services & Health Precincts

Con		Health Precincts per Are		T A 4. Carrella
	Area 1: North	Area 2: East	Area 3: Central	Area 4: South
Backlog	Atlantis (19) Du Noon (15) Hout Bay (13) Wallacedene (4)	Enkanini (8) Khayelitsha Site B (11) Khayelitsha Site C (2) Mfuleni (5) Nomzamo (11)	Manenberg (18) Nyanga/ Gugulethu (6) Hanover Park (14) Elsies River/Bishop Lavis (10) Delft (7) Blue Downs (3) Belhar (12)	Phillippi (9) Seawinds (16) Pelican Park (17)
Optimisation		Khayelitsha CBD	Bellville	Mitchells Plain Town TC Claremont CBD Wynberg CBD

The matrix sets out, on the basis of a consistent and clear set of criteria, ranking for each of the precincts. It provides clarity, for example on which are the highest priority precincts from a Community Services & Health perspective, the highest priorities from the perspective of City strategic alignment, as well as the highest ranked precinct in terms of the aforementioned combined/overall. It is clear from the matrix which specific facilities are required and specifics on how they are aligned to City strategy. There are twenty-four precincts in total. While there are precinct priorities in each Area, Central and East have the highest number of precincts identified, eight and six respectively.



Map 10: Social Services Precincts:

8.3. Precinct Profiles

8.3.1.Backlog precincts

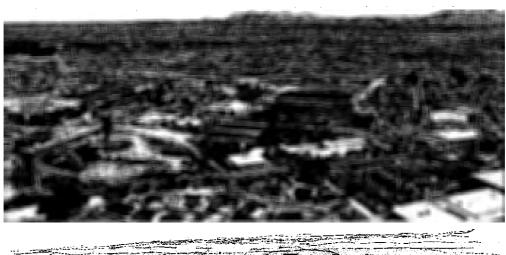
(i) Mfuleni

Mfuleni has an established urban node/precinct. An extensive precinct planning process was undertaken in 2014, which culminated in the finalised precinct plan which was endorsed by the political structures (Subcouncil) of the City, as well as the elected Project Steering Committee (PSC).

The key interventions identified by the plan include: an *9urban park, taxi rank upgrading, main road widening, shared parking, *clinic, *multi-purpose centre, *new civic building, *new school, upgrading of *sports fields, mixed use retail, and additional mixed use sites.

Priority facility developments include the following. A temporary expanded clinic has been constructed to alleviate the high need in the area, while planning and design is underway to develop a new clinic. The urban park has also been constructed and is operational.

The old clinic building is being investigated for an alternate Community Services & Health facility and may be repurposed in the future for a facility aimed at youth development. The library requires expansion to address existing demand and the sports ground also requires upgrading and improvements that will enhance its functionality in serving the variety of sporting needs in the area.



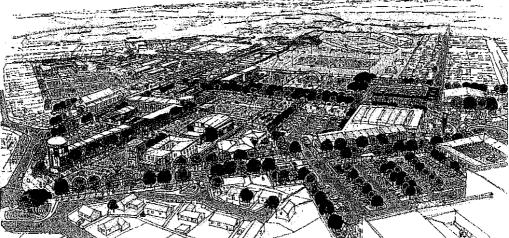


Figure 11: Mfuleni Urban Node

 $^{^9}$ *Social services facilities identified in the Mfuleni urban node/precinct. Community Services & Health Infrastructure Plan 2019

(ii) Manenberg

Precinct planning has been undertaken in the area, with extensive public engagement. The plan identified the need for a safer and more secure environment, as well as a stimulating and cohesive environment where people have easy access to different education and social facilities and programmes. In pursuit of that it proposed the establishment of a series of facilities that would make up a Youth and Lifestyle Campus to address social ills, particularly those affecting youth. It highlighted the need to consolidate key public facilities, linked by safe routes.

The CSHIP identifies the relocation and expansion of the community library and development of high order recreation and park facilities as contributing towards the abovementioned vision. The Greens and surrounds is the civic heart of Manenberg. As such, design was completed and construction is underway on the Greens/Marico Park integrated recreation and parks facility.



Figure 12: Manenberg

The District Hospital, as well as a School of Skills are priority projects identified by the PGWC in the same precinct and are due to be implemented in the short to medium term. The relocation of the existing (isolated) community library into the abovementioned precinct has been identified as a high priority and is being planned currently. Upgrading the existing clinic is also identified.

(iii) Nyanga/ Gugulethu

The Nyanga Urban Node has a completed precinct plan, which sets out the City's vision for the area and identifies a series of projects that could be implemented to achieve that vision. It is centred around transforming the existing public transport interchange area and public facilities within it, while complimenting the development of the precinct with the appropriate urban management actions.

Key actions identified in respect of Community Services & Health include, inter alia, the consolidation and optimisation of the existing facilities cluster (clinic, multi-purpose centre, sportsground) by developing the space between Zolani Centre and the sports ground. The objective is to improve the functioning by providing for a wider range of activities and users of the space, as well as activating that which is currently underutilised. This could be implemented in the short term.

Furthermore, it is proposed that the Nyanga library is relocated to close to Zolani Centre. A smaller scale cluster of facilities, including the Gugulethu library, pool and park are also identified for improvement and upgrading in the medium term.

(iv) Hanover Park

A Public Investment Framework and precinct plan have been prepared for Hanover Park. It focused on consolidation and upgrading within the Town Centre.

The key actions/projects identified include redevelopment of the library, a community hall and pool in the medium term. It also includes the development of a new clinic (CHC to be implemented by PGWC).

These facility upgrades should be complimented by other City infrastructure investment into, inter alia, public transport and non-motorised transport infrastructure and human settlement projects.

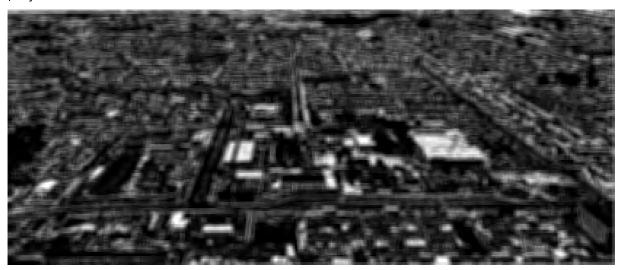


Figure 13: Hanover Park

(v) Du Noon

Extensive research and community engagement culminated in the preparation of local area plan for the area over the last number of years. The plan identified key public sector interventions required to address the rapid and extensive population growth in the area. To date, significant investment has been realised into public transport (MyCiti), the northern sportsground and community centre, as well as the construction of a new library which is recently completed. In addition to that which has already been implemented, the need for further investment (ECD, public space and NMT links between facilities) has been identified in the northern precinct.

The local area plan also identified the dire need for recreation and parks facilities in the southern part of the area. Concept planning has been undertaken for a high order recreation and park facility development planned in the southern precinct. An emergency school having been developed on the site, as well as informal settlement has restricted those plans and planning for the facility would have to be revisited. The project remains a priority for Du Noon.

(vi) Nomzamo

The broader Nomzamo/Lwandle area is characterized by extensive human settlements developments and shortfalls in social facilities and services to address community needs. Given the extent of existing backlogs, this precinct has been prioritised and should continue to be developed in the short to medium term.

The existing urban node in Nomzamo was identified by numerous City departments as the civic hub of the community and was prioritised for public transport interchange upgrade, which was completed in 2016. In 2017, the Recreation and Parks Department completed construction of a Smart Park to address the identified need for a community park.

In future, upgrading of the sportsgrounds in Nomzamo and Lwandle are prioritised, for which facility layout plans should be prepared detailing the vision for their development. Replacement of the synthetic pitch at Nomzamo is a priority. The layout and design of the facilities at the Lwandle sports ground should be reviewed and development efforts focused on better functioning of the facilities for its current users, as well as to attract new users and activities.

In addition, a new clinic, community library expansion and community park are required in



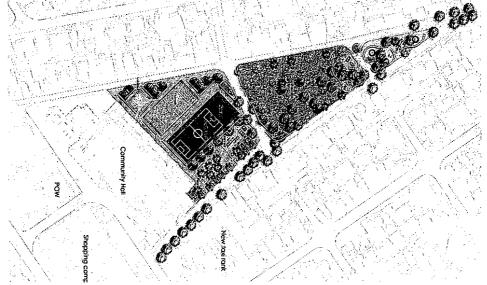


Figure 14: Nomzamo precinct & Smart Park

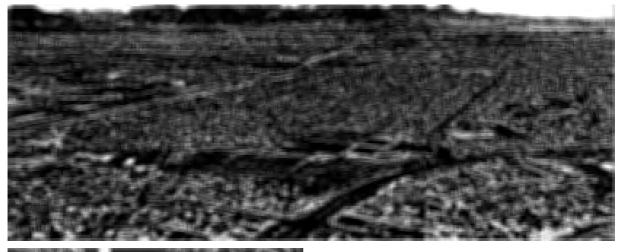
(vii) Khayelitsha Site C

The broader Site C area is characterized by high density residential areas, including formal and informal dwellings. Due to its location, land for housing is in high demand. It has been settled at high densities and land for facilities or non-residential use is extremely scarce. The eastern part of the area incorporates Nolungile station, taxi rank and Site C Plaza, a large commercial development and transport interchange. Swartklip, which has been identified as a site of large scale mixed use development in the future forms the southern edge of the area.

A Site C Urban Framework (2009) was prepared which identifies the need for facilities consolidation in the 'western gateway precinct' which comprises education, sport and recreation, as well as IRT and NMT related interventions. It proposes the citing of the an IRT station adjacent to the recreation complex to reinforce the area as the gateway to site C.

Numerous facilities are required to be developed in the area to cater for the existing population, including expansion of the existing clinic and a community recreation area/park. Design has been undertaken for the further development of the recreation facility at the western gateway which will optimise the use of this facility by making it multi-purpose, accommodating formal as well as formal sport and recreational activities.

In addition, a new clinic, sportsground and regional park are to be accommodated in the future development of Swartklip. Future planning is required in preparation for delivering these facilities as part of that development.





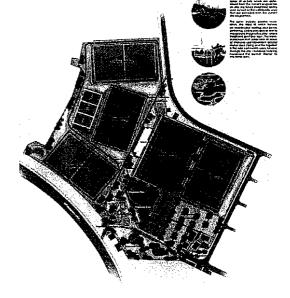


Figure 15: Site C Integrated Recreation facility
Community Services & Health Infrastructure Plan 2019

(viii) Elsies River

Precinct planning has been initiated and a team appointed to prepare and finalise a full precinct plan and public investment framework for the area. This work will feed a detailed project pipeline for the City departments to address the area.

A key component of the work is to address the consolidation of various City owned and government owned social facilities within the precinct. In parallel to this work, Community Services & Health has identified the need to build on the successes of the existing youth development facility in the area and expanding the reach of this facility, which is likely to require physical infrastructural improvements or redevelopment in the short to medium term.

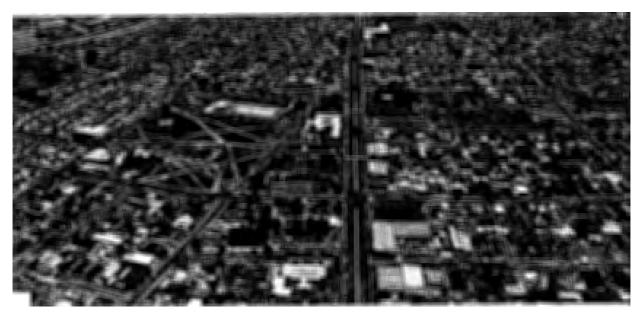


Figure 16: Elsies River

(ix) Enkanini

Enkanini is the largest informal settlement in the City, comprising an estimated 10 000 structures. It is currently very densely populated and requires phased development and relocation of dwellings in order to provide services.

Planning or the redevelopment of the settlement to accommodate bulk services and infrastructure has been undertaken by the City's Informal Settlements Department. The implementation may take close to 10 years to complete and will be undertaken in phases.

The City's Informal Settlements Department, together with the Community Services & Health Directorate, Urban Planning and Mechanisms Department and Western Cape Provincial Government (Education) have collaborated on the planning for the settlement and prepared a medium to long term plan for implementation. The planning for social facilities and services has been incorporated and space allocation made under challenging circumstances regarding land availability, which has also presented the opportunity for those departments to pursue new and innovative models for delivery.

In the short term, phased implementation of facilities as and when opportunities associated with the phased development of the settlement present themselves should be pursued. For example, the delivery of Informal Settlement Community Services & Health Centres.

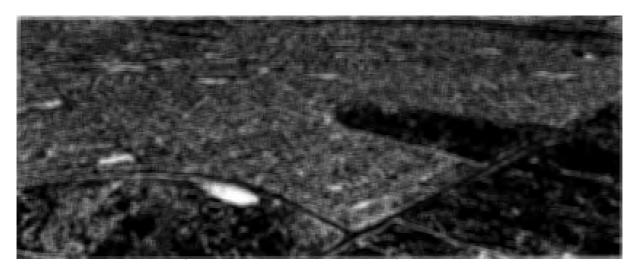


Figure 17: Enkanini informal settlement

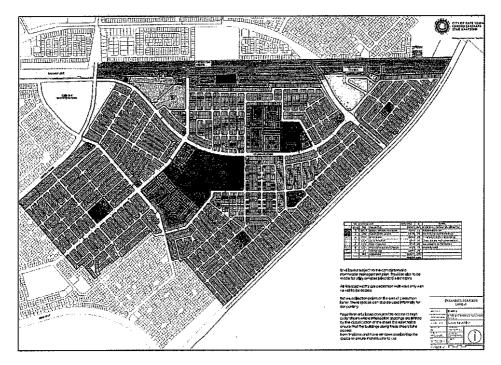


Figure 18: Enkanini layout plan

(x) Phillippi

Phillippi has been prioritised for investment by the City of Cape Town as a catalytic project to drive spatial transformation. Key interventions proposed include upgrading the Public Transport Interchange (PTI), as well IRT Phase 2a, which are key to achieving the TOD.

Recent land-use changes (including land invasions) has resulted in the need for the City to revisit the spatial vision for Philippi East in particular. The broader Phillippi area is characterized by dense formal and informal residential development which is underserved in the respect of social facilities.

Key projects identified in the CSHIP include major upgrading or replacement of an existing clinic, expansion or replacement of the community library, as well as the development of a new sportsground and ECD centre of excellence/support centre. These align well with the City's strategy to transform the area and should be accommodated within the TOD precincts, within or close to stations.

(xi) Delff

A precinct planning process has been initiated, incorporating stages 1 & 2 as set out above in section 8.1.2. The deliverables for this stage provide base information required to embark upon more detailed planning of the precinct, as well as the necessary information regarding key stakeholders which will be engaged to develop the precinct plan.

The broader Delft area is characterized by extensive human settlements developments and shortfalls in social facilities and services to address community needs. Given the extent of existing backlogs, this precinct should be prioritised in the short to medium term. The clusters of existing facilities in central and southern Delft present opportunities to consolidate facilities into safe and well-functioning places and spaces for community use.

Delft central in particular presents significant opportunity for optimisation of the existing facility cluster. Expansion/upgrading of the clinics and library, the development of high quality park space and the consolidation of exiting sports grounds to optimise community use and multifunctionality of the facilities should be pursued. The need for multi-purpose centre is also highlighted to be addressed.



Figure 19: Delft central

(xii) Blue Downs

Precinct planning has been undertaken by the City's Transport Development Authority (TDA) as part of the Blue Downs Integration Zone and rail corridor planning. The area surrounding the proposed station has been the subject of that plan, with a focus on urban design in pursuit of the TOD. The plan identifies social facility requirements in the area. The Community Services & Health Directorate is in the process of refining that planning with emphasis on technical specifications and implementability in line with its department's strategies and requirements.

The development of the proposed station is fundamental to the precinct development and as such the facilities associated with the station precinct are on a medium to long term investment priority. This is also supported by the public and private human settlements developments in the pipeline.

Key projects include the expansion of the existing clinics and library, as well the development of a community park, regional park, sportsground associated with future human settlement developments at Happy Valley and Nooiensfontein. A Regional Recreation Hub at Blue Downs sportsground is a high priority in short to medium term.



Figure 20: Blue Downs Recreation facility

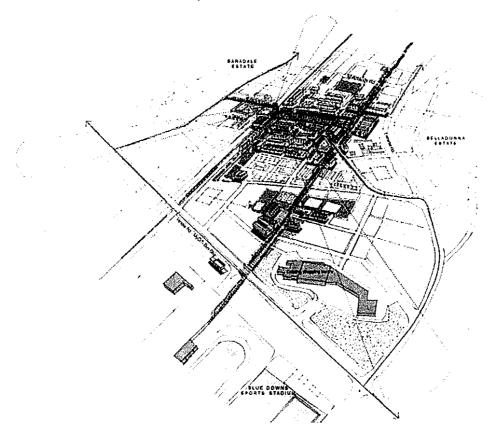


Figure 21: Blue Downs precinct concept (CCT, 2018)

(xiii) Wallacedene

A precinct planning process has been initiated, incorporating stages 1 & 2 as set out above in section 8.1.2. The deliverables for this stage provide base information required to embark upon more detailed planning of the precinct, as well as the necessary information regarding key stakeholders which will be engaged to develop the precinct plan.

The broader Wallacedene/Bloekombos area is characterized by extensive human settlements developments and shortfalls in social facilities and services to address community needs. Given the extent of existing backlogs, this precinct should be prioritised in the short to medium term.

Key projects identified as being required include a new Regional Library, clinic upgrading/replacement, as well as a new community centre/Multipurpose Centre.

Developable land for facilities is scarce in the area and a significant opportunity is presented by the Blue Ridge sports complex and other nearby facilities for the accommodation of a cluster of social facilities.

(xiv) Belhar

A precinct planning process has been initiated in-house, incorporating aspects of stages 1 & 2 as set out above in section 8.1.2. The deliverables for this stage will provide base information required to embark upon more detailed planning of the precinct, as well as the necessary information regarding key stakeholders which will be engaged to develop the precinct plan. In addition to the above, conceptual development scenarios/alternatives are being prepared.

The key facilities identified for development include a new clinic, a park and community library upgrade. Two facility clusters have been identified within Belhar, the eastern cluster which serves the more recently developed lower income areas and the western cluster serving the more established older parts of Belhar.

The eastern precinct incorporates a health facility, library and a Subcouncil office. The existing cluster is faced with significant challenges associated with vandalism and safety concerns but is also crucial in serving the needier areas. Emphasis should be placed on securing a cluster of facilities and driving sustainable and effective provision of services through design and operational interventions which could improve the functioning of the existing precinct.

The western precinct is the site of numerous sports facilities, separated by a large undeveloped dune which has for many years been unsafe and caused community outcry. This cluster should be consolidated by incorporating facilities that could enhance the current high usage for sports (including provincial football tournaments), improve the multi-use for other codes, as well to incorporate informal, higher order community park facilities which are required in the area. Opportunity also exists to incorporate other City or Provincial facilities into the cluster. There is interest from City Law Enforcement to accommodate its headquarters in the cluster. This will be mutually beneficial to the relevant departments, as well as the community.

(xv) Khayelitsha Site B

Detailed precinct planning has not yet been undertaken for the broader Site B area. It includes the area from Spine Road northwards towards Pama road and including the area surrounding Nonkqubela station. It incorporates a corridor of open space and adjacent public facilities (such as schools) which can be rationalized into more efficient and effective clusters of facilities.

The key facilities identified for development include a new sportsground, multi-purpose centre, 2 community parks, regional library and clinic upgrade. These facilities may not all be accommodated in the same facility cluster. The development of the Zakhele clinic would address the need for clinic upgrade. The regional library presents the opportunity to consolidate (and will replace) the sub-optimal existing community libraries (Kulani & Khayelitsha).

The cluster at Nonkqubela station should be considered for the new library, which may require the design and development of a new, multi-purpose and multi-story building within the existing station precinct to support the need for expanded facilities and services and in line with TOD imperatives. A development framework was prepared in 2012, which proposes consolidation of this precinct and expansion of public facilities and services. The sports complex along Pama road should be investigated to consolidate recreation related facilities within this area, clustering the investments at an accessible location. The



Figure 22: Khaya/Nonkqubela precinct

(xvi) Hout Bay

Detailed precinct planning has not been undertaken for Hout Bay. A draft framework for social facilities was prepared, which identified clusters of facilities that should be the focus of investment and upgrading, as well as which should be better connected by public links and NMT infrastructure.

It identifies the facility at the corner of Hout Bay Main and Victoria Roads as a key location for municipal investment, the focus of which is facilitating the enhancement of a multi-functional and integrated recreation facility as part of a network if public facilities across Hout Bay. Another node is located at the corner of Hout Bay Main Road and Princess Street, where the PGWC is considering for a new clinic to serve the greater Hout Bay.

(xvii) Seawinds

Detailed precinct planning has not been undertaken for the broader Seawinds area. Key projects identified as being required in CSHIP include a new community library, clinic upgrade, community park, as well as an informal settlement Community Services & Health Centre, given the numerous informal settlement in the area.

A community park was recently implemented as part of the integrated recreation and parks facility. Emphasis should be placed on integrated management and programming within the facility.



Figure 23: Seawinds Integrated Recreation and Parks facility

(xviii) Pelican Park

The precinct identified is part of recently completed integrated human settlement development in Pelican Park, which comprises a mix of housing types.

Need was identified for a new clinic, community library and community park/recreation facility. The clinic has been constructed and opened in 2019. The next priority is the development of a high quality community park and then the preparation for and development of the community library in the medium to long term.

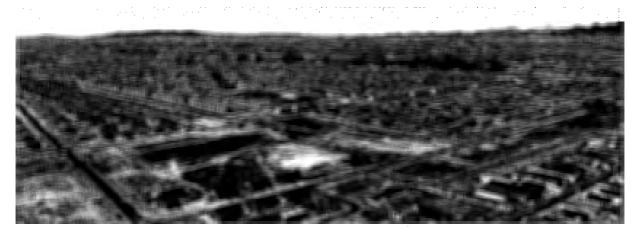


Figure 24: Pelican Park Integrated Human Settlements

(xix) Atlantis

Detailed precinct planning has not been undertaken for Atlantis. Key projects identified as being required in the CSHIP include regional and community parks, as well as a clinic upgrade, as well as optimisation of existing facilities.

A community park was recently implemented in 2017, which is part of a suite of facilities which form a linear structuring element through Atlantis which should be the focus of optimisation.

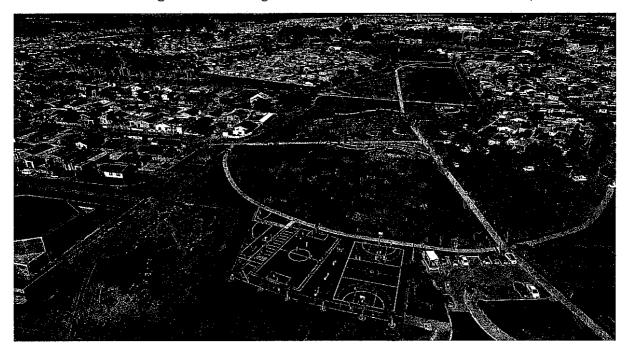


Figure 25: Atlantis Smart Park

8.3.2. Optimisation precincts

Optimisation precincts are nodes identified in the Cape Town Spatial Development Framework (2018) within which the Community Services & Health Directorate owns and manages facilities or land which have the potential to be optimized in order to realise benefits such as reduced operational costs, enhanced facilities with greater capacity, integrated management of multiple facilities, multi-functionality and sharing of facilities or rationalisation of land or facilities for other land uses (eg housing, business use, transport infrastructure etc.)

The five optimisation precincts include:

- Bellville
- Wynberg
- Claremont
- Khayelitsha CBD
- Mitchells Plain CBD

Each of them requires research into the existing facilities, their users and operations (and associated agreements) in order to better understand the opportunities presented, as well as possible constraints from a spatial, infrastructural and operational perspective.

All of the them are associated with a major economic node in the city and are highly accessible by public transport, meaning they are both attractors of people and are highly accessible to people. This makes them ideal for the location of high order social facilities. It also means that land within these precincts is valuable and must be put to best use. Each of the optimisation precincts is unique, Bellville for example is the second largest economic node in the city, while Khayelitsha CBD is more of an emerging node. The work into these spaces should take cognizance of the requirements for social facilities, as well as the potential impact they can have in influencing the urban development processes in each area.

9. References

- 1. Blaauberg District Spatial Development Plan and EMF, City of Cape Town, 2012
- 2. Blue Downs Rail Link Stations Final Report, City of Cape Town Transport Development Authority, 2018
- 3. Built Environment Performance Plan (BEPP) 2018/19, City of Cape Town, 2018
- 4. Cape Flats District Spatial Development Plan and EMF, City of Cape Town, 2012
- 5. Cape Town Municipal Spatial Development Framework, City of Cape Town, 2018
- 6. City of Cape Town, Five-Year Integrated Development Plan July 2017 June 2022, 2017
- 7. City of Cape Town, Immovable Property Asset Performance Report, 2016
- 8. CSIR Guidelines for the Provision of Social Facilities in South African Settlements, First Edition, 2012
- 9. District Health Plan, Cape Metro Health District, Western Cape Provincial Government, 2016
- 10. Draft SDECD Strategic Plan 2017-2022, 2017
- 11. Du Noon Strategies and Opportunities for a well-functioning settlement, City of Cape Town, 2014
- 12. Forward Planning 2032: Social Facilities in Cape Town, City of Cape Town, 2014
- 13. Hanover Park Public Investment Framework (revised), City of Cape Town, 2018
- 14. Helderberg District Spatial Development Plan and EMF, City of Cape Town, 2012
- 15. Ideal Clinics Definitions, components and checklist, Department of Health, Republic of South Africa, 2017
- 16. Integrated Urban Development Framework, Ministry of Cooperative Governance and Traditional Affairs, 2016
- 17. Khayelitsha /Mitchells Plain and Greater Blue Downs District Spatial Development Plan and EMF, City of Cape Town, 2012
- 18. Khayelitsha Site C & T R Section, An Urban Framework, City of Cape Town, 2009
- 19. Manenberg Public Investment Framework, City of Cape Town & Provincial Government of the Western Cape, 2014
- 20. MDHS comments on the 2030 Primary Care Infrastructure Requirements, Provincial Government of the Western Cape, 2017
- 21. Mfuleni Urban Node Precinct Plan Business Plan, City of Cape Town, 2014
- 22. Municipal Infrastructure Roles and Responsibilities of National Sector Departments, Provincial Counterparts and Municipalities, The Department of Provincial and Local Government, (undated)
- 23. Northern District Spatial Development Plan and EMF, City of Cape Town, 2012
- 24. Nyanga Urban Node Upgrade Final Business Plan Guide Report, City of Cape Town, 2015
- 25. Provincial Strategic Plan 2014 2019, Provincial Government of the Western Cape (PGWC), 2014
- 26. Service Level Agreement(s) between the Community Services & Health Directorates and Area Based Service Delivery Directorate, City of Cape Town, 2017
- 27. Southern District Spatial Development Plan and EMF, City of Cape Town, 2012
- 28. Summary Guidelines and Standards for the Planning of City of Cape Town Social Facilities and Recreational Spaces (3rd revision), 2014
- 29. Table Bay District Spatial Development Plan and EMF, City of Cape Town, 2012
- 30. Tygerberg District Spatial Development Plan and EMF, City of Cape Town, 2012

10. Annexures

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