



**GAUTENG PROVINCE**  
HEALTH  
REPUBLIC OF SOUTH AFRICA

## **GAUTENG DEPARTMENT OF HEALTH BUDGET VOTE FOR 2021/22 BY THE MEC FOR HEALTH DR. NOMATHEMBA MOKGETHI TO THE GAUTENG PROVINCIAL LEGISLATURE ON 17 JUNE 2020**

**Madam Speaker and Deputy Speaker**

**Honourable Premier**

**Members of the Executive Council**

**Honourable Chief Whip of the Majority Party**

**Members of the Provincial Legislature**

**Residents of Gauteng**

Madam Speaker, it is an honour for me to present to this August House the 2021/22 Budget Vote for the Gauteng Department of Health.

Gauteng Department of Health has been allocated a total of R56.5 billion in the 2021/22 financial year, and R169.6 billion over the 2021 Medium Term Expenditure Framework to fund the provision of quality health services in Gauteng.

Honourable Members, this Budget Vote process takes place at a time where South Africa and our province is confronted with tough times, facing the third wave of the COVID-19 pandemic.

Our province is experiencing alarming number of infections recorded on daily basis, coupled with everyday records of fatalities that are concerning and deeply regrettable.

Two days ago, President Cyril Ramaphosa moved the country to lockdown level 3, due to rapid surge of COVID-19 cases, and added tougher restrictions, to deal with the third wave of infections.

The reality and nature of the pandemic is such that many people remain exposed and vulnerable to contracting the virus. As it stands, South Africa has approximately **1,76 million** cumulative number of confirmed cases, and more than **58 000** deaths confirmed making South Africa the lead country with the most cases in the African Region.

While the capacity for admitting patients have been created, the province continues to see a high number of increasing infections. As of today, the number of confirmed new COVID cases is 7 859.

Noting the worrying figures highlighted above, the Department has been hard at work, engaged in numerous initiatives as a response to mitigate against the devastating impact of COVID-19 across our healthcare facilities. In our previous efforts, we have directed special focus on programmes that prioritised treatment and care, we have also maximised the roll-out of vaccine programme at the beginning of the year 2021.

In the 2021/22 financial year, a total additional amount of R2 billion has been made available for province's Comprehensive Health Response to COVID-19 which is allocated for, amongst others the rollout of the

vaccination programme at 330 sites and supporting additional human resources required.

A total of 1.5 billion is allocated to sustain posts that were created and filled towards the purpose of the COVID-19 response. In addition, an amount of R217 million is also allocated to fund nursing agencies that continue to play a critical role in the delivery of health services in the face of the pandemic.

While the virus has claimed a considerable number of lives, we have equally witnessed a substantial amount of recoveries in people who have tested positive for COVID-19, this was as a result of a comprehensive response we managed to put in place.

Given the magnitude of the pandemic and the burden it imposed on the health system, additional clinical and administrative support was required to augment provincial capacity to adequately respond to the pandemic. In this regard, 7 374 posts were created during the financial year 2020/2021 at a cost of more than R1,5 Billion

The Department has also taken a conscious effort to prioritise infrastructure as a catalyst under the context of COVID-19, we have invested on additional infrastructure and clinical care to enhance the capacity of beds in various hospitals across the province.

One of the noteworthy facilities, is the Jubilee District Hospital in Hammanskraal, we have revamped its capacity to include the newly built ward, the CT scan and skills laboratory. The Jubilee District hospital is one of the health facilities earmarked to provide for the much needed

COVID-19 services. Its refurbishment comprises of an Alternative Building Technology (ABT) structure with 300 beds, to address the demand of COVID-19 beds.

Currently, the total number of dedicate COVID beds in the public sector are 3 840, while there is also an additional of 747 ABT beds ready for activation. The total number of admitted patients as of yesterday was 4 420, with 1 191 in public sector and 3 229 in the private sector hospitals.

Madam Speaker, this is one example of many practical initiatives the Department has put in place to remain tactical and vigilant, to plan for the best and prepare for the worst. Noting that COVID-19 status remain fluid, there is no precise scientific prediction of its probable devastation.

Furthermore, since February this year, we have operationalised another pillar of the COVID-19 response which focuses on vaccination, currently prioritising the healthcare workers and people over the age of 60 years.

As a province, we have since managed to register 47% of the people over the age of 60 years on the Electronic Vaccination Date System (EVDS) and 202 052 were vaccinated by the 16<sup>th</sup> of June. Regarding healthcare workers, 88% of the 215 101 have been vaccinated to date.

While the vaccination programme continues, it is important to acknowledge the reality of vaccine inequality globally and affirm the view that access to COVID-19 vaccine should not be a privilege but a right accessible to all. The Department welcome the commitment by the G7 on expansion of the vaccine access programme to developing countries as resolved in the G7 summit in the past week.

As a country, we fully support the move to lift patent protection of coronavirus vaccines. We believe the waiver can allow the production of vaccines to be ramped-up and deliver more affordable doses for less wealthy countries.

Vaccine remains one of the weapons we have available to combat the scourge of the COVID-19 pandemic. The Department will continue with the efforts made to improve the administration of the vaccine in the province.

Madam Speaker, the impact of the COVID-19 lockdown regulations led to a reduction in the numbers of patients visiting our facilities in the previous year. We saw a decreased volume of patients seen at hospital Out-Patient Department at approximately 26 million during the past financial year, as compared to 27.3 million in the 2019/2020 financial year.

A decline of 20.4% was also experienced with regard to patients seen in primary healthcare facilities, which was a decline from 21.3 million in 2019/20 to 16.9 million in 2020/21 financial year.

Whilst COVID-19 had a significant impact on the overall performance of priority health programmes, our approach is one that has drawn lessons from literature and research conducted in other countries, on the importance of continued provision of essential services in a pandemic context to prevent mortality related to the discontinuation of essential services. Therefore, in our COVID-19 response we ensured that essential service provision remains an integral part of the interventions.

Honourable Members, it is for this reason that we encouraged registration of outpatients on the Central Chronic Medication Dispensary and Distribution (CCMDD) programme. This is to ensure that those patients receiving medication through our OPD services would not be impacted by failure to access medicine at facilities due to lockdown regulations. And as such, up to 1 022 840 patients with chronic health conditions were enrolled to the programme in the 2020/2021 financial year. This exceeded the annual target with over 26% increase in enrolment year on year comparison.

Similarly, some areas where improved outcomes were noted include Child preventable illnesses due to Pneumonia which was kept below the threshold of <2.4% during 2020/21 financial year, the Pneumonia case fatality rate among the under 5 years being at 2.3%. The province continued without fail to detect and treat TB cases, with 60.2% of the TB drug resistant cases being successfully treated during 2020/21 financial year.

The HIV testing targets critical for the realisation of the UN obligations were also attained through testing of over 4 million patients in the previous financial year. Access to care has also been improved through the expansion of health platforms resulting in our primary healthcare facilities being able to provide 24-hours services through our Community Health Centres (CHCs).

Madam Speaker, our strategic priorities continue to guide all our efforts as we enter the third year of the sixth government administration. These include (1) implementing the NHI, (2) improving patient experiences of care, (3) improving clinical services, (4) promoting public health education;

(5) strengthening governance and leadership and (6) economic empowerment and job creation.

We remain committed to realise the vision we set for ourselves by ensuring that with the budget provided for this year we improve our responsiveness, our patient centeredness to our citizens and innovation in the delivery of care.

While we acknowledge the devastating impact of COVID-19 pandemic and how it has negatively affected our ability to fast-track the filling of critical posts. The Department has thus defined a staffing strategy to ensure that all SMS vacant positions are filled before the end of the first quarter of the new financial year to stabilize the Department.

## **On NHI**

Madam Speaker, the National Health Insurance remains a key priority for the Department, this is more important in the context of the pandemic. Furthermore, the target is to ensure that everyone has equal access to quality health care services by 2030. The transitioning to National Health Insurance will be implemented in the next five years to ensure Universal Health Coverage.

An amount of R150.8 million is allocated towards the implementation of the National Health Insurance over the 2021 MTEF. The amount allocated will be channelled towards preparing the health care system for the National Health Insurance by improving patient's experience of care, improving clinical outcomes, and ensuring that all facilities have achieved

the Ideal Clinic and Ideal Hospital Status as well as certification of health facilities.

Furthermore, the Office of Health Standards and Compliance (OHSC) commenced with assessments of Primary Health Care (PHC) facilities for certification for National Health Insurance (NHI) preparedness. This resulted in sixteen (16) of the audited PHC facilities being awarded with 4-year accreditation certification for NHI.

At this stage, 89% of our Primary Health Care Clinics have been assessed and found to be ideal. All the facilities that were targeted for the achievement of Ideal Status have successfully achieved this status. The progress registered till this point, places Gauteng as the number province, to pave the way for the realisation of the universal health coverage.

## **ON IMPROVING PATIENTS EXPERIENCE OF CARE**

Honourable Members, the Gauteng Emergency Medical Services will receive R1.5 billion in the 2021/22 financial year and R4.8 billion over the 2021 MTEF to improve emergency response times in urban and rural areas. Emergency Medical Services will also be equipped to deal with neo-natal cases and the department will finalise the integration of vehicle tracking.

Madam Speaker, the unfortunate breakout of a fire at the Charlotte Maxeke Academic Hospital in April 2021 has gravely affected delivery of health services in Gauteng. As the Department, we are working around the clock to see to it that the situation goes back to normal and that the facility operates fully.



We are cognisant that the aftermath of fire has severely affected health workers, Charlotte Maxeke is a specialised academic hospital providing services in Gauteng and surrounding areas.

Since Charlotte Maxeke is non-operational, we have lost ICU, Highcare and COVID-19 beds. As a Department, we acknowledge that this has placed immense pressure on other hospitals that admitted patients from this facility.

Madam speaker, we remain committed in ensuring that all facilities meet the Occupational Health Safety standards. While the targets for the year 2020/2021 were exceeded, we acknowledge that more needs to be done to ensure that 100% of our facilities exceed the standards set as per the Occupational Health and Safety Act. It is for this reason that OHS functional committees are being established including all our hospitals and clinics to ensure that there are no lapses with the OHS Act and related regulations.

Plans are underway to implement three standards to ensure proper management systems for OHS in our four central hospitals, towards ensuring their certification by 2023.

We will introduce these as new governance tools to ensure proper implementation of the Safety, Health Environment Risk and Quality Management system.

Furthermore, we will be training standards champions to implement this programme and internal auditors to monitor compliance with these international standards.

Similarly, we are training 50 officials in partnership with the University of the Witwatersrand on exposure science to ensure rigorous identification of hazards and associated risks of occupational injuries and diseases. This will ensure that there is internal capacity to conduct assessments in relation to OHS associated with our health infrastructure.

Madam Speaker, in this 2021/2022 financial year, we aim to improve the management of Patient Safety Incidents in the province. We recognise that some setbacks have been seen in the previous year, this was aggravated by the constraints of the pandemic.

Madam Speaker, as the Department we believe that the budget priorities outlined in this Budget Vote are made in good faith, and are a reflection of a government that is in-sync with the material realities of our people. We are a caring government that places the needs of society at the centre of our administration.

In conclusion, we note that this House Sitting takes place in the Month of June where we are commemorating Youth Month. Young people have been bearing the brunt of the effects of COVID-19 which include amongst others, the loss of jobs, disturbance of academic schedules, mental health challenges due to COVID-19 hardships.

As the government, we must ensure that we use any means necessary at our disposal to develop and empower our youth. We have to re-kindle some semblance of hope, that they can still rise out of the misery of this global pandemic.

**--I Thank You--**