# Vote 6

# **Department of Health**

	2006/07 To be appropriated	2007/08	2008/09			
MTEF allocations	R6 323 493 000	R6 774 319 000	R7 332 905 000			
Responsible MEC	Provincial Minister of H	Health				
Administering Department	Department of Health	Department of Health				
Accounting Officer	Head of Department, I	Department of Health				

# 1. Overview

# Core functions and responsibilities

The delivery of a comprehensive package of health services to the people of the Western Cape. The service includes preventive, promotive, emergency and curative services, rehabilitation and chronic care.

Effective interventions to reduce morbidity and mortality particularly in the high priority areas of HIV and Aids, tuberculosis (TB) and trauma.

The delivery of tertiary health care to neighbouring provinces which is largely funded from the National tertiary services grant.

Provisions of training facilities for health care workers and professionals in conjunction with the universities and universities of technology.

The licensing and regulation of private hospitals within the province.

## **Vision**

"Equal access to quality health care".

#### Mission

To improve the health of all people in the Western Cape and beyond, by ensuring the provision of an equitable health care system, in partnership with all stakeholders, within the context of optimal socio-economic development.

#### Main services

In terms of section 27 of the Constitution of the Republic of South Africa, 1996 (Act 108 of 1996):

Everyone has the right to have access to -

- Health care services, including reproductive health care;
- Sufficient food and water.

The state must take reasonable legislative and other measures within its available resources, to achieve the progressive realisation of each of these rights.

No one may be refused emergency medical treatment."

The Western Cape Department of Health is therefore responsible for providing health services to the uninsured population of the province, i.e.  $\pm$  71 per cent of the total population of 4,8 million, which amounts to  $\pm$ 3,5 million. In addition to this there is an obligation to provide tertiary services to people beyond the provincial boundaries.

The range of services provided by the Department includes the following:

Delivery of comprehensive, cost-effective primary health care services including the prevention and promotion of a safe and healthy environment.

The delivery of district, provincial and central hospital services.

The delivery of health programmes to deal with specific health issues such as nutrition, HIV and Aids, tuberculosis, reproductive health, environmental and port health, etc.

Delivery of medical emergency and patient transport services.

Rendering of a training and research platform for the country, in consultation with stakeholders.

Rendering of specialised orthotic/prosthetic, forensic and medico-legal services.

Delivery of support services to ensure efficient health services.

The overall management and administration of the delivery of public health care within the province.

The regulation of private health care.

# Demands and changes in services and expected changes in the services and resources

The annual migration of ± 48 000 people into the province has a significant impact on the demands for services.

Assumption of responsibility for Personal Primary Health Care (PPHC) in the non-metropolitan areas.

Transfer of forensic medical services from the South African Police Service to the Department of Health.

The implementation of Healthcare 2010 which will reshape the service by treating patients at the level of care that is most appropriate to their need and therefore improving quality of care and realising significant efficiency gains.

#### Acts, rules and regulations

#### **National Legislation**

Academic Health Centres Act, 86 of 1993

Atmospheric Pollution Prevention Act, 45 of 1965

Births and Deaths Registration Act, 51 of 1992

Broad Based Black Economic Empowerment Act, 53 of 2003

Child Care Act, 74 of 1983

Chiropracters, Homeopaths and Allied Health Service Professions Act, 63 of 1982

Choice on Termination of Pregnancy Act, 92 of 1996

Compensation for Occupational Injuries and Diseases Act, 130 of 1993

Constitution of the Republic of South Africa, 1996, Act 108 of 1996

Correctional Services Act, 8 of 1959

Division of Revenue Act (Annually)

Domestic Violence Act, 116 of 1998

Drugs and Drug Trafficking Act, 140 of 1992

Employment Equity Act, 55 of 1998

Environment Conservation Act, 73 of 1998

Foodstuffs, Cosmetics and Disinfectants Act, 54 of 1972

Hazardous Substances Act, 15 of 1973

Health Act, 63 of 1977

Health Donations Fund Act, 11 of 1978

Health Professions Act. 56 of 1974

Human Tissue Act, 65 of 1983

Inquests Act, 58 of 1959

Institution of legal proceedings against certain Organs of State Act, 40 of 2002

International Health Regulations Act, 28 of 1974

Labour Relations Act, 66 of 1995

Medical Schemes Act, 66 of 1995

Medical, Dental and Supplementary Health Science Professions Act, 56 of 1074

Mental Health Care Act, 17 of 2002

Municipal Finance Management Act, 56 of 2003

National Health Laboratories Service Act, 37 of 2000

National Policy for Health Act, 116 of 1990

Non Profit Organisations Act, 71 of 1977

Nuclear Energy Act, 46 of 1999

Occupational Health and Safety Act, 85 of 1993

Pharmacy Act, 53 of 1974

Preferential Procurement Policy Framework Act, 5 of 2000

Promotion of Access to Information Act, 2 of 2000

Promotion of Administrative Justice Act, 3 of 2000

Promotion of Equality and Prevention of Unfair Discrimination Act, 4 of 2000

Protected Disclosures Act, 26 of 2000

Public Finance Management Act, 1of 1999

Sexual Offences Act, 23 of 1957

Skills Development Act, 97 of 1998

Skills Development Levies Act, 9 of 1999

South African Medical Research Council Act, 58 of 1991

South African Police Services Act. 68 of 1978

Sterilisation Act, 44 of 1998

The National Health Act, 61 of 2003

Tobacco Products Control Act, 83 of 1993

University of Cape Town Act, 38 of 1959

## **Provincial Legislation**

Ambulance Personnel Transfer and Pensions Ordinance 11 of 1955. Assigned to the Province under Proclamation 115 of 1994.

Communicable Diseases and Notification of Notifiable Medical Condition Regulations. Published in Proclamation R158 of 1987.

Election, Powers and Functions of Medical Committees Regulations. Published under PN 307 of 1960.

Exhumation Ordinance, 12 of 1980.

Health Act, Act 63 of 1977. Assigned to the province by virtue of Proclamation R152 of 1994.

Honorary Medical Staff of Provincial Hospitals Regulations. Published under Provincial Notice 553 of 1953.

Hospitals Ordinance 18 of 1946. Assigned to the Province under Proclamation 115 of 1994.

Provincial treasury instructions.

Regulations Governing Private Health Establishments. Published in PN 187 of 2001.

Regulations governing the Uniform Patient Fee Schedule, 2004.

Requirements from regional Stores, and Control and Condemning of Provincial Hospitals Stores and Equipment Regulations. Published under PN 761 of 1953.

Training of Nurses and Midwives Ordinance 4 of 1984. Assigned to the Province under Proclamation 115 of 1994.

# **Budget decisions**

# Brief information on external activities and events relevant to budget decisions Budgetary pressures experienced during 2005/06 and their consequences

In real terms, the department received an additional allocation in 2005/06 of about R370 million. These funds were allocated to different policy options, varying from R66 million for Non-Metro Personal Primary Health Care to small amounts, such as R87 000 for the Citrusdal District Hospital.

In previous financial years the department had to scale down services due to shrinking budget allocations. In 2005/06 the challenge was different, namely to establish and expand services, but to establish and expand only in line with the strategic priorities as indicated by the policy options.

This process took longer than anticipated, and in some cases these services were only fully operational at the end of 2005/06. The unspent funds were therefore channelled to strategic once-off projects, such as surgery backlogs (e.g. cataract operations), and the acquisition of much needed equipment. By the start of 2006/07 all the planned service expansions will be fully operational.

The department continues to experience a growth in demand of services and even with the increased real budget allocation, service pressure continues. The latest available information is for the financial years 2003/04 and 2004/05. During this period the number of patients (Primary Health Care Visits, Out Patients and Admissions), increased by 4.9 per cent on a weighted average basis. The most significant growth is in the number of admissions at district hospitals, where the increase was 15 per cent. At the other extreme, Out Patients at Central and Regional hospitals declined by 5 per cent. The number of patients transported by the Emergency Services increased by 22 per cent. The number of patients placed on anti-retroviral treatment increased by approximately 500 per month.

Despite additional funding available for staff and the advertising of posts, in many cases, vacancies could not be filled.

A particular pressure was experienced with respect to the Hospital Revitalisation Grant (HRP) , which was substantially underspent. In the previous year (2004/05) this grant was substantially overspent. The manner in which these funds are allocated needs to be reviewed. A project allocation basis, irrespective of financial years, may be more appropriate.

The introduction of a new salary dispensation of all inclusive salary packages for the Middle Management Services (MMS) on salary levels 11 and 12 cost the Department an additional amount of approximately R15 million. The new salary dispensation that was allocated to social workers cost the Department an additional amount of R2,660 million.

#### Budgetary process and construction of the budget allocations for 2005/06 and beyond

The budget projections for the respective entities formed the basis of the allocations for 2005/06. The approach followed for 2006/07 was that allocations were essentially based on the 2005/06 budgets, adjusted by inflation and Improvement in Condition of Service (ICS). The changes made to these baseline allocations include:

- Managers shifted funds between budget entities, but these shifts were limited to specific projects.
- As far as funds were available budget entities were compensated for mandatory additional expenses, such as
  the additional cost of Middle Management (about R22 million), the appointment of additional interns at the
  request of the National Department of Health and Government Motor Transport (GMT) increased.
- The Provincial Treasury allocated additional earmarked allocations to the department in line with national policy priorities. These funds were allocated according to the conditions attached, and include:
  - o Primary Health Care (PHC) funding in particular for personal PHC.
  - o Emergency Medical Services (EMS) with a push to improve service levels.
  - The Human Resources Framework as released by the National Minister of Health on 3 August 2005.

To allocate the funds within the earmarked amounts, the Department developed and described a list of 35 policy options, valued at R500 million. These were prioritised on the basis of Healthcare 2010, national priorities and the Social Capital Formation strategy. The final funded policy options are listed under each programme.

The service plan which is being finalised will be used in future as the basis for the allocation of funds. In line with Healthcare 2010, it aims to allocate funding according to the number of activities per level of care. The current classification of hospitals in sub-programmes 2.9: District Hospitals, 4.1: General (Regional) Hospitals and 5.1: Central Hospital Services will be maintained until the detail of the service plan is approved and implemented.

According to the latest Provincial Budgets and Expenditure Review (2001/02 – 2007/08), the cost per uninsured capita is 38 per cent higher in the Western Cape than the country average. An analysis of services rendered per capita per uninsured population indicated that this province provides 35 per cent more services in quantity per uninsured person, compared to the average for the country.

# 2. Review 2005/06

During 2005/06 considerable effort has been invested in developing a service plan that will provide the guideline for the comprehensive changes that will be necessary to realise the goals of Healthcare 2010. This plan will be consulted and implemented during 2006/07.

The demand for services continues to be driven by:

The flow of patients from neighbouring provinces seeking health care at all levels of the service in the Western Cape.

The increased acuity of trauma patients and the year-on-year increase in medical emergencies largely due to chronic illnesses such as Diabetes Mellitus, asthma and hypertension.

The combined impact of HIV and Aids and Tuberculosis (TB), both in terms of increased numbers and acuity of illness.

The National Health Act, 2003 (Act 61 of 2003) came into effect on 2 May 2005 with the exception of some sections, i.e. Chapter 6 (Health establishments and issues relating to the certificate of need) and Chapter 8 (Control of the use of blood, blood products, tissue and gametes in humans). However, the regulations which must accompany the Act has not yet been finalised by the National Department of Health. In terms of this Act new governance structures such as the Provincial Health Council, District Health Councils and a consultative forum must be established. The MEC for Health convened the first meeting of the Provincial Health Council on 21 October 2005.

The Mental Health Care Act, 2002 (Act 17 of 2002) prescribed the procedure for the admission of mentally ill persons, which resulted in the establishment of the Mental Health Care Review Board.

A significant challenge has been the assumption of responsibility for the provision of the Personal Primary Health Care (PPHC) services in the rural areas of the province that were previously provided by the local authorities. Full funding for these services was allocated to the department from 1 April 2005. The status quo for funding of PPHC in the Cape Metro will continue for the next two years with funding provisionally allocated to provincialise this function in the Metro in the outer year of the MTEF period.

The Department made progress in the formulation of its Social Capital Formation (SCF) strategy, which is based upon the effective implementation of Primary Health Care services. The following pilot interventions were implemented:

The Integrated Management of Childhood Illnesses (IMCI) with a specific emphasis on the management of diarrhoeal disease;

The strengthening of the immunisation campaign;

The management of chronic diseases to ensure the continuity of care. The Faculties of Health Sciences of the Universities of Cape Town, Stellenbosch and the Western Cape have been requested to assist the Department in the formulation of a strategy for the reduction of the burden of disease.

As from 1 April 2005 the funding for Programme 8: Health Facilities Management was transferred to the Department of Health from the Department of Transport and Public Works where it previously resorted. The Public Works functions remained with the Department of Transport and Public Works.

Construction work on the upgrading of the rural regional hospitals at George and Worcester and the district hospital at Vredenburg is proceeding. The business case for Paarl Hospital was approved and tenders have been invited for the revitalisation project. The business case for the proposed Khayelitsha Hospital has been submitted and the preliminary planning of this hospital has commenced.

# Delays in implementing policy options of previous year 2005/06 and reasons therefore:

The low spending in the first six months of 2005/06 relates mostly to equipment spending, which normally peaks in the latter part of the financial year and new projects following additional allocations in real terms to the department in the current financial year. Examples of the new projects include the introduction of the Chronic Dispensing Unit in Programme 1: Administration, the establishment of 120 level 1 beds in Karl Bremer and Tygerberg Hospitals, as part of Programme 2: District Health Services, the Provincial Disaster and Emergency Management Centre in Programme 3: Emergency Medical Services, the expansion of bed capacity and the appointment of additional specialists in Programme 4: Provincial Hospital Services.

It took time to implement the approved policy options as most of them were implemented later than anticipated, which led to an increase in the cash flow in the latter part of the financial year. Because many of the new approved policy options were not implemented as from 1 April 2005 an underspending on recurrent expenditure is expected. The department therefore identified and approved additional non-recurrent spending for the current financial year, which will also increase the spending levels in the last six months of the year.

The take-over of the Personal Primary Health Care from municipalities from 1 April 2005 resulted in payment delays, as municipalities were refunded for their expenditure on a claims basis, compared to the transfer payment basis of the previous years.

The slow spending in the first six months in Programme 8: Health Facilities Management relates particularly to the Hospital Revitalisation Programme (HRP) conditional grant which consists of a few major projects where expenditure is spread over more than one financial year. The major underspending in respect of this grant are the projects at Worcester and Vredenburg Hospitals.

#### Other important initiatives:

The relationship between Institutes of Higher Education and the Department of Health is governed by outdated Joint Agreements. A concerted effort, led by the Premier and the Vice Chancellors during 2005, is paving the way for new multilateral and bilateral agreements that would pave the way towards new Joint Agreements to replace the current agreements. It is expected that a multi-lateral agreement between government and the Institutions of Higher Education will be signed during 2006/07 paving the way toward revised bilateral Joint Agreements.

During December 2004 an independent external review of the Western Cape Emergency Medical Services was performed by a consultant (Barry John) from the West Midlands Emergency Ambulance Service in the United Kingdom in order to quantify and qualify the gap between current performance and national requirements. While the report did not quantify the staffing and fleet needs, this was done through modeling. The Barry Johns report acknowledged that efficiency gains will result in limited improvements to the response times of ambulances and that a significant investment in additional resources will be required to bring the response times within acceptable levels. Recommendations of the review report have been accepted and implementation thereof has commenced. During 2005 significant strides have been made in appointing additional uniformed staff (108 in total, of which 75 are in the Metro), additional vehicles (27 in the Metro and 9 in the rural areas), calls have been prioritised as P1, P2 and P3 and attention has been focused on improving the response times for priority one calls as well as workshops and training initiatives that have begun to motivate and improve management capacity within Emergency Medical Services (EMS).

In response to the HIV and Aids epidemic, the province has started implementing the Comprehensive HIV and Aids Care, Management and Treatment plan adopted by the National Cabinet in 2003. The Department has committed itself to integrating the HIV and Aids programme to the general health services in such a way that the additional resources lead to strengthening the general health system, rather than creating a vertical HIV and Aids service delivery model.

A key challenge to the Department is dealing with the growing TB epidemic in the light of the increasing rate of coinfection of Tuberculosis (TB) and HIV and Aids. Currently 30 per cent of TB patients in the Western Cape are coinfected with HIV and Aids resulting in high morbidity and mortality rates in this group. Pulmonary TB in the Western Cape has steadily increased over the past 7 years. From 1997 to 2003, TB increased by 38 per cent, however, like the HIV and Aids prevalence in 2004 there was no statistically significant increase in the number of TB cases. However, the Department is committed to managing the huge burden of the TB epidemic.

# 3. Outlook for 2006/07

The key issue for the Department in 2006/07 will be the consultation, finalisation and implementation of the Service Plan that is the foundation for the implementation of Healthcare 2010. Closely related to the Service Plan will be the revision of the staffing establishments to ensure the appropriate allocation of staff both in terms of numbers and skill mix. A management decision has been taken to implement the Healthcare 2010 'shape of the service' within the existing infrastructure by 2007/08. However, to fully realise the benefits of Healthcare 2010 the planning and if possible construction of additional infrastructure must continue and gain momentum during 2006/07.

Focus areas during 2006/07 will be:

Strengthening Primary Health Care and providing extended hours of service at the Community Health Centres.

The allocation of additional funds to Emergency Medical Services for vehicles and personnel with a view to improving the response times.

The development of a more effective Planned Patient Transport system.

Nurse training and mentorship in order to address the significant issue of the recruitment, training and retention of nurses.

The continuation of the aggressive revenue generation plan.

The Expanded Public Works Programme (EPWP) is a national programme designed to provide productive employment opportunities for a significant number of the unemployed, not only to earn an income but to skill them to increase their employability. To ensure a culture of service delivery with work creation as well as building mutually beneficial networks and relationships, the Department as part of the Social Sector, has identified projects which include Community Based Ancillary Health Workers, i.e. community home-based care workers, integrated management of childhood illness community worker and TB DOTS community workers, Anti-retroviral Counselors and Voluntary Counseling Testing Counselors. These workers will be up-skilled through the programme to become ancillary health workers in the first phase leading to a community health worker. Projects will be funded through Departmental funding.

# 4. Receipts and financing

# **Summary of receipts**

Table 4.1 hereunder gives the sources of funding for the vote.

Table 4.1 Summary of receipts

-	-	Outcome						Medium-teri	m estimate	
Receipts R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Treasury funding										
Equitable share	2 364 128	2 826 872	3 248 276	3 638 900	3 661 253	3 663 110	4 034 688	10.14	4 407 886	4 872 991
Conditional grants	1 467 022	1 555 421	1 684 382	1 870 576	1 861 159	1 816 047	1 991 725	9.67	2 051 224	2 139 039
Total Treasury funding	3 831 150	4 382 293	4 932 658	5 509 476	5 522 412	5 479 157	6 026 413	9.99	6 459 110	7 012 030
Departmental receipts Sales of goods and services other than capital assets	106 779	149 662	185 534	168 515	188 469	184 848	201 620	9.07	206 940	206 940
Transfers received Interest, dividends and rent on land	8 808	5 126	43 706 179	62 794 271	63 787 271	63 787 271	93 423 271	46.46	106 054 271	111 720 271
Sales of capital assets Financial transactions in assets and liabilities	4 285	10 223	125 6 997	31 1 416	31 1 852	31 5 473	29 1 737	( 6.45) ( 68.26)	29 1 915	29 1 915
Total departmental receipts	119 872	165 011	236 541	233 027	254 410	254 410	297 080	16.77	315 209	320 875
Total receipts	3 951 022	4 547 304	5 169 199	5 742 503	5 776 822	5 733 567	6 323 493	10.29	6 774 319	7 332 905

# 5. Payment summary

# **Key assumptions**

In allocating the budget for 2006/07 the following broad assumptions have been made:

The disease profile of the population of the Western Cape during 2006/07 will not differ significantly from the disease profile of 2005/06.

The Department will not have to contend with any significant new epidemics/pandemics.

The total quantum of health care services will not differ significantly from 2005/06.

# **Programme summary**

Table 5.1 below shows the budget or estimated expenditure per programme and Table 5.2 per economic classification (in summary). Details of the Government Financial Statistics (GFS) economic classifications are attached as an annexure to this vote.

Table 5.1 Summary of payments and estimates

			Outcome						Medium-tern	n estimate	
	Programme R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro-priation	Revised estimate		% Change from Revised estimate		
		2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
1.	Administration <sup>a</sup>	121 273	215 644	213 316	195 618	182 144	174 782	199 354	14.06	219 353	235 248
2.	District health services <sup>c,d,g,h</sup>	993 592	1 144 699	1 330 397	1 611 684	1 640 479	1 649 725	1 914 072	16.02	2 041 229	2 279 172
3.	Emergency medical services	152 910	185 695	198 170	254 470	255 109	253 374	278 999	10.11	301 473	338 603
4.	Provincial hospital services <sup>c</sup>	974 273	1 053 048	1 176 641	1 276 765	1 288 031	1 288 031	1 336 078	3.73	1 427 844	1 527 516
5.	Central hospital services <sup>b,c</sup>	1 476 202	1 607 089	1 805 918	1 936 056	1 963 483	1 963 483	2 086 517	6.27	2 245 303	2 363 400
6.	Health sciences and training	65 381	71 116	73 541	83 648	83 648	81 533	106 047	30.07	142 015	178 477
7.	Health care support services	66 597	73 837	82 752	87 457	90 203	92 075	77 480	( 15.85)	81 885	86 769
8.	Health facilities management <sup>e,f,g,i</sup>	100 794	196 176	288 464	296 805	273 725	230 564	324 946	40.94	315 217	323 720
	tal payments and timates	3 951 022	4 547 304	5 169 199	5 742 503	5 776 822	5 733 567	6 323 493	10.29	6 774 319	7 332 905

<sup>&</sup>lt;sup>a</sup> 2006/07: MEC remuneration payable. Salary R544 124; Car allowance: R136 030.

b 2006/07: Conditional grant: National tertiary services (R1 272 640 000).

c 2006/07: Conditional grant: Health professional training and development (R323 278 000).

d 2006/07: Conditional grant: Comprehensive HIV and Aids (R115 670 000).

e 2006/07: Conditional grant: Hospital revitalisation (R149 703 000).

f 2006/07: Conditional grant: Provincial infrastructure grant (R61 829 000).

<sup>&</sup>lt;sup>9</sup> 2006/07: Conditional grant: Forensic pathology services grant (R68 605 000).

Function shift: Primary school nutrition programme to Vote 5: Education, comparative figures excluded (2002/03 - R25 334 000; 2003/04 - R30 494 000).

Function shift: Works from Vote 10: Transport and Public Works, comparative figures included (2002/03 - R100 794 000; 2003/04 - R196 176 000; 2004/5 - R288 464 000).

# Summary by economic classification

Table 5.2 Summary of provincial payments and estimates by economic classification

		Outcome						Medium-term	estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro-priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	3 423 070	3 856 085	4 374 197	4 843 814	4 918 462	4 916 023	5 553 258	12.96	5 967 498	6 509 362
Compensation of employees	2 370 274	2 444 792	2 799 467	3 137 951	3 111 282	3 028 074	3 598 358	18.83	3 842 181	4 182 536
Goods and services	1 050 991	1 409 391	1 574 247	1 705 863	1 807 180	1 886 723	1 954 900	3.61	2 125 317	2 326 826
Financial transactions in assets and liabilities	1 805	1 902	483			1 226		( 100.00)		
Transfers and subsidies to	408 605	474 209	467 149	534 254	505 612	507 957	390 555	(23.11)	396 776	417 373
Provinces and municipalities	180 627	208 671	228 132	252 619	219 162	220 652	138 856	(37.07)	132 225	138 954
Departmental agencies and accounts	62 231	70 062	5 976	4 386	7 132	7 132	4 605	( 35.43)	4 867	5 158
Universities and technikons	40 900	42 245	56 979	58 116	57 836	57 836	1 407	( 97.57)	1 487	1 575
Non-profit institutions	111 987	124 159	140 533	158 506	159 603	159 603	175 455	9.93	183 975	193 035
Households	12 860	29 072	35 529	60 627	61 879	62 734	70 232	11.95	74 222	78 651
Payments for capital assets	119 347	217 010	327 853	364 435	352 748	309 587	379 680	22.64	410 045	406 170
Buildings and other fixed structures	70 584	126 555	222 267	248 267	200 287	157 126	206 585	31.48	211 351	213 763
Machinery and equipment	48 763	90 455	105 436	116 168	152 385	152 385	172 915	13.47	198 694	192 407
Software and other intangible assets			150		76	76	180	136.84		
Total economic classification	3 951 022	4 547 304	5 169 199	5 742 503	5 776 822	5 733 567	6 323 493	10.29	6 774 319	7 332 905

# Transfers to public entities

Table 5.3 Summary of departmental transfers to public entities - None

# Transfers to local government

Table 5.4 Summary of departmental transfers to local government by category

		Outcome					Medium-term estimate			
Departmental transfers R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appropriation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Category A	114 072	132 304	131 074	106 655	108 930	108 930	127 075	16.66	122 928	129 944
Category B	28 540	33 449	40 241	75 393	52 932	52 932		(100.00)		
Category C	32 143	36 603	49 372	62 072	48 836	48 836	9 394	(80.76)	9 297	9 010
Total departmental transfers to local government	174 755	202 356	220 687	244 120	210 698	210 698	136 469	(35.23)	132 225	138 954

Note: Excludes regional services council levy.

# Departmental Public-Private Partnership (PPP) projects

Table 5.5 Summary of departmental Public-Private Partnership projects

	Total cost of project						Medium-term estimate			
Project description R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro-priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Projects under implementation		873	711	44 359	484	484	31 626	6434.30	38 552	40 172
PPP unitary charge				40 363			30 630		38 439	40 172
Advisory fees		873	711	3 996	484	484	996	105.79	113	
New projects	<u> </u>			2 500						
Advisory fees				2 500						
Total Public-Private Partnership projects		873	711	46 859	484	484	31 626	6434.30	38 552	40 172

# 6. Programme description

# **Programme 1: Administration**

Purpose: To conduct the strategic management and overall administration of the Department of Health.

#### Analysis per sub-programme

Sub-programme 1.1: Office of the MEC

rendering of advisory, secretarial and office support services

## Sub-programme 1.2: Management

policy formulation, overall management and administration support of the department and the respective regions and institutions within the department

# Policy developments:

The National Health Act, 2003 (Act 61 of 2003) has far-reaching implications and challenges for the Department. At present Chapters 6 and 8 of the Act have not yet been enacted. The Department is in the process of addressing the governance requirements of the Act. In order to comply with the requirements of a District Health System the Service Plan has made provision for appropriate configuration of the services and management structures.

# Changes: policy, structure, service establishment, etc. Geographic distribution of services:

The service delivery plan is being finalised to facilitate the reshaping of the service in line with Healthcare 2010, whereafter the staff establishments will be appropriately amended.

The department remains committed to the delivery of highly specialised services both to the people of the Western Cape as well as those from beyond the boundaries. Together with the various stakeholders, a rational, affordable quantum of quality services will be determined and rendered by practitioners who are still held in high regard both nationally and internationally.

# Funding was allocated to the following policy options in 2006/07

R400 000 for the appointment of data analysts to improve the availability of information.

R5 million for the strengthening of central and regional management which includes the establishment of a directorate of nursing and other actions to improve administration of human resources and other support functions.

An earmarked allocation of R53,6 million has been made for health equipment. Of this earmarked funding R11,6 million has been allocated to this programme and the balance of R42 million to Programme 5: Central Hospital Services. In addition to this, an amount of R26,5 million has been allocated via the Hospital Revitalisation Programme and a further R92,8 million of the equitable share has been allocated for machinery and equipment. The total funding allocated throughout the Department for equipment for 2006/07 is therefore R172,9 million.

R4,3 million has been allocated for the operational costs of the Chronic Dispensing Unit.

R3 million was allocated to promote improved asset management while an additional R2,9 million was allocated to fund financial administrative staff over and above the R10 million allocated during the previous financial year.

#### **Expenditure trends analysis:**

The allocation to Administration increases to 3,15 per cent in 2006/07 in comparison to the 3,05 per cent allocated in the revised estimate of the Appropriation Budget of 2005/06. This is due to reallocation of regional management from Sub-programme 1.2.2: Decentralised Management to Sub-programme 2.1: District Management. There is a nominal increase of 14,06 per cent or R24,572 million from 2005/06 to 2006/07.

Table 6.1 Summary of payments and estimates – Programme 1: Administration

			Outcome					Medium-term estimate			
	Sub-programme R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
1.	Office of the Provincial	2 255	2 743	3 336	3 949	3 949	3 949	4 052	2.61	4 283	4 540
2.	Management	119 018	212 901	209 980	191 669	178 195	170 833	195 302	14.32	215 070	230 708
	Central management	78 839	173 707	165 912	182 858	169 384	162 022	185 892	14.73	205 126	220 171
	Decentralised management	40 179	39 194	44 068	8 811	8 811	8 811	9 410	6.80	9 944	10 537
To	tal payments and estimates	121 273	215 644	213 316	195 618	182 144	174 782	199 354	14.06	219 353	235 248

<sup>&</sup>lt;sup>a</sup> 2006/07: MEC remuneration payable. Salary R544 124; Car allowance: R136 030.

#### Earmarked allocations:

Included in sub-programme 1.2: "Management" is an earmarked allocation amounting to R11 646 000 (2006/07), R12 390 000 (2007/08) and R12 985 000 (2008/09) for the purpose of Health equipment.

Included in sub-programme 1.2: "Management" is an earmarked allocation amounting to R5 000 000 (2006/07), R12 605 000 (2007/08) and R14 700 000 (2008/09) for the purpose of Human Resource Development.

Included in sub-programme 1.2: "Management" is an earmarked allocation amounting to R400 000 (2006/07), R1 000 000 (2007/08) and R1 400 000 (2008/09) for the purpose of Information systems.

Table 6.1.1 Summary of provincial payments and estimates by economic classification – Programme 1: Administration

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	103 507	164 325	153 986	155 561	142 221	134 859	162 538	20.52	180 490	194 066
Compensation of employees	77 904	86 973	100 869	93 908	78 717	70 145	91 616	30.61	105 493	114 585
Goods and services	23 798	75 450	53 071	61 653	63 504	63 504	70 922	11.68	74 997	79 481
Financial transactions in assets and liabilities	1 805	1 902	46			1 210		( 100.00)		
Transfers and subsidies to	8 493	8 250	6 029	20 493	20 798	20 798	18 797	( 9.62)	19 819	21 002
Provinces and municipalities	188	214	250	219	192	192	43	(77.60)		
Universities and technikons	2 000	2 000	2 150	2 544	2 544	2 544		( 100.00)		
Households	6 305	6 036	3 629	17 730	18 062	18 062	18 754	3.83	19 819	21 002
Payments for capital assets	9 273	43 069	53 301	19 564	19 125	19 125	18 019	( 5.78)	19 044	20 180
Machinery and equipment	9 273	43 069	53 288	19 564	19 097	19 097	18 019	(5.64)	19 044	20 180
Software and other intangible assets			13		28	28		( 100.00)		
Total economic classification	121 273	215 644	213 316	195 618	182 144	174 782	199 354	14.06	219 353	235 248

# **Details of transfers and subsidies:**

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appro- priation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Transfers and subsidies to (Current)	8 493	8 250	6 029	20 493	20 798	20 798	18 797	(9.62)	19 819	21 002
Provinces and municipalities	188	214	250	219	192	192	43	(77.60)		
Municipalities	188	214	250	219	192	192	43	(77.60)		
Municipalities of which	188	214	250	219	192	192	43	(77.60)		
Regional services council levies	188	214	250	219	192	192	43			
Universities and technikons	2 000	2 000	2 150	2 544	2 544	2 544		(100.00)		
Households	6 305	6 036	3 629	17 730	18 062	18 062	18 754	3.83	19 819	21 002
Social benefits			116	116	326	326	259	(20.55)	272	286
Other transfers to households	6 305	6 036	3 513	17 614	17 736	17 736	18 495	4.28	19 547	20 716
-										

### **Programme 2: District Health Services**

**Purpose:** To render Primary Health Care and District Hospital Services.

#### Analysis per sub-programme

# Sub-programme 2.1: District management

planning and administration of services, managing personnel- and financial administration and the co-ordinating and management of the day hospital organisation and community health services rendered by local authorities and non-governmental organisations within the Metro and determining working methods and procedures and exercising district control

## Sub-programme 2.2: Community health clinics

rendering a nurse driven primary health care service at clinic level including visiting points, mobile- and local authority clinics

#### Sub-programme 2.3: Community health centres

rendering a primary health service with full-time medical officers in respect of mother and child, health promotion, geriatrics, occupational therapy, physiotherapy, psychiatry, speech therapy, communicable diseases, mental health, etc.

#### Sub-programme 2.4: Community based services

rendering a community based health service at non-health facilities in respect of home based care, abuse victims, mental- and chronic care, school health, etc.

#### Sub-programme 2.5: Other community services

rendering environmental and port health etc.

#### Sub-programme 2.6: HIV and Aids

rendering a primary health care service in respect of HIV and Aids campaigns and special projects

#### Sub-programme 2.7: Nutrition

rendering a nutrition service aimed at specific target groups and combines direct and indirect nutrition interventions to address malnutrition

#### Sub-programme 2.8: Coroner services

rendering forensic and medico legal services in order to establish the circumstances and causes surrounding unnatural death

#### Sub-programme 2.9: District hospitals

rendering of a hospital service at district level

#### Sub-programme 2.10: Global Fund

strengthen and expand the HIV and Aids prevention, care and treatment programmes

#### Policy developments:

Three broad policy developments inform the provision of primary health care and district hospitals. These are the National Health Act, 2003 (Act 61 of 2003), Healthcare 2010 that was adopted in 2003 and the Provincial strategies of iKapa Elihlumayo. The National Health Act establishes the district health system and with it new boundaries, governance structures, planning and reporting formats significantly strengthening the District Health System as the vehicle for delivering Personal Primary Health Care (PPHC).

The decision to provincialise PPHC in the Western Cape, initially in the non-Metropolitan areas of the province was based on sound technical and legal grounds. In implementing this decision the department will adhere to the eleven principles set out in the National Health Act that guide the establishment of the district health system.

In the provincialisation of PPHC services the following issues remain to be resolved:

Integrating local government and provincial government staff into a single consolidated staff establishment with a transfer of local government staff in accordance with the provisions of the Labour Relations Act 1995 (Act 66 of 1995).

Transfer of fixed and moveable assets as well as the transfer of liabilities where relevant.

The finalisation of financial arrangements through the MTEF period and beyond.

The policy options for which funding has been allocated for 2006/07 are the following:

An amount of R10 million has been allocated for the appointment of additional staff for the Metro District Health Services. This policy option aims to strengthen the Primary Health Care (PHC) delivery system by employing six senior family physicians for six 24-hour Community Health Centres (CHC) and filling approximately 106 nursing posts at both the Community Health Centres and the district hospitals.

Funding is required to establish extended hours of service for one CHC per sub-district. The Department has adopted the strategy to implement a nurse-driven service providing the comprehensive PHC package at CHCs for an extended period, i.e until 21:30. It is anticipated that this will improve access to services and also relieve the burden of non-emergency visits to emergency services. An amount of R4 million is allocated to this process.

An amount of R12,5 million was allocated to improve the Tuberculosis (TB) services, particularly in the clinics and the mobile clinics. The HIV and Aids epidemic is a significant factor in the increase of TB within the province. It is estimated that TB is responsible for a third of all deaths in HIV infected people, therefore strengthening this service will result in more effective management of the dual epidemic of HIV and TB.

An amount of R10 million has been allocated for the strengthening of district management and PHC by establishing district management structures and support staff establishments in the four Metro districts and also in the rural districts. This will facilitate the effective functioning of the District Health System in line with demarcated district boundaries and will contribute towards the establishment of the governance structures (District Health Councils, sub-district health structures and Health Facility Boards) as well as the provision of appropriate management support particularly relating to finance, human resource management and the monitoring and evaluation of performance. The timing of the implementation of this policy option is, however, dependent on the approval of the Service Plan.

This programme has developed eight divisional priorities, which are derived from Healthcare 2010 and are integrally linked to the objectives of the Department. These priorities address two broad areas of work:

The procedural and technical goals which either drive or retard progress with the implementation of the District Health System which is perceived as the key to unlocking effective and efficient service delivery at the interface with patients. By creating the appropriate infrastructure, eliminating duplication and inefficiencies and by creating an environment in which staff can perform effectively it is anticipated that many of the problems can be corrected. The following three additional and vital support initiatives have been identified: strengthening of community based services, improvement of the district hospital platform and the improved management of chronic diseases.

The second group of goals relate to the priority health programmes that are deemed to be critical to improving the general health of the people of the Western Cape. These programme priorities were selected with a view to serving as key entry points into improving the general health of the people within the context of the burden of disease in the Western Cape. The priority health programmes identified are: Tuberculosis, HIV and Aids, women's health, child health and chronic diseases.

#### Changes: policy, structure, service establishment, etc. Geographic distribution of services:

## Implementation of the District Health System

The process of assuming responsibility for Personal Primary Health Care (PPHC) services in the non-metro districts will continue during this financial year. Once the Service Plan is approved the implementation of the proposed district and sub-district management structures will strengthen management and service delivery in the districts.

#### Community-based services

Community based services will be delivered via two main streams to meet the different types of needs and clients but will also provide an inter-related and seamless service. These services are for:

Clients in need of personal clinical care who have been de-institutionalised from acute/sub-acute or chronic hospital beds and need a continuum of care in an alternative environment, i.e. not in a hospital bed; and

Preventative and promotive health services which are delivered as part of the Social Capital Formation and public health interventions, e.g. Healthy Cities/communities programmes.

#### District hospital services

The approval of the Healthcare 2010 Service Plan will facilitate access to level 1 acute beds creating the additional capacity to absorb more patients from the secondary level of care.

#### Chronic disease management

The programme to provide the medication of chronic patients from an alternative supply will be intensified with a view to having 35 per cent of chronic patient visits for medication being addressed by the alternative system. This will significantly improve the quality of care provided to these patients. This will be complemented by the social capital and community based initiatives that will provide support to the patients.

A study will be commissioned to investigate the burden of disease affecting the province and determine appropriate interventions to reduce the burden of disease. An amount of R1,5 million has been allocated to fund this research.

#### Tuberculosis (TB)

Tuberculosis will receive an additional R9,6 million of which R2,6 million will be derived from revenue and R7,1 million will be derived from the equitable share. These additional resources will be used to improve the cure rate, case detection rate of TB and to strengthen the capacity and efficiency of the Brooklyn Chest Hospital to improve its ability to manage multi-drug resistant TB.

#### HIV and Aids

Funds from the conditional grant and earmarked funds continue to be made available to expand the prevention, treatment and care initiatives for HIV and Aids.

#### Women's health

Women's health remains a priority area, but much work is still required to provide women with adequate preventive and curative interventions. More attention will be given in the areas such as the management of rape victims and screening for cervical cancer.

#### Child and youth health

Greater emphasis is placed on child and youth health. Improving immunisation of children remains a priority. The programme will focus on increasing the number of districts with a 90 per cent immunisation coverage for children under one year of age.

#### **Coroner Services**

The transfer of "Medico-Legal Mortuaries" from the South African Police Service (SAPS) to the Provincial Department of Health has been approved as of 1 April 2006. The Department will establish a new Forensic Pathology Service (FPS) that will render a service via two academic Forensic Pathology Laboratories in the Metro, three regional referral FPS laboratories and smaller FPS laboratories and holding centres in the West Coast/Winelands, Boland/Overberg and the Southern Cape/Karoo regions.

The Forensic Pathology Service (FPS) aims to render a standardised, objective, impartial and scientifically accurate service, that comply with national protocols and procedures for the medico-legal investigation of death to serve the judicial processes in the Western Cape.

#### Global Fund

Approval for phase 2 of the Global Fund grant is awaited, however, with approval of Phase 2 an additional R67 million will be added to the HIV and Aids budget of the Department for 2006/07. In terms of the phase 2 proposal submitted the Department will take over services funded by the Global Fund over a four year period. The Global Fund Grant enables the Department to rapidly implement strategies to promote the management, prevention and treatment of people with HIV and Aids.

#### Social Capital Formation

The strengthening of primary health care makes a significant contribution to Social Capital Formation. Specific target areas are the Integrated Management of Childhood Illnesses with an emphasis on the management of diarrhoeal disease, the strengthening of the immunisation campaign and the management of chronic diseases.

With respect to child health the Department has developed a Diarrhoeal Disease intervention campaign and will embark on an in-depth intervention to increase the immunisation coverage. The Diarrhoeal Disease intervention campaign, from February to May each year includes support at community level for the early identification of danger signs in ill children for immediate referral to a health worker, use of sugar/salt solutions and hand washing programmes in Khayelitsha, Mitchells Plain, Delft, Kraaifontein (Wallacedene) and Gugulethu. All Primary Health Care (PHC) facilities will have oral rehydration corners and extra paediatric bed capacity is available at Red Cross Children's Hospital and Tygerberg, Lentegeur and Somerset Hospitals.

The Health Promoting Schools Programme include the following initiatives:

Deworming projects in primary schools in selected geographic areas across the Metro;

A home visitation programme aimed at equipping care givers with basic skills on child rearing and safety; and

A youth risk survey will be done in Mitchells Plain.

Support groups for clients with chronic diseases of lifestyle are being established or strengthened in all Community Health Centres (CHC's) and support group activities will be monitored.

Eight sub-district health for will be launched in the Metro.

To foster internal social capital there will be ongoing training of frontline health workers on the basic concepts of social capital and community involvement.

## **Expenditure trends analysis:**

In 2006/07 Programme 2 is allocated 30,27 per cent of the total vote in comparison to the 28,77 per cent of the vote that was allocated in the revised estimate of 2005/06. This translates to an increase of approximately R264,347 million or a 16,02 per cent increase in nominal terms. This increase is due to the reallocation of the funding for the district management from Programme 1: Administration to Programme 2: District Health Services and the reallocation of Forensic Pathology Services from Programme 7: Health Care Support Services to Programme 2: District Health Services, and also the increased allocation of donor funding from the Global Fund, which is still subject to approval.

# Service delivery measures:

#### **Programme 2: District Health Services**

Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
2.1 District management	Establishment of district management structures.	Number of district management structures created.	Health district management structures created.	6
	Decentralisation of management to district	% of districts with appointed managers.	District managers appointed.	100%
	and sub-district level.	% of districts with District Health Plans in place.	District health plans in place.	100%
		Number of health sub- districts with management structures in place.	Sub-district management structures in place.	8
2.2 Community health clinics	Provision of Primary Health Care Services to	Number of clinic and mobile visits per annum.	Access to Primary Health Care.	8 000 000
	the citizens of the Western Cape.	% of sub-districts offering full package of PHC services		70%
	Full immunisation coverage for under 1year olds.	% of 1 year olds immunised.	Provision of immunisation coverage to 90% of 1 year olds.	90%
		Number of sub-districts with immunisation coverage of >90%.	Sub-districts with immunisation coverage of >90%.	16 of 37 districts
	Implement cervical screening programme in clinics and Community Health Centres (CHCs).	% of patients in target group reached.	Improved cervical screening.	6.5%
	Improve coverage of the provision of antenatal	Antenatal booking rate below 20 weeks.	Early antenatal booking.	45%
	care.	% of women attending antenatal care.	Antenatal coverage.	85%
	Effective management of suspected TB cases.	% of smear positive TB cases cured.	TB cure rate.	71%
		Pulmonary Tuberculosis (PTB) smear conversion rate at 3 months for new cases.	PTB smear conversion rate.	77.5%
2.3 Community health centres.	Provision of Community Health Centre (CHC) services.	Number of CHC visits per annum.	Utilisation of CHCs.	6 000 000
	Improve facility management.	Number of facility managers appointed.	Improved facility management.	35
	Improve the governance of facilities.	% of health facilities with community based accountability / governance structures.	Community-based governance structures established.	70%

Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
	Improve the management of chronic diseases.	Number of patients with prescriptions issued for chronic medication via an alternative supply system.	More effective dispensing of chronic medication.	646 384
	Improve the clinical governance at CHCs.	Number of CHCs with family physicians appointed.	Improved clinical governance.	12
	Improve Trauma and Emergency services at CHCs.	Number of CHCs implementing the Cape Triage System.	Improved Trauma and Emergency services.	12
	Computerisation of Community Health Centres.	Number of CHCs computerised and with access to the provincial intranet.	CHCs computerised and with access to the provincial intranet.	35
<ul><li>2.4 Community based services.</li><li>2.5 Other community services.</li></ul>	Increase the number of category 3 clients receiving care.	Number of registered category 3 clients receiving home-based care.	NGO contracted home- based services.	6 000
00/ VI000.		Number of home-based careers appointed.	Appointment of home- based careers.	900
2.6 HIV and Aids	Roll-out of anti-retroviral (ARV) therapy.	Number of patients receiving ARV treatment.	Provision of anti-retroviral therapy.	22 487
		% of patients who require treatment and who are receiving it.		71%
	Voluntary counseling and testing (VCT).	% of VCT uptake in patients 15 years and older.	VCT coverage.	7.8%
	Increase male condom distribution.	Male condom distribution rate from primary distribution sites per male 15 years and older.	Distribution of male condoms.	25%
	Improve Sexually Transmitted Infection (STI) partner treatment rate.	STI partner treatment rate.	Treatment rate of the partners of patients with STIs.	25%
2.7 Nutrition	Monitoring of growth in children under 5 years.	% of children under 5 years of age not gaining weight.	Effective monitoring of growth faltering children under 5 years of age.	1.6%
	Micro-nutrient supplementation to vulnerable children	% of malnourished children provided with Vitamin A supplementation.	Provision of Vitamin A supplements to children who fail to thrive.	55%
2.8 Forensic pathology services	Provision of an effective and efficient forensic pathology service in	Number of post mortem examinations performed and documented.	Required number of post mortem examinations performed.	10 000
	accordance with the statutory requirements.	Turnaround time from receipt to dispatch of corpses.	Efficient turnaround time.	7 days
		Waiting period for Forensic Pathology Services documentation.	Documentation made available timeously.	20 working days
		Average cost per examination.	Cost effective service.	R4 500
2.9 District hospitals	Increase the availability and access to level 1 hospital beds.	Number of level 1 beds.	Improved access to level 1 beds.	1 729
	Optimal utilisation of inpatient capacity.	% bed utilisation rate.	Efficient utilisation of facilities.	78%
	Provide an in-patient service.	Number of in-patient days.	In-patient services.	467 003
	Provide an effective	Number of Patient Day	Mix of in-patient and out-	708 288

Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
	hospital service.	Equivalents (PDEs).	patient services.	
2.10 Global Fund	Roll-out of anti-retroviral (ARV) therapy	Number of patients receiving ARV treatment that is funded by the Global Fund.	Provision of ARV therapy.	6 292
	Strengthening peer education at secondary schools.	Number of badged junior and senior peer educators.	Training peer educators	8 416
	Expansion of palliative inpatient services.	Number of active hospice beds.	Active hospice beds.	136 <sup>1</sup>
	Provision of a community based response.	Number of community based projects that are funded.	Implementation of community based projects.	177 <sup>2</sup>

Table 6.2 Summary of payments and estimates – Programme 2: District health services

			Outcome						Medium-term	estimate	
	Sub-programme R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
		2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
1.	District management	21 636	32 956	26 983	68 537	82 971	86 901	96 557	11.11	102 573	109 283
2.	Community health clinics <sup>a</sup>	204 653	264 879	265 076	322 480	321 280	304 121	377 055	23.98	399 934	547 311
3.	Community health centres <sup>a</sup>	362 374	384 819	441 885	513 430	515 772	536 994	553 247	3.03	588 207	624 255
4.	Community based services <sup>a</sup>	39 644	33 443	36 554	50 178	51 378	42 516	97 911	130.29	103 621	109 827
5.	Other community services <sup>a</sup>	37 140	43 527	47 459	56 636	54 976	51 181	36 869	(27.96)	38 963	41 289
6.	HIV and Aids <sup>b</sup>	19 678	38 146	94 394	116 023	116 023	126 754	150 954	19.09	158 502	166 912
7.	Nutrition d	15 378	12 908	15 442	14 811	14 811	14 811	15 744	6.30	16 673	17 639
8.	Coroner services a,c		304	843	775	10 358	10 358	55 770	438.42	62 544	57 643
9.	District hospitals <sup>a</sup>	293 089	333 717	376 649	418 143	419 173	422 352	445 463	5.47	473 281	502 416
10.	Global Fund <sup>e</sup>			25 112	50 671	53 737	53 737	84 502	57.25	96 931	102 597
To	tal payments and estimates	993 592	1 144 699	1 330 397	1 611 684	1 640 479	1 649 725	1 914 072	16.02	2 041 229	2 279 172

<sup>&</sup>lt;sup>a</sup> 2006/07: Conditional grant: Health professional training and development: R35 173 000 (Compensation of employees R22 862 000; Goods and services R12 311 000).

#### Earmarked allocations:

Included in sub-programme 2.1: "District management" is an earmarked allocation amounting to R10 000 000 (2006/07), R10 500 000 (2007/08) and R11 025 000 (2008/09) for the purpose of Primary Health Care.

Included in sub-programme 2.2: "Community health clinics" is an earmarked allocation amounting to R3 590 000 (2006/07), R4 960 000 (2007/08) and R115 242 000 (2008/09) for the purpose of Primary Health Care.

Included in sub-programme 2.3: "Community health centres" is an earmarked allocation amounting to R9 326 000 (2006/07), R9 792 000 (2007/08) and R10 262 000 (2008/09) for the purpose of Drugs, medicines and other key inputs.

Included in sub-programme 2.3: "Community health centres" is an earmarked allocation amounting to R9 054 000 (2006/07), R12 380 000 (2007/08) and R13 219 000 (2008/09) for the purpose of Primary Health Care.

b 2006/07: Conditional grant: Comprehensive HIV and Aids: R115 670 000 (Compensation of employees R41 543 000; Goods and services R45 970 000, Transfers and subsidies R27 907 000; Machinery and equipment R250 000).

c 2006/07: Conditional grant: Forensic pathology services: R46 633 000 (Compensation of employees R31 226 000; Goods and services R10 904 000; Machinery and Equipment R4 503 000).

d Function shift: Primary school nutrition programme to Vote 5: Education, comparative figures excluded (2002/03 - R25 334 000; 2003/04 - R30 494 000).

The budget allocations to the Global Fund are estimates for the 2006/07, 2007/08 & 2008/09 financial years which are dependant on the approval of the phase 2 Agreement by the Global Fund.

<sup>&</sup>lt;sup>1</sup> Indicator has been changed in the Phase 2 Global Fund application.

<sup>&</sup>lt;sup>2</sup> Indicator has been changed in the Phase 2 Global Fund application.

Included in sub-programme 2.4: "Community based services" is an earmarked allocation amounting to R920 000 (2006/07), R1 056 000 (2007/08) and R1 075 000 (2008/09) for the purpose of Primary Health Care.

Included in sub-programme 2.6: "HIV and Aids" is an earmarked allocation amounting to R35 284 000 (2006/07), R37 048 000 (2007/08) and R38 827 000 (2008/09) for the purpose of HIV/Aids.

Included in sub-programme 2.7: "Nutrition" is an earmarked allocation amounting to R5 558 000 (2006/07), R5 824 000 (2007/08) and R6 087 000 (2008/09) for the purpose of phasing-in to Provincial Equitable Share (PES): Integrated Nutrition Programme.

Included in sub-programme 2.9: "District hospitals" is an earmarked allocation amounting to R4 345 000 (2006/07), R6 709 000 (2007/08) and R7 502 000 (2008/09) for the purpose of Primary Health Care.

Included in sub-programme 2.9: "District hospitals" is an earmarked allocation amounting to R4 810 000 (2006/07), R5 051 000 (2007/08) and R5 293 000 (2008/09) for the purpose of Drugs, medicines and other key inputs.

Table 6.2.1 Summary of provincial payments and estimates by economic classification – Programme 2:

District health services

		Outcome						Medium-term	estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	791 167	910 605	1 054 957	1 255 473	1 312 142	1 321 388	1 601 744	21.22	1 720 418	1 940 306
Compensation of employees	494 201	535 214	615 784	751 602	772 063	752 269	1 000 337	32.98	1 067 886	1 208 597
Goods and services	296 966	375 391	439 142	503 871	540 079	569 119	601 407	5.67	652 532	731 709
Financial transactions in assets and liabilities			31							
Transfers and subsidies to	194 701	225 711	263 460	340 712	308 379	308 379	282 318	( 8.45)	284 151	298 027
Provinces and municipalities	134 191	163 199	185 497	246 175	212 738	212 738	137 189	( 35.51)	132 225	138 954
Universities and technikons	2 231	2 342	2 461	2 695	2 695	2 695		( 100.00)		
Non-profit institutions	58 261	58 743	74 347	90 825	91 929	91 929	144 090	56.74	150 828	157 910
Households	18	1 427	1 155	1 017	1 017	1 017	1 039	2.16	1 098	1 163
Payments for capital assets	7 724	8 383	11 980	15 499	19 958	19 958	30 010	50.37	36 660	40 839
Machinery and equipment	7 724	8 383	11 850	15 499	19 958	19 958	30 010	50.37	36 660	40 839
Software and other intangible assets			130							
Total economic classification	993 592	1 144 699	1 330 397	1 611 684	1 640 479	1 649 725	1 914 072	16.02	2 041 229	2 279 172

#### Details of transfers and subsidies:

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appro- priation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Transfers and subsidies to (Current)	194 701	225 711	263 460	340 712	308 379	308 379	282 318	(8.45)	284 151	298 027
Provinces and municipalities	134 191	163 199	185 497	246 175	212 738	212 738	137 189	(35.51)	132 225	138 954
Municipalities	134 191	163 199	185 497	246 175	212 738	212 738	137 189	(35.51)	132 225	138 954
Municipalities	134 191	163 199	185 497	246 175	212 738	212 738	137 189	(35.51)	132 225	138 954
of which										
Regional services council levies	1 106	1 296	1 659	2 055	2 040	2 040	720			
Universities and technikons	2 231	2 342	2 461	2 695	2 695	2 695		(100.00)		
Non-profit institutions	58 261	58 743	74 347	90 825	91 929	91 929	144 090	56.74	150 828	157 910
Households	18	1 427	1 155	1 017	1 017	1 017	1 039	2.16	1 098	1 163
Social benefits	18	1 427	1 155	1 017	1 017	1 017	1 039	2.16	1 098	1 163
Ľ										

# **Programme 3: Emergency Medical Services**

**Purpose:** The rendering of pre-hospital emergency medical services including inter-hospital transfers and planned patient transport.

## Analysis per sub-programme:

#### Sub-programme 3.1: Emergency medical services

rendering emergency medical services including ambulance services, special operations, communications and air ambulance services

#### Sub-programme 3.2: Planned patient transport

rendering planned patient transport including local outpatient transport (within the boundaries of a given town or local area) and inter-city/town outpatient transport (into referral centres)

#### Policy developments:

The transfer of the City of Cape Town personnel operational staff to the Province remains to be finalised.

In a joint initiative with the provincial departments of Local Government and Housing and Community Safety, the Emergency Medical Services established Disaster Management and Emergency Medical Services Communication Centres in Bredasdorp, Worcester, Beaufort West, George, Moorreesburg and Cape Town in 2005/06. The Bredasdorp and Beaufort West Centres became operational in June and August 2005, respectively. The Cape Town Centre was officially opened on 15 December 2005. It is anticipated that the George Centre will be brought online in February 2006 and the Worcester and Moorreesburg Centres in the new financial year.

Following a tragic accident and the loss of the helicopter in late 2005 the aeromedical service in the Southern Cape was re-established as of 1 February 2006 using a B2-Squirrel which operates out of the Oudtshoorn Airport where a new hanger was built with community assistance.

The provision of a modern computerised communication system to manage Emergency Medical Services (EMS) resources is a top priority central to the efficient deployment of resources in achieving appropriate response times. A new communications system will be installed in the Metropolitan Area of Cape Town and will be phased into the rural areas over three years. Electronic communications systems are essential for rapid response, efficient deployment, co-ordination with other emergency services – all of which lead to improved quality of patient care. It is proposed to introduce vehicle tracking as a dispatch aid.

As of April 2005 the Planned Patient Transport services were separated from the Emergency Ambulance Services. Planned Patient Transport or outpatient transport is a problem particularly in the rural areas where poor rural communities do not have access to some health facilities because of the lack of public transport infrastructure and long distance transfers are required to get patients into referral centres for treatment.

#### Changes: policy, structure, service establishment, etc. Geographic distribution of services:

It is planned that a further additional amount of approximately R11 million be allocated to this programme during 2006/07 for new ambulances, ambulance equipment and the appointment of additional ambulance personnel, and

also the purchase of new patient transport vehicles and for the appointment of drivers for the planned patient transport services.

Funding has been allocated for the following funding priorities during 2006/07:

R2 million has been allocated for new ambulances, which will procure approximately 6 vehicles, which will be mainly deployed in the Metro. An amount of R400 000 has been allocated to equip the ambulances.

R3 million has been allocated for the appointment of additional personnel in the Metro and in critical rural towns.

R3,720 million has been allocated for the purchase of 10 patient transport vehicles and R1,8 million has been allocated for the appointment of approximately 35 drivers.

R5,3 million has been allocated to compensate for additional operational costs associated with increased Government Motor Transport tariffs.

# **Expenditure trends analysis:**

In 2006/07 Emergency Medical Services is allocated 4,4 per cent of the vote as was the case in the revised allocation of 2005/06. This amounts to a nominal increase of 10,11 per cent or R25,625 million.

#### Service delivery measures:

**Programme 3: Emergency Medical Services** 

	Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
3.1	Emergency transport	Provide an effective ambulance service.	Number of ambulances per 1 000 population.	Sufficient ambulances to provide an effective service.	0.053
			Number of ambulance personnel per 1 000 population.	Sufficient ambulance personnel to provide an effective service.	0.30
			Total kilometers traveled per kilometer per annum per 1 000 population.	Responsive and effective Emergency Management Service (EMS).	4 000
		Improve service delivery.	% of response times within.		
			15 minutes in town.	Improved response times.	70%
			40 minutes in rural areas.		80%
		Cost effective ambulance service.	Cost per patient transported by ambulance.	Cost effective service.	R400
3.2	Planned patient transport.	Ensure access to the appropriate level of health care services via Planned Patient Transport.	Total number of patients transported.	Improved access to the appropriate health care services.	45 000

Table 6.3 Summary of payments and estimates – Programme 3: Emergency medical services

		Outcome					Medium-term estimate			
Sub-programme R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Emergency transport	152 910	184 441	198 170	248 976	249 325	247 712	265 084	7.01	285 228	316 996
2. Planned patient transport		1 254		5 494	5 784	5 662	13 915	145.76	16 245	21 607
Total payments and estimates	152 910	185 695	198 170	254 470	255 109	253 374	278 999	10.11	301 473	338 603

#### **Earmarked allocations:**

Included in sub-programme 3.1: "Emergency transport" is an earmarked allocation amounting to R1 000 000 (2006/07) for the purpose of Building renovation and furnishings.

Included in sub-programme 3.1: "Emergency transport" is an earmarked allocation amounting to R2 360 000 (2006/07), R2 360 000 (2007/08) and R2 473 000 (2008/09) for the purpose of Disaster management/EMS centre, Rental of ICT solution: Disaster management/EMS centre.

Included in sub-programme 3.1: "Emergency transport" is an earmarked allocation amounting to R8 445 000 (2006/07), R13 248 000 (2007/08) and R26 415 000 (2008/09) for the purpose of Emergency medical services.

Included in sub-programme 3.2: "Planned patient transport is an earmarked allocation amounting to R2 512 000 (2006/07), R3 968 000 (2007/08) and R7 890 000 (2008/09) for the purpose of Emergency medical services.

Table 6.3.1 Summary of provincial payments and estimates by economic classification – Programme 3: Emergency medical services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	89 655	124 399	153 329	221 484	222 624	221 043	245 982	11.28	267 902	299 900
Compensation of employees	63 477	79 339	113 814	163 392	158 982	158 824	178 658	12.49	194 218	218 988
Goods and services	26 178	45 060	39 258	58 092	63 642	62 219	67 324	8.20	73 684	80 912
Financial transactions in assets and liabilities			257							
Transfers and subsidies to	49 411	49 858	41 281	12 340	12 450	12 296	16 560	34.68	17 362	18 398
Provinces and municipalities	41 908	40 685	32 585	504	504	350	132	( 62.29)		
Non-profit institutions	7 503	9 163	8 696	11 836	11 836	11 836	16 428	38.80	17 362	18 398
Households		10			110	110		(100.00)		
Payments for capital assets	13 844	11 438	3 560	20 646	20 035	20 035	16 457	( 17.86)	16 209	20 305
Buildings and other fixed structures					5 600	5 600		( 100.00)		
Machinery and equipment	13 844	11 438	3 560	20 646	14 435	14 435	16 457	14.01	16 209	20 305
Total economic classification	152 910	185 695	198 170	254 470	255 109	253 374	278 999	10.11	301 473	338 603

# Details of transfers and subsidies:

Economic classification R'000  Audited 2002/03  Transfers and subsidies to (Current)  Provinces and municipalities Municipalities Municipalities of which  Audited 2002/03  49 411  41 908  41 908	Audited 2003/04 49 858 40 685 40 685	Audited 2004/05 41 281 32 585	Main appro- priation 2005/06 12 340 504	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07 16 560 132	% Change from Revised estimate 2005/06	<b>2007/08</b> 17 362	<b>2008/09</b> 18 398
Provinces and municipalities 41 908 Municipalities 41 908 Municipalities 41 908	40 685	32 585						17 362	18 398
Municipalities 41 908 Municipalities 41 908			504	504	350	132	(62.29)		
Municipalities 41 908	40.685				000		(02.23)		
1	40 000	32 585	504	504	350	132	(62.29)		
	40 685	32 585	504	504	350	132	(62.29)		
Regional services council levies 239	232	274	504	504	350	132			
Non-profit institutions 7 503	9 163	8 696	11 836	11 836	11 836	16 428	38.80	17 362	18 398
Households	10			110	110		(100.00)		
Social benefits	10			110	110		(100.00)		

# **Programme 4: Provincial Hospital Services**

**Purpose:** Delivery of hospital services, which are accessible, appropriate, effective and provide general specialist services, including a specialised rehabilitation service, as well as a platform for training health professionals and research.

# Analysis per sub-programme:

#### Sub-programme 4.1: General (Regional) hospitals

rendering of hospital services at a general specialist level and a platform for training of health workers and research

#### Sub-programme 4.2: Tuberculosis hospitals

to convert present tuberculosis hospitals into strategically placed centres of excellence in which a small percentage of patients may undergo hospitalisation under conditions, which allow for isolation during the intensive phase of treatment, as well as the application of the standardised multi-drug resistant (MDR) protocols

#### Sub-programme 4.3: Psychiatric/mental hospitals

rendering a specialist psychiatric hospital service for people with mental illness and intellectual disability and providing a platform for the training of health workers and research

#### **Sub-programme 4.4: Chronic medical hospitals**

these hospitals provide medium to long term care to patients who require rehabilitation and/or a minimum degree of active medical care but cannot be sent home. These patients are often unable to access ambulatory care at our services or their socio-economic or family circumstances do not allow for them to be cared for at home

#### Sub-programme 4.5: Dental training hospitals

rendering an affordable and comprehensive oral health service and training, based on the primary health care approach

#### Policy developments:

The policy in respect of Provincial Hospital Services is well developed and is contained in the Healthcare 2010 plan. The focus in the MTEF period will be on implementation of Healthcare 2010.

Regulations promulgated in terms of the Mental Health Care Act, 2002 (Act 17 of 2002) have significant policy implications for the Department, such as the establishment of the Mental Health Care Review Board.

# Changes: policy, structure, service establishment, etc. Geographic distribution of services:

#### **General Hospitals**

Given the shortage of nurses, the department will spend R2 million on nurse training and mentorship within sub-programmes 4.1: General (Regional) hospitals, 4.3: Psychiatric/mental hospitals, and 4.4: Chronic medical hospitals.

The recruitment and retention of specialists in the rural regional hospitals is a priority. The upgrading of the posts to principal specialists to head the different disciplines will begin in this year. An amount of R1,5 million has been allocated to the rural regional hospitals to commence this process.

20 Additional Level 2 beds will be commissioned at Eben Donges Hospital in keeping with the expanded infrastructure through the Hospital Revitilsation Programme (HRP). This will cost approximately R3 million per year. An additional 100 level 2 beds will be opened at Eben Donges Hospital over the next three years where R3 million is allocated in 2006/07 to facilitate this.

R1,2 million will be spent on commissioning a day surgery ward of 10 beds at New Somerset Hospital to fast track the basic procedures such as cataracts, tonsillectomies, hernias etc. The culture of efficiency and rapid turnover of patients will be instituted from the beginning.

R2,330 million will be used to fill critical posts at Regional Hospitals. Most hospitals have been steadily losing staff especially professional nurses.

The pressure on availability of beds in the metro for new admissions has increased. In addition to the creation of additional bed capacity described above, greater efficiency in the management of beds needs to be developed. central co-ordination and equitable distribution of patient load after hours is being developed within Programme 3: Emergency Medical Services to facilitate the admission of new patients and pre-empt the diversion of ambulances and "temporary closure" of hospitals which has come to be a regular occurrence within the Metro.

The upgrading of George and Worcester Hospitals in terms of the Hospital Revitalisation Programme will continue. The Business Plan for the revitalisation of Paarl Hospital has been accepted by the National Department of Health for funding. A project manager has been appointed and the tender will be awarded during this financial year.

Implementation of extended Ear-Nose-and-Throat (ENT) services began two years ago. The service will be strengthened with training of medical officers to sustain the ENT service at regional and district hospitals to reduce waiting lists of basic ENT services such as tonsillectomies.

A closer working relationship and co-management of trauma and emergency services between the regional and district hospitals and the Community Health Centres within the District Health System will be forged.

Level 2 beds and services are being separated from level 3 services within the central hospitals. The sum total of the level 2 beds within the central hospitals is greater than all the regional hospitals within the Metro. Identification of all level 2 beds will allow better co-ordination and management of the level 2 service platform within the Metro.

The appointment of clinical co-ordinators to co-ordinate services across all levels of care will have a positive impact on the streamlining and referral of patients between institutions.

R3 million has been earmarked for improving the quality of rehabilitation services across the Programme 4: Provincial Hospital Services platform. This allocation includes the acquisition of assistive devices to improve access to these devices.

#### **Tuberculosis Hospitals**

The provincialisation of Harry Comay, Paarl Tuberculosis (TB) Hospital (Sonstraal), Malmesbury TB Hospital (Infectious Diseases) and DP Marais Hospital will require the Department to upgrade the services and facilities of these hospitals and increase their capacity to care for more acutely ill patients. An amount of R1,4 million has been committed in Programme 2: District Health Services to equalise the salaries of staff from DP Marais and Harry Comay due to the provincialisation process.

The infrastructure within certain TB hospitals is old and requires renovation, maintenance and upgrading. An additional amount of R4,3 million has been allocated to enhance the TB response: R930 000 to DP Marais Hospital, R2,8 million to Brooklyn Chest Hospital and R600 000 to Harry Comay Hospital.

### **Psychiatric Hospitals**

Regulations promulgated in terms of the Mental Health Care Act, 2002 (Act 17 of 2002) have resulted in the need to adjust many of the mental health policies to ensure compliance with the obligations imposed by the Act. In terms of the Act a Mental Health Review Board was established and plays an important role in the protection of the rights of mental health care users. In terms of the Act the Provincial Minister of Health has designated mental health facilities and units. However, mental health care users can present at any health care facility for referral to a designated facility for treatment and can expect to receive treatment at all levels of care in the least restrictive manner, and only if required be referred to a designated facility.

Stikland Hospital is funding and overseeing the upgrade of a vacant ward in conjunction with the Department of Transport and Public Works for the commissioning of an opiate detoxification unit for the management of complicated detoxification. This ward is adjacent to the existing alcohol rehabilitation unit and it is envisaged that once staffed and commissioned this unit would become a centre for providing a 24 hour help line to general health care emergency services which will continue to provide most first line detoxification services on both an outpatient and inpatient basis throughout the Province. R2,5 million has been set aside to commission and operate this facility.

# **Chronic Medical Hospitals**

The aim is to reorganise this sub-programme and place the institutions in the programmes where they operate. The following hospitals are currently classified as chronic medical hospitals: Maitland Cottage Hospital, Booth Memorial Hospital, the Western Cape Rehabilitation Centre, Sarah Fox Hospital, St Joseph's Provincially Aided Hospital, Malmesbury TB Hospital (Infectious Diseases) and Nelspoort Hospital. Maitland Cottage Hospital, which is closely linked to Red Cross Children's Hospital has been shifted to Programme 5: Central Hospital Services while the Booth Memorial Hospital, Sarah Fox Hospital and the St Joseph's Provincially Aided Hospital have been shifted to Programme 2: District Hospital Services as they are regarded as step-down facilities.

The Western Cape Rehabilitation Centre (WCRC) will co-manage with Programme 2: District Health Services a specialist referral-seating clinic for high-risk patients. This will include motorised wheelchairs and pressure care cushions for these patients. There will be an outreach, mobile seating clinic to build capacity within the regions to decrease referrals from the rural regions, transport costs and delays in repairs of wheelchairs. The increased provision of assistive devices requires additional capacity for repairs. Funding is provided to commence this project during 2006/07. An amount of R8,5 million has been allocated to fund facilities management at the WCRC, which will significantly improve conditions at the institution.

# **Dental Training Hospitals**

Service will continue within the platform provided for the training of dental health professionals.

# **Expenditure trends analysis:**

Programme 4 is allocated 21,13 per cent of the vote during 2006/07 in comparison to the 22,46 percent that was allocated during 2005/06. This translates to an increase of R48,047 million or 3,73 per cent in nominal terms. It must also be noted that the budget for three of the Provincially aided hospitals has been allocated to different programmes, i.e. the budget for the St Joseph's Hospital and Sarah Fox have been allocated to Subprogramme 2.4: Community Based Services and the budget for Maitland Cottage Hospital has been allocated to Sub-programme 5.1: Central Hospital Services during 2006/07.

# Service delivery measures:

**Programme 4: Provincial Hospital Services** 

Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
I.1 General (Regional) hospitals	Provide in-patient facilities.	Number of beds.	Adequate in-patient capacity.	2 010
	Optimal utilisation of inpatient capacity.	% bed occupancy.	Efficient utilisation of facilities.	93%
	Provide an out-patient service.	Number of out-patients.	Out-patient services.	668 649
	Provide an in-patient service.	Number of in-patient days.	In-patient services.	682 295
	Provide an effective hospital service.	Number of Patient Day Equivalents (PDEs).	Mix of in-patient and outpatient services.	905 177
1.2 Tuberculosis hospitals	Provide in-patient facilities.	Number of beds.	Adequate in-patient capacity.	1 165
	Optimal utilisation of inpatient capacity.	% bed occupancy.	Efficient utilisation of facilities.	85%
	Provide an out-patient service.	Number of out-patients.	Out-patient services.	3 614
	Provide an in-patient service.	Number of in-patient days.	In-patient services.	361 441
	Provide an effective hospital service.	Number of Patient Day Equivalents (PDEs).	Mix of in-patient and outpatient services.	362 646
1.3 Psychiatric/mental hospitals	Provide in-patient facilities.	Number of beds.	Adequate in-patient capacity.	2 200
	Optimal utilisation of inpatient capacity.	% bed occupancy.	Efficient utilisation of facilities.	85%
	Provide an out-patient service.	Number of out-patients.	Out-patient services.	19 111
	Provide an in-patient service.	Number of in-patient days.	In-patient services.	682 550
	Provide an effective hospital service.	Number of Patient Day Equivalents (PDEs).	Mix of in-patient and outpatient services.	688 920
1.4 Chronic medical hospitals	Provide in-patient facilities.	Number of beds.	Adequate in-patient capacity.	884
	Optimal utilisation of inpatient capacity.	% bed occupancy.	Efficient utilisation of facilities.	85%
	Provide an out-patient service.	Number of out-patients.	Out-patient services.	2 743
	Provide an in-patient service.	Number of in-patient days.	In-patient services.	274 261
	Provide an effective hospital service.	Number of Patient Day Equivalents (PDEs).	Mix of in-patient and outpatient services.	275 175
4.5 Dental training hospitals	Optimise student training as agreed to by the Committee of Dental Deans.	Graduating students.	Qualified oral health professionals.	80
	Provide oral health care.	The number of patient visits.	Improved oral health.	150 000
	Reduce time patients spend on waiting lists for dentures.	Number of patients on waiting lists for dentures.	Shorter waiting period.	700

Table 6.4 Summary of payments and estimates – Programme 4: Provincial hospital services

			Outcome						Medium-tern	n estimate	
	Sub-programme R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
1.	General hospitals <sup>a</sup>	613 307	665 389	750 742	776 762	785 678	785 678	838 501	6.72	891 508	958 890
2.	Tuberculosis hospitals <sup>a</sup>	51 154	54 269	62 049	64 124	64 238	68 017	73 490	8.05	77 666	82 301
3.	Psychiatric/Mental hospitals <sup>a</sup>	225 209	232 790	256 210	285 273	285 273	283 538	305 115	7.61	328 852	348 665
4.	Chronic medical hospitals <sup>a</sup>	42 078	53 228	55 265	96 859	99 095	94 727	60 986	(35.62)	68 509	72 661
5.	Dental training hospitals <sup>a</sup>	42 525	47 372	52 375	53 747	53 747	56 071	57 986	3.42	61 309	64 999
To	otal payments and estimates	974 273	1 053 048	1 176 641	1 276 765	1 288 031	1 288 031	1 336 078	3.73	1 427 844	1 527 516

<sup>&</sup>lt;sup>a</sup> 2006/07: Conditional grant: Health professional training and development: R88 428 000 (Compensation of employees R57 478 000; Goods and services R30 950 000).

#### Earmarked allocations:

Included in sub-programme 4.1: "General hospitals" is an earmarked allocation amounting to R10 933 000 (2006/07), R11 479 000 (2007/08) and R12 030 000 (2008/09) for the purpose of Drugs, medicines and other key inputs.

Included in sub-programme 4.1: "General hospitals" is an earmarked allocation amounting to R11 826 000 (2006/07), R16 888 000 (2007/08) and R29 542 000 (2008/09) for the purpose of Human Resource Development.

Included in sub-programme 4.3: "Psychiatric Mental hospitals" is an earmarked allocation amounting to R2 240 000 (2006/07), R8 289 000 (2007/08) and R8 457 000 (2008/09) for the purpose of Human Resource Development.

Included in sub-programme 4.4: "Chronic medical hospitals" is an earmarked allocation amounting to R560 000 (2006/07), R4 400 000 (2007/08) and R4 456 000 (2008/09) for the purpose of Human Resource Development.

Included in sub-programme 4.5: "Dental training hospitals" is an earmarked allocation amounting to R450 000 (2006/07), R475 000 (2007/08) and R504 000 (2008/09) for the purpose of Human Resource Development.

Table 6.4.1 Summary of provincial payments and estimates by economic classification – Programme 4: Provincial hospital services

		Outcome						Medium-term	estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro-priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	859 986	915 203	1 097 895	1 201 294	1 208 791	1 207 124	1 313 637	8.82	1 404 733	1 503 027
Compensation of employees	644 770	656 465	776 942	856 623	849 105	813 095	933 808	14.85	1 001 261	1 071 635
Goods and services	215 216	258 738	320 909	344 671	359 686	394 029	379 829	( 3.60)	403 472	431 392
Financial transactions in assets and liabilities			44							
Transfers and subsidies to	106 381	129 850	72 379	66 838	67 318	68 985	12 542	( 81.82)	12 649	13 403
Provinces and municipalities	1 683	1 858	6 565	2 189	2 196	3 863	572	( 85.19)		
Departmental agencies and accounts	58 399	66 408								
Universities and technikons		3 682	6 539	7 397	7 717	7 717		( 100.00)		
Non-profit institutions	46 223	56 253	57 490	55 845	55 838	55 838	10 342	(81.48)	10 929	11 581
Households	76	1 649	1 785	1 407	1 567	1 567	1 628	3.89	1 720	1 822
Payments for capital assets	7 906	7 995	6 367	8 633	11 922	11 922	9 899	(16.97)	10 462	11 086
Machinery and equipment	7 906	7 995	6 360	8 633	11 922	11 922	9 899	(16.97)	10 462	11 086
Software and other intangible assets			7							
Total economic classification	974 273	1 053 048	1 176 641	1 276 765	1 288 031	1 288 031	1 336 078	3.73	1 427 844	1 527 516

# Details of transfers and subsidies:

		Outcome					I	Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appro- priation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Transfers and subsidies to (Current)	106 381	129 850	72 379	66 838	67 318	68 985	12 542	(81.82)	12 649	13 403
Provinces and municipalities	1 683	1 858	6 565	2 189	2 196	3 863	572	(85.19)		
Municipalities	1 683	1 858	6 565	2 189	2 196	3 863	572	(85.19)		
Municipalities	1 683	1 858	6 565	2 189	2 196	3 863	572	(85.19)		
of which										
Regional services council levies	1 683	1 858	2 027	2 189	2 196	3 863	572			
Departmental agencies and accounts	58 399	66 408								
Provide list of entities receiving transfers	58 399	66 408								
Hospital Trading Account: Karl Bremer	58 399	66 408								
Universities and technikons		3 682	6 539	7 397	7 717	7 717		(100.00)		
Non-profit institutions	46 223	56 253	57 490	55 845	55 838	55 838	10 342	(81.48)	10 929	11 581
Households	76	1 649	1 785	1 407	1 567	1 567	1 628	3.89	1 720	1 822
Social benefits	76	1 649	1 785	1 407	1 567	1 567	1 628	3.89	1 720	1 822

# **Programme 5: Central Hospital Services**

**Purpose:** To provide tertiary health services and create a platform for the training of health workers.

#### Analysis per sub-programme

#### Sub-programme 5.1: Central hospital services

rendering of a highly specialised medical health and quaternary services on a national basis and a platform for the training of health workers and research

# Policy developments:

The central hospitals in the Western Cape provide quaternary and tertiary care and also a quantum of secondary level care. The policy regarding tertiary health care is contained in Healthcare 2010. The focus of the MTEF period will be on integrating the detailed and refined tertiary services plan with the other levels of the health care system in support of the implementation of Healthcare 2010. The revision of the staffing structure will evolve from the service plan. Effective communication with stakeholders and the development of an implementation strategy is essential.

The relationship between Institutes of Higher Education and the Department of Health is governed by outdated Joint Agreements. A concerted effort, led by the Premier and the Vice Chancellors during 2005, is paving the way for new multilateral and bilateral agreements that would replace current agreements. It is expected that a multi-lateral agreement between government and the Institutions of Higher Education will be signed during 2006/07 paving the way towards revised bilateral Joint Agreements.

# Changes: policy, structure, service establishment, etc. Geographic distribution of services: Central Hospitals:

The reduced nursing capacity, both in terms of number and of experience, remains the key challenge in this service. Professional and specialised nurses are highly mobile in a global environment of high demand for nurses. The attrition rate for professional nurses alone is 25 per cent. Several strategies have been embarked upon within the department to address this major challenge, for example more bursaries have been allocated towards formal training and the capacity for training the sub-professional categories of nurses has been increased, and a postgraduate training programme for midwifery has been re-established.

Quality of care initiatives include establishing dedicated quality assurance capacity at the respective institutions, establishing a provincial structure for Infection Prevention and Control in collaboration with the Quality Assurance Unit and developing uniform operational policies regarding infection prevention and control as well as conducting regular patient and staff satisfaction surveys.

Priorities aimed at improving institutional performance include establishing a balanced scorecard for each institution, establishing day surgery, enhancing theatre management, implementing a uniform Emergency Services triage system and enhancing junior and senior management.

In order to improve system performance and assess the impact of the interventions co-ordinating clinicians in each of the major disciplines will be appointed. In addition a uniform policy for the co-ordination of acute admissions will be established.

#### **Individual Central Hospitals**

#### Red Cross Children's Hospital (RCCH)

Red Cross Children's Hospital is a national asset and has been established as a separate entity with its own support structure. Aspects of financial, human resource management and information management capacity is still lacking.

Identified sub-specialist paediatric services across Red Cross and Tygerberg Hospital will be consolidated into single discipline departments. Implementation has already commenced in the Cardiology and Cardiothoracic services. Lessons learned from this process will extend to Nephrology and Renal Transplant services; Neurology and Child Development services.

The community support for Red Cross War Memorial Children's Hospital has been phenomenal and the fundraising arm of the hospital, The Children's Hospital Trust has raised over R90 million since 1995 for redevelopment projects, such as:

a new specialist outpatients and emergency services wing - R43 million

a new integrated paediatric intensive care unit - R3,8 million

specialised medical equipment - R15 million

a new trauma and diagnostic radiology unit - R16 million

a new oncology unit - R16 million.

a project to commence the upgrading of a ward and operating theatres will commence in 2006/07.

# Tygerberg Hospital

During 2004 Tygerberg Hospital continued the process of consolidating regional services into separate wards as the first step towards strengthening capacity for regional Metro hospital services. This process will continue during the MTEF period.

Once the service plan for the Metro has been finalised, the future service and infrastructure configuration of Tygerberg Hospital will be clarified. The CSIR has been appointed to survey and report on the condition of Tygerberg Hospital which is in urgent need of upgrading / renovation. A business case will be submitted to the National Department of Health to motivate for funds to re-build or replace Tygerberg Hospital.

Revenue generation has been identified as a key strategic objective for the Department in addressing the budgetary constraints.

Tygerberg hospital is experiencing an increasing load on trauma and emergency services. Therefore the creation of additional management and infrastructure capacity has been prioritised. Trauma headcounts have consistently increased. The projections of orthopedic implants on current trends indicate an increase in this expenditure in excess of R1,5 million.

#### **Groote Schuur Hospital**

The key strategies of Groote Schuur Hospital are as follows:

Re-engineering the institutional framework – this will include restructuring management, the interface between the hospital and higher education institutions, clinical departmental and divisional structures, and the separation of tertiary and secondary services within the institution. The consolidation of the Intensive Care Units, Wards and Trauma and Emergency Units will be completed, which will result in improved theatre management and day surgery utilisation.

Strengthen de-centralised management through five clinical centres, supported by Cost Centre Accounting.

Strengthen revenue flows by expanding on the bed capacity and aggressive follow up of Road Accident Fund claims and other hospital fees.

Consolidate secondary services and ensure appropriate outpatient attendances.

## Other strategies

The Department has established a dedicated team to address prioritisation and central procurement to systematically address the equipment backlogs.

#### Additional funding has been allocated to Programme 5 to address the following:

An amount of R13,2 million additional funding has been allocated to Programme 5: Central Hospital Services in 2006/07, which will contribute towards the funding of one Linear Accelerator, two of which are required.

An amount of R2,5 million has been allocated to fund a neuropsychiatric service at Groote Schuur Hospital and an amount of R1 million to fund the separation of child from adult psychiatric services at Tygerberg Hospital. An additional 30 interns will be employed at Tygerberg Hospital for which an additional R5,4 million has been provided.

#### **Expenditure trends analysis:**

The Central Hospital Services is allocated 33 per cent of the budget during 2006/07 in comparison to the 34,25 per cent of the revised estimate of the Appropriation Budget that was allocated during 2005/06. This amounts to a nominal increase of R123,034 million or 6,27 per cent.

# Service delivery measures:

#### **Programme 5: Central Hospital Services**

	Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
5.1	Central hospital services	Provide in-patient facilities.	Number of beds.	Adequate in-patient capacity.	2 532
		Optimal utilisation of inpatient capacity.	% bed occupancy.	Efficient utilisation of facilities.	82%
		Provide an out-patient service.	Number of out-patients.	Out-patient services.	1 233 377
		Provide an in-patient service.	Number of in-patient days.	In-patient services.	757 828
		Provide an effective hospital service.	Number of Patient Day Equivalents (PDEs).	Mix of in-patient and outpatient services.	1 168 953

Table 6.5 Summary of payments and estimates – Programme 5: Central hospital services

	Outcome							Medium-tern	n estimate	
Sub-programme R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro-priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Central hospital services <sup>a,b</sup>	1 476 202	1 607 089	1 805 918	1 936 056	1 963 483	1 963 483	2 086 517	6.27	2 245 303	2 363 400
Total payments and estimates	1 476 202	1 607 089	1 805 918	1 936 056	1 963 483	1 963 483	2 086 517	6.27	2 245 303	2 363 400

<sup>&</sup>lt;sup>a</sup> 2006/07: Conditional grant: National tertiary services: R1 272 640 000 (Compensation of employees R763 584 000; Goods and services R509 056 000).

#### Earmarked allocations:

Included in sub-programme 5.1: "Central hospital services" is an earmarked allocation amounting to R27 681 000 (2006/07), R29 066 000 (2007/08) and R30 462 000 (2008/09) for the purpose of Drugs, medicines and other key inputs.

Included in sub-programme 5.1: "Central hospital services" is an earmarked allocation amounting to R41 990 000 (2006/07), R43 928 000 (2007/08) and R46 036 000 (2008/09) for the purpose of Health equipment.

Included in sub-programme 5.1: "Central hospital services" is an earmarked allocation amounting R6 560 000 (2008/09) for the purpose of Human Resource development.

Included in sub-programme 5.1: "Central hospital services" is an earmarked allocation amounting to R13 173 000 (2006/07), R51 206 000 (2007/08) and R30 434 000 (2008/09) for the purpose of Modernisation of tertiary services.

Table 6.5.1 Summary of provincial payments and estimates by economic classification – Programme 5: Central hospital services

		Outcome						Medium-term	estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro-priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	1 427 852	1 549 821	1 727 421	1 838 346	1 853 391	1 852 536	2 008 167	8.40	2 123 226	2 257 300
Compensation of employees	1 005 741	1 006 818	1 117 994	1 196 285	1 177 124	1 163 491	1 315 523	13.07	1 390 293	1 480 621
Goods and services	422 111	543 003	609 327	642 061	676 267	689 045	692 644	0.52	732 933	776 679
Financial transactions in assets and liabilities			100							
Transfers and subsidies to	39 079	39 079	49 243	48 324	48 324	49 179	7 371	( 85.01)	6 869	7 279
Provinces and municipalities	2 410	2 484	3 025	3 322	3 322	3 322	871	(73.78)		
Universities and technikons	36 669	34 221	44 129	43 188	42 588	42 588		( 100.00)		
Non-profit institutions							4 595		4 856	5 146
Households		2 374	2 089	1 814	2 414	3 269	1 905	(41.73)	2 013	2 133
Payments for capital assets	9 271	18 189	29 254	49 386	61 768	61 768	70 979	14.91	115 208	98 821
Machinery and equipment	9 271	18 189	29 254	49 386	61 720	61 720	70 979	15.00	115 208	98 821
Software and other intangible assets					48	48		( 100.00)		
Total economic classification	1 476 202	1 607 089	1 805 918	1 936 056	1 963 483	1 963 483	2 086 517	6.27	2 245 303	2 363 400

<sup>&</sup>lt;sup>b</sup> 2006/07: Conditional grant: Health professional training and development: R199 677 000 (Compensation of employees R129 790 000; Goods and services R69 887 000).

#### Details of transfers and subsidies:

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appro- priation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Transfers and subsidies to (Current)	39 079	39 079	49 243	48 324	48 324	49 179	7 371	(85.01)	6 869	7 279
Provinces and municipalities	2 410	2 484	3 025	3 322	3 322	3 322	871	(73.78)		
Municipalities	2 410	2 484	3 025	3 322	3 322	3 322	871	(73.78)		
Municipalities	2 410	2 484	3 025	3 322	3 322	3 322	871	(73.78)		
of which										
Regional services council levies	2 410	2 484	3 025	3 322	3 322	3 322	871			
Universities and technikons	36 669	34 221	44 129	43 188	42 588	42 588		(100.00)		
Non-profit institutions							4 595		4 856	5 146
Households		2 374	2 089	1 814	2 414	3 269	1 905	(41.73)	2 013	2 133
Social benefits		2 374	2 089	1 814	2 414	3 269	1 905	(41.73)	2 013	2 133
										<u>.</u>

# **Programme 6: Health Sciences and Training**

**Purpose:** Rendering of training and development opportunities for actual and potential employees of the department of Health.

# Analysis per sub-programme:

#### Sub-programme 6.1: Nurse training college

training of nurses at undergraduate, and post-basic level. Target group includes actual and potential employees

#### Sub-programme 6.2: Emergency medical services (EMS) training college

training of rescue and ambulance personnel. Target group includes actual and potential employees

#### Sub-programme 6.3: Bursaries

provision of bursaries for health science training programmes at undergraduate and postgraduate levels. Target group includes actual and potential employees

#### Sub-programme 6.4: Primary health care (PHC) training

provision of PHC related training for personnel, provided by the regions

#### Sub-programme 6.5: Training (other)

provision of skills development interventions for all occupational categories in the department. Target group includes actual and potential employees

#### Policy developments:

The success of Healthcare 2010 will depend to a large extent on the correct skills mix at all levels of the health service. The focus of Health Sciences and Training will be to ensure sustainable service delivery through adequately skilled human resources.

#### Changes: policy, structure, service establishment, etc. Geographic distribution of services:

Addressing the shortfall in the number of professionals being trained in order to meet future service requirements by:

Increasing the critical mass of nurses based on health service needs and priorities.

Increasing the critical mass of health science professionals and support staff in scarce skills, based on health service needs and priorities (pharmacists, radiographers, medical/clinical technologists, medical physicists, industrial technicians).

Supporting the broadening of clinical teaching/ learning platform to widen access to health science students in support of recruitment and retention.

Securing the budget for full-time and part-time bursaries to attain the targets for delivery in terms of Healthcare 2010.

Increasing the critical mass of pharmacist assistants, enrolled nurse assistants and enrolled nurses through the learnership programme.

Ensuring the relevance and quality of training programmes by:

Alignment of Human Resource Development (HRD) strategies with policy directives of the skills development legislation, the HRD transformation agenda and the Healthcare 2010 plan for service delivery.

A review of decentralised Primary Health Care training to assess alignment of departmental training to Healthcare 2010 priorities.

Strengthening partnerships with Higher Education Institutions.

Addressing the training skills and competencies gap, both in-service and pre-service by:

Training programmes for clinical nurse practitioners.

Re-orientation programmes for primary health care.

Training programmes for mid-level workers through short courses, learnerships, mentoring.

Enhancing capacity of health science professionals through encouraging appropriate continuous professional development training.

Programmes such as integrated management of childhood illnesses and home based care are programmes coordinated under the Chief Directorate: Health Programmes in Programme 2: District health services.

Adult Basic Education and Training (ABET) programmes for staff all contribute towards bridging the skills gap, while providing higher portability of skills and wider opportunities for career paths and employability.

The establishment of learnerships in partnership with the Health and Welfare Sector Education Training Authority (HWSETA) some of which will be intended to alleviate unemployment and poverty by providing skills development and employment access opportunities.

The Western Cape College of Nursing being transferred to the Cape Peninsula University of Technology (CPUT).

An amount of R20,725 million has been allocated for the Expanded Public Works Programme (EPWP) which is intended to provide an opportunity for the training of unemployed persons as community based health workers, nursing assistants and pharmacist's assistants.

# **Expenditure trends analysis:**

Health Sciences and Training is allocated 1,68 per cent of the vote in 2006/07 in comparison to the 1.42 per cent of the vote that was allocated in 2005/06. This is a nominal increase of R24,514 million or 30,07 per cent.

#### Service delivery measures:

#### Programme 6: Health Sciences and Training

	Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
6.1	Nurse training college.	Provide trained nursing personnel.	Number of nurses in training.	Various categories of trained nurses.	682
6.2	Emergency medical services (EMS) training college.	Provide trained personnel for the Emergency Medical Services (EMS).	Number of EMS personnel in training.	Personnel skilled in EMS.	276
6.3	Bursaries.	Provide bursaries for nurse training.	Number of bursaries awarded for nurse training.	Training of nurses of various categories facilitated.	2 448
		Provision of bursaries for health science training other than nursing.	Number of bursaries awarded.	Training in various health sciences facilitated.	645
6.4	Primary health care (PHC) training.	Provision of PHC related training.	Number of training interventions provided to PHC personnel.	Training of PHC personnel is facilitated.	4 000
6.5	Training (Other).	Coordinate the implementation of the Departmental Workplace Skills Plan.	Number of training interventions provided to personnel.	Ongoing development and training of personnel.	16 300
		Provide management and leadership development skills.	Number of management and leadership development training opportunities.	The development of management and leadership skill is facilitated.	1 400
		Provide ABET training.	Number of ABET learners registered for courses.	ABET training facilitated.	1 200

Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
	Provide learnerships	Number of learnerships to employees	Human resource development for employees facilitated.	500
		Number of learnerships to unemployed people	Human resource development for non employees facilitated	650
	Provide productive employment opportunities for a significant number of the unemployed.	Number of community based health workers trained.	Training of a number of unemployed as community based health workers.	1 146

Table 6.6 Summary of payments and estimates - Programme 6: Health sciences and training

			Outcome						Medium-tern	n estimate	
	Sub-programme R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appro- priation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
1.	Nursing training college	55 683	48 826	40 251	35 370	35 370	33 521	28 141	(16.05)	29 740	31 514
2.	Emergency medical services training colleges	1 802	2 591	2 748	3 252	3 252	2 986	3 444	15.34	3 640	3 858
3.	Bursaries	6 456	17 017	27 519	41 845	41 845	41 845	50 397	20.44	53 262	56 441
4.	Primary health care training				1	1	1	1		1	1
5.	Training other	1 440	2 682	3 023	3 180	3 180	3 180	24 064	656.73	55 372	86 663
To	otal payments and estimates	65 381	71 116	73 541	83 648	83 648	81 533	106 047	30.07	142 015	178 477

Note:

Contrary to practice in the past, the department does not appoint students on PERSAL, but rather award bursaries. For this reason sub-programme 6.1: Nursing training college is decreasing while sub-programme 6.3: Bursaries is increasing.

#### Earmarked allocation:

Included in sub-programme 6.5: "Training other" is an earmarked allocation amounting to R20 725 000 (2006/07), R49 054 000 (2007/08) and R74 044 000 (2008/09) for the purpose of EPWP-Health.

Table 6.6.1 Summary of provincial payments and estimates by economic classification – Programme 6: Health sciences and training

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	56 791	51 269	42 801	39 518	39 929	37 837	55 326	46.22	88 437	121 702
Compensation of employees	50 361	44 343	35 776	29 945	29 895	27 803	25 220	( 9.29)	26 884	28 728
Goods and services	6 430	6 926	7 025	9 573	10 034	10 034	30 106	200.04	61 553	92 974
Transfers and subsidies to	8 060	19 347	30 331	42 867	42 917	42 894	50 395	17.49	53 233	56 410
Provinces and municipalities	164	144	116	96	96	73	25	( 65.75)		
Departmental agencies and accounts	1 440	1 654	1 873	1 967	1 967	1 967	2 065	4.98	2 183	2 313
Universities and technikons			1 700	2 292	2 292	2 292	1 407	( 38.61)	1 487	1 575
Households	6 456	17 549	26 642	38 512	38 562	38 562	46 898	21.62	49 563	52 522
Payments for capital assets	530	500	409	1 263	802	802	326	( 59.35)	345	365
Machinery and equipment	530	500	409	1 263	802	802	326	( 59.35)	345	365
Total economic classification	65 381	71 116	73 541	83 648	83 648	81 533	106 047	30.07	142 015	178 477

# Details of transfers and subsidies:

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appro- priation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Transfers and subsidies to (Current)	8 060	19 347	30 331	42 867	42 917	42 894	50 395	17.49	53 233	56 410
Provinces and municipalities	164	144	116	96	96	73	25	(65.75)		
Municipalities	164	144	116	96	96	73	25	(65.75)		
Municipalities	164	144	116	96	96	73	25	(65.75)		
of which										
Regional services council levies	164	144	116	96	96	73	25			
Departmental agencies and accounts	1 440	1 654	1 873	1 967	1 967	1 967	2 065	4.98	2 183	2 313
Provide list of entities receiving transfers	1 440	1 654	1 873	1 967	1 967	1 967	2 065	4.98	2 183	2 313
SETA	1 440	1 654	1 873	1 967	1 967	1 967	2 065	4.98	2 183	2 313
Universities and technikons			1 700	2 292	2 292	2 292	1 407	(38.61)	1 487	1 575
Households	6 456	17 549	26 642	38 512	38 562	38 562	46 898	21.62	49 563	52 522
Social benefits			18	10	60	60	11	(81.67)	11	12
Other transfers to households	6 456	17 549	26 624	38 502	38 502	38 502	46 887	21.78	49 552	52 510
-										

# **Programme 7: Health Care Support Services**

**Purpose:** To render support services required by the Department to realise its aims.

# Analysis per sub-programme:

Sub-programme 7.1: Laundry services

rendering a laundry service to hospitals, care and rehabilitation centres and certain local authorities

#### Sub-programme 7.2: Engineering services

rendering a maintenance service to equipment and engineering installations, and minor maintenance to buildings

#### Sub-programme 7.3: Forensic services

rendering specialised forensic and medico-legal services in order to establish the circumstances and causes surrounding unnatural death

#### Sub-programme 7.4: Orthotic and prosthetic services

rendering specialised orthotic and prosthetic services

#### Sub-programme 7.5: Medicine trading account

managing the supply of pharmaceuticals and medical sundries to hospitals, community health centres and local authorities

# **Policy developments:**

No policy changes are envisaged in the MTEF period.

# Changes: policy, structure, service establishment, etc. Geographic distribution of services:

No major changes in the configuration of services are envisaged in the MTEF period. The focus will be on maximising efficiency.

The major funding priority that has been identified is the R6,5 million for laundry equipment for the Tygerberg Hospital laundry that will be provided from the general provisions for equipment.

### **Expenditure trends analysis:**

Health Care Support Services is allocated 1,23 per cent of the vote in 2006/07 in comparison to the 1,61 per cent of the revised estimate of the Appropriation Budget that was allocated in 2005/06. This is a decrease of R14,595 million or 15,85 per cent in nominal terms. This is due to the reallocation of the funding for Forensic Pathology Services from Sub-programme 7.3: Forensic Services to Sub-programme 2.8: Coroner Services.

# Service delivery measures:

#### **Programme 7: Health Care Support Services**

Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
7.1 Laundries	Provide an in-house laundry service to all provincial hospitals.	Number of pieces laundered in-house.	Clean and disinfected linen.	17,5 million
	Provide an outsourced laundry service to all provincial hospitals.	Number of pieces laundered outsourced.	Clean and disinfected linen.	5,5 million
	Provide an in-house laundry service to all provincial hospitals.	Average in-house cost per item.	Clean and disinfected linen.	R1,74
	Provide an outsourced laundry service to all provincial hospitals.	Average outsourced cost per item.	Clean and disinfected linen.	R1,73
7.2 Engineering	Effective maintenance of buildings and engineering installations.	Maintenance backlog as a % of replacement value.	Health facilities that are maintained, safe, presentable and fit for purpose.	7%
	Efficient engineering installations.	Cost of utilities per bed.	Minimised cost of utilities and operation.	R4 000
	Effective maintenance of equipment, buildings and engineering installations.	Number of jobs completed – in-house and outsourced.	Health facilities and equipment that are maintained, safe, presentable and fit for purpose.	13 800
7.3 Forensic service	This function has been transferred to Subprogramme 2.8.			

	Sub-programme	Measurable objective	Performance measure	Output	Target (2006/07)
7.4	Orthotic and prosthetic services.	Render an orthotic and prosthetic service for the Province.	Number of devices manufactured.	Orthotic and prosthetic devices.	5 000
		Provide quality devices.	% of devices requiring remanufacture.	Devices that meet patient need first time.	2%
		Provide a responsive service.	Number of patients on waiting list waiting for over 6 months.	More devices for the same cost. Reduced waiting time.	600
7.5	Medicine trading account.	Ensure availability of essential drugs.	Number of items on dues out.	Dues out below 60.	60
		Efficient utilisation of working capital.	Stock turnover.	Stock turnover 8 or more times per year.	9

Table 6.7 Summary of payments and estimates – Programme 7: Health care support services

			Outcome						Medium-tern	n estimate	
	Sub-programme R'000	Audited 2002/03	Audited	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
_											
1.	Laundries	32 434	33 156	37 631	38 047	38 047	40 184	33 948	(15.52)	35 878	38 019
2.	Engineering	19 118	25 621	27 243	29 973	29 973	29 973	31 197	4.08	32 970	34 936
3.	Forensic services	4 946	5 466	6 445	7 783	7 783	7 518	1	(99.99)	1	1
4.	Orthotic and prosthetic services	7 707	7 594	7 330	9 235	9 235	9 235	9 794	6.05	10 352	10 968
5.	Medicine trading account	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
To	otal payments and estimates	66 597	73 837	82 752	87 457	90 203	92 075	77 480	(15.85)	81 885	86 769

Note:

The budget for outsourced laundries have been shifted to the respective institutions therefore the decrease in sub-programme 7.1: Laundries.

Table 6.7.1 Summary of provincial payments and estimates by economic classification – Programme 7: Health care support services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	63 902	70 842	77 611	83 600	83 826	85 698	74 183	( 13.44)	78 426	83 104
Compensation of employees	33 820	35 640	38 288	46 196	45 396	42 447	42 160	(0.68)	44 558	47 216
Goods and services	30 082	35 202	39 318	37 404	38 430	43 235	32 023	( 25.93)	33 868	35 888
Financial transactions in assets and liabilities			5			16		( 100.00)		
Transfers and subsidies to	2 480	2 114	4 426	2 680	5 426	5 426	2 572	( 52.60)	2 693	2 854
Provinces and municipalities	83	87	94	114	114	114	24	( 78.95)		
Departmental agencies and accounts	2 392	2 000	4 103	2 419	5 165	5 165	2 540	( 50.82)	2 684	2 845
Households	5	27	229	147	147	147	8	(94.56)	9	9
Payments for capital assets	215	881	715	1 177	951	951	725	(23.76)	766	811
Machinery and equipment	215	881	715	1 177	951	951	725	(23.76)	766	811
Total economic classification	66 597	73 837	82 752	87 457	90 203	92 075	77 480	( 15.85)	81 885	86 769

### **Details of transfers and subsidies:**

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appro- priation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Transfers and subsidies to (Current)	88	114	323	261	261	261	32	(87.74)	9	9
Provinces and municipalities	83	87	94	114	114	114	24	(78.95)		
Municipalities	83	87	94	114	114	114	24	(78.95)		
Municipalities	83	87	94	114	114	114	24	(78.95)		
of which										
Regional services council levies	83	87	94	114	114	114	24			
Households	5	27	229	147	147	147	8	(94.56)	9	9
Social benefits	5	27	229	147	147	147	8	(94.56)	9	9
Transfers and subsidies to (Capital)	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
Municipalities of which										
Departmental agencies and accounts	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
Provide list of entities receiving transfers	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
CMD Capital Augmentation	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
Ľ										

Table 6.7.2 Payments and estimates - Details of Central Medical Trading Account

			Outcome						Medium-tern	n estimate	
	Sub-programme R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appropriation	Revised estimate		% Change from Revised estimate		
		2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
1.	Administration	18 543	17 280	14 365	22 854	25 800	25 800	31 711	22.91	39 005	47 976
2.	Medicine provision	179 667	244 031	245 383	285 361	293 030	293 030	341 760	16.63	399 859	467 835
Te	otal payments and estimates	198 210	261 311	259 748	308 215	318 830	318 830	373 471	17.14	438 864	515 811

Table 6.7.2.1 Payments and estimates – Details of Central Medical Trading Account

		Outcome						Medium-term	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appropriation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	197 891	260 954	259 480	307 320	317 685	317 685	372 535	17.27	437 740	514 462
Compensation of employees	8 287	8 949	10 135	13 059	12 334	12 334	17 143	38.99	18 857	20 743
Goods and services	189 604	252 005	249 345	294 261	305 351	305 351	355 392	16.39	418 883	493 719
Transfers and subsidies to	20	21	25	35	35	35	45	28.57	54	65
Provinces and municipalities	20	21	25	35	35	35	45	28.57	54	65
Payments for capital assets	299	336	243	860	1 110	1 110	891	(19.73)	1 070	1 284
Machinery and equipment	299	336	243	860	1 110	1 110	891	(19.73)	1 070	1 284
Total economic classification	198 210	261 311	259 748	308 215	318 830	318 830	373 471	17.14	438 864	515 811
Total expenditure	198 210	261 311	259 748	308 215	318 830	318 830	373 471	17.14	438 864	515 811
Less: Estimated Revenue	195 818	263 021	265 424	308 215	318 830	318 830	373 471	17.14	438 864	515 811
Deficit (Surplus) to be voted	2 392	(1710)	(5676)							

### **Programme 8: Health Facilities Management**

**Purpose:** To provide for new health facilities, upgrading and maintenance of existing facilities, including the hospital revitalisation and provincial infrastructure grants.

### Analysis per sub-programme

Sub-programme 8.1: Community health facilities Sub-programme 8.2: Emergency medical rescue Sub-programme 8.3: District hospital services Sub-programme 8.4: Provincial hospital services Sub-programme 8.5: Central hospital services

Sub-programme 8.6: Other facilities

to provide for new health facilities, upgrading and maintenance of existing facilities, including the hospital revitalisation and provincial infrastructure grants

### Policy developments:

The funding for the Works function for Health was transferred to Health and placed in this programme as of 1 April 2005. A Service Level Agreement (SLA) was signed between the Department of Health and the Department of Transport and Public Works to inform the relationship between the two departments.

The National Department of Health has indicated that the allocation for the Hospital Revitalisation Programme (HRP) will increase significantly in the coming years. Provinces have been invited to submit motivation for additional hospitals for revitalisation.

The Department has prioritised the development and upgrading of infrastructure in line with Healthcare 2010 and this is reflected in the Hospital Revitalisation Projects at George, Worcester and Vredenburg. The revitalisation of Paarl Hospital commenced during 2005/06. Other projects that will be included in the Revitalisation Programme in the near future are the new district hospitals for Khayelitsha and Mitchell's Plain, the replacement hospitals for Victoria and Hottentots Holland Hospitals and the revitalisation of Valkenberg Hospital. Tygerberg Hospital is in urgent need of upgrading and renovation. The CSIR has been appointed to survey and report on the condition and sustainability of the hospital in terms of its future role in Healthcare 2010. A business case will be submitted to the National Department of Health to motivate for funds to rebuild/replace Tygerberg Hospital.

Other major projects include the comprehensive renovation and upgrading of Mowbray Maternity Hospital and the upgrading of Caledon and Riversdale Hospitals and the improvements to ambulance stations. The construction of new community health centres for Montagu, Stanford, Wellington and Simondium is scheduled in 2006/07.

The development of a service plan in line with Healthcare 2010 will give further direction to the prioritisation of facilities that need to be upgraded.

The forensic mortuaries are in the process of being transferred from the South African Police Services to the Department of Health. The physical infrastructure is being upgraded, to meet the requirements of the Occupational Health and Safety Act, 1993 (Act 85 of 1993) for which funding is being made available via the Forensic Pathology Serivces conditional grant.

There are terms of the Pharmacy and Medicines Acts that relate to the infrastructure requirements that became binding on the State as of 1 July 2005 which have significant financial implications and which are unfunded. Deficiencies in the infrastructure are therefore only being addressed when they can be accommodated as part of the capital works budget.

#### Changes: policy, structure, service establishment, etc. Geographic distribution of services:

In order to accommodate the service requirements of Healthcare 2010 an infrastructure plan for hospitals and ambulance stations have been compiled. A similar plan for primary health care facilities is in draft form.

#### **Expenditure trends analysis:**

Programme 8 is allocated 5,14 per cent of the vote in comparison to the 4,02 per cent of the vote that was allocated in revised estimate of the Appropriation Budget of 2005/06. This translates into an increased allocation of R94,382 million or 40,94 per cent in nominal terms.

### Service delivery measures:

#### **Programme 8: Health Facilities Management**

Sub-program	nme	Measurable objective	Performance measure	Output	Target (2006/07)
8.1 Community hocentres.	ealth	Improve quality of care.	% of facilities with piped water.	Provision of piped water.	100%
			% of facilities with mains electricity.	Provision of mains electricity.	100%
			% of facilities with access to a fixed line telephone.	Provision of a fixed telephone line.	100%
		Improve access to Primary Health Care facilities.	% of population within 5km of a fixed Primary Health Care (PHC) facility.	Improved access to PHC facilities.	94%
8.2 Emergency n services.	nedical	Improve ambulance stations.	% of ambulance stations built for purpose.	Replace temporary accommodation with built for purpose ambulance stations.	70%
8.3 District hospi services.	tal	Provide district hospital infrastructure that is fit for purpose.	Total infrastructure expenditure as a % of backlog.	Hospitals that are in good condition and suitable for purpose.	15.0%

Sub-pro	gramme	Measurable objective	Performance measure	Output	Target (2006/07)
8.4 Provinci services	•	Provide provincial hospitals with the physical infrastructure that is fit for purpose.	Total infrastructure expenditure as a % of backlog.	Hospitals that are in good condition and suitable for purpose.	40.8%
8.5 Central	Hospitals.	Provide central hospitals with the physical infrastructure that is fit for purpose.	Total infrastructure expenditure as a % of backlog.	Hospitals that are in good condition and suitable for purpose.	2.2%

Table 6.8 Summary of payments and estimates – Programme 8: Health facilities management

			Outcome						Medium-term	n estimate	
	Sub-programme R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
1.	Community health facilities <sup>a,d</sup>	6 459	12 572	18 485	19 020	12 861	12 861	23 865	85.56	26 255	31 689
2.	Emergency medical rescue services <sup>b,d</sup>	2 455	4 779	7 027	7 230	510	510	14 820	2805.88	16 250	2 415
3.	District hospital services a,b,d	24 470	47 625	70 030	72 055	57 132	41 330	56 241	36.08	56 936	100 699
4.	Provincial hospital services a,b,d	60 572	117 892	173 353	178 365	155 526	128 167	163 418	27.50	120 356	105 570
5.	Central hospital services a,b,d	5 094	9 914	14 578	15 000	36 698	36 698	34 185	(6.85)	60 078	65 916
6.	Other facilities <sup>a,b,c,d</sup>	1 744	3 394	4 991	5 135	10 998	10 998	32 417	194.75	35 342	17 431
To	otal payments and estimates	100 794	196 176	288 464	296 805	273 725	230 564	324 946	40.94	315 217	323 720

a 2006/07: Conditional grant: Hospital revitalisation: R149 703 000 (Compensation of employees R11 036 000; Goods and services R7 448 000; Buildings and other fixed structures R104 539 000 and Machinery and equipment R26 680 000)

Table 6.8.1 Summary of provincial payments and estimates by economic classification – Programme 8: Health facilities management

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	30 210	69 621	66 197	48 538	55 538	55 538	91 681	65.08	103 866	109 957
Compensation of employees							11 036		11 588	12 166
Goods and services	30 210	69 621	66 197	48 538	55 538	55 538	80 645	45.21	92 278	97 791
Payments for capital assets	70 584	126 555	222 267	248 267	218 187	175 026	233 265	33.27	211 351	213 763
Buildings and other fixed structures	70 584	126 555	222 267	248 267	194 687	151 526	206 585	36.34	211 351	213 763
Machinery and equipment					23 500	23 500	26 500	12.77		
Software and other intangible assets							180			
Total economic classification	100 794	196 176	288 464	296 805	273 725	230 564	324 946	40.94	315 217	323 720

b 2006/07: Conditional grant: Provincial infrastructure grant: R61 829 000 (Buildings and other fixed structures R61 829 000).

 <sup>2006/07:</sup> Conditional grant: Forensic pathology services grant: R21 972 000 (Goods and services R755 000 and Buildings and other fixed structures R21 217 000)

d Function shift: Works from Vote 10: Transport and Public Works, comparative figures included (2002/03 - R100 794 000; 2003/04 - R196 176 000; 2004/5 - R288 464 000).

### 7. Other programme information

### Personnel numbers and costs

Table 7.1 Personnel numbers and costs

Programme R'000	As at 31 March 2003	As at 31 March 2004	As at 31 March 2005	As at 31 March 2006	As at 31 March 2007	As at 31 March 2008	As at 31 March 2009
1. Administration	597	528	401	256	319	348	356
2. District health services	5 327	4 972	5 561	6 477	8 205	8 257	8 820
3. Emergency medical services	956	833	1 070	1 432	1 521	1 561	1 660
Provincial hospital services	6 903	7 165	6 784	6 713	7 287	7 368	7 417
5. Central hospital services	8 922	8 690	8 479	8 341	8 697	8 660	8 671
6. Health sciences and training	787	747	372	268	226	228	229
7. Health care support services	473	449	461	485	451	449	447
Health facilities management					118	117	115
Total personnel numbers	23 965	23 384	23 128	23 972	26 824	26 988	27 715
Total personnel cost (R'000)	2 370 274	2 444 792	2 799 467	3 028 074	3 598 358	3 842 181	4 182 536
Unit cost (R'000)	99	105	121	126	134	142	151

#### Note:

The total personnel numbers exclude the staff of the Medical Depot.

The growth in the personnel budgets is mostly due to the transfer of staff from municipalities (sub-programme 2.2: Community health clinics) and from the South African Police Services (sub-programme 2.8 - Forensic pathology services). As from 2006/07 the payments for university joint staff (mainly programme 5.1 - Central hospitals) are treated as personnel expenditure and not as transfer payments. The real increase in staff numbers is marginal and amounts to approximately R20 million per annum.

The staff numbers are derived from the personnel budgets, using the same average cost per employee in real terms. The increases in staff numbers are therefore the result of the matters above.

The cost per person (unit cost) is slightly overstated because the rand values includes sesional staff, periodic and extraordinary appointments, while the numbers exclude these categories.

Table 7.2 Departmental personnel number and cost

		Outcome					Medium-term estimate					
Description	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate				
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09		
Total for department Personnel numbers (head count)	23 965	23 384	23 128	24 799	23 972	23 972	26 824	11.90	26 988	27 715		
Personnel cost (R'000)	2 370 274	2 444 792	2 799 467	3 137 951	3 111 282	3 028 074	3 598 358	18.83	3 842 181	4 182 536		
Human resources component												
Personnel numbers (head count)			97	104	103	101	113	11.88	113	116		
Personnel cost (R'000)			13 704	15 361	15 230	14 823	17 615	18.84	18 810	20 478		
Head count as % of total for department			0.42	0.42	0.43	0.42	0.42		0.42	0.42		
Personnel cost as % of total for department			0.49	0.49	0.49	0.49	0.49		0.49	0.49		
Finance												
Personnel numbers (head count)			46	49	49	48	53	10.42	54	55		
Personnel cost (R'000)  Head count as % of total for department			7 128 0.20	7 989 0.20	7 921 0.20	7 710 0.20	9 162 0.20	18.83	9 783 0.20	10 651 0.20		
Personnel cost as % of total for department			0.25	0.25	0.25	0.25	0.25		0.25	0.25		
Full time workers												
Personnel numbers (head count)			21 441	22 990	22 862	22 223	24 869	11.91	25 018	25 694		
Personnel cost (R'000)			2 406 096	2 697 017	2 674 096	2 602 580	3 092 730	18.83	3 302 518	3 595 460		
Head count as % of total for department			92.71	92.71	95.37	92.70	92.71		92.70	92.71		
Personnel cost as % of total for department			85.95	85.95	85.95	85.95	85.95		85.95	85.96		
Part-time workers												
Personnel numbers (head count)			92	99	98	95	107	12.63	107	110		
Personnel cost (R'000)			16 836	18 871	18 711	18 210	21 640	18.84	23 108	25 158		
Head count as % of total for department			0.40	0.40	0.41	0.40	0.40		0.40	0.40		
Personnel cost as % of total for department			0.60	0.60	0.60	0.60	0.60		0.60	0.60		
Contract workers												
Personnel numbers (head count)			1 595	1 710	1 701	1 653	1 850	11.92	1 861	1 911		
Personnel cost (R'000)			316 932	355 252	352 233	342 813	407 376	18.83	435 009	473 596		
Head count as % of total for department			6.90	6.90	7.10	6.90	6.90		6.90	6.90		
Personnel cost as % of total for department			11.32	11.32	11.32	11.32	11.32		11.32	11.32		

The 2004/5 staff numbers and costs are based on the month March 2005.

It excludes NOA (Nature of Appointment) 3 (Sessional staff), 17 (Periodical appointments) and 32 (extra-ordinary appointments).

Human resources component include all staff with HRM related job titles, as class at institutions are not classified as such on PERSAL.

The same principle applies to Finance Staff.

Full time workers are staff with NOA 1 (permanent), 2 (Probation), 4 (Temporary) and 16 (political).

Part time workers are staff with NOA 6 and 7.

Contract workers are staff with NOA 5.

# **Training**

Table 7.3 Payments on training

			Outcome						Medium-tern	n estimate	
	Programme R'000	Audited	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
1.	Administration	535	774	614	1 378	1 337	1 337	1 431	7.03	1 503	1 577
	Subsistence and travel Other	535	774	614	1 378	1 337	1 337	1 431	7.03	1 503	1 577
2.	District health services	309	657	3 305	6 155	8 486	8 486	8 910	5.00	9 355	9 823
	of which Other	309	657	3 305	6 155	8 486	8 486	8 910	5.00	9 355	9 823
3.	Emergency medical services  of which  Other		48								
4.	Provincial hospital services	8	28	2 456	4 642	4 642	4 642	4 920	5.99	5 167	5 425
	of which										
	Other	8	28	2 456	4 642	4 642	4 642	4 920	5.99	5 167	5 425
5.	Central hospital services of which	4	764	1 094	3 101	2 471	2 471	2 645	7.04	2 776	2 915
	Other	4	764	1 094	3 101	2 471	2 471	2 645	7.04	2 776	2 915
6.	Health sciences and training of which	65 381	71 116	73 541	83 648	83 648	83 648	103 564	23.81	135 811	168 568
	Subsistence and travel	1 032	1 122	1 150	1 095	1 095	1 095	1 304	19.09	1 369	1 478
	Payments on tuition	20 683	22 497	27 519	41 845	41 845	41 845	46 887		49 555	52 518
	Other	43 666	47 497	44 872	40 708	40 708	40 708	55 373	36.02	84 887	114 572
7.	Health care support services of which	26	162	216	320	320	320	339	5.94	356	374
	Other	26	162	216	320	320	320	339	5.94	356	374
То	tal payments on training	66 263	73 549	81 226	99 244	100 904	100 904	121 809	20.72	154 968	188 682

Table 7.4 Information on training

		Outcome						Medium-tern	n estimate	
Description	2002/03	2003/04	2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Number of staff	23 965	23 384	23 128	24 799	23 972	23 972	26 824	11.90	26 988	27 715
Number of personnel trained	8 338	15 302	16 042	15 500	15 500	15 500	16 300	5.16	16 600	16 600
of which	0 330	10 302	10 042	15 500	15 500	15 500	10 300	5.10	10 000	10 000
Male	2 001	3 826	3 944	3 720	3 720	3 720	3 912	5.16	3 984	3 984
Female	6 337	11 476	12 098	11 780	11 780	11 780	12 388	5.16	12 616	12 616
Number of training opportunities	8 704	15 733	15 567	16 533	16 533	16 533	17 412	5.32	17 912	18 250
of which										
Tertiary	366	431	67	533	533	533	1 112	108.63	1 312	1 650
Workshops										
Seminars										
Other	8 338	15 302	15 500	16 000	16 000	16 000	16 300	1.88	16 600	16 600
Number of bursaries offered	323	726	1 105	1 625	1 625	1 625	1 981	21.91	2 655	2 720
Number of interns appointed		21	57	60	60	60	70	16.67	80	80
Number of learnerships appointed		19	484	680	680	680	650	(4.41)	630	610
Number of days spent on training										

# Reconciliation of structural changes

Table 7.5 Reconciliation of structural changes - None

Table B.1 Specification of receipts

		Outcome						Medium-term	estimate	
Receipts R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Sales of goods and services other than capital assets	106 779	149 662	185 534	168 515	188 469	184 848	201 620	9.07	206 940	206 940
Sales of goods and services produced by department (excluding capital assets)	106 779	149 662	185 534	168 515	188 469	184 848	201 620	9.07	206 940	206 940
Other sales	106 779	149 662	185 534	168 515	188 469	184 848	201 620	9.07	206 940	206 940
Of which										
Boarding & Lodging	6 245	6 350	4 743	5 535	5 535	4 135	5 406	30.74	6 225	6 225
Commission on insurance	2 333	2 379	2 643	2 500	2 500	2 749	4 000	45.51	4 000	4 000
Health patient fees	95 159	137 145	158 868	148 842	167 173	160 607	178 491	11.14	183 769	183 769
Registration, tuition & exam fees	44	143	325	147	147	9	529	5777.78	134	134
Sales	328	336	233	189	189	179	355	98.32	382	382
Vehicle repair service	36	335	315	100	100	191	72	(62.30)	72	72
Other	2 634	2 974	18 407	11 202	12 825	16 978	12 767	(24.80)	12 358	12 358
Transfers received from	8 808	5 126	43 706	62 794	63 787	63 787	93 423	46.46	106 054	111 720
Universities and technikons	8 808	5 126	14 282	9 123	10 116	10 116	8 921	(11.81)	9 123	9 123
International organisations			29 424	50 671	50 671	50 671	84 502	66.77	96 931	102 597
Public corporations and private enterprises				3 000	3 000	3 000		(100.00)		
Interest, dividends and rent on land			179	271	271	271	271		271	271
Interest			179	271	271	271	271		271	271
Sales of capital assets			125	31	31	31	29	(6.45)	29	29
Other capital assets			125	31	31	31	29	(6.45)	29	29
Financial transactions in assets and liabilities	4 285	10 223	6 997	1 416	1 852	5 473	1 737	(68.26)	1 915	1 915
Total departmental receipts	119 872	165 011	236 541	233 027	254 410	254 410	297 080	16.77	315 209	320 875

Table B.2 Summary of payments and estimates by economic classification

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Current payments	3 423 070	3 856 085	4 374 197	4 843 814	4 918 462	4 916 023	5 553 258	12.96	5 967 498	6 509 362
Compensation of employees	2 370 274	2 444 792	2 799 467	3 137 951	3 111 282	3 028 074	3 598 358	18.83	3 842 181	4 182 536
Salaries and wages	2 028 851	2 096 986	2 428 643	2 736 385	2 716 660	2 633 452	3 146 036	19.46	3 359 234	3 655 733
Social contributions	341 423	347 806	370 824	401 566	394 622	394 622	452 322	14.62	482 947	526 803
Goods and services	1 050 991	1 409 391	1 574 247	1 705 863	1 807 180	1 886 723	1 954 900	3.61	2 125 317	2 326 826
Of which Consultants and specialised	14 939	19 707	114 453	137 286	161 949	173 949	154 212	(11.35)	164 447	177 437
services Maintenance and repairs and running cost	71 361	124 651	111 784	91 733	105 017	105 017	120 469	14.71	134 442	142 902
Medical services	126 486	181 894	308 348	325 899	324 857	324 857	361 565	11.30	385 320	415 106
Medical supplies	226 942	307 817	307 826	316 401	326 418	339 418	352 550	3.87	375 890	406 079
Medicine	287 858	320 276	312 791	349 627	361 559	379 571	400 911	5.62	430 817	472 921
Financial transactions in assets and liabilities	1 805	1 902	483			1 226		(100.00)		
Transfers and subsidies to	408 605	474 209	467 149	534 254	505 612	507 957	390 555	(23.11)	396 776	417 373
Provinces and municipalities	180 627	208 671	228 132	252 619	219 162	220 652	138 856	(37.07)	132 225	138 954
Municipalities	180 627	208 671	228 132	252 619	219 162	220 652	138 856	(37.07)	132 225	138 954
Municipalities	180 627	208 671	228 132	252 619	219 162	220 652	138 856	(37.07)	132 225	138 954
of which  Regional services council levies	5 873	6 315	7 445	8 499	8 464	9 954	2 387	(76.02)		
Departmental agencies and accounts	62 231	70 062	5 976	4 386	7 132	7 132	4 605	(35.43)	4 867	5 158
Provide list of entities receiving transfers	62 231	70 062	5 976	4 386	7 132	7 132	4 605	(35.43)	4 867	5 158
CMD Capital Augmentation	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
Hospital Trading Account: Karl Bremer	58 399	66 408						,		
SETA	1 440	1 654	1 873	1 967	1 967	1 967	2 065	4.98	2 183	2 313
Universities and technikons	40 900	42 245	56 979	58 116	57 836	57 836	1 407	(97.57)	1 487	1 575
Non-profit institutions	111 987	124 159	140 533	158 506	159 603	159 603	175 455	9.93	183 975	193 035
Households	12 860	29 072	35 529	60 627	61 879	62 734	70 232	11.95	74 222	78 651
Social benefits	99	5 487	5 392	4 511	5 641	6 496	4 850	(25.34)	5 123	5 425
Other transfers to households	12 761	23 585	30 137	56 116	56 238	56 238	65 382	16.26	69 099	73 226
Payments for capital assets	119 347	217 010	327 853	364 435	352 748	309 587	379 680	22.64	410 045	406 170
Buildings and other fixed structures	70 584	126 555	222 267	248 267	200 287	157 126	206 585	31.48	211 351	213 763
Buildings	70 584	126 555	222 267	248 267	200 287	157 126	206 585	31.48	211 351	213 763
Machinery and equipment	48 763	90 455	105 436	116 168	152 385	152 385	172 915	13.47	198 694	192 407
Transport equipment	10 419	5 776		5 075	7 175	7 175	12 845	79.02	12 100	13 100
Other machinery and equipment	38 344	84 679	105 436	111 093	145 210	145 210	160 070	10.23	186 594	179 307
Software and other intangible assets			150		76	76	180	136.84		
Total economic classification	3 951 022	4 547 304	5 169 199	5 742 503	5 776 822	5 733 567	6 323 493	10.29	6 774 319	7 332 905

Table B.2.1 Payments and estimates by economic classification – Programme 1: Administration

		Outcome						Medium-tern	n estimate	
Economic classification R'000				Main appro-	Adjusted appro-	Revised		% Change from Revised		
1,000	Audited 2002/03	Audited 2003/04	Audited 2004/05	priation 2005/06	priation 2005/06	estimate 2005/06	2006/07	estimate 2005/06	2007/08	2008/09
Current payments	103 507	164 325	153 986	155 561	142 221	134 859	162 538	20.52	180 490	194 066
Compensation of employees	77 904	86 973	100 869	93 908	78 717	70 145	91 616	30.61	105 493	114 585
Salaries and wages	66 358	74 973	87 114	82 513	68 815	60 243	81 606	35.46	93 701	101 697
Social contributions	11 546	12 000	13 755	11 395	9 902	9 902	10 010	1.09	11 792	12 888
Goods and services	23 798	75 450	53 071	61 653	63 504	63 504	70 922	11.68	74 997	79 481
Of which Consultants and specialised	6 414	8 404	4 268	17 247	18 583	18 583	19 924	7.22	21 071	22 331
services Maintenance and repairs and running cost	182	178	202	1 687	1 684	1 684	1 949	15.74	2 061	2 184
Medical services	248	261	144	101						
Medical supplies	69	111	102							
Medicine		4	224							
Financial transactions in assets and liabilities	1 805	1 902	46			1 210		(100.00)		
Transfers and subsidies to	8 493	8 250	6 029	20 493	20 798	20 798	18 797	(9.62)	19 819	21 002
Provinces and municipalities	188	214	250	219	192	192	43	(77.60)		
Municipalities	188	214	250	219	192	192	43	(77.60)		
Municipalities	188	214	250	219	192	192	43	(77.60)		
of which Regional services council levies	188	214	250	219	192	192	43			
Universities and technikons	2 000	2 000	2 150	2 544	2 544	2 544		(100.00)		
Households	6 305	6 036	3 629	17 730	18 062	18 062	18 754	3.83	19 819	21 002
Social benefits	0 000	0 000	116	116	326	326	259	(20.55)	272	286
Other transfers to households	6 305	6 036	3 513	17 614	17 736	17 736	18 495	4.28	19 547	20 716
Payments for capital assets	9 273	43 069	53 301	19 564	19 125	19 125	18 019	(5.78)	19 044	20 180
Machinery and equipment	9 273	43 069	53 288	19 564	19 097	19 097	18 019	(5.64)	19 044	20 180
Other machinery and equipment	9 273	43 069	53 288	19 564	19 097	19 097	18 019	(5.64)	19 044	20 180
Software and other intangible assets			13		28	28		(100.00)		
Total economic classification	121 273	215 644	213 316	195 618	182 144	174 782	199 354	14.06	219 353	235 248

The item Consultants and specialised services includes amongst other fees in respect of the Chronic Dispensing Unit.

Table B.2.2 Payments and estimates by economic classification – Programme 2: District health services

		Outcome						Medium-tern	n estimate	
								% Change		
Economic classification				Main	Adjusted			from		
R'000				appro-	appro-	Revised		Revised		
	Audited	<b>Audited</b>	Audited	priation	priation	estimate		estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	791 167	910 605	1 054 957	1 255 473	1 312 142	1 321 388	1 601 744	21.22	1 720 418	1 940 306
Compensation of employees	494 201	535 214	615 784	751 602	772 063	752 269	1 000 337	32.98	1 067 886	1 208 597
Salaries and wages	421 223	457 878	533 580	647 706	667 903	648 109	863 205	33.19	920 942	1 042 198
Social contributions	72 978	77 336	82 204	103 896	104 160	104 160	137 132	31.66	146 944	166 399
Goods and services	296 966	375 391	439 142	503 871	540 079	569 119	601 407	5.67	652 532	731 709
Of which										
Consultants and specialised	4 449	6 250	29 056	33 977	40 561	45 561	40 554	(10.99)	44 003	49 347
services Maintenance and repairs and	4 689	4 394	4 394	4 538	8 856	8 856	5 416	(38.84)	5 877	6 591
running cost				_,						
Medical services	23 803	40 780	64 321	74 899	76 897	76 897	89 397	16.26	97 001	108 781
Medical supplies	29 398	53 088	81 599	73 769	74 825	84 825	88 049	3.80	95 538	107 140
Medicine	155 658	171 252	171 158	198 952	206 699	217 699	237 464	9.08	257 662	288 951
Financial transactions in assets and liabilities			31							
Transfers and subsidies to	194 701	225 711	263 460	340 712	308 379	308 379	282 318	(8.45)	284 151	298 027
Provinces and municipalities	134 191	163 199	185 497	246 175	212 738	212 738	137 189	(35.51)	132 225	138 954
Municipalities	134 191	163 199	185 497	246 175	212 738	212 738	137 189	(35.51)	132 225	138 954
Municipalities	134 191	163 199	185 497	246 175	212 738	212 738	137 189	(35.51)	132 225	138 954
of which								(*****)		
Regional services council levies	1 106	1 296	1 659	2 055	2 040	2 040	720			
Universities and technikons	2 231	2 342	2 461	2 695	2 695	2 695		(100.00)		
Non-profit institutions	58 261	58 743	74 347	90 825	91 929	91 929	144 090	56.74	150 828	157 910
Households	18	1 427	1 155	1 017	1 017	1 017	1 039	2.16	1 098	1 163
Social benefits	18	1 427	1 155	1 017	1 017	1 017	1 039	2.16	1 098	1 163
Payments for capital assets	7 724	8 383	11 980	15 499	19 958	19 958	30 010	50.37	36 660	40 839
Machinery and equipment	7 724	8 383	11 850	15 499	19 958	19 958	30 010	50.37	36 660	40 839
Transport equipment					1 500	1 500	2 500	66.67	2 500	
Other machinery and equipment	7 724	8 383	11 850	15 499	18 458	18 458	27 510	49.04	34 160	40 839
Software and other intangible assets		2.30	130	12.00	12.00	13.100				
Total economic classification	993 592	1 144 699	1 330 397	1 611 684	1 640 479	1 649 725	1 914 072	16.02	2 041 229	2 279 172

The item Consultants and specialised services includes amongst other Agency staff.

Table B.2.3 Payments and estimates by economic classification – Programme 3: Emergency medical services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Current payments	89 655	124 399	153 329	221 484	222 624	221 043	245 982	11.28	267 902	299 900
Compensation of employees	63 477	79 339	113 814	163 392	158 982	158 824	178 658	12.49	194 218	218 988
Salaries and wages	52 986	67 512	96 734	136 893	134 383	134 225	149 768	11.58	162 767	183 421
Social contributions	10 491	11 827	17 080	26 499	24 599	24 599	28 890	17.44	31 451	35 567
Goods and services	26 178	45 060	39 258	58 092	63 642	62 219	67 324	8.20	73 684	80 912
of which										
Consultants and specialised services	4	15	1 061	265	435	435	307	(29.43)	336	369
Maintenance and repairs and running cost	380	783	532	671	871	871	778	(10.68)	851	935
Medical services	1	18	16	88	88	88	102	15.91	112	123
Medical supplies	631	1 203	1 196	3 126	5 026	5 026	4 710	(6.29)	5 155	5 661
Medicine	137	180	152	294	294	294	341	15.99	373	410
Financial transactions in assets and liabilities			257							
Transfers and subsidies to	49 411	49 858	41 281	12 340	12 450	12 296	16 560	34.68	17 362	18 398
Provinces and municipalities	41 908	40 685	32 585	504	504	350	132	(62.29)		
Municipalities	41 908	40 685	32 585	504	504	350	132	(62.29)		
Municipalities  of which	41 908	40 685	32 585	504	504	350	132	(62.29)		
Regional services council levies	239	232	274	504	504	350	132			
Non-profit institutions	7 503	9 163	8 696	11 836	11 836	11 836	16 428	38.80	17 362	18 398
Households		10			110	110		(100.00)		
Social benefits		10			110	110		(100.00)		
Payments for capital assets	13 844	11 438	3 560	20 646	20 035	20 035	16 457	(17.86)	16 209	20 305
Buildings and other fixed structures					5 600	5 600		(100.00)		
Buildings					5 600	5 600		(100.00)		
Machinery and equipment	13 844	11 438	3 560	20 646	14 435	14 435	16 457	14.01	16 209	20 305
Transport equipment	10 419	5 776		5 075	5 075	5 075	10 345	103.84	9 600	13 100
Other machinery and equipment	3 425	5 662	3 560	15 571	9 360	9 360	6 112	(34.70)	6 609	7 205
Total economic classification	152 910	185 695	198 170	254 470	255 109	253 374	278 999	10.11	301 473	338 603

Table B.2.4 Payments and estimates by economic classification – Programme 4: Provincial hospital services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Current payments	859 986	915 203	1 097 895	1 201 294	1 208 791	1 207 124	1 313 637	8.82	1 404 733	1 503 027
Compensation of employees	644 770	656 465	776 942	856 623	849 105	813 095	933 808	14.85	1 001 261	1 071 635
Salaries and wages	549 847	562 359	672 662	742 797	736 843	700 833	813 163	16.03	872 925	934 971
Social contributions	94 923	94 106	104 280	113 826	112 262	112 262	120 645	7.47	128 336	136 664
Goods and services	215 216	258 738	320 909	344 671	359 686	394 029	379 829	(3.60)	403 472	431 392
Of which								( /		
Consultants and specialised services	1 397	1 754	36 209	39 420	40 536	47 536	43 441	(8.61)	46 148	49 346
Maintenance and repairs and running cost	8 774	10 517	7 895	6 868	9 675	9 675	7 569	(21.77)	8 040	8 540
Medical services	35 205	44 201	68 757	70 441	71 184	71 184	77 626	9.05	82 463	88 178
Medical supplies	48 907	67 125	62 211	67 573	70 587	70 587	74 466	5.50	79 105	85 488
Medicine	32 362	37 129	38 150	39 999	40 116	44 128	44 079	(0.11)	46 825	50 071
Financial transactions in assets and liabilities			44							
Transfers and subsidies to	106 381	129 850	72 379	66 838	67 318	68 985	12 542	(81.82)	12 649	13 403
Provinces and municipalities	1 683	1 858	6 565	2 189	2 196	3 863	572	(85.19)		
Municipalities	1 683	1 858	6 565	2 189	2 196	3 863	572	(85.19)		
Municipalities	1 683	1 858	6 565	2 189	2 196	3 863	572	(85.19)		
of which										
Regional services council levies	1 683	1 858	2 027	2 189	2 196	3 863	572			
Departmental agencies and accounts	58 399	66 408								
Provide list of entities receiving transfers	58 399	66 408								
Hospital Trading Account: Karl Bremer	58 399	66 408								
Universities and technikons		3 682	6 539	7 397	7 717	7 717		(100.00)		
Non-profit institutions	46 223	56 253	57 490	55 845	55 838	55 838	10 342	(81.48)	10 929	11 581
Households	76	1 649	1 785	1 407	1 567	1 567	1 628	3.89	1 720	1 822
Social benefits	76	1 649	1 785	1 407	1 567	1 567	1 628	3.89	1 720	1 822
Payments for capital assets	7 906	7 995	6 367	8 633	11 922	11 922	9 899	(16.97)	10 462	11 086
Machinery and equipment	7 906	7 995	6 360	8 633	11 922	11 922	9 899	(16.97)	10 462	11 086
Transport equipment					600	600		(100.00)		
Other machinery and equipment Software and other intangible assets	7 906	7 995	6 360	8 633	11 322	11 322	9 899	(12.57)	10 462	11 086
L Total economic classification	974 273	1 053 048	1 176 641	1 276 765	1 288 031	1 288 031	1 336 078	3.73	1 427 844	1 527 516

The item Consultants and specialised services includes amongst other Agency staff.

Table B.2.5 Payments and estimates by economic classification – Programme 5: Central hospital services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Current payments	1 427 852	1 549 821	1 727 421	1 838 346	1 853 391	1 852 536	2 008 167	8.40	2 123 226	2 257 300
Compensation of employees	1 005 741	1 006 818	1 117 994	1 196 285	1 177 124	1 163 491	1 315 523	13.07	1 390 293	1 480 621
Salaries and wages	867 388	866 642	975 737	1 060 325	1 043 415	1 029 782	1 170 536	13.67	1 237 065	1 317 219
Social contributions	138 353	140 176	142 257	135 960	133 709	133 709	144 987	8.43	153 228	163 402
Goods and services	422 111	543 003	609 327	642 061	676 267	689 045	692 644	0.52	732 933	776 679
Of which	422 111	343 003	009 321	042 00 1	010 201	009 043	032 044	0.52	132 333	110019
Consultants and specialised services	794	1 114	43 010	45 562	61 019	61 019	49 130	(19.48)	51 991	55 100
Maintenance and repairs and running cost	17 139	24 045	25 337	23 256	29 218	29 218	25 077	(14.17)	26 537	28 124
Medical services	67 228	94 319	174 269	178 365	174 683	174 683	192 334	10.10	203 532	215 703
Medical supplies	146 918	184 345	160 643	169 336	173 383	176 383	182 598	3.52	193 229	204 784
Medicine	99 701	111 689	103 106	110 382	114 450	117 450	119 027	1.34	125 957	133 489
Financial transactions in assets and liabilities			100							
Transfers and subsidies to	39 079	39 079	49 243	48 324	48 324	49 179	7 371	(85.01)	6 869	7 279
Provinces and municipalities	2 410	2 484	3 025	3 322	3 322	3 322	871	(73.78)		
Municipalities	2 410	2 484	3 025	3 322	3 322	3 322	871	(73.78)		
Municipalities	2 410	2 484	3 025	3 322	3 322	3 322	871	(73.78)		
of which										
Regional services council levies	2 410	2 484	3 025	3 322	3 322	3 322	871			
Universities and technikons	36 669	34 221	44 129	43 188	42 588	42 588		(100.00)		
Non-profit institutions							4 595	, ,	4 856	5 146
Households		2 374	2 089	1 814	2 414	3 269	1 905	(41.73)	2 013	2 133
Social benefits		2 374	2 089	1 814	2 414	3 269	1 905	(41.73)	2 013	2 133
Payments for capital assets	9 271	18 189	29 254	49 386	61 768	61 768	70 979	14.91	115 208	98 821
Machinery and equipment	9 271	18 189	29 254	49 386	61 720	61 720	70 979	15.00	115 208	98 821
Other machinery and equipment	9 271	18 189	29 254	49 386	61 720	61 720	70 979	15.00	115 208	98 821
Software and other intangible assets	•				48	48		(100.00)		
Total economic classification	1 476 202	1 607 089	1 805 918	1 936 056	1 963 483	1 963 483	2 086 517	6.27	2 245 303	2 363 400

The item Consultants and specialised services includes amongst other Agency staff.

Table B.2.6 Payments and estimates by economic classification – Programme 6: Health sciences and training

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Current payments	56 791	51 269	42 801	39 518	39 929	37 837	55 326	46.22	88 437	121 702
Compensation of employees	50 361	44 343	35 776	29 945	29 895	27 803	25 220	(9.29)	26 884	28 728
Salaries and wages	42 420	37 317	30 162	25 933	25 883	23 791	21 883	(8.02)	23 325	24 923
Social contributions	7 941	7 026	5 614	4 012	4 012	4 012	3 337	(16.82)	3 559	3 805
Goods and services	6 430	6 926	7 025	9 573	10 034	10 034	30 106	200.04	61 553	92 974
Of which										
Consultants and specialised services	895	970	849	815	815	815	856	5.03	898	944
Maintenance and repairs and running cost	174	199	24	27	27	27	28	3.70	29	31
Medical services			18	10	10	10	11	10.00	12	13
Medical supplies	34	106	3	42	42	42	44	4.76	46	48
Medicine		22								
Transfers and subsidies to	8 060	19 347	30 331	42 867	42 917	42 894	50 395	17.49	53 233	56 410
Provinces and municipalities	164	144	116	96	96	73	25	(65.75)		
Municipalities	164	144	116	96	96	73	25	(65.75)		
Municipalities	164	144	116	96	96	73	25	(65.75)		
of which										
Regional services council levies	164	144	116	96	96	73	25			
Departmental agencies and accounts	1 440	1 654	1 873	1 967	1 967	1 967	2 065	4.98	2 183	2 313
Provide list of entities receiving transfers	1 440	1 654	1 873	1 967	1 967	1 967	2 065	4.98	2 183	2 313
SETA	1 440	1 654	1 873	1 967	1 967	1 967	2 065	4.98	2 183	2 313
Universities and technikons			1 700	2 292	2 292	2 292	1 407	(38.61)	1 487	1 575
Households	6 456	17 549	26 642	38 512	38 562	38 562	46 898	21.62	49 563	52 522
Social benefits			18	10	60	60	11	(81.67)	11	12
Other transfers to households	6 456	17 549	26 624	38 502	38 502	38 502	46 887	21.78	49 552	52 510
Payments for capital assets	530	500	409	1 263	802	802	326	(59.35)	345	365
Machinery and equipment	530	500	409	1 263	802	802	326	(59.35)	345	365
Other machinery and equipment	530	500	409	1 263	802	802	326	(59.35)	345	365
Total economic classification	65 381	71 116	73 541	83 648	83 648	81 533	106 047	30.07	142 015	178 477

Table B.2.7 Payments and estimates by economic classification – Programme 7: Health care support services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Current payments	63 902	70 842	77 611	83 600	83 826	85 698	74 183	(13.44)	78 426	83 104
Compensation of employees	33 820	35 640	38 288	46 196	45 396	42 447	42 160	(0.68)	44 558	47 216
Salaries and wages	28 629	30 305	32 654	40 218	39 418	36 469	36 468	(0.00)	38 542	40 842
Social contributions	5 191	5 335	5 634	5 978	5 978	5 978	5 692	(4.78)	6 016	6 374
Goods and services	30 082	35 202	39 318	37 404	38 430	43 235	32 023	(25.93)	33 868	35 888
Of which	30 002	33 202	33 310	37 404	30 430	+0 200	32 023	(25.55)	33 000	33 000
Consultants and specialised services	986	1 200								
Maintenance and repairs and running cost	9 813	14 914	7 203	6 148	6 148	6 148	6 455	4.99	6 778	7 117
Medical services	1	2 315	823	1 995	1 995	1 995	2 095	5.01	2 200	2 308
Medical supplies	985	1 839	2 072	2 555	2 555	2 555	2 683	5.01	2 817	2 958
Medicine			1							
Financial transactions in assets and liabilities			5			16		(100.00)		
Transfers and subsidies to	2 480	2 114	4 426	2 680	5 426	5 426	2 572	(52.60)	2 693	2 854
Provinces and municipalities	83	87	94	114	114	114	24	(78.95)		
Municipalities	83	87	94	114	114	114	24	(78.95)		
Municipalities	83	87	94	114	114	114	24	(78.95)		
of which										
Regional services council levies	83	87	94	114	114	114	24			
Departmental agencies and accounts	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
Provide list of entities receiving transfers	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
CMD Capital Augmentation	2 392	2 000	4 103	2 419	5 165	5 165	2 540	(50.82)	2 684	2 845
Households	5	27	229	147	147	147	8	(94.56)	9	9
Social benefits	5	27	229	147	147	147	8	(94.56)	9	9
Payments for capital assets	215	881	715	1 177	951	951	725	(23.76)	766	811
Machinery and equipment	215	881	715	1 177	951	951	725	(23.76)	766	811
Other machinery and equipment	215	881	715	1 177	951	951	725	(23.76)	766	811
Total economic classification	66 597	73 837	82 752	87 457	90 203	92 075	77 480	(15.85)	81 885	86 769

Table B.2.8 Payments and estimates by economic classification – Programme 8: Health facilities management

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Current payments	30 210	69 621	66 197	48 538	55 538	55 538	91 681	65.08	103 866	109 957
Compensation of employees							11 036		11 588	12 166
Salaries and wages							9 407		9 967	10 462
Social contributions							1 629		1 621	1 704
Goods and services	30 210	69 621	66 197	48 538	55 538	55 538	80 645	45.21	92 278	97 791
Of which										
Maintenance and repairs and running cost	30 210	69 621	66 197	48 538	48 538	48 538	73 197	50.80	84 269	89 380
Payments for capital assets	70 584	126 555	222 267	248 267	218 187	175 026	233 265	33.27	211 351	213 763
Buildings and other fixed structures	70 584	126 555	222 267	248 267	194 687	151 526	206 585	36.34	211 351	213 763
Buildings	70 584	126 555	222 267	248 267	194 687	151 526	206 585	36.34	211 351	213 763
Machinery and equipment					23 500	23 500	26 500	12.77		
Other machinery and equipment					23 500	23 500	26 500	12.77		
Software and other intangible assets							180			
Total economic classification	100 794	196 176	288 464	296 805	273 725	230 564	324 946	40.94	315 217	323 720

Table B.3 Details on public entities – Name of Public Entity: None

Table B.4 Transfers to local government by transfers/grant type, category and municipality

		Outcome						Medium-tern	n estimate	
Municipalities R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Category A	114 072	132 304	131 074	106 655	108 930	108 930	127 075	16.66	122 928	129 944
City of Cape Town	114 072	132 304	131 074	106 655	108 930	108 930	127 075	16.66	122 928	129 944
Category B	28 540	33 449	40 241	75 393	52 932	52 932		(100.00)		
Beaufort West	1 088	1 131	1 073	879	714	714		(100.00)		
Bergrivier	348	33	3	25						
Bitou	1 631	1 329	2 313	4 363	4 335	4 335		(100.00)		
Breede River/Winelands	801	808	805	1 963	1 133	1 133		(100.00)		
Breede Valley	1 620	1 659	1 745	6 016	4 426	4 426		(100.00)		
Cape Agulhas	63	67								
Cederberg	409	483	588	556	556	556		(100.00)		
Drakenstein	2 777	3 313	6 648	4 955	4 955	4 955		(100.00)		
George	4 650	6 411	5 949	11 874	11 418	11 418		(100.00)		
Kannaland	17	24	1							
Knysna	1 349	1 860	2 004	4 313	4 263	4 263		(100.00)		
Laingsburg	19	32	7							
Hessequa	1 999	1 881	1 871	1 013	1 013	1 013		(100.00)		
Matzikama	470	738	828	686	686	686		(100.00)		
Mossel Bay	2 281	2 231	2 482	5 091	5 001	5 001		(100.00)		
Oudtshoorn	695	603	1 139	1 823	1 570	1 570		(100.00)		
Overstrand	960	1 008	1 056	1 921	1 091	1 091		(100.00)		
Prince Albert	244	342	248	244	244	244		(100.00)		
Saldanha Bay	1 364	1 936	2 284	3 303	3 388	3 388		(100.00)		
Stellenbosch	1 937	2 546	2 727	3 797	3 747	3 747		(100.00)		
Swartland	1 458	1 935	3 990	2 064	1 788	1 788		(100.00)		
Theewaterskloof	1 719	2 487	1 855	2 682	2 152	2 152		(100.00)		
Witzenberg	641	592	625	757	452	452		(100.00)		
Unallocated				17 068				,		
Category C	32 143	36 603	49 372	62 072	48 836	48 836	9 394	(80.76)	9 297	9 010
Cape Winelands	8 448	8 619	16 570	15 752	15 984	15 984	2 074	(87.02)	2 053	1 989
Central Karoo	3 207	3 651	3 356	3 861	3 868	3 868	1 164	(69.91)	1 152	1 116
Eden	7 909	8 468	9 044	11 018	10 593	10 593	2 538	(76.04)	2 512	2 434
Overberg	6 237	7 084	8 640	7 417	7 912	7 912	1 565	(80.22)	1 549	1 501
West Coast Unallocated	6 342	8 781	11 762	11 092 12 932	10 479	10 479	2 053	(80.41)	2 031	1 970
Total transfers to local government	174 755	202 356	220 687	244 120	210 698	210 698	136 469	(35.23)	132 225	138 954

Note: Excludes regional services council levy.

Table B.4.1 Transfers to local government by transfers/grant type, category and municipality (continued)

		Outcome						Medium-tern	n estimate	
Municipalities R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Personal Primary health care services	174 755	202 356	209 752	229 066	195 356	195 356	113 608	(41.85)	116 271	123 211
Category A	114 072	132 304	125 041	99 065	99 065	99 065	113 608	14.68	116 271	123 211
City of Cape Town	114 072	132 304	125 041	99 065	99 065	99 065	113 608	14.68	116 271	123 211
Category B	28 540	33 449	38 253	73 959	52 781	52 781		(100.00)		
Beaufort West	1 088	1 131	923	714	714	714		(100.00)		
Bergrivier	348	33	3	25						
Bitou	1 631	1 329	2 303	4 335	4 335	4 335		(100.00)		
Breede River/Winelands	801	808	805	1 963	1 133	1 133		(100.00)		
Breede Valley	1 620	1 659	1 745	6 016	4 426	4 426		(100.00)		
Cape Agulhas	63	67								
Cederberg	409	483	557	556	556	556		(100.00)		
Drakenstein	2 777	3 313	6 431	4 955	4 955	4 955		(100.00)		
George	4 650	6 411	5 537	11 418	11 418	11 418		(100.00)		
Kannaland	17	24	1							
Knysna	1 349	1 860	1 950	4 263	4 263	4 263		(100.00)		
Laingsburg	19	32	7							
Hessequa	1 999	1 881	1 871	1 013	1 013	1 013		(100.00)		
Matzikama	470	738	808	686	686	686		(100.00)		
Mossel Bay	2 281	2 231	2 403	5 001	5 001	5 001		(100.00)		
Oudtshoorn	695	603	972	1 570	1 570	1 570		(100.00)		
Overstrand	960	1 008	1 056	1 921	1 091	1 091		(100.00)		
Prince Albert	244	342	248	244	244	244		(100.00)		
Saldanha Bay	1 364	1 936	1 915	3 303	3 303	3 303		(100.00)		
Stellenbosch	1 937	2 546	2 453	3 726	3 726	3 726		(100.00)		
Swartland	1 458	1 935	3 785	1 743	1 743	1 743		(100.00)		
Theewaterskloof	1 719	2 487	1 855	2 682	2 152	2 152		(100.00)		
Witzenberg	641	592	625	757	452	452		(100.00)		
Unallocated				17 068				,		
Category C	32 143	36 603	46 458	56 042	43 510	43 510		(100.00)		
Cape Winelands	8 448	8 619	16 438	14 898	14 898	14 898		(100.00)		
Central Karoo	3 207	3 651	3 099	2 927	2 927	2 927		(100.00)		
Eden	7 909	8 468	8 433	9 277	9 277	9 277		(100.00)		
Overberg	6 237	7 084	8 549	6 740	7 140	7 140		(100.00)		
West Coast	6 342	8 781	9 939	9 268	9 268	9 268		(100.00)		
Unallocated				12 932				, ,		

Note: Excludes regional services council levy.

Table B.4.2 Transfers to local government by transfers/grant type, category and municipality (continued)

		Outcome						Medium-term	n estimate	
Municipalities R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appropriation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Integrated Nutrition			4 983	4 800	3 000	3 000	3 000		3 177	3 361
Category A			2 882	3 000	3 000	3 000	3 000		3 177	3 361
City of Cape Town			2 882	3 000	3 000	3 000	3 000		3 177	3 361
Category B			1 081	1 042						
Beaufort West			150	165						
Bitou			10	28						
Cederberg			31							
Drakenstein			75							
George			412	456						
Knysna			54	50						
Matzikama			20							
Mossel Bay			79	90						
Oudtshoorn			167	253						
Saldanha Bay			42							
Stellenbosch			18							
Swartland			23							
Category C			1 020	758						
Cape Winelands			62							
Central Karoo			141	178						
Eden			398	580						
West Coast			419							

Note: Excludes regional services council levy. Due to structural changes comparitive figures cannot be submitted.

Table B.4.3 Transfers to local government by transfers/grant type, category and municipality (continued)

		Outcome						Medium-tern	n estimate	
Municipalities R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appropriation	Revised estimate		% Change from Revised estimate		
	2002/03	2003/04	2004/05	2005/06	2005/06	2005/06	2006/07	2005/06	2007/08	2008/09
Global fund			2 905	7 937	8 639	8 639	12 910	49.44	12 777	12 382
Category A			2 117	3 773	3 773	3 773	3 516	(6.81)	3 480	3 372
City of Cape Town			2 117	3 773	3 773	3 773	3 516	(6.81)	3 480	3 372
Category C			788	4 164	4 866	4 866	9 394	93.05	9 297	9 010
Cape Winelands			70	854	1 086	1 086	2 074	90.98	2 053	1 989
Central Karoo			116	440	625	625	1 164	86.24	1 152	1 116
Eden			213	1 161	1 316	1 316	2 538	92.86	2 512	2 434
Overberg			91	677	772	772	1 565	102.72	1 549	1 501
West Coast			298	1 032	1 067	1 067	2 053	92.41	2 031	1 970

Note: Excludes regional services council levy. Due to structural changes comparitive figures cannot be submitted.

Table B.4.4 Transfers to local government by transfers/grant type, category and municipality (continued)

		Outcome						Medium-term	estimate	
Municipalities R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
HIV and Aids			3 047	2 317	3 703	3 703	6 951	87.71		
Category A			1 034	817	3 092	3 092	6 951	124.81		
City of Cape Town			1 034	817	3 092	3 092	6 951	124.81		
Category B			907	392	151	151		(100.00)		
Drakenstein			142							
Saldanha Bay			327		85	85		(100.00)		
Stellenbosch			256	71	21	21		(100.00)		
Swartland			182	321	45	45		(100.00)		
Category C			1 106	1 108	460	460		(100.00)		
Central Karoo				316	316	316		(100.00)		
West Coast			1 106	792	144	144		(100.00)		

Note: Excludes regional services council levy. Due to structural changes comparitive figures cannot be submitted.

Table B.5 Provincial payments and estimates by district and local municipality

		Outcome						Medium-terr	n estimate	
Municipalities R'000	Audited 2002/03	Audited 2003/04	Audited 2004/05	Main appro- priation 2005/06	Adjusted appropriation 2005/06	Revised estimate 2005/06	2006/07	% Change from Revised estimate 2005/06	2007/08	2008/09
Cape Town Metro	3 222 944	3 706 671	4 220 498	4 428 757	4 482 558	4 448 994	4 877 399	9.63	5 225 863	5 657 343
West Coast Municipalities	101 261	118 152	127 571	198 367	197 023	195 548	218 351	11.66	233 807	252 999
Matzikama	14 246	16 398	17 016	20 292	20 440	20 287	22 336	10.10	23 917	25 881
Cederberg	13 861	15 874	18 072	19 218	19 218	19 074	21 154	10.90	22 651	24 511
Bergrivier	770	666	761	737	712	707	811	14.71	869	940
Saldanha Bay	15 401	17 703	20 307	62 750	63 122	62 649	69 072	10.25	73 961	80 032
Swartland	37 732	45 356	51 890	80 663	75 903	75 335	88 789	17.86	95 074	102 878
West Coast District Municipality	19 251	22 155	19 525	14 707	17 628	17 496	16 189	(7.47)	17 335	18 757
Cape Winelands Municipalities	312 253	370 214	410 323	570 749	551 851	547 718	628 248	14.70	672 719	727 939
Witzenberg	15 786	18 569	21 259	22 300	21 970	21 805	24 547	12.58	26 284	28 442
Drakenstein	104 341	122 131	146 943	182 196	184 449	183 068	200 551	9.55	214 747	232 374
Stellenbosch	32 342	36 302	35 555	40 757	40 951	40 644	44 863	10.38	48 039	51 982
Breede Valley	124 362	138 180	162 674	278 280	257 595	255 666	306 314	19.81	327 997	354 921
Breede River/Winelands	20 406	35 418	27 522	32 318	31 826	31 588	35 574	12.62	38 092	41 219
Cape Winelands District	15 016	19 614	16 370	14 898	15 060	14 947	16 399	9.71	17 560	19 001
Municipality										
Overberg Municipalities	49 668	48 806	67 476	88 050	87 832	87 175	96 920	11.18	103 781	112 299
Theewaterskloof	14 631	17 590	19 712	25 478	24 976	24 789	28 045	13.13	30 030	32 495
Overstrand	11 551	13 896	15 826	23 719	23 309	23 134	26 108	12.86	27 957	30 251
Cape Agulhas	8 085	9 310	10 229	11 312	11 659	11 572	12 452	7.60	13 333	14 427
Swellendam			11 046	14 654	15 001	14 889	16 130	8.34	17 272	18 690
Overberg District Municipality	15 401	8 010	10 663	12 887	12 887	12 791	14 185	10.90	15 189	16 436
Eden Municipalities	232 554	266 275	301 049	410 887	410 115	407 045	452 281	11.11	484 295	524 048
Kannaland	5 775	6 411	7 051	9 077	9 077	9 009	9 991	10.90	10 699	11 577
Hessequa	13 861	16 053	17 886	20 266	20 766	20 611	22 308	8.23	23 887	25 847
Mossel Bay	21 946	26 239	28 849	37 665	37 665	37 383	41 459	10.90	44 394	48 038
George	121 282	136 332	153 753	234 659	230 407	228 682	258 299	12.95	276 582	299 286
Oudtshoorn	32 342	37 730	42 548	51 901	52 901	52 505	57 130	8.81	61 173	66 195
Bitou	3 080	2 286	4 633	5 685	5 935	5 891	6 258	6.23	6 701	7 251
Knysna	20 791	25 285	28 956	32 944	33 444	33 194	36 263	9.25	38 830	42 017
Eden District Municipality	13 476	15 939	17 373	18 690	19 920	19 770	20 573	4.06	22 029	23 837
Central Karoo Municipalities	32 342	37 186	42 282	45 693	47 443	47 087	50 294	6.81	53 854	58 277
Laingsburg	1 925	2 382	2 813	2 905	2 905	2 883	3 198	10.93	3 424	3 705
Prince Albert	3 080	3 624	3 964	4 014	4 264	4 232	4 418	4.40	4 731	5 119
Beaufort West	16 171	18 585	22 549	25 740	26 240	26 044	28 331	8.78	30 339	32 829
Central Karoo District Municipality	11 166	12 595	12 956	13 034	14 034	13 928	14 347	3.01	15 360	16 624
Total provincial expenditure by district and local municipality	3 951 022	4 547 304	5 169 199	5 742 503	5 776 822	5 733 567	6 323 493	10.29	6 774 319	7 332 905

gory	
ate	
by c	
nre	
nct.	
astr	
infr	
for	٢
iture	
end	-
exp	
of	H
tails	
f de	٢
ummary of details of expenditure for infrastructure by category	
nma	
ഗ	
able B.6	
ole l	
Ta	

İ																						
					į	Project duration	luration	Project cost	t cost			2	MTEF 2006/07			MTEF 2007/08	80/200			MTEF	MTEF 2008/09	
	Categories	Region/ district	Munici- pality	descrip- tion	Project Stage	Date:	Date:	Atstart	At com-	Programme	Per- sonnel	Trans- fers	Other costs	Total	Per- sonnel	Trans- fers	Other costs	Total	Per- sonnel	Trans- fers	Other costs	Total
						Start	I SILL		pietion		R'000	R'000	R'000	R'000	R'000	R000	R'000	R'000	R'000	R000	R'000	R'000
N	1. NEW CONSTRUCTION	NO																				
ή. Ο 4 π	OWN FUNDS Atlantis hospital - Replace ambulance	Cape Town	City of Cape Town	Ambulance Station	Construction	Apr 05	Mar 08	1 500	1 720	8.2 Emergency medical rescue services			820	820			850	850				
2 8	station Browns farm	Cape Town	City of Cape Town	Clinic	Construction	Apr 04	Mar 08	4 800	000 9	8.1 Community health facilities			2,500	2,500			1,000	1,000				
8	Delft - Upgrade clinic	Cape Town	City of Cape Town	Clinic	Inception	Apr 08	Mar 10	4 200	4 650	8.1 Community health facilities											200	500
4	Eerste river hospital - Stores	Cape Town	City of Cape Town	Hospital	Retention/ Final account	Apr 04	Mar 06	2 000	2 500	8.3 District hospital services			90	50								
3	Elsies river clinic	Cape Town	City of Cape Town	Clinic	Retention/ Final account	Apr 04	Mar 06	2 900	3 700	8.1 Community health facilities			90	50								
9	Hermanus ambulance	Overberg	Over-strand Clinic	Olinic	Construction	Apr 05	Mar 07	4 300	4 500	8.2 Emergency medical rescue			1,700	1,700			1,350	1,350			200	200
<u> </u>	- Replacement	Eden	Knysna	Clinic	Inception	Apr 08	Mar 10	4 500	2 000	8.1 Community health facilities											90	20
8	mith hospital	Eden	Kannaland	Hospital	Retention/ Final account	Apr 03	Mar 06	1 000	1 050	8.3 District hospital services			20	50								
<u>გ</u>	Maitland - Upgrade clinic	Cape Town	City of Cape Town	Clinic	Inception	Apr 08	Mar 10	3 000	3 500	8.1 Community health facilities											20	20
9	Malmesbury - Wesbank - New clinic	West	Swartland	Clinic	Inception	Apr 07	Mar 09	5 000	2 500	8.1 Community health facilities											20	90
± = =	ommunity ire	spus	Breede River/	Clinic	Construction	Apr 03	Mar 09	2 500	7 000	8.1 Community health facilities			2,000	2,000			3,900	3,900			1,000	1,000
5	Plettenberg Bay - Kwanaokuthula -	Eden	Winelands	Clinic	Inception	Apr 07	Mar 10	6 500	7 000 7	8.1 Community health facilities							200	200			2,000	2,000
6	Replacement clinic Robbie Nurock - Replacement clinic	Cape Town	City of Cape Town	Clinic	Inception	Apr 07	Mar 10	6 500	2 000	8.1 Community health facilities							250	250			5,000	5,000
4 0 T	Simondium community health centre	Cape Winelands	Draken- stein	Clinic	Construction	Apr 03	Mar 08	5 000	5 400	8.1 Community health facilities			2,200	2,200			3,050	3,050				
5	Stanford community	Overberg	Over-strand Clinic	Olinic	Construction	Apr 04	Mar 08	2 000	5 400	8.1 Community health facilities			2,200	2,200			3,000	3,000				
	>	Overberg	Swellen- dam	Clinic	Construction	Apr 03	Mar 08	2 200	_	8.1 Community health facilities			4,200	4,200			1,200	1,200				
<del>- 2</del>	Table View - De Noon - New clinic	Cape Town	City of Cape Town	Clinic	Inception	Apr 07	Mar 10	2 000	2 200	8.1 Community health facilities							200	200			3,450	3,450
81	Wellington community health centre	Cape	Draken- stein	Clinic	Construction	Apr 04	Mar 09	4 300	8 000	8.1 Community health facilities			2,200	2,200			3,000	3,000			2,700	2,700
6	ape Nursing ectrical		City of Cape Town	Other facilities	Retention/ Final account	Aug 01	Jun 06			8.6 Other facilities			20	20								
8	contractor GF Jooste hospital - Upgrading & renovation	Cape Town	City of Cape Town	Hospital	Retention/ Final account	Aug 03	Jun 06	4 000	000 6	8.4 Provincial hospital services			10	10								
27	Cape Medical Depot - airconditioning	Cape Town	City of Cape Town	Other facilities	Inception	Apr 06	Jun 06	1 000	1 000	8.6 Other facilities			1,000	1,000								
Tota	Total own new construction	uction											19,000	19,000			18,000	18,000			18,000	18,000

by category
چ
infrastructure
<u>ō</u>
f expenditure fo
5
y of details
0
Summary
9
B
able B.6

Tak	Table B.6 Summa	ary of c	letails c	of exper	Summary of details of expenditure for infrastructure by category	۲ infra	struct	ure by c	ategory													
					(	Project	Project duration		Project cost			2	MTEF 2006/07			MTEF 2007/08	80/200			MTEF 2	MTEF 2008/09	
	Categories	Region/ district	Munici- pality	Project descrip- tion	Current Project Stage	Date: Start	Date: Finish	Atstart	At com- pletion	Programme		Trans- fers	Other costs	Total	Per- sonnel costs	Trans- fers	Other	Total	Per- sonnel costs	<u> </u>	Other costs	Total
2. 8		UPGRAD	NG ING								K.000	R.000	R.000	R.000	R'000	R000	R,000	7.000 0.000	R.000	8000	R.000	R.000
	PIG																					
- <del>-</del>	Alexandra hospital - Rationalisation	Cape Town	City of Cape Town	Hospital	Inception	Apr 06	Mar 09	12 000	13 000	8.4 Provincial hospital services			800	800			4,000	4,000			11,770	11,770
2, 6	Bredasdorp hospital - Ambulance station	Overberg	Cape Augulhas Breede	Ambulance Station	Inception	Jun 05	Mar 06	700	750	8.2 Emergency medical rescue services			069	069			20	9 8			740	740
	ambulance station G F Jooste - AIDS centre		River / Winelands City of	Station		Apr 07	Mar ar			services 8.1 Community health facilities							800	8 8			3,959	3,959
			Cape Town			į				6								8				8
2	Heidelberg - New ambulance station	Eden	Langeberg	Ambulance Station	Inception	Apr 07	Mar 09	1 500	1 800	8.2 Emergency medical rescue services							1,000	1,000			856	826
φ	Swellendam hospital - Improve ambulance	Overberg	Swellen- dam	Ambulance Station	Inception	Apr 07	Mar 08	1 800	2 100	8.2 Emergency medical rescue services							1,800	1,800			310	310
^	station Hermanus ambulance	Overberg	Over-strand	Ambulance	Planning	Apr 05	Mar 08	4 300	2 000	8.2 Emergency medical rescue			4,600	4,600			200	200				
ω	skation Brooklyn Chest hospital	Cape Town	City of Cape Town		Inception	Apr 06	Mar 09	15 000	17 000	services 8.4 Provincial hospital services			1,000	1,000			000'9	9'000'9			10,700	10,700
0	Caledon hospital	Overberg	Theewaters	Hospital	Planning	Apr 05	Mar 09	2 000	7 500	8.3 District hospital services			3,300	3,300			2,500	2,500			535	535
9	Caledon hospital - Ambulance station	Overberg	Theewaters kloof	Ambulance	Planning	May 05	Jun 07	800	850	8.2 Emergency medical rescue			800	800			20	20				
7	Ceres hospital -	Cape	Witzen-berg		Inception	Apr 05	Mar 08	4 000	4 500	8.2 Emergency medical rescue			490	490			4,000	4,000				
12	Ambulance station De Dooms hospital -	Cape	Breede	Ambulance	Inception	May 06	Feb 07	100	100	8.2 Emergency medical rescue			100	100								
55	Eerste River Hospital	Cape Town	City of Cape Town		Inception	Apr 04	Mar 09	000 9	7 200	8.3 District hospital services			200	200			3,000	3,000			4,280	4,280
4	Hermanus Hospital - PPP	Overberg	Over-	Hospital	Planning	Apr 05	Mar 08	ЬРР	ЬРР	8.3 District hospital services			2,982	2,982			2,982	2,982			3,190	3,190
15 1	Lamberts Bay hospital - Ambulance station	West	Cederberg	Ambulance	Inception	Apr 06	Mar 07	300	320	8.2 Emergency medical rescue			320	320								
91	Lentegeur hospital - Ambulance station	Cape Towr	City of Cape Town		Planning	Apr 05	Mar 08	1 500	3 500	8.2 Emergency medical rescue services			1,800	1,800			1,500	1,500				
17	Beaufort West - New ambulance station	Central Karoo	Beaufort West	Ambulance Station	Inception	Apr 06	Mar 08	3 000	5 000	8.2 Emergency medical rescue services			1,000	1,000			4,000	4,000				
8	Mossel bay hospital	Eden	Mossel Bay		Inception	Apr 05	Mar 09	20 000	30 000	8.3 District hospital services			1,000	1,000			12,000	12,000			16,050	16,050
6	Mowbray maternity hospital	Cape Town	City of Cape Town	Hospital	Construction	Apr 04	Sep 06	30 000	48 200	8.4 Provincial hospital services			16,200	16,200			200	200				
8	Oudtshoorn hospital -	Eden	Oudts-	Ambulance	Inception	Apr 06	Mar 08	1 000	1 200	8.2 Emergency medical rescue			1,000	1,000			200	200				
2	Oudtshoorn hospital -	Eden	Oudts-	Hospital	Planning	Apr 05	Mar 07	1 500	1 700	8.6 Other facilities			1,500	1,500								
	Riversdale hospital	Eden	Langeberg	Hospital	Planning	Apr 05			_	8.3 District hospital services			7,000	7,000			5,000	5,000				
83	Riversdale hospital - Ambulance station	Eden	Langeberg	Ambulance Station	Inception	Apr 05	Dec 05	1 000	1 200	8.2 Emergency medical rescue services			006	006			300	300				
24	Stellenbosch hospital - Ambulance station	Boland	Draken- stein	Ambulance Station	Inception	Mar 06	Dec 06	009	750	8.2 Emergency medical rescue services			009	009			150	150				
52	Stikland hospital	Cape Town	City of Cape Town		Construction	Apr 04	Apr 06	3 500	4 000	8.4 Provincial hospital services			200	200								
1											1	1										

>
ŏ
ğ
\$
by category
şb
w
₽
ਹ
2
st
G
₹
₽
penditure for infrastructur
ø
expenditure
≝
٦
₫
å
õ
ᇰ
S
≝
ñ
쁑
Ψ.
/ of details
Summary
a
Ξ
ξ
ळ
ဖ
m
ble I
虿

Tab	Table B.6 Summa	Summary of details of expenditure for infrastructure by category	tails o	fexpen	diture for	r infras	structu	re by c	ategory													
				100		Project duration	uration	Project cost	t cost			-	MTEF 2006/07			MTEF 2007/08	80/200			MTEF	MTEF 2008/09	
	Categories	Region/ I	Munici- pality	descrip- tion	Project Stage	Date:	Date:	Atstart	At com-	Programme	Per- sonnel	Trans- fers	Other costs	Total	Per- sonnel	Trans- fers	Other	Total	Per- sonnel costs	Trans- fers	Other costs	Total
						100			Dielio		R'000	R'000	R'000	R'000	R'000	R000	R'000	R'000	R'000	R000	R'000	R'000
26 T)	Tygerberg Hospital - Interim measures	Cape Town Cit	City of Cape Town	Hospital	Planning	Apr 07	Mar 09	20 000	30 000 08	3.5 Central hospital services			1,500	1,500			12,500	12,500			14,333	14,333
27 G	Groote Schuur Hospital - Interim measures	Cape Town City of Cape Town		Hospital	Inception	Apr 07	Mar 09	18 000	25 000 8	8.5 Central hospital services			1,500	1,500			12,500	12,500			14,333	14,333
28 × ×	Red Cross Hospital - Ward Upgrades	Cape Town City of Cape Town		Hospital		Apr 07	Mar 09	7 500	10 000 8	8.5 Central hospital services							4,430	4,430			4,815	4,815
58	Valkenberg forensic wards	Cape Town City of Cape Town		Hospital	Inception	Apr 04	Mar 09	20 000	57 500 8	8.4 Provincial hospital services			2,000	2,000								
% <u>%</u>	Valkenberg hospital: Admissions	Cape Town Cit	City of Cape Town	Hospital	Construction	Apr 01	Jun 06	8 946	16 410 8	8.4 Provincial hospital services			200	200								
31	Vredendal Hospital	West Ma	Matzikama	Hospital	Planning	Apr 05	Mar 07	2 000	3 000 8	8.3 District hospital services			2,950	2,950								
32	iberg Hospital - lectrified Perimeter	Cape Town City of Cape Town		Hospital	Tender	Oct 05	Mar 07	3 000	3 000 8	8.4 Provincial hospital services			2,500	2,500								
8 8	Fence Groote Schuur Office Accommodation	Cape Town City of Cape Town		Hospital	Planning	Oct 05	Jun 06	1 000	1 200 8	8.5 Central hospital services			1,000	1,000								
¥ 4 &	Atlantis Hospital - Replacement of roof	Cape Town City of Cape Town		Hospital	Construction	Apr 05	Jun 06	2 600	200 8	8.3 District hospital services			200	200								
£ 28	Tygerberg - Fire Doors	Cape Town City of Cape Town		Hospital	Tender	Oct 05	Jun 06	3 500	3 897 8	8.5 Central hospital services			2,897	2,897								
	SUB TOTAL: PIG												61,829	61,829			80,262	80,262			85,880	85,880
+. <b>I</b> 0 5	e e	Eden Ge	George	Hospital	Construction	Apr 00	Jul 06	55 000	005 62	8.4 Provincial hospital services			7.737	7,737								
۷i <u>۲۷ ۲۲</u>	2C Khayelitsha hospital	Cape Town Cit	City of Cape Town	Hospital	Planning	Apr 05	Mar 10	215 000	230 000	8.3 District hospital services			8,000	8,000			8,000	8,000			57,295	57,295
ю <u>«</u>	Paarl hospital	Cape		Hospital	Tender	Oct 00	Mar 08	220 000	240 000	8.4 Provincial hospital services			30,104	30,104			56,319	56,319			45,593	45,593
4.	Vredenburg hospital	Spu	а	Hospital	Construction	Apr 00	Mar 07	48 304	55 550 8	8.3 District hospital services			14,198	14,198			5,167	5,167				
5.	Worcester hospital	Cape Brown		Hospital	Construction	Apr 00	Aug 08	147 776	195 700	8.4 Provincial hospital services			71,000	71,000			18,814	18,814			779	677
Θ.	Mitchell's Plain hospital	Cape Town Ci	City of Cape Town	Hospital	Inception	Apr 06	Mar 10	215 000	230 000	8.3 District hospital services												
>	Victoria hospital	Cape Town Cit	City of Cape Town	Hospital	Inception	Apr 06	Mar 10	215 000	230 000	8.4 Provincial hospital services												
ω ω	Hottentots Holland hospital	Cape Town City of Cape Town		Hospital	Inception	Apr 07	Mar 11	215 000	230 000	8.4 Provincial hospital services												
<u>ა</u>	Valkenberg Hospital	Cape Town City of Cape Town		Hospital	Inception	Apr 06	Apr 10	481 000	490 000 8	8.4 Provincial hospital services												
10 H	HMQIG									3.1 Community health facilities	200		300	500	210		315	525	220		332	552
										5.3 District nospital services 3.4 Provincial hospital services	4,023		3,448	5,232	4,224		3,620	7,844	4,435		3,802	3,623
										3.5 Central hospital services	3,660		1,241	4,901	3,843		1,303	5,146	4,035		1,368	5,403
oto 6										3.6 Other facilities	1,500		1,000	2,500	1,575		1,050	2,625	1,654		1,102	2,756
	SUB TOTAL HRP										11,036		138,667	149,703	11,588		96,309	107,897	12,166		112,078	124,244
	Total rehabilitation/upgrading	grading									11,036		200,496	211,532	11,588		176,571	188,159	12,166		197,958	210,124
																						1

Table B.6 Summary of details of expenditure for infrastructure by category

									,													
					1	Project duration	luration	Project cost	cost				MTEF 2006/07			MTEF 2	MTEF 2007/08			MTEF	MTEF 2008/09	
Categories		Region/ district	Munici- pality	descrip- tion	Project Stage	Date: Start	Date: Finish	At start	At com-	Programme	Per- sonnel	Trans- fers	Other costs	Total	Per- sonnel costs	Trans- fers	Other	Total	Per- sonnel costs	Trans- fers	Other costs	Total
											R'000	R.000	R'000	R'000	R'000	R000	R'000	R.000	R.000	R000	R'000	R.000
3. OTHER CAPITAL PROJECTS	PITAL PRO	<b>OJECTS</b>																				
1 Forensic pathology services	logy			-	Inception and construction	Apr 06	Apr 09	54 972	55 000	8.6 Other facilities			21,217	21,217			24,789	24,789			6,216	6,216
Total other capital projects	oital proje	cts											21,217	21,217			24,789	24,789			6,216	6,216
4. RECURRENT MAINTENANCE	IT MAINTE	ENANCE																				
Vote 6: Health										8.1 Community health facilities			8,015	8,015			9,130	9,130			8/9'6	9,678
										8.3 District hospital services			13,019	13,019			14,830	14,830			15,720	15,720
										8.4 Provincial hospital services			23,596	23,596			26,879	26,879			28,491	28,491
									_	8.5 Central hospital services			22,387	22,387			25,502	25,502			27,032	27,032
									_	8.6 Other facilities			6,180	6,180			7,928	7,928			8,459	8,459
														1								
Total recurrent maintenance	t mainten:	ance											73,197	73,197			84,269	84,269			89,380	89,380
Total infrastructure	cture										11,036		313,910	324,946	11,588		303,629	315,217	12,166		311,554	323,720

NOTE:
The HRP allocation is funded per project and the "per year" funds is determined by the predicted cashflow. Business cases for Mitchell's Plain Hospital, Khayelitsha Hospital and Valkenberg Hospital have been submitted to National Health for approval. Once the business cases are approved the project is funded.

229 Vote 6: Health