



No.017 - 2024: First Session, Seventh Legislature

GAUTENG
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ANNOUNCEMENTS, TABLINGS AND COMMITTEE REPORTS

Tuesday, 30 July 2024

ANNOUNCEMENTS

none

TABLINGS

none

COMMITTEE REPORTS

1. The Chairperson of the Health and Wellness Portfolio Committee, Adv. B E Letsoalo, tabled the Committee's Oversight Report on the Detail of the Department of Health and Wellness Budget Vote 04 of the Provincial Appropriation Bill [G001-2024] for the 2024/25 FY, as attached:

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COMMITTEE OVERSIGHT REPORT ON THE GAUTENG DEPARTMENT OF HEALTH AND WELLNESS BUDGET VOTE 4 FOR 2024/25

Committee Details		Department Details	
Committee	Health Portfolio Committee	Department	Department of Health and Wellness
Financial Year	2024/25	Budget Vote Nr.	Vote 4
		Name of MEC	Nomantu Nkomo-Ralehoko
Committee Approvals			
	Name	Signed	Date
Hon. Chairperson	Hon. B. Letsoalo		29 July 2024
Adoption and Tabling			
Date of Final Adoption		Scheduled date of House Tabling	
29 July 2024		31 July 2024	

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1. ABBREVIATIONS

Abbreviation	Full Wording
AIDS	Acquired Immune Deficiency Syndrome
ANC	Antenatal Care
APP	Annual Performance Plan
ART	Anti-Retroviral therapy/ treatment
ARV	Anti-retroviral
CAPEX	Capital Expenditure
CARMMA	Campaign on Accelerated Reduction of Maternal and Child Mortality
CPIX	Consumer Price Index
CHC	Community Health Centre
CHW	Community Health Worker
CCMT	Comprehensive Care Management and Treatment
CCMD	Central Chronic Medication Distribution
DHS	District Health System
DCST	District Clinical Specialist Teams
EMS	Emergency Medical Service
FY	Financial Year
GPA	Gauteng Programme of Action
GDOH&W.	Gauteng Department of Health and Wellness
HAART	Highly Active Antiretroviral Treatment
HAST	HIV and AIDS, STIs and TB
HIV	Human Immunodeficiency virus
IHIS	Integrated Health Information System
ICT	Information and Communication Technology
MDR	Multi Drugs Resistance
MMC	Male Medical Circumcision
MTEF	Medium Term Expenditure Framework
NCD	Non-Communicable diseases
NDOH	National Department of Health and Wellness
NHI	National Health Insurance
NHLS	National Health Laboratory Service
NGO	Non-Government Organisation
NSDA	Negotiated Service Delivery Agreement
NIART	Nurse initiated Antiretroviral Therapy
NRP	Nurse Resuscitation Programme
NSP	National Strategic Plans
OSD	Occupational Specific Dispensation
PFMA	Public Finance Management Act
PPE	Personal Protective Equipment
PACS	Picture Archiving Communication system
PFMA	Public Finance Management Act
PHC	Primary Health Care
PMTCT	Prevention of Mother to Child Transmission
QHP	Quality Health care Programs
SALGA	South African Local Government Association
STP	Strategic Transformation Plan
STIs	Sexual Transmitted Infections
TB	Tuberculosis
TMR	Transformation Modernisation Reindustrialisation
XDR	Extreme Drug Resistance
WBOT	Ward Based Outreach Teams
WHO	World Health Organisation

HEALTH PORTFOLIO COMMITTEE

31 July 2024,

The Hon. Chairperson of the Health and Wellness Portfolio Committee, Hon. B Letsoalo tables the Committee's report on the Gauteng Department of Health and Wellness's Budget Vote 4 Report for the 2024/25 FY as follows:

2. EXECUTIVE SUMMARY

The Health Portfolio Committee has assessed the department's budget allocation for effective oversight. The purpose was to determine whether the allocations correspond with the provincial priorities of the Gauteng Department of Health and Wellness (GDOH&W) for the 2024/25 financial year. The report seeks to highlight the Committee's assessment of the department's budget allocation. The assessment done was based on the Gauteng Provincial Legislature's oversight framework, the Sector Oversight Model (SOM).

The Portfolio Committee on Health and Wellness presents its Oversight Report on the Budget Vote 4 of the Gauteng Department of Health and Wellness for 2024/25 financial year. The oversight role of the Portfolio Committee, as prescribed in the Constitution of the Republic of South Africa and the Standing Rules of the Gauteng Legislature, makes it imperative for the Committee to provide an assessment of the state of the budget allocation of **R64 837 043 000** which is a 7.9% increase compared to the **R60 093 535 000** allocated to the Gauteng Department of Health and Wellness (GDOH&W) in the 2023/24 financial year.

Out of this budget, equitable share is increased from **R46 202 127 000** to **R50 425 731 000** whilst conditional grants received an allocation of **R14 411 312 000**, increased from **R13 891 408 000** in the 2023/24FY. Each programme is allocated budget from the equitable share as follows:

- Administration budget increased by 3% from **R1 489 406 000** to **R1 934 645 000**.
- District Health Services budget increased by 8.2% from **R20 137 498 000** to **R21 793 134 000**.

- Emergency Medical Services budget increased by 6.3% from **R1 778 114 000** to **R1 890 518 000**.
- Provincial Hospitals Services budget increased by 10.3% from **R11 357 425 000** to **R12 527 896 000**.
- Central Hospital Services budget increased by 5.2% from **R21 762 135 000** to **R22 894 510 000**.
- Health science training budget increased by 1.5% from **R1 196 718 000** to **R1 214 438 000**.
- Health care support increased by 4.6% from **R453 930 000** to **R474 656 000**.
- Health Facilities budget increased by 9.8% from **R1 918 309 000** to **R2 107 246 000**.

The Committee takes note of the key assumptions considered in the budget to sustain and recruit temporary staff for a period of 12 months across health facilities as well as to reduce radiation oncology backlog. Additionally, the current budget will guarantee that services continue to be provided while taking into account the allocation of resources to patient care, safety, and the strengthening and investment in Primary Health Care to provide treatment at the appropriate level; funding for Maternity and Neonatal Care Program; improvements to Occupational Health and Safety and Mental Health Care; expansion of 24-hour service posts and mental health posts; e-health investment in the facilities; and the provision of medico-legal claims.

As a result, the Committee welcomes the department's interventions, even though the commitment will necessitate stringent implementation, monitoring, and assessment, which the department has repeatedly demonstrated to be lacking in the past. The implementation of the long-delayed eHealth or Integrated Health Information System, which would improve patient administration, financial management, decision making, and clinical patient management, is of critical importance to the Committee.

3. INTRODUCTION

The core mandate of the Gauteng Department of Health and Wellness is to improve the health status of the population of Gauteng by improving the quality of health services, secure better value for money, ensure effective organization and to provide

an integrated services and programs that promote and protect the health, quality and sustainable livelihood of poor vulnerable and marginalized groups in society.

The following are the strategic goals of the Gauteng Department of Health and Wellness:

Priority 1: NHI Implementation

Priority 2: Improved patient experience of care

Priority 3: Improved clinical services

Priority 4: Strengthened Public Health Literacy and Health Promotion

Priority 5: Economic Empowerment and Job Creation

Priority 6: Strengthened Governance and Leadership

The budget process is designed to enable the departments to formulate fiscal and policy priorities which are delivered through the budget; an important political tool that reveals government's strategic choices and decisions. It is through this process that the department is able to do its financial planning and budgeting that represent the aspirations of Gauteng citizens. This process further assists the department to commit to transparency and good governance as required by the Public Finance Management Act 1 of 1999.

The following documents were used to assess and evaluate the programmes to determine expenditure patterns and service delivery thereof.

- Sector Oversight Model (SOM)
- The National Development Plan 2030
- The Ten Pillar programme of transformation, modernization, and re-industrialization
- Gauteng Provincial Government Estimates of Provincial Revenue and Expenditure 2024/25
- State of the Nation Address 2024
- GDOH Five-year Strategic Plan

4. PROCESS FOLLOWED

- 4.1 The Speaker of the Gauteng Legislature, Hon Helen Ntombi Mekgwe referred the Budget Vote report of the Gauteng Department of Health and Wellness to the Committee on the 25 March 2024 for consideration, reporting and adoption.
- 4.2 On 25 July 2024, the Committee received the research analysis from the Committee Researcher.
- 4.3 On 25 July 2024, the Committee received a presentation from the Gauteng Department of Health and Wellness on the revised Budget Vote 4 for 2024/25 FY.
- 4.4 On 29 July 2024, the Committee deliberated and adopted the adjusted Budget Vote 4 Report.

5. COMPLIANCE AND QUALITY

5.1 Timeframes

The Gauteng Department of Health and Wellness's 2024/25 Budget Vote 4 Report was prepared timeously and submitted to the Legislature. This is in accordance with Rule 68 (1) and (2) which stipulates the preparation and submission of the strategic plan, APP, and Budget.

5.2 Format

The Gauteng Department of Health and Wellness submitted its report in a prescribed format used by other executive departments.

5.3 Legal parameters

The Gauteng Department of Health and Wellness complied with Section 68 (1) and (2) of the Gauteng Legislature Standing Rules by preparing and submitting its 2024/25 Budget vote 4 Report to the Legislature.

5.4 Controls

The report tabled in the Legislature has been signed off by the Accounting Officer and the Executive Authority. The approval by the most senior authority in the department demonstrates that an effort is made to ensure that the reports are accurate.

5.5 Quality Parameters

The report controls within the department have proven to be adequate to ensure compliance with the necessary requirements for submission of the budget report.

6. OVERSIGHT ON STRATEGIC PRIORITIES

National Priorities

- Implementation of the NHI.
- Improving patients' experience of care.
- Improving clinical services.
- Health education and health promotion.
- Governance and leadership.
- Job creation and economic growth

Provincial Priorities

- Providing better quality health care to all.
- Improved access to healthcare
- Primary healthcare as an activist and community - oriented approach to the delivery of healthcare.
- Roll out of the NHI.
- The urgent turnaround of the Gauteng Department of Health and Wellness and all public health institutions
- To stabilize the finances of the department, improve the delivery of quality healthcare, reduce waiting time and queues, increase professional staff and invest in infrastructure, including the ICT as part of modernizing public services and e - governance.
- Revitalization of infrastructure.
- Accelerated implementation of the HIV and AIDS strategic plan and the increased focus on TB and other communicable diseases.
- Review of drug policy and strengthening Research and Development.

The National Development Plan

By 2030, the health system should:

- Provide quality care to all, free at the point of service, or paid for by publicly provided or privately funded insurance.
- The primary and district health system should provide universal access, with a focus on prevention, education, disease management and treatment.
- Hospitals should be effective and efficient, providing quality secondary and tertiary care for those who need it.
- More health professionals should be on hand, especially in poorer communities.
- Reform of the public health system should focus on:
 - Improved management, especially at institutional level
 - More and better-trained health professionals
 - Greater discretion over clinical and administrative matters at facility level, combined with effective accountability.
 - Better patient information systems supporting more decentralized and home-based care models.
 - A focus on maternal and infant health care.

7. OVERSIGHT ON TECHNICAL PERFORMANCE

a. PROGRAMME INFORMATION

PROGRAMME 1 – ADMINISTRATION

The main objective of this programme is to provide strategic direction and leadership, to guide and support the development of policy frameworks and guidelines for the implementation of priority programmes, to develop policies and legislation on health care provision, and to ensure that norms and standards are followed in the course of implementation.

The Committee notes the increased budget allocation on this programme from **R1 444 146 000** to **R1 934 645 000**. This is an increase of 3% from the original allocation sharing 2.5% of the department's total budget allocation. The budget will pay for incapacity leave, retirement, payment of revenue collecting agencies, fund the revenue enhancement strategy implemented through contracted service providers for tracing patient debtors and processing claims from the Compensation Fund. Further

allocations were made towards centralized procurement of consumable supplies; appointment of data capturers, including the modernization of the health information system and the payment of medico legal claims.

The Committee is concerned as to whether the allocation in this program will be sufficient, given that it has been exceeding its budget in the preceding quarters and the annual reports of 2022/23FY and 2023/24FY owing to accruals and litigations. The progress of implementing the health information system, including the ICT infrastructure at various institutions, remains a pending subject for the department to implement, despite budget allocations for the previous five fiscal years. It is disturbing that the targets for CHCs implementing PACS, CHCs with integrated health information systems, and the percentage of hospitals with integrated health information systems have been decreased from 100% to 51%, 100% to 61%, and 100% to 81%, respectively, despite the budget increase. The department is therefore requested to provide a detailed explanation of the decreased targets as well as a strategy on the full implementation of IHIS in all health facilities as well as PACS in CHCs.

PROGRAMME 2 – DISTRICT HEALTH

The purpose of District Health services is to provide comprehensive Primary Health Care services, district hospital services, comprehensive HIV and AIDS care and to deliver priority health programmes including the nutrition services.

For the department to optimise its plans of shifting away from curative to health promotion and disease prevention, the budget has been adjusted from **R20 137 498 000** to **R21 793 134 000** marking an increase of 8.2% sharing 33.6% of the department's total budget allocation.

The Committee welcomes the biggest portion of the budget allocated to fund the treatment and prevention of HIV and AIDS. For 2024/25FY, HIV and AIDS is allocated a budget of **R6 454 829 000**, representing a 6.8% increase when compared to the previous financial year's allocation of **R6 039 240 000**. The Committee supports the budget increase since it will assist the department to combat HIV and AIDS in order to improve life expectancy, including rapidly expanding access to antiretroviral therapy

(ART) for individuals living with HIV and AIDS, particularly among disadvantaged populations.

The second largest share in this programme is allocated to sub-programme, District hospitals with an allocation of **R4 900 033 000** reflecting an increase when compared to the **R4 519 159 000** allocated in 2023/24FY. The allocation is intended to cover the increasing patient load in order to relieve central and regional hospitals of additional health care obligations.

Community Based Services received an increased allocation of **R3 294 379 000**, from the **R2 734 575 000** allocated in 2023/24FY. Whilst Community Health Clinics, responsible for the provision of improved primary health care, received the third largest share of **R2 914 891 000** in this programme reflecting an increase when compared to the past financial year's allocation of **R2 810 322 000**.

The sub programme, Community Health Centres received **R2 579 126 000** to complement broadening access to quality public healthcare priority by implementing the 24-hour extension of service within the Community Health Centres.

PROGRAMME 3 – EMERGENCY MEDICAL SERVICES

The purpose of Emergency Medical services (EMS) programme is to ensure rapid and effective emergency medical care and transport, efficient, planned patient transport in accordance with Provincial norms and standards.

The budget allocation for this programme reflects an increased allocation from the budget of **R1 778 114 000** to **R1 890 518 000** by 6.3%. The allocation will pay for provincialisation of EMS to fill critical vacancies; improvement of conditions of service; filling of critical posts; and absorption of emergency care technicians.

EMS share 2.9% of the department's total budget. The amount is apportioned between two sub-programmes, the Emergency transport receiving **R1 560 936 000** and Planned Patient transport receiving **R329 582 000**.

PROGRAMME 4 – PROVINCIAL HOSPITAL SERVICES

The purpose of this programme is to provide general and specialised hospital services offered by specialists through regional hospitals, TB hospitals, psychiatric/mental hospitals, dental training hospitals and other specialised hospitals.

The Committee notes an increase in the original allocation of this programme from **R11 357 425 000** to **R12 527 896 000**. This is an increase of 10.3% in the allocation of the current financial year, sharing 19.3% of the department's total budget.

The sub programme general hospitals, like in the previous financial year received the largest portion of **R9 235 297 000** representing 71% of the total amount allocated for Provincial hospital services. According to the department the major portion of the budget is allocated to fund hospitals providing level one and two services which provides health services in the fields of internal medicine, paediatrics, obstetrics and gynaecology and general surgery.

The Committee is of the view that the budget allocation is sufficient to allow the department to provide level one and two services efficiently and effectively, provided that there is stringent adherence to the referral protocol and efficient use of resources.

The Psychiatric/Mental hospitals sub programme received the second largest share of **R2 062 930 000** which comprises 15% share of the total provincial hospital's budget. This allocation increased slightly when compared to the previous financial year's budget **R1 985 866 000**. The budget is earmarked to pay for mental health contracted beds. It is acknowledged that additional funds were allocated to increase the number of acute bed capacity for people with severe and profound intellectual disabilities. For purposes of oversight, the Committee requests the department to provide the names of facilities where there are mental health contracted beds including further details on the duration of the contract.

Dental training hospitals received the third largest share of **R701 863 000**; reflecting an increase from the **R667 965 000** allocated in the 2023/24FY. Hospitals dealing with TB received an increased sum of **R399 341 000** from the **R390 450 000** allocation in the 2023/24FY.

The Committee is of the view that the budget allocation is sufficient to allow the department to provide continuation for the prevention and treatment of XDR/MDR tuberculosis.

PROGRAMME 5: CENTRAL HOSPITAL SERVICES

The purpose of this programme is to provide highly specialised health care services, a platform for the training of health workers and research, and as specialist referral centre for tertiary and neighbouring provinces.

The allocation in this programme provides funding for Chris Hani Baragwanath, Charlotte Maxeke, Steve Biko and Dr George Mukhari Academic Hospitals. They are funded mainly from the National Tertiary Services and Health Professional Training Services conditional grants.

Central Hospitals programme received a revised budget of **R22 894 510 000** reflecting an increase by 5.2%, from the previous allocation of **R21 762 135 000** and constituting 33.5% of the entire budget of the department. The increased budget is due to additional allocation towards reduction of radiation (oncology) backlog in facilities. The Committee therefore requests that the department provides the current cancer radiation and surgery lists, as well as the number of patients awaiting surgery.

The Committee notes that the budget increase is in line in this programme as it will hugely impact on service delivery, especially when there are key deliverables planned.

PROGRAMME 6: HEALTH SCIENCES AND TRAINING

The purpose of this programme is to develop the department's human resource, management of employee wellness programme and addresses the education, training and developmental needs and priorities of the department.

The Department's strategic goals in respect of District Health services are as follows:

- Improve achievement of national norms for supply of health professionals
- Improve compliance with legislative framework
- Respond to the GDOH staff education, training and development needs

- Provide employee health and wellness to improve productivity and staff morale
- Contribute to the job creation mandate through targeted youth empowerment programmes

The department increased allocation in this programme from **R1 196 718 000** to **R1 214 438 000**. This is an increase of 1.5% sharing 1.9% of the department's total allocation. The Committee notes that the funding is meant for scarce skills such as medical professionals, assistant pharmacists, and pharmacists.

The budget in this programme is allocated to four sub-programmes namely: Nursing training colleges, EMS training colleges, Bursaries and other training. Of the four sub-programmes, Nursing training colleges received the largest share of **R710 696 000** which is an increase from the previous financial year's allocation of **R696 498 000**.

The second share of **R341 974 000** is allocated to Bursaries sub-programme whilst **R104 382 000** is allocated to Other Training. The Committee notes that this provision is made towards the South African Cuban Doctor programme, to address shortage of staff; implementation of new nursing curriculum, filling of new posts, and to acquire additional simulation as well as learning and teaching materials. The Committee is concerned that the budget for the Cuban doctor training programme has never been specified, and therefore requests the budget allocated for this purpose, including information on the allegations made in the past regarding the Cuban doctor training programme as well as the results of that report.

The smallest portion of the budget of **R57 386 000** is allocated to EMS Training Colleges. According to the department the allocated budget is meant for capacitating the department with Emergency Care Technicians, thus ensuring that Emergency Medical Services norms and standards are met.

PROGRAM 7: HEALTH CARE SUPPORT SERVICES

The purpose of this programme is to render non-clinical services including laundry, food services and medical supplies, to support hospitals and clinics in an effective and efficient manner. The focus is on the implementation of Supply Chain Management

and Broad Based Black Economic Empowerment in support of five strategic goals of the department.

For the year under review, the budget allocation for Health Care and Support has been increased from **R453 930 000** to **R474 656 000** marking an increase of 4.6% and sharing 0.7% of the total budget.

The bulk of the allocation, **R370 286 000** is allocated to laundry services which constitute 72.5% of the programme total budget with increase as compared to the previous financial year's allocation of **R338 339 000**. The budget for this programme is directed to five laundries throughout the province that provide cleaning services and purchase linen for health facilities. The five laundries are namely: Bara Laundry, Edenvale laundries, Dunswart Laundry, Masakhane, JHB Laundries (44 Joubert Parktown).

Food supply received the second largest share of **R118 548 000**, constituting 27.5% of the programme total budget allocation. This allocation increased from the 2023/24FY budget of **R115 590 000**. The Committee notes that as part of food supply, Masakhane cook freeze is supplying pre-packed food to hospital facilities. The Committee requests the department to provide further information on the facilities being catered for by Masakhane, as well as clarity on whether this is a contracted service provider.

The Committee welcomes the allocation and the commitment made by the department to support SMMEs as providers of food, linen, and hospital related needs. This will contribute to the transformation of the economy as per the provinces 10 radical pillars of transformation. However, the department is recommended to effectively monitor service delivery, since several complaints have been made about food supply shortages, as well as inadequate management of laundry services, which are significantly impacting service delivery.

PROGRAMME 8: HEALTH FACILITY AND MANAGEMENT

The purpose of this programme is to plan, provide and equip new facilities / assets and up-grade, rehabilitate and maintain community health centers', clinics, districts, provincial, specialized and academic hospitals including other related facilities. It is also responsible for providing a professional, cost effective and safe health technology service to all the health institutions and auxiliary services in the Gauteng Province; Licensing of compliant private health facilities and also to provide a security strategy and procedures to all institutions through support and leadership.

In this financial year, the allocation under this programme has been increased by 9.8% from **R1 918 309 000** to **R2 436 752 000** which constitutes 4.1% of the department's budget. It is noted that the major portion of the budget for this programme is transferred to the Department of Infrastructure Development for major capital works programmes performed on behalf of the department.

The Committee supports the additional allocation with the goal of improving health infrastructure design, delivery, and maintenance while also maintaining statutory compliance in all health institutions. However, the Committee notes that a large portion of existing infrastructure does require maintenance, rehabilitation and upgrading. The department is therefore requested to furnish the Committee with a list of planned infrastructure projects for oversight purposes.

8. OVERSIGHT ON FINANCIAL PERFORMANCE

The Gauteng Department of Health and Wellness received the second largest departmental budget in the province. The current budget is increased by 7.9% from **R60 093 535 000** to **R64 837 043 000** in the current year.

In terms of economic classification, current payment increased to **R60 195 530 000** sharing 92,8% of the total adjusted budget. Goods and services were decreased from **R 20 347 509 000** to **R20 116 845 000**. The Committee is concerned with the decrease since it may affect items such as medicine, laboratory services, consumable supply, and property payments. The department is therefore requested to provide

detailed strategies that are in place to ensure efficient health care delivery, since patient's satisfaction tends to depend on availability of resources like medicine.

Compensation of employees increased from the budget of **R35 665 552 000** to **R37 433 132 000** to pay salaries as well as to strengthen mental health services. The Committee notes that compensation of employees is sharing 61.8% of the total Vote 4 allocations to make provision for appointment of critical positions. The funds are also earmarked to pay salaries for retention of health care professionals who were previously employed for COVID-19.

In terms of capital assets, machinery and equipment got slightly decreased from **R1 579 357** to **R1 406 636 000**. Whilst buildings and other fixed structures were increased from **R694 546 000** to **R993 132 000**.

9. RESOLUTIONS MANAGEMENT

RESOLUTIONS MANAGEMENT		
RESOLUTIONS PASSED DURING THE LAST QUARTER	RESOLUTIONS / ACTION DUE DURING THE LAST QUARTER	RESOLUTIONS CLOSED
<i>Number of Resolutions passed during the last Quarter</i>	<i>Number of Resolution Responses / Action due in the last Quarter</i>	<i>From those due in the last Quarter, how many Resolutions are now closed</i>
14	14	0
<i>Nature of Resolutions</i>	<i>How many new and how many outstanding</i>	<i>Reasons for Resolutions not yet closed</i>
Service Delivery – 10 Internal Arrangement – 1 Governance – 3	0	Awaiting responses from the department
<i>With respect to the Resolutions / Action due during last Quarter but still Open, what measures has the Committee taken to ensure speedy Closure of these Resolutions</i>		
Follow up of responses has been made through Proceedings Unit.		

10. FINDINGS, RECOMMENDATIONS, AND IMPLICATIONS ON LAW MAKING

10.1 Committee Findings / Concerns

The Committee is concerned with:

- 10.1.1 The performance targets for IHIS and PACS implementation at facilities have been reduced, whereas progress toward complete implementation of the health information system, including ICT infrastructure, has been delayed over the years.
- 10.1.2 There is less information available on the budget for the Cuban doctor training program.
- 10.1.3 The less information provided on plans for existing infrastructure that requires maintenance, rehabilitation and upgrading.
- 10.1.4 The decreased budget on goods and services from **R 20 347 509 000** to **R20 116 845 000** since it has the potential to affect items such as medicine, laboratory services, consumable supply, and property payments.
- 10.1.5 The accruals that consistently affect the budget in every financial year.
- 10.1.6 The less reported information regarding the budget for occupational health and safety in health facilities.
- 10.1.7 The undocumented foreign nationals that in return burden the health system as they cannot be turned away.
- 10.1.8 The present state of medicolegal claims, which influence the budget in every financial year.

10.2 Committee Recommendations

The Committee recommends that the department should provide detailed reports by **30 August 2024** on the following:

- 10.2.1 A detailed explanation of the decreased targets as well as a strategy on the full implementation of IHIS in all health facilities as well as PACS in CHCs.
- 10.2.2 The budget allocated specifically to the Cuban Doctor Training programme; the performance of the programme in the year ending 2023/24FY including community service placements, as well as a report on the outcome of the allegations made in the past regarding the Cuban doctor training programme.

- 10.2.3 A list of new infrastructure projects as well as infrastructure maintenance that are planned for in this financial year; including budgeted amounts that are allocated to each hospital for maintenance of infrastructure.
- 10.2.4 Detailed strategies that are in place to ensure efficient health care delivery, since patient's satisfaction tends to depend on availability of resources like medicine which fall under the goods and services budget allocation that has been decreased.
- 10.2.5 A detailed assessment on the effectiveness of the accruals management strategies that the department is putting into practice in an effort to eradicate accruals.
- 10.2.6 A detailed budget that has been allocated for occupational health and safety in facilities.
- 10.2.7 The strategy that the department is applying in dealing with undocumented foreign nationals that in turn burden the health system.
- 10.2.8 A strategy to be applied in order to lessen negligence in hospital facilities, and ultimately reducing the amount spent on medical claims.

11 ACKNOWLEDGEMENTS

The Chairperson wishes to thank the MEC for Health, Hon. Nomantu Nkomo-Ralehoko and her team, led by the HOD, Mr. Arnold Lesiba Malotana, for the preparation of the Budget Vote 4 Report and the efforts made in taking the committee through the details of the report and responding to questions raised by members.

Highly appreciated is the role of the Committee Members of the Health Portfolio Committee for their dedication and commitment: Hon. L. E. Makhubela; Hon. M. M. Mfikoe; Hon. J. B. Bloom; Hon. M. Hicklin; Hon. K. Poho; Hon. L. J. Evans; Hon. L. Mkhwanazi; Hon. A. J. Fuchs; Hon. P. Makwala

Last but not least, I would like to acknowledge the support staff: Group Committee Co-ordinator Z Pantshwa-Mbalo; Senior Researcher S Nenweli; Senior Committee Coordinator, Ms N Ngidi; Researcher Dr MD Mokonoto; the Committee Coordinator, Ms N August; The Committee Administrator, Ms T Msomi; Service Officer, Mr I

Ngcobo; Information Officer, Mr W Nsibande, Communications Officer, Ms Thabisile Nzuke; and Hansard staff, Mr M Makwela.

12 ADOPTION

In accordance with Rule 168, the Committee hereby recommends that the House adopt the Health Portfolio Committee Oversight report on the Department of Health and Wellness Budget Vote 4 report for 2024/25 FY, taking into consideration the concerns and proposed recommendations made in this report.

