2011/2012 BUDGET VOTE ON HEALTH (5), TABLED BY MS FEZI NGUBENTOMBI, FREE STATE MEC FOR HEALTH, FREE STATE PROVINCIAL LEGISLATURE, HEILBRON

28 March 2011

Honourable Speaker and Deputy Speaker of the Free State Provincial Legislature
Honourable Premier
Members of the Legislature
Honourable Members of the National Assembly and the National Council of Provinces (NCOP)
Executive Mayors and Councillors
Chairpersons and representatives of the governance structures of the Free State Department of Health
Members of the House of Traditional Leaders
Director-General
The Head of the Department of Health and members of top management
Members of the media
Distinguished guests
Ladies and gentlemen

Introduction

Honourable Speaker, I greet you all on this momentous occasion of the presentation and tabling of the second budget vote of the Free State Department of Health in the fourth term of the democratic government.

This year marks the 51st anniversary of the Sharpeville (and Langa) massacres which signified the first protest action by the people of South Africa against pass laws, which resulted in the banning of liberation movements. The health services we are receiving today, accessed by all South Africans irrespective of their colour, sex, creed, wealth status are a consequence of the sacrifices of those martyrs.

Honourable Speaker, let me wish our people a prosperous year ahead and pay tribute to the poor who are the primary beneficiaries of the quality healthcare services we are striving to create across the length and breadth of our province.

I also wish to pay special tribute to our healthcare professionals and health workers in general that have held the fort during difficult and challenging times faced by the health system in the Free State. It is through their gallant efforts that we can proclaim today, with confidence, that the vision of a better life for all is no more a pipe dream but a reality. We will continue to strive for affordable, accessible and quality healthcare for all, based on re-engineering of primary healthcare services, delivered through a strong District Health System of which the focus will be on the preventative health approach.

Honourable members, the people of the Free State like the rest of South Africa are shocked and extremely saddened by the devastating events of the earth tremor and tsunami which swept across Japan, and left in its trail an unprecedented loss of both material and human lives. In the face of these horrifying events, the people and government of SA, reacted promptly by dispatching a team of highly skilled and experienced team of rescuers who have been working round the clock to salvage lives. Mr Ruiters and Mr Fleischman, our emergency medical services (EMS) officers have been deployed to support and assist in Japan.

Honourable Speaker, inspired by the vision of the Freedom Charter that, The People Shall Govern through their democratically elected organs, since my appointment as MEC for Health in February 2011, I have immediately engaged myself with the following:

- Re-launched the District Health Councils of Lejweleputswa, Motheo and Thabo Mofutsanyana
- Resuscitated the hospital boards and clinic committees of the same districts
- Re-launched the Traditional Healers Forum
- Convened a staff indaba at Bophelo House
- And met with MEC from Antwerp to strengthen our relations on the field of occupational health and safety as well as training of paramedics.

The programme to give our people a platform voice their aspirations regarding health will continue. For this reason I will be going to Fezile Dabi and Xhariep in the next two weeks to revive and support these governance structures.

Honourable speaker, the Premier Mr.ES Magashule in his State of Provincial Address on 4 March 2011, laid a foundation for our programme of action when among others he said: “Primary healthcare remains the key priority in the healthcare and service sector. The provision of quality healthcare for our people, especially the poor, will continue to be a high priority during the year. We will continue to pay special attention to care for children, women, tuberculosis (TB) sufferers, and people with chronic diseases…”Indeed, we are ready to intensify our war against the marauding quadruple burden of diseases in our province.

The Free State approach is intended at enhancing the Negotiated Service Delivery Agreement (NSDA). This budget will also contribute to outcome 2 of government’s vision of “A Long and Healthy Life for all South Africans” and the four outputs namely:

- Increasing life expectancy
- Reducing maternal and infant deaths
- Reduction of the burden of HIV, AIDS, TB and other communicable diseases
- Strengthening health systems

Honourable Speaker, before I could takethe members of this House through the 2011/12 budget of the Free State Department of Health, please allow me to salute my esteemed colleague, Ms Sisi Mabe, MEC for Public Works who paved the way earlier for me.

Speaker and fellow Free Staters our budget for 2011/2012 will outline specific steps we are going to take per programme to achieve the goals of NSDA and the Ten Point Plan. The total budget allocation for budget vote 5 for 2011/2012 financial year is R6,8 billion and will be allocated as follows:

Programme 1: Administration

R270 163 is allocated mainly to strengthen strategic leadership and social compact. This is the first point of our Ten point Plan intended at improving on the leadership of the department and strengthening community involvement. It is my considered opinion that as a department we cannot plan and decide for our communities without them being involved. This is the reason why we deemed it fit as a department to engage with all governance structures, namely: District Health Council, Provincial and District AIDS Councils, Hospital boards and Clinic committees, in our districts.

Structures like the initiation schools committees were revived and consulted in anticipation of a successful male medical circumcision programme.

In June 2011 we will re-launch the Provincial Health Council and an Orientation Workshop will be presented in July 2011 to all members of the Hospital Boards and clinic committees in the province. The Clinic Committees will be reconstituted after the Municipal elections in May 2011. The new clinic committee members should be nominated by the Local Communities, chaired by the Local Councillors and appointed by me. Training will be done for appointed clinic committees members for effective service delivery.

We will continue to enhance our efforts to sustain mutually beneficial relations with private sector hospitals and healthcare groups, the South African National Defence Force, the University of the Free State and the Central University of Technology.

Currently offices of Home Affairs that assist with births and deaths registration are situated at Bongani Regional Hospital, Katleho District Hospital in Virginia and Winburg District Hospital. In the new financial year, the services will be launched at Boitumelo Regional Hospital which has a temporary service at the moment.

Honourable Speaker, I have already embarked on unannounced visits to institutions throughout the province, in addition we will constitute a team based in my office to support this work on a sustained basis.

Program 2: District Health Services: R2,632,481 billion.

This programme receives the biggest allocation of money in our pursuit as government to turn health services to be more accessible and most importantly affordable to all South Africans. The focus of this programme is to give attention to Primary Healthcare Re-engineering which will entail a shift from a curative to a preventative and responsive approach. The re-engineering will take place at three levels which is Ward, District and School level. This will involve the establishment of Family Health Teams consisting of nurses, a doctor and community health workers for a defined population with a community health worker acting as a link between people and healthcare providers. The department is working towards launching several such Family Health teams in all five districts in the province by May 2011.

The programme is receiving R288,871 million rand more compared to the previous financial year.

Access to healthcare services is a critical lever to ensure that all the peoples of the Free State become agents of socio economic change and, we are very proud to have rendered healthcare services to the 2,82 million inhabitants in the province. The department served the following number of patients during the period of April 2010 to 1 March 2011:

- Primary healthcare facilities treated and provided healthcare services to 6,258, 018 patients.
- District hospitals treated 140 359 casualties, 416 988 outpatients; and 115 203 inpatients.

Prevention of mother to child transmission (PMTCT)

Honourable Speaker, the Prevention of Mother to Child Transmission (PMTCT) programme underwent substantial review during the reporting period and a number of clinical protocols were revised. Of the 50 699 pregnant women tested for HIV, about 51% of the HIV-positive pregnant women were put on Highly Active Antiretroviral Therapy (HAART). We will continue to strive to achieve an HIV free generation through an effective PMTCT programme.

Acceleration of implementation of the HIV and AIDS Strategic Plan and the increased focus on TB and other communicable diseases.

You will recall Honourable Speaker, the Hon Minister of Health Dr Aaron Motsoaledi has impressed upon us and further motivated all of us to wage a relentless war against the ravaging HIV and AIDS and TB pandemics.

The scourge of HIV and AIDS is more pronounced in our youth between the ages of 14 years to 29 years and affected are mostly females. Intergenerational sex where adult males get involved with young girls maybe one of the exacerbating factors in the prevalence of HIV and AIDS and TB in this age group. In improving strategies and tactics men must be in the fore front in the war against HIV and AIDS further more the following has been achieved:

- The department distributed 22 568 249 male condoms. This marked significant progress from the 18 152 000 male condoms distributed in 2009/10.
- A total of 116 facilities are now offering antiretroviral therapy.
- To enhance the management of tuberculosis (TB), 1 086 health professionals were trained in the clinical aspects of TB, while 657 non-professionals also received training to provide care and support to TB patients, ensure treatment adherence and raise community awareness and literacy about TB.
- Creation of a Dedicated Chief Directorate for HIV and AIDS and TB and immediate appointment of staff

According to the 2009 National HIV Antenatal Prevalence Survey, the overall HIV prevalence estimates among first time antenatal care attendees in South Africa, is 29.4%. The Free State province ranked third highest in the country with an HIV prevalence of 30.1%.

The Free State department of health will focus on the following strategies to combat HIV and AIDS:

- Increase the up-take of pregnant women and children who are HIV infected into the treatment program.
- Maintain retention of children and adults in the treatment program
- Effective management of TB/HIV co-infection
- Recruitment and retention of Healthcare Professionals
- Monitoring and Evaluation of the program
- Ensuring that all sites have electronic Data Monitoring System.

Honourable Speaker, since the implementation of the health worker-initiated HIV Counseling and Testing (HCT) campaign in April last year, nearly 600 000 of our clientsnow know their status and we will intensify the campaign in line with national directives. If we continue on the same momentum, I have no doubt that we will come close to achieving our provincial target of 957 889.

We will increase the number of new patients initiated on Anti-Retroviral Therapy (ART) to 99 622 adults and 9 802 children by the of financial year 2011/12.

Condom distribution will rapidly be upscale at all public health facilities and 51 000 000 condoms will be distributed. We will launch the provincial Medical Male Circumcision campaign later this year. We are targeting to circumcise a total of 29 484 clients.

We will initiate 70% of people with HIV and AIDS and TB co-morbidity with a CD4 count of 350 or less on ART.

Honourable Speaker, per unit population South Africa is ranked number 1 amongst the 22 countries that contribute 80% of the global burden of TB. For this reason, we will strengthen community involvement in Direct Observation Treatment (DOTS) program and also increase the TB cure rate of new smear positive patients from 71.7% to 77%.

A reduction in the TB treatment defaulter rate from 4.6 to less than 4.3% will be achieved.

Honourable Speaker, I am proud to announce that on 24 March 2011 we opened in Welkom the second Multi-Drug Resistant (MDR) Centre in the Free State. The Kopano MDR Centre will cater for 45 patients, receiving the comprehensive care provided for at this state of the art centre. Furthermore, we will reduce the incidence of MDR TB amongst pulmonary TB patients to less than 2%.

During the official opening of the same MDR centre we were particularly moved by the courageous story of Mojalefa Khodumo who was a TB patient. We immediately decided to employ him full time to join the cadre of the department in the fight against the scourge of TB. TB can be cured!

The HCT campaign will further be given impetus by ensuring that in all government events testing is done as part of our sustained efforts to defeat the scourge of HIV and AIDS.

I wish to take this opportunity to encourage all the people of the Free State to heed the call to test in order to know your status. As the slogan for the HCT says 'I am responsible, we are responsible', let's all take charge of our lives and defeat this monster.

This morning, we commenced with a health walk. Through that programme we were sending a massage that sedentary diseases can be avoided thus reducing the burden on the Primary Healthcare.

Maternal, child and women's health

The department will provide the two new vaccines (rotavirus & pneumococcal conjugate) to reduce infant and child mortality through diarrhea and pneumonia.

The coverage of the Expanded Programme on Immunisation (EPI) will be increased from 86.6% to 91%.

- The 2010 Expanded Programme on Immunisation schedule to protect the children of the Free State assisted 46 932 children and vaccinations were given for vaccine preventable diseases, 81% of the target population were immunised.
- With regard to women's health, progress was made in the early identification of cervical cancer. The cervical cancer screening coverage increased from 25% in 2009/10 to 40% in 2010/11.

Honourable Speaker, in line with attainment of millennium development goal 5 which is reduction of maternal mortality, a Maternal and Child Health Unit with specialists has been established at the Universitas Academic Hospital to put in place measures to reduce maternal and infant mortality.

Furthermore the following will be done:

- Appointment of a Principal Obstetrician, Principal Paediatrician, Principal Family Physician, Principal Midwife and Principal Primary Health Nurse per district.

Mass mobilisation for better health outcomes for the Free State population

Health promotion programmes and disease prevention campaigns will be intensified with the emphasis on cataract surgery, and breast cancer mammogram Netcare project.

Implementation of the rural health strategy

During the 2010/11 financial year the department procured through government garage fifteen new state of the art mobiles. The current units are matching the requirements of rural services with the ablution facilities, administration space, consulting room, air conditioner, twenty chairs and the safe waiting area for patients outside the vehicle covered with a roller tent to protect them from the sun and adverse whether conditions. Each of the five districts will receive three of these cars.

Honourable speaker, and the premier; we are privileged and proud by the fact that we have some of these cars parked outside and to be presented to the communities of the Free State as part of our commitment for a better life for all.

Program 3: Emergency Medical Services: R384, 850 million

Honourable Speaker, EMS continues to play an important role in strengthening the healthcare system. In the past financial year, 222 439 calls were handled. The Patient transport services, transported 329 234 patients to attend specialised clinics at the Universitas, and Pelonomi Hospitals in Bloemfontein. Of the 222 439 calls handled 28 453 were regarded as critical patients EMS.

The successful hosting of 2010 FIFA World Cup has had legacy spin-offs for the department. Sixty (60) new ambulances were procured, 200 additional emergency medical personnel were appointed and medical equipment to the value of R2,2 million was procured.

In the year 2011/12 EMS will lease a further 60 Ambulances to strengthen inter-hospital transport service and also recruit extra 250 personnel to support this function. This means that each and every hospital in the province will have a dedicated inter-hospital transfer Ambulance so that patients can be referred to the next level of care without any delay. The decentralisation of Emergency Medical Services to the district level will be implemented in this financial year. At least two call centres will be opened in Welkom and Bethlehem to support district EMS.

Program 4: Regional Hospital Services: R1,628,852

Honourable Speaker, it's worth noting that under this programme the regional hospitals and the Free State Psychiatric Complex have performed as follows:

Regional Hospitals: 100 753 Casualties; 304 053 Outpatients; and 91 259 in patients were seen.

The Free State Psychiatric Complex treated 12 644 outpatients and 799 inpatients.

Program 5: Central Hospital Services: R1,126,247

Universitas treated 266 726 outpatients and 27 840 Inpatients.

Universitas Academic Hospital (UAH) and Pelonomi hospital (PH) will continue to provide all tertiary services in the Free State and still remain the main training platform for the faculties of Health Sciences. It would be critical to revive Bongani as a satellite training platform because it is already accredited.

Program 6: Health Science Training: R165,564

The Research and Development Plan of the Free State Department of Health will focus on research that informs the national outcome of improving the health status of the entire population and contribute to the Government's vision of "A Long and Healthy Life for All South Africans". To achieve this, we will establish and launch the Provincial Health Research Committee in July this year, and develop and maintain a database of health research projects carried out in the province. A dedicated research fund will be created to conduct research on prioritised areas of health research in the province that will facilitate the development and implementation of evidence based health policy.

Program 7: Healthcare Support Services: R113,819

Honourable speaker, this programme caters for the laundry service and assistive devices. During this year we will increase the number of users for assistive devices.

We have started with the process of decentralizing some laundry services. We have established two satellite laundries, one in Vrede and onw in Tokollo. For the next financial year we are going to establish two satellite laundries, one in Jagersfontein and one in Hoopstad. The budget for these laundries is R2.4 million and 10 jobs will be created through this process.

Implementation of National Health Insurance (NHI)

Honourable speaker, the advent of the NHI is upon us. The Department of health in the Free State will work tirelessly to ensure that the ground is well prepared for the roll out of NHI. All the detailed steps outlined under the re-engineering of primary healthcare, and the implementation of the national core standards in all our facilities will be critical to prepare for the realization of the NHI.

Improving the quality of health services

The department has adopted and currently institutionalising the implementation of National Core Standards approved by the National Health Council. All 262 facilities will be assessed for compliance with standards and quality improvement plans developed to improve the quality of health services received by our people.

Mr Speaker, we will enroll an additional seven of the 31 hospitals for external accreditation by COHSASA in preparation for NHI.

To ensure patient safety, reduce clinical errors and improve clinical governance all our 31 hospitals will be entered for Adverse Incidence Management System.

The implementation and monitoring of Six Ministerial Priorities (Patient Safety, Waiting times, Cleanliness, Infection Prevention and Control, Staff Attitude and Medicine Availability) for all our facilities will be prioritised through:

- The appointment of dedicated infection prevention and control nurses for all our hospitals
- We will display service standards and average waiting times in our facilities

- Queue marshalls will be appointed to guide and direct patient towards the service pointsand measurewaiting times inour hospitals
- And lastly, we will implement clinical governance and clinical audits for all our 31 hospitals.

Overhauling the healthcare system and improving its managementpolicy review, systems and processes

Honourable Speaker, the department also continued with plans to overhaul the health system to improve its management and effectiveness. The key objective is to ensure that the health system is managed by appropriately trained and qualified managers, working in a supportive environment.To this end, 18 managers are currently attending the Masters Degree in Public Health Management at the University of Johannesburg (WITS) and two (2) more have been enrolled in the Oliver Tambo Fellowship program presented by the University of the Western Cape.

Improved human resource planning, development and management

The success of department interventions to improve the health of the Free State Communities hinges on the availability of appropriately trained, adequately qualified and well motivated health workers of diverse categories, providing the required skills mix in all health facilities.

To strengthen strategic management and leadership of our public health facilities we have appointed Chief Executive Officers at Pelonomi, Boitumelo and Bongani Regional Hospitals as well as National District Hospitals in Bloemfontein, the Elizabeth Ross District Hospital in Qwa-Qwa and at theMetsimaholo/Parys District Hospital Complex. Honourable Speaker, we are proud to announce that out of the eighteen (18) hospital CEO'snine (9) are females and (9) are males. At the corporate office we appointed HOD, CFO, Executive Manager: Clinical Services. In addition to these appointments, we have finally handed over delegations to all managers across the spectrum.

We will soon conclude the restructuring and re-engineering the department organisational structure in order to align it with the outputs. This will also include placing personnel in positions that are requisite to their skills.

Honourable Speaker, the Free State School of Nursing, with its three sub-campuses currently trains 1 068 student nurses. We also have eight hospital nursing schools currently training 210 learners. In April I will participate in the handing over of diplomas at the Annual Diploma Ceremony in Kestell to 178 newly qualified nurses, 39 midwives and 10 intensive care trained professional nurses.

The Free State Department of Health hosted a successful Nursing Summit on 23 February this year. Subsequently, a delegation from our Department will be attending the National Nursing Summit, hosted by the Minister of Health in 5 to 7 April 2011. We will during this year, establish a Directorate: Nursing Services.

Honourable speaker, we will partner with the department of Education to audit the physical state of all previous teacher colleges with a view of rehabilitating them for use to train the most needed categories of nurses. In the financial year 2011/12 we will pilot this project in Qwa-Qwa.

During the 2011/12 financial year, 1 769 vacant posts will be filled and the categories prioritised are those for specialists, medical practitioners, pharmacists and nursing personnel as well as Emergency Care Practitioners.

Training of the Pharmacist Assistants is on course to create jobs as well as improve the access to ARVs at primary health clinic.

Programme 8: Revitalisation and infrastructure development

Honourable Speaker, construction work of the two hospitals, Pelonomi and Boitumelo Regional Hospitals, is still continuing. We envisage to finalise this work by 2015, resources permitting.

During his State of the Province Address the Honourable, Premier also said “We will focus on improving and expanding the existing health infrastructure by building four new clinics in Villiers, Viljoenskroon, Memel and Makhalaneng in Qwaqwa.We will also spend R40million for the construction of these clinics.

Honourable Speaker, the Free State government has established and fostered meaningful relations with the private sector. The Chinese business community has under the flagship of a programme called China Africa Charity undertaken to renovate 20 clinics. I am therefore pleased to announce the 20 clinics which will benefit from the generosity of the Africa Chinese Charity:

Thabo Mofutsanyana: Thaba Bosiu and Tina Moloi clinics in QwaQwa, Zamani clinic in Memel and Leratswana clinic in Arlington; Motheo: Itumeleng Clinic in Botshabelo, Phetheho Clinic in Thaba Nchu, One Stop Clinic in Dewetsdorp, and Excelsior Clinic in Mnatsopa.

Lejweleputswa: Dealesville, Rheederspark and Thabong clinics in Welkom and the Winburg clinic; Fezile Dab: Harry Gwala and Thusanang clinics in Sasolburg and the Deneysville town clinic, as well as the Thusanong clinic in Parys/Thumahole; and Xhariep: Fauriesmith clinic, Reddersburg clinic, Springfontein clinic and Petrusburg Community Health Centre; and

Mobile clinics will be provided to address the health needs of the rural communities and professional nurses will in certain instances be redeployed to the clinics in order to ensure that there is a clear focus on health promotion and disease prevention instead of curative services.

The Honourable Speaker, the building of the new Ladybrand hospital will be realisable with an allocation R80 million for the new financial year and the construction of the new hospital in Trompsburg, R71 million is allocated. These are multi-year projects which started late in this financial year.

A further R15 million is allocated for planning towards the new Mangaung Hospital in Bloemfontein and R50 million towards the revitalisation of the Free State Psychiatric Complex in Bloemfontein.

Honourable Speaker, I am pleased to announce that during the first four months we will officially open the new Smithfield clinic, Tokollo Hospital in Heilbron, the new Bloemfontein Forensic Pathology Mortuary and the renovated clinics, Geneva and Hanipark, in Welkom as well as Bultfontein.

Review of drug policy

Hon. Speaker, the review of the drug policy is a national mandate. However for the provincewe will establish a chronic medicine dispensing unit to ensure that the patients with conditions like diabetes, hypertension receive their medications in areas where they stayinstead of travelling to bigger hospitals.

Youth development

Honourable Speaker, we will also pay particular attention to programmes that are targeted at youth at school level and at community level. In june this year will launch a comprehensive youth development

programme called Thakaneng. In this regard we will cooperate closely with the National Youth Development Agency.

In conclusion, I want to thank my family for their support and sacrifices. I am proud of my team because they understand the tasks and challenges at stake and are equal to the task. Once again my sincerest appreciation to the Premier other MECs as well as a wide range of the Free State communities, our guests, committees and hospital boards, health professionals and traditional healers for their unwavering support and commitment.

I table Vote 5.

I thank you.