

listeriosis outbreak, a disease which in the recent years has developed into a deadly epidemic. We plead with members of the public to be careful when preparing food; keep clean and wash hands before and while preparing food; separate raw and cooked food; thoroughly cook food, especially meat; keep food at safe temperatures; use safe water; and also refrain from consuming the food items that have been identified as leading causes of the outbreak.

Lastly, allow me Honourable Speaker to express my heartfelt gratitude to Honourable Premier for his support; the Portfolio Committee for Health, led by its Chairperson Honourable Dimaza; the Superintendent General of the Department and the entire departmental team.

I also wish to express my gratitude to my family for firstly allowing me to serve the people of this province and for also being my support and source of strength to work selflessly in serving those who are in need of our service.

Honourable Speaker, I now table the Eastern Cape Department of Health's 2018/19 Budget and Policy Speech; the 2018/19 Annual Performance Plan and Operational Plan as well as the Service Delivery Improvement Plan for 2018 MTEF period.

Ndiyabulela!

EASTERN CAPE DEPARTMENT OF HEALTH 2018/19 BUDGET AND POLICY SPEECH, 13 MARCH 2018

Honourable Speaker and Deputy Speaker;

Honourable Premier;

Members of the Executive Council;

Members of the Provincial Legislature;

Leadership of all Political formations represented in this House;

Chairperson of the African National Congress Standing Committee on Health;

Traditional Leadership;

Ministers of Religion;

Director General of the Province;

Superintendent General of the Department of Health;

Departmental Management and Staff;

Departmental Stakeholders;

Honoured Guests;

Ladies and Gentlemen;

Greetings to all of you,

Madam Speaker it is such a privilege and honour to table this fifth and final Budget and Policy Speech of the Eastern Cape Department of Health for this current term of government. In 2014 and with an overwhelming majority, the citizenry of this province mandated the African National Congress (ANC) to govern the Eastern Cape and ensure its people enjoy a better life for all.

Madam Speaker, in the presence of these Honourable Members I can confidently say without any fear of contradiction that over the past four years, the people of our province have seen and experienced improved government services, even in the most rural and remote areas of our vast province.

Nelson Rolihlahla Mandela once said, *“action without vision is only passing time, vision without action is merely day dreaming, but vision with action can change the world.”* Madam Speaker, I am pleased to have been part of a leadership collective which implemented the vision of the Eastern Cape Government, to bring a significant change and impact in our communities.

I am also equally proud to have presided over the Department of Health at the time when the department was at its most stable. I say so because during this period, we managed to bring stability at leadership level by reducing acting positions at Head Office and facility level to less than 10%; we invested in providing personnel and medication to our health facilities; and showed significant

I wish to pass my sincere gratitude to the Provincial Executive Council for always extending a hand in our service delivery efforts, as well as our sister departments who are always keen to work together to enhance the impact of service delivery in our communities.

I wish to invite Honourable Members to support the department in celebrating the centenaries of Tata Mandela and Mama Sisulu at the events that we will host in their honour. As already alluded to earlier in this speech, we will be honouring Tata Mandela and dedicate this year's TB day on 27 March 2018 at Kouga, to his legacy.

To mark Mama Sisulu's centenary celebrations, we will dedicate this year's Nurses Day celebration on 11 May 2018 in her honour. On that day, we will re-dedicate the nursing profession to high levels of professionalism and care for our patients, emulating the example of nurses like Mama Sisulu.

In this year of centenary celebrations, the department will also commemorate the 120th anniversary of Victoria Hospital's existence. Ngenyanga yoMsimsi kulonyaka umiyo Somlomo naMalungu abekekileyo sizakube sinyathela kulamhlaba wakwaSomgxada siscangatha kumzila kaCecilia Makiwane ngethuba exelenga kwesasibhedlele sivuselela isidima nendima yamanesi eluntwini xa sisenza esisikhumbuzo sibalulekileyo kwimbali yeliPhondo.

Honourable Members, as I conclude, I would like to make a special appeal to the people of our province to exercise caution against the

Madam Speaker, the biggest allocation for the department at R12 billion goes to District Health Services to implement Re-engineering of Primary Health Care services, ensure compliance with Office of Health Standards and Compliance (OHSC) standards as well as attainment of Ideal Clinic standards.

Programme 4 and 5 will receive the next biggest allocation to ensure optimum functioning of tertiary services in the province and facilitate in-reach and outreach services in order to transfer skills.

Programme 8 also receives a significant allocation to drive infrastructure delivery and maintenance as well as procurement of critical medical equipment.

Conclusion

Madam Speaker, all these achievements that we have highlighted and the work that we commit to do in the 2018/19 financial year is made possible through cooperation and collaborative efforts. Without the dedication of our departmental management and personnel we would not have these good stories to tell. It is my hope that in the coming financial year we will all heed President Ramaphosa's call and say "Thuma mina", as we dedicate our service to those who need it most. We shall strive to practise good governance which will bring forth clean audit outcomes by the end of this term.

improvement in financial management by attaining 2 consecutive unqualified audit opinions from the Auditor General.

Honourable Members, during this year of renewal, unity and jobs, the year which is also set aside to celebrate the 100 years of 2 great icons, utata uNelson Mandela, nonama Albertina "Mother of the Nation" Nontsikelelo Sisulu, it gives me great pleasure to reflect on the good work done by my department to deliver quality health services in the past 4 years, and to reflect on the remaining priorities as we conclude this fifth term of our government. As the department, we feel obliged to celebrate the centenary of these health ambassadors and recognise the contribution they made in health services, during their lifetime.

Madam Speaker, despite all the positive gains of our government, there is still much more work to be done in order to end the disparities created by the apartheid government. We will therefore continue to fight harder to realise a better life for all our people; address challenges related to social determinants of health and change the livelihoods of our people.

Madam Speaker, during this term of government, the Department of Health gave effect to the governing party's pronouncement of Health as a priority. We pledged to implement a fast-tracked approach to service delivery, so as to ensure that citizens of our province receive an effective and efficient health service in our health institutions. This afforded the department an advantage to receive priority budget

allocation from the provincial government, an effort which is earnestly laudable. We also appreciate the commitment displayed by the provincial government to the provision of quality health care services over this period.

Notwithstanding this favourable allocation year on year, the department consistently operated under significant financial strain, owing to the country's negative economic outlook, the increasing demand for health services, and the scourge of medico legal claims. The department then had to continuously reprioritise its budget so as to ensure that the non-negotiable items as determined by the Minister of Health are adequately covered. This reprioritization took place across all departmental programmes and consequently, 85 per cent of the department's Goods and Services budget is now being spent on the non-negotiable items. Because of these concerted reprioritising efforts, the department was able to accomplish positive and commendable clinical outcomes which I will share with the Honourable Members.

Re-engineering of Primary Health Care Services

Honourable Members, our focus during this period has been on the Re-engineering of Primary Health Care as the main building block of the National Health Insurance (NHI). In as far as the implementation of the NHI readiness programmes in our two pilot districts, the department made good progress in ensuring that these communities access and experience universal health coverage, irrespective of

2018/19 Budget and Programme Allocation

Madam Speaker, allow me to table the 2018/19 budget appropriation for the Eastern Cape Department of Health. We have been allocated an amount of twenty-three billion, six hundred and ninety-nine million rand, five hundred and sixty rand. The table below gives a breakdown of the budget per programme and economic classification:

Programme	Allocation 'R'000
1. Administration	695 199
2. District Health Services	12 031 947
3. Emergency Medical Services	1 284 612
4. Provincial Health Services	3 857 135
5. Central Hospital Services	3 447 737
6. Health Sciences and Training	885 346
7. Health Care Support Services	125 512
8. Health Facilities Management	1 372 071
Total	R 23 699 560
Economic Classification	Allocation
Compensation of Employees	15 860 414
Goods and Services	6 121 833
Transfers and Subsidies	287 403
Payments for Capital Assets	1 429 910
Total	R 23 699 560

Somlomo obekekileyo, sisebenza nzima silisele lezeMpilo ukuvingca amazibuko okuxhatshazwa kwemali kaRhulumente nge Medico Legal claims. We will be implementing our multi-pronged medico legal strategy, which focuses on addressing the clinical, administrative, human resources and legal causes of the medico legal claims. As was indicated by Hon. Premier in his State of the Province Address, we are rooting out corrupt practices in medico legal claims and we can confidently say that arrests in this regard are imminent.

one's socio-economic status. As the department, we have set up a total of 692 Ward Based Outreach Teams (WBOTs) who are led by registered nurses across the entire province. Ninety-five of these teams are in OR Tambo and 26 in Alfred Nzo. The teams visit and register households and monitor adherence of patients to treatment when at home.

Honourable Members, as part of these WBOTs, we have contracted 5 427 Community Health Workers (CHWs) which on top of providing a service to the department, has been our contribution to reducing poverty in our communities. More than 90% of CHWs are women who receive a monthly stipend of R 3000.

Madam Speaker, through the Integrated School Health Programme (ISHP), the department continued to provide school health services in order to improve physical, mental and general well-being of children of school-going age. In 2017/18, the department screened 24 748, grade 1 learners and 16 927, grade 8 learners. In addition, the department contracted 201 Professional Nurses and 383 Enrolled Nurses to support the schools health programme.

The ISHP teams also made good progress in administering the 1st and 2nd dose of HPV vaccination to eligible girls that are in Quintile 1 and 2 public and special schools. In 2017/18, we have vaccinated 55 224 or 87% of the 62 786 targeted learners, and the remaining learners that were not vaccinated were the non-eligible cohort. This Cervarix



vaccine has been found to reduce incidences of cervical cancer from HPV infection by 70%.

Honourable Members, one of our notable successes has been the rolling out of the Centralized Chronic Medicine Dispensing and Distribution (CCMDD), as a way of reducing waiting times in facilities and relieving our clients from frequently visiting health facilities for collection of chronic medication. At the end of December 2017, the number of patients benefitting from CCMDD programme stood at 231 569 in 712 health facilities across the province. We also have an additional 97 external Pick-up-Points and 490 adherence clubs where clients can collect medicines from, thereby improving access to medicine availability. We are pleased Honourable Members that the medicines approved for the CCMDD programme have now been expanded to include other chronic conditions such as asthma, arthritis, epilepsy, diabetes and hypertension.

With regards to patient registration, we have improved our management of patient records through using the Health Patient Registration System (HPRS). The system uses South African Identification number and all other legal personal identification as the primary patient identifier and this assists in tracking patients at all levels of care for improved quality and continuity of care.

accommodation for health professionals, as well as fencing and guard houses for our facilities. Working in collaboration with the Office of the Premier, we will target youth groups at various districts to provide first line maintenance in our health facilities.

In 2018/19, we will also be constructing the Radiation Oncology Unit in Nelson Mandela Academic Hospital, a move which will bring much needed relief to cancer patients who are required to travel from OR Tambo and surrounding districts to access the service at Frere Hospital.

On clinical support services Madame Speaker, the department will retain the 62 post Community Service Pharmacists in order to improve quality of pharmaceutical care, access and availability of medicines as well as compliance to the National Core Standards and Pharmaceutical Services laws and regulations. Also, we will continue the refurbishment of the Mthatha Depot in preparation to have the depot accredited with the Medicines Control Council (MCC).

The department will continue to implement its strategies to improve access to medicines, including registration of external Pick-up-Points and Adherence Clubs through the CCMDD programme in order to bring medicines closer to the people. To this effect we will conduct further engagements with the SA Post Office for use of their facilities as pick up points, especially in rural areas.

support efforts of keeping girl learners at school during their menstrual cycle.

Madam Speaker, the biggest cohort of the Cuban trained medical students is expected to come back to the country in July 2018 and will be placed across the expanded clinical teaching platform, which covers fifteen (15) district hospitals, supported by the central hospital, tertiary hospitals and regional hospitals. The 285 medical students will come back to serve the province over a three-year period after undertaking their final training and re-orientation into the South African health context through local universities.

The National Department of Health has been organising with various provincial health departments and medical schools to prepare for this major achievement and on our part we are ready to receive these students and look forward to reaping our investment in them very soon.

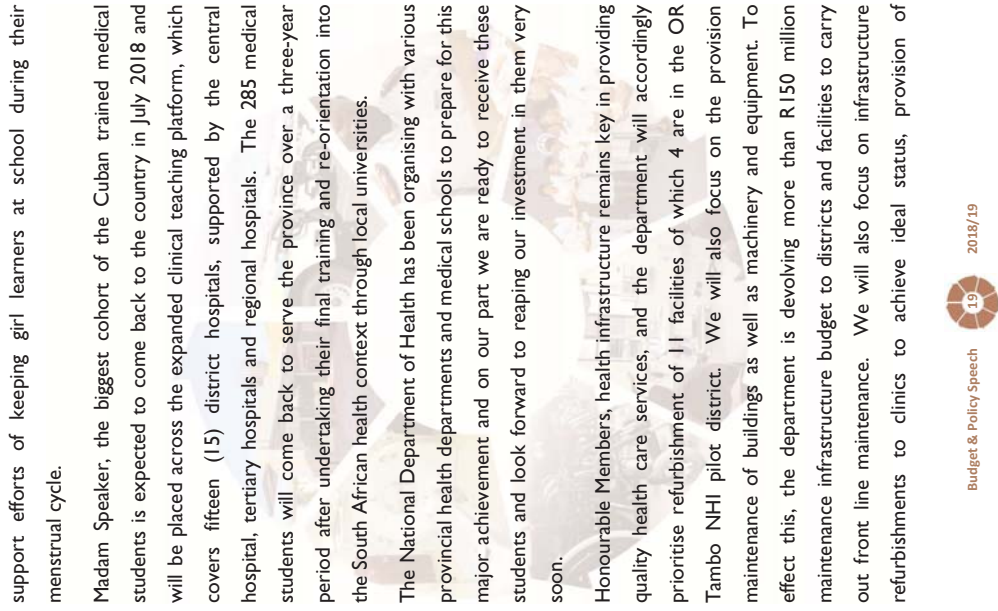
Honourable Members, health infrastructure remains key in providing quality health care services, and the department will accordingly prioritise refurbishment of 11 facilities of which 4 are in the OR Tambo NHI pilot district. We will also focus on the provision maintenance of buildings as well as machinery and equipment. To effect this, the department is devolving more than R150 million maintenance infrastructure budget to districts and facilities to carry out front line maintenance. We will also focus on infrastructure refurbishments to clinics to achieve ideal status, provision of

Honourable Members, we have 774 facilities that are now linked to HPRS, which include all 145 PHC facilities in OR Tambo. From these facilities, we have registered 1.4 million patients on the HPRS of which 708 457 are in OR Tambo. We have also developed an integrated plan to implement the HPRS across the province.

Through our collaborative efforts with the Office of the Premier we have managed to provide broadband connectivity to 88 hospitals and 752 PHC facilities and in the coming year, we will focus on connecting the 16 remaining facilities.

Madam Speaker, we have also heeded the call to systematically improve the quality of care provided in PHC facilities through the implementation of Ideal Clinic Realisation and Maintenance (ICRM) programme. To date, 26 out of the 78 clinics targeted facilities have achieved the ideal status. We have also procured more than 1 800 pieces of medical equipment and surgical supplies and provided additional consulting rooms to our health facilities as part of ICRM.

Honourable Members, we are indeed very proud that our very own Sarah Baartman Health District came up as the top performing district in the country during the ICRM peer-review assessments that were conducted in November 2017. Our District Health Planning was also put on the map when our own Amathole District's Health Plan for 2018/19 was identified as the best plan in the country which



National Department of Health has approved as a benchmark for the entire sector.

Increasing Life Expectancy

Honourable Members, TB and HIV remain responsible for a significant number of mortalities in the Province, while non-communicable diseases such as heart diseases; cerebrovascular diseases; injuries; diabetes mellitus; chronic lower respiratory disease; and hypertension also causes for concern.

With regards to our tireless efforts to fight HIV/AIDS, we can be proud of the following achievements since coming into office in 2014/15:

- We have tested a total of 6.2 million clients for HIV and put 436 078 patients on ART as at end of December 2017.
- Over 350 million condoms have been distributed to the sexually active population of the province.

The above initiatives have been made possible by amongst others our commitment to implementing the Universal Test and Treat strategy which directly supports the 90-90-90 targets of ensuring that 90% of all people living with HIV know their HIV status, 90% of people with diagnosed HIV infection receive sustained ART and 90% of all people receiving ART have viral suppression.

With regards to TB management, we are proud to have consistently maintained a TB client success rate above 82% and this rate even

communities about the dangers of cancer and also promote cancer prevention strategies which focus on prevention, early detection as well as treatment of the disease.

Honourable Members, as a way of consolidating our maternal and reproductive health strategies, the department will make an additional investment in providing staff; procure essential life-saving equipment and modern technology to monitor and easily identify high risk pregnancies and also provide best support for new-born babies, in order to prevent birth-related harm and defects. In 2018/19, the department will strengthen its recruitment drive to attract scarce skills required to make full composition of District Clinical Specialist Teams (DCSTs).

Madam Speaker, the department will continue to collaborate with Department of Education on the ISHP. We plan to vaccinate 89 000 eligible girls against the HPV infection. Furthermore, through this partnership, we will continue providing sexual reproductive health education programmes to schools in a bid to reduce teenage pregnancy amongst learners. This collaboration will also extend to joint intergenerational dialogues aimed at keeping learners at school. We will also continue to provide health screening services to young girls at school through the Integrated School Health Programme.

Menstrual hygiene in an integral part for women's health. We therefore welcome the Honourable Premier's pronouncement on provision of sanitary towels to schools, as this will significantly

We are targeting to test 1.5 million clients and ensure that more than 550 000 HIV positive patients remain on treatment, 100 000 of which will be new patients. We will again strengthen our efforts to track and trace TB patients-lost-to-follow-up, through collaborative work with community-based organisations and active participation in the Operation Masiphathisane War room initiatives. In the new financial year, we will implement new initiatives to increase early detection and initiation of TB patients on treatment through the introduction of the Lipoarabinomannan (LAM) antigen test.

Honourable Members, on the 24th March 2018 we will commemorate the World TB Day in Humansdorp and during these celebrations the department will honour and salute tata Nelson Mandela for his contribution to the de-stigmatisation of Tuberculosis, acknowledging his successful battle against TB as well as his advocacy on HIV/AIDS.

We have noted the successes of the 90-90-90 strategy on HIV/AIDS and TB and for that reason, the department will adopt this strategy in the fight against non-communicable diseases such as diabetes and hypertension.

Malungu ePalamente abekelileyo, isifo somhlaza sesinye sezifo ezingunobangela wobhubhane eluntwini, amaxesha amaninzi oku kubangelwa yitswela-lwazi kwanokungafumani uncedo lonyango kwangethuba. During the 2018/19 financial year, the department will work on several cancer awareness campaigns and educate our

improved up to 85% at the end of December 2017. This was made possible through collaboration with partners and community stakeholders to bring increased education and awareness to communities about adhering to treatment.

The introduction of the new treatment regimens, Bedaquiline and Linezolid in the fight against drug resistant TB has also yielded positive results in our communities. We are aware of the challenges with patients lost to follow up and have identified areas where the defaulter rate is high, therefore our interventions going forward will be mostly targeted at these areas.

As part of our campaign to promote healthy lifestyles and reduce the burden of non-communicable diseases Honourable Members, in 2017/18, the department tested over 970 000 and 1 million clients for hypertension and diabetes respectively. A total of 1 million clients were also screened for mental disorders against a target of 409 672 during the same period.

We have made significant progress in turning around one of our strategic district hospitals, Butterworth Hospital through the appointment of critical clinical and general staff as well as providing much needed equipment. In the year under review, we appointed amongst others 8 doctors which brought the number of doctors at the hospital to 19 fulltime doctors; 22 Enrolled Nursing Assistants, 20 Enrolled Nurses, 7 Professional Nurses, 4 Operational Managers,

and 25 General Assistants. In February 2018, Butterworth Hospital's Eye Clinic, in collaboration with the Grace Vision (NGO) successfully conducted 36 cataract operations, and we intend to formalise this partnership in order to increase our reach to those in need of this specialised service.

Emergency Medical Services (EMS)

Madam Speaker, the department pledged to increase its emergency services capacity during this term in order to increase access to various communities of our province, especially the most remote and rural communities. Over this period, we have been able to register some key achievements including:

- The addition of 100 new ambulances, 31 Response Vehicles, 4 Rescue Vehicles; and 27 Planned Patient Transport Vehicles (PTVs).
- 773 additional staff members were appointed in an effort to improve response times.
- We have contracted 3 aeromedical helicopters which are based in Mthatha, East London and Port Elizabeth.
- We further increased our foot print in the rural communities with the establishment of EMS bases within hospitals and rural areas.
- In the current financial year, we have received 135 (4x4) ambulances and the remaining 9 are expected before the end of the financial year.

We also bought other critical equipment which includes: X-ray machines, BP machines, Cardiotocographs (CTGs), Vital Signs Monitors etc. for district hospitals and clinics.

2018/19 Service Delivery Priorities

As we conclude this MTSF period Madam Speaker, we will ensure that the Re-engineering of PHC as one of the corner stones of the National Health Insurance remains our apex priority. We plan to reach a total of 400 000 households through our WBOTs to register households and gather important information about the health profile of members in these households. The department will also be replicating to other districts, the lessons learnt from OR Tambo and Alfred Nzo Pilot districts as we enter the next phase of the NHI readiness programme.

The department will continue to implement the World Health Organisation's (WHO) 90-90-90 strategy on HIV, STIs and TB to reduce the quadruple burden of disease as part of giving effect to President Ramaphosa's January 8th Statement call to intensify efforts to improve the health of our people, particularly in the context of the devastating impact of the AIDS epidemic and the emergence of other diseases. This call was further confirmed by the Premier during his State of the Province Address (SOPA), Sikwiphulo lokuqinisekisa ukuba wonke umntu uyasazi isimo sakhe sempilo, futhi afumane uncedo olufanelekileyo kwangexesha.

We are proud to have achieved major infrastructure developments in a bid to deliver quality health services to our people, including:

- a) Building of St Patricks Hospital in Alfred Nzo, the State of the Art Health Resource Centre at St Elizabeth Hospital in OR Tambo, as well as revamping of Frontier and Dora Nginza Hospitals.
- b) Commissioning of the Cecilia Makiwane flagship project which offers cutting edge Telemedical technology. This facility was officially opened by the then Deputy President Cyril Ramaphosa in September 2017.
- c) A total of 18 clinics have been opened, of which 10 are in OR Tambo District.
- d) 16 clinics in OR Tambo district have been provided additional consulting rooms as part of the Ideal Clinic programme.
- e) 2 Lilitha colleges were revamped during this period.

During this period, we also made significant investment in health technology. Through our transversal medical equipment contracts, the department procured additional equipment, particularly for critical clinical areas such as Intensive Care Unit; Maternity Units; High Care Units; Accident and Emergency; Theatres; Out Patient Departments; Radiology; Nuclear Medicine and Neonate Intensive Care Unit.

- We have rationalised the training of EMS personnel to meet the latest requirements. In this regard, the department has signed a Memorandum of Understanding (MOU) with Nelson Mandela Metropolitan University (NMMU) and Fort Hare to offer the Bachelor Degree in Emergency Medical Care (BEMC). We believe that this move will greatly benefit the department and is a significant step closer to addressing our skills shortage in this regard. This positive development comes as 14 bursary holders have qualified with a BEMC and will be deployed throughout the province to alleviate the staff shortage.

Madam Speaker, we have also made inroads in the provision of assistive devices to our patients with physical challenges and disabilities. Over this period, we have distributed more than 18 048 Wheel Chairs; 11 460 Hearing Aids; 34 822 Prostheses and 80 094 Orthoses. We are proud that both Livingstone and Frere Hospitals are now able to fit Cochlear Implants, which means that we no longer need to send our patients to Tygerberg Hospital in Cape Town to access this service. These devices help the patients to improve the hearing ability, and accordingly prevent further disability.

Human Resources Provision

Madam Speaker, we remain cognisant of the fact that the success to delivering on our service delivery obligations is dependent on the capability of our workforce. It is for this reason that the department

continuously makes efforts to address challenges of staff shortages within its facilities and with the limited financial resources.

Our recruitment efforts this year were boosted with the additional allocation of R317 million during the 2017/18 adjustment estimates period for the recruitment of 1888 critical personnel to improve mother and child health outcomes in 26 priority facilities of which 17 are district hospitals; 1 CHC; 3 tertiary hospitals and 5 regional hospitals. These are facilities where a high number of children are born, and invariably record high incidences of maternal and child adverse events which result in medico legal claims.

During the year under review Honourable Members, we managed to also appoint 145 community service health professionals which include physiotherapists, radiographers, speech therapists etc. These professionals are placed in all districts to ensure coverage of the entire province. Siginisekisa ukuba wonke ubani ongumhlali kweliPhondo ufumana uncedo lwezempilo ngokupheleleyo.

We have also increased accountability at Head Office and districts by ensuring that critical managerial positions are filled. In February 2018, the department welcomed 5 new senior managers, 4 of which were women. This achievement has tilted the employment equity statistics to favour women more than men.

Madam Speaker, despite the unabating financial pressure, the department continues to fund and skill a range of students who are

pursuing health related qualifications through its bursary scheme. In 2017/18, the department funded a total of 121 students from disadvantaged backgrounds and who are studying at various South African Universities, to the value of R13 million. For 2018/19 financial year, the department is committing R 7.2 million to fund 56 needy students in various health related fields. The department still continues to fund students in the Castro-Mandela Medical Scholarship programme and a significant number of these students is returning to the country to complete their training.

Over this reporting period, the department is proud to have created job opportunities for the youth by providing internship opportunities to 2 093 young people.

Madam Speaker, I am very excited to announce that the department has finally concluded its organogram and after meeting all the necessary requirements, I approved the new organogram on 05 March 2018 for implementation come 01 April 2018. The new organogram focuses on efficient front-line service, well-resourced facilities and districts as well as a lean Head Office.

Health Infrastructure

Honourable Members, in the last four years, we have made commendable strides in the area of health infrastructure investment. The profile of our complete infrastructure projects is evidence of this hard work. Over this period, we spent R2.9 billion of which R653 million was spent in OR Tambo district alone.