



VOTE 16

HEALTH



BUDGET 2017

ESTIMATES
OF NATIONAL
EXPENDITURE



national treasury

Department:
National Treasury
REPUBLIC OF SOUTH AFRICA



Estimates of National Expenditure

2017

National Treasury

Republic of South Africa

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The Estimates of National Expenditure 2017 is compiled with the latest available information from departmental and other sources. Some of this information is unaudited or subject to revision.

The Estimates of National Expenditure e-publications for individual votes are available on www.treasury.gov.za. Compared to the Estimates of National Expenditure publication, the e-publications for each vote contain more comprehensive coverage of all public entities. Also included are tables containing information on programme specific personnel expenditure, conditional grants to provinces and municipalities, public private partnerships and information on donor funding. Expenditure information at the level of site service delivery is included, where appropriate.

Foreword

The 2017 Budget is presented at a time when indications are that the global economy could grow moderately better than the last forecast. Global GDP is expected to grow at 3.4 per cent in 2017, 0.3 percentage points higher than 2016. But uncertainty persists. The trade policies that the United States of America will pursue are unclear. The exact nature of Britain's exit from the European Union and economic impact are unknown. There is also evidence that globalisation is losing favour in some parts of the world and protectionism is growing. The global economy could be very different in future, depending on how these trends evolve.

Given the uncertainty, we have revised down South Africa's GDP growth projections and expect that tax revenue will be lower over the MTEF period as a result. We have also reduced the expenditure ceiling by R10.3 billion in 2017/18 and R15.9 billion in 2018/19, in line with government's fiscal objective of reducing the deficit, achieving a primary surplus and stabilising debt. Since its introduction in 2012, the expenditure ceiling in each financial year has never been breached.

Government is committed to delivering on its priorities despite the lowered revenue forecast and expenditure ceiling. It is critical that we allocate our limited resources wisely and use them effectively. In the 2017 Budget process, measures were taken to free-up resources and baselines were reduced across all departments by R7.5 billion in 2017/18, R7 billion in 2018/19 and R6.7 billion in 2019/20. The contingency reserve was also drawn down, and provisionally reserved funds were reallocated. However, the bulk of the funds allocated to priority areas within and across functions were reprioritised from lower-priority budget areas.

To ensure that funding remains focused on frontline service delivery, efforts have been intensified to improve efficiency in expenditure. Budget limits on compensation of employees introduced in the 2016 Appropriation Act are carried over to 2017. Departments will manage personnel headcount and employee earnings in line with these budget allocations.

Overall non-interest expenditure is still set to grow by an annual average of 1.4 per cent in real terms, from R1.24 trillion in 2017/18 to R1.43 trillion in 2019/20. Proposals in the budget include net increases in funding for the Post-School Education and Training, Basic Education, Economic Affairs and Health functions. The Post-School Education and Training function is the fastest growing, at 9.4 per cent over the medium term. The funding is mainly for universities to subsidise fee increases and for the National Student Financial Aid Scheme.

The publication is a concrete expression of the collaborative effort of highly dedicated civil servants across government throughout the process to prepare the Budget. We are particularly appreciative of this, as well as the contributions from the Ministers' Committee on the Budget and the Directors-General in central government. We are also thankful to all National Treasury staff who, under the expert guidance and leadership of the Minister of Finance, Pravin Gordhan, and his Deputy, Mcebisi Jonas, worked tirelessly to produce this crucial document.

The wide-ranging coverage of the Estimates of National Expenditure provides a coherent and summarised account of the prioritisation, spending plans and service delivery commitments of all 40 national votes and of government agencies. These plans constitute an important mechanism through which Parliament and the public hold institutions, including the National Treasury and its entities, to account.

Within the current difficult fiscal context not everything we believe would be beneficial to do, can be done now. Thus it is imperative that activities planned on budget be done effectively and efficiently.



Lungisa Fuzile
Director-General: National Treasury

Introduction

The Estimates of National Expenditure publications

The Estimates of National Expenditure (ENE) publications describe in detail government's expenditure plans over the next three financial years, also known as the medium-term expenditure framework (MTEF) period. The 2017 MTEF period is from 2017/18 to 2019/20.

The ENE publications contain information on: what government institutions aim to achieve over the medium term, and why; how they plan to spend their budget allocations in support of this; and what outputs and outcomes the spending is intended to produce. The publications also provide information on how institutions have spent their budgets in previous years, tables with performance data and targets, personnel data and detailed expenditure trends and estimates by programme, subprogramme and economic classification for each department and the entities that report to the vote's executive authority. Explanatory narratives detail the institution's mandate, purpose (and that of its programmes), together with programme-level objectives and descriptions of subprogrammes. Summary data tables at the end of each vote contain data on infrastructure, provincial and municipal conditional grants, departmental public private partnerships, donor funding, and expenditure at the level of site service delivery, where applicable.

A separate 2017 ENE Overview publication is also available on www.treasury.gov.za and summarises the ENE information across all votes. The 2017 ENE Overview contains a narrative explanation and budget-wide summary tables; a description of the budgeting approach; and it also has a write-up on how to interpret the information that is contained in each section of the publications.

Health

**National Treasury
Republic of South Africa**



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Vote 16

Health

Budget summary

R million	2017/18				2018/19	2019/20
	Total	Current payments	Transfers and subsidies	Payments for capital assets	Total	Total
MTEF allocation						
Administration	512.8	506.0	2.3	4.6	547.5	582.5
National Health Insurance, Health Planning and Systems Enablement	735.1	700.1	28.4	6.6	992.8	1 047.4
HIV and AIDS, Tuberculosis, and Maternal and Child Health	18 278.3	532.8	17 729.3	16.3	20 745.6	22 909.4
Primary Health Care Services	264.3	256.1	3.0	5.3	293.1	315.1
Hospitals, Tertiary Health Services and Human Resource Development	21 108.2	315.5	19 962.5	830.2	22 301.1	23 640.8
Health Regulation and Compliance Management	1 727.0	94.3	1 630.0	2.7	1 786.9	1 889.9
Total expenditure estimates	42 625.7	2 404.7	39 355.4	865.6	46 667.0	50 384.9
Executive authority	Minister of Health					
Accounting officer	Director General of Health					
Website address	www.doh.gov.za					

The Estimates of National Expenditure e-publications for individual votes are available on www.treasury.gov.za. These publications provide more comprehensive coverage of vote specific information, particularly about goods and services, transfers and subsidies, personnel, entities, donor funding, public private partnerships, conditional grants to provinces and municipalities, and expenditure information at the level of site service delivery, where appropriate.

Vote purpose

Provide leadership and coordination of health services to promote the health of all people in South Africa through an accessible, caring and high quality health system, based on the primary health care approach.

Mandate

The Department of Health derives its mandate from the National Health Act (2003), which requires that the department provide a framework for a structured and uniform health system for South Africa. The act sets out the responsibilities of the three levels of government in the provision of health services. The department contributes directly to the realisation of outcome 2 (a long and healthy life for all South Africans) of government's 2014-2019 medium-term strategic framework.

Selected performance indicators

Table 16.1 Performance indicators by programme and related outcome

Indicator	Programme	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Total number of primary health care facilities implementing improved patient administration and web-based information systems	National Health Insurance, Health Planning and Systems Enablement	Outcome 2: A long and healthy life for all South Africans	-1	50	657	1 450	2 450	3 000	3 656
Total number of health facilities reporting medicine stock availability at national surveillance centre	National Health Insurance, Health Planning and Systems Enablement		-1	600	1 859	3 244	3 261	3 363	3 898
Total number of patients receiving medicine through the centralised chronic medicine dispensing and distribution system	National Health Insurance, Health Planning and Systems Enablement		-1	200 000	396 567	650 000	950 000	1 000 000	1 500 000
Percentage of human papillomavirus immunisation first dose coverage per year	HIV and AIDS, Tuberculosis, and Maternal and Child Health		-1	-1	91.8% (427 400/ 500 933)	87%	87%	88%	90%
Total number of clients remaining on antiretroviral treatment at the end of the year	HIV and AIDS, Tuberculosis, and Maternal and Child Health		2.7 million	3.1 million	3.4 million	4.3 million	4.5 million	5 million	5.5 million
Tuberculosis new client treatment success rate ²	HIV and AIDS, Tuberculosis, and Maternal and Child Health		80.8% (98 155/ 121 428)	82.4% (95 928/ 116 349)	83.3% (80 180/ 95 318)	84%	86%	88%	90%

Table 16.1 Performance indicators by programme and related outcome

Indicator	Programme	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Infant polymerase chain reaction test positive around 10 weeks rate per year ³	HIV and AIDS, Tuberculosis, and Maternal and Child Health	Outcome 2: A long and healthy life for all South Africans	2% (4 932/ 247 619) ⁴	1.5% (3 801/ 252 269) ⁴	1.5% (2 495/ 169 656) ⁴	1.4%	1.35%	1.33%	1.3%
Total number of functional ward-based primary health care outreach teams	Primary Health Care Services		1 063	1 748	2 590	2 000	2 000	2 000	2 000
Number of additional primary health care facilities in the 52 districts that qualify as ideal clinics per year	Primary Health Care Services		- ¹	- ¹	322	750	750	750	600
Total number of commercial points of entry that provide port health services that are compliant with international health regulations	Primary Health Care Services		- ¹	- ¹	- ¹	- ¹	20	35	35
Number of facilities maintained, repaired and/or refurbished in national health insurance districts	Hospitals, Tertiary Health Services and Human Resource Development		- ¹	94	190	178	197	125	182
Percentage of backlog eliminated for blood alcohol tests	Hospitals, Tertiary Health Services and Human Resource Development		- ¹	- ¹	- ¹	- ¹	100%	- ⁵	- ⁵

1. No historical data available.

2. This indicator is reported on with a time lag of one year.

3. This is an indicator for mother-to-child transmission of HIV, which shows the infants tested positive for HIV within 10 weeks as a proportion of all live births by HIV-positive mothers.

4. Indicator has changed from 6 weeks to 10 weeks in line with the new guidelines on the prevention of mother-to-child transmission. The historical performance is for a rate at 6 weeks after birth.

5. Once the backlog is eliminated, this indicator will be revised to measure turnaround time.

Expenditure analysis

The department will focus in the period ahead on expanding treatment and prevention programmes for HIV and AIDS and tuberculosis (TB), revitalising public health care facilities and ensuring that specialised tertiary hospital services are provided. Spending on these activities is set to account for 85.4 per cent, or R119.2 billion, of the department's total budget over the MTEF period. A further R885.3 million has been added to the baseline in 2019/20 for increased distribution of antiretroviral treatment and R600 million over the MTEF period has been added to support the operations of the newly built Nelson Mandela Children's Hospital. The department transfers 88.3 per cent, or R123.4 billion, of its budget over the medium term to provincial departments of health through conditional grants.

The department's budget for compensation of employees has been reduced by R9.7 million in 2017/18, R10.7 million in 2018/19 and R11.3 million in 2019/20, due to the Cabinet-approved budget reductions to lower the national aggregate expenditure ceiling. In April 2017, 209 employees will leave the health regulation and compliance management programme to work for the newly established South African Health Products Regulatory Authority. This will reduce the allocation for compensation of employees by R344.6 million over the medium term. The authority will be responsible for the regulation and control of registering, licensing, manufacturing and importing of active pharmaceutical ingredients, medicines and medical devices; and for conducting clinical trials in a manner compatible with the national medicines policy. In total, the authority will receive R397.6 million in transfers from the department. The authority will also fund its operations by collecting and retaining fees from the pharmaceutical and health products industry.

Expanding HIV and AIDS, and TB treatment and prevention

The HIV and TB investment cases were two major cost-effectiveness projects carried out in 2015/16 to identify the ideal mix of interventions for addressing the HIV and AIDS, and TB epidemics. Implementing the recommendations from these investment cases is expected to result in an increase in spending in the *HIV and AIDS, Tuberculosis, and Maternal and Child Health* programme, from R16 billion in 2016/17 to R22.9 billion in 2019/20, at an average annual rate of 12.8 per cent over the medium term

The department has adopted the 90-90-90 targets of the United Nations programme on HIV and AIDS. These targets commit government to ensuring that by 2020, 90 per cent of all people living with HIV will know their status; 90 per cent of all people diagnosed with HIV will receive sustained antiretroviral therapy, and 90 per cent of all people receiving antiretroviral therapy will be virally suppressed. In September 2016, the department implemented the universal test-and-treat policy, which states that the department should offer treatment to everyone diagnosed with HIV, regardless of their CD4 count. An allocation of R885.3 million added to the *comprehensive HIV, AIDS and TB grant* in 2019/20 funds the provision of antiretroviral treatment

to 5.5 million people living with HIV. Spending on the grant is projected to increase by 13 per cent over the medium term, despite being reduced by R102.4 million in 2017/18 and R110.2 million in 2018/19.

The *comprehensive HIV, AIDS and TB grant* has a dedicated R200 million in 2017/18 and R460 million in 2018/19 to equip provinces with the tools to implement the TB investment case recommendations, such as intensifying screening campaigns to ensure early detection and treatment. These funds are channelled to provincial health departments through the grant in the *HIV and AIDS, Tuberculosis, and Maternal and Child Health* programme. This spending is expected to improve detection and contribute to increasing the success rate of TB treatment from 84 percent in 2016/17 to 90 percent in 2019/20.

Revitalising public health care facilities

A baseline audit of all health care facilities in South Africa found that many facilities require major refurbishment, with some requiring full replacement. The department is in the process of finalising a 10-year infrastructure plan to assist in determining the areas with the greatest need for investment. The department will invest R20.8 billion in healthcare infrastructure over the MTEF period. These funds will be managed as two conditional grants in the *Health Facilities Infrastructure Management* subprogramme in the *Hospitals, Tertiary Health Services and Human Resource Development* programme. The budget for these grants is set to increase at an average annual rate of 6.8 per cent over the medium term. The direct *health facility revitalisation grant* is transferred to provincial departments of health to fund the building of new facilities and the upgrading, refurbishing and maintenance of existing health facilities. A total of R17.8 billion is allocated for this grant over the medium term, after Cabinet-approved reductions of R363.6 million. The health facility revitalisation component of the *national health insurance indirect grant* is allocated R3 billion over the medium term. This grant is exclusively for infrastructure improvements in the 11 national health insurance pilot districts. The department is working closely with implementing agents to ensure that all 872 primary health care facilities in these districts are maintained, constructed or revitalised by 2019/20.

Ensuring accessible specialised tertiary health services

Tertiary health services are highly specialised, hospital-based health care services that require strong national coordination as a result of their unequal distribution across South Africa. Consequently, many patients are forced to seek specialised care in neighbouring provinces because the required tertiary services are not available in their home province. To compensate provinces for treating patients from other provinces, the department will continue to subsidise funding for tertiary health services in 28 hospitals and hospital complexes through the direct *national tertiary services grant* over the medium term. The grant pays for specialised personnel, equipment, advanced medical investigation and treatment according to approved service specifications, and will also support the modernisation of tertiary facilities by upgrading medical equipment. Amounts of R11.7 billion in 2017/18, R12.4 billion in 2018/19 and R13.2 billion in 2019/20 are to be transferred through the *Hospitals, Tertiary Health Services and Human Resource Development* programme.

Although the construction of the Nelson Mandela Children's Hospital in Gauteng was funded by donations to the Nelson Mandela Children's Hospital Trust, the hospital will rely largely on government for operational funding. Amounts of R150 million in 2017/18, R200 million in 2018/19 and R300 million in 2019/20 have been allocated to the *national tertiary services grant* in the Gauteng department of health to provide highly specialised paediatric services to patients from all across southern Africa.

National health insurance

National health insurance is a health financing system designed to provide access to affordable personal health care services for all South Africans. Over the medium term, the department will focus on finalising and gazetting the White Paper on national health insurance, drafting and publishing the National Health Insurance Bill for public consultation and creating a national health insurance fund, which is expected to be the main purchaser of health care services in South Africa. In preparation for the scheme, the department will recruit private health care professionals, roll out electronic patient registration and medicines stock management systems, and implement the dispensing and distribution model for new central chronic medicines. Overall, R5.2 billion is allocated specifically for National Health Insurance over the medium term period, the majority of which is allocated to the *national health insurance indirect grant*.

A total of R1 billion is earmarked for the recruitment of health professionals and to ensure that 1.5 million chronic patients access their medication through a centralised, chronic medicine-dispensing and distribution system. This will improve access to chronic medicines and alleviate the pressure on public health facilities. Over the medium term, R967.8 million is allocated to implement the patient-registration system and an electronic stock management system from the *national health insurance indirect grant*, by the end of the current MTEF period. Funding for these interventions falls under the *National Health Insurance, Health Planning and Systems Enablement* programme, with spending increasing by 21.2 per cent per year over the medium term.

The ideal clinic component of the *national health insurance indirect grant* falls under the *Primary Health Care Services* programme and has been allocated a total of R132.8 million over the medium term to allow the department to bring a total of 3 172 primary health care facilities up to an ideal status by 2019/20.

Expenditure trends

Table 16.2 Vote expenditure trends by programme and economic classification

Programmes																																	
1. Administration																																	
2. National Health Insurance, Health Planning and Systems Enablement																																	
3. HIV and AIDS, Tuberculosis, and Maternal and Child Health																																	
4. Primary Health Care Services																																	
5. Hospitals, Tertiary Health Services and Human Resource Development																																	
6. Health Regulation and Compliance Management																																	
Programme	Annual budget			Adjusted appropriation			Audited outcome			Annual budget			Adjusted appropriation			Audited outcome			Annual budget			Adjusted appropriation			Audited outcome			Average: Outcome/Annual budget (%)			Average: Outcome/Adjusted appropriation (%)		
R million	2013/14			2014/15			2015/16			2016/17			2013/14 - 2016/17			2013/14 - 2016/17			2013/14 - 2016/17			2013/14 - 2016/17			2013/14 - 2016/17			2013/14 - 2016/17					
Programme 1	411.0	405.7	347.3	389.7	389.7	386.5	457.1	456.6	438.5	463.5	462.0	462.0	95.0%	95.4%																			
Programme 2	491.9	491.8	222.6	652.0	658.9	338.2	587.8	596.6	553.1	559.8	588.6	588.6	74.3%	72.9%																			
Programme 3	10 829.9	10 842.8	10 763.5	12 840.7	12 840.7	12 818.7	14 442.1	14 378.9	14 179.0	16 018.6	16 009.6	15 979.6	99.3%	99.4%																			
Programme 4	214.0	207.2	183.5	200.5	216.2	206.3	225.0	224.9	212.6	257.8	256.5	256.5	95.7%	94.9%																			
Programme 5	17 908.2	17 715.4	17 493.2	18 929.5	18 816.5	18 448.6	19 159.1	18 970.0	19 002.3	19 573.5	19 574.0	19 514.0	98.5%	99.2%																			
Programme 6	1 252.1	1 261.7	1 214.4	1 367.6	1 403.1	1 340.7	1 596.9	1 603.9	1 599.4	1 690.2	1 706.7	1 706.7	99.2%	98.1%																			
Total	31 107.1	30 924.6	30 224.5	34 380.0	34 325.1	33 539.0	36 468.0	36 230.9	35 984.9	38 563.3	38 597.4	38 507.4	98.4%	98.7%																			
Change to 2016 Budget estimate											34.1																						
Economic classification																																	
Current payments	1 743.3	1 732.5	1 262.3	2 041.0	2 245.1	1 740.1	2 351.5	2 270.1	1 934.0	2 304.8	2 341.6	2 256.6	85.2%	83.7%																			
Compensation of employees	631.8	631.8	628.0	649.1	656.5	686.3	772.1	774.3	750.1	873.4	857.4	857.3	99.8%	100.1%																			
Goods and services	1 111.5	1 100.7	634.4	1 391.9	1 588.6	1 053.8	1 579.5	1 495.8	1 183.9	1 431.4	1 484.2	1 399.3	77.5%	75.3%																			
Transfers and subsidies	28 538.0	28 725.6	28 787.4	31 314.1	31 591.1	31 570.6	33 448.5	33 496.1	33 482.2	35 637.0	35 664.6	35 664.6	100.4%	100.0%																			
Provinces and municipalities	27 317.5	27 686.5	27 487.2	29 902.1	30 164.1	30 171.1	31 857.9	31 904.7	31 904.7	33 972.0	33 981.0	33 981.0	100.4%	99.8%																			
Departmental agencies and accounts	1 026.9	839.5	1 089.1	1 202.9	1 212.9	1 178.1	1 416.4	1 417.1	1 419.4	1 494.5	1 494.7	1 494.7	-	-																			
Higher education institutions	-	-	-	3.0	3.0	-	3.1	3.1	-	3.3	3.3	3.3	35.0%	35.0%																			
Foreign governments and international organisations	-	-	-	-	2.7	2.6	-	-	-	-	14.4	14.4	-	99.8%																			
Public corporations and private enterprises	-	-	0.2	-	-	-	-	-	-	-	-	-	-	-																			
Non-profit institutions	193.6	199.7	209.6	206.1	208.4	215.3	171.1	171.1	155.1	167.2	167.2	167.2	101.2%	100.1%																			
Households	-	-	1.5	-	-	3.5	-	-	2.9	-	4.0	4.0	40 817.2%	296.7%																			
Payments for capital assets	825.9	466.5	173.0	1 024.9	488.9	227.4	668.0	464.7	567.8	621.5	591.0	586.0	49.5%	77.3%																			
Buildings and other fixed structures	807.0	440.0	113.7	979.9	378.4	168.9	562.5	354.6	470.6	471.9	471.9	471.9	43.4%	74.5%																			
Machinery and equipment	18.8	26.4	59.3	45.1	100.7	58.4	105.5	110.1	93.0	149.6	119.1	114.1	101.8%	91.1%																			
Software and other intangible assets	-	-	-	-	9.8	0.2	-	-	4.2	-	-	-	-	44.9%																			
Payments for financial assets	-	-	1.7	-	-	0.9	-	-	0.9	-	0.3	0.3	-	1 280.3%																			
Total	31 107.1	30 924.6	30 224.5	34 380.0	34 325.1	33 539.0	36 468.0	36 230.9	35 984.9	38 563.3	38 597.4	38 507.4	98.4%	98.7%																			

Expenditure estimates

Table 16.3 Vote expenditure estimates by programme and economic classification

Programmes								
1. Administration								
2. National Health Insurance, Health Planning and Systems Enablement								
3. HIV and AIDS, Tuberculosis, and Maternal and Child Health								
4. Primary Health Care Services								
5. Hospitals, Tertiary Health Services and Human Resource Development								
6. Health Regulation and Compliance Management								
Programme	Revised estimate	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
R million	2016/17	2013/14 - 2016/17		2017/18	2018/19	2019/20	2016/17 - 2019/20	
Programme 1	462.0	4.4%	1.2%	512.8	547.5	582.5	8.0%	1.2%
Programme 2	588.6	6.2%	1.2%	735.1	992.8	1 047.4	21.2%	1.9%
Programme 3	15 979.6	13.8%	38.9%	18 278.3	20 745.6	22 909.4	12.8%	43.7%
Programme 4	256.5	7.4%	0.6%	264.3	293.1	315.1	7.1%	0.6%
Programme 5	19 514.0	3.3%	53.9%	21 108.2	22 301.1	23 640.8	6.6%	48.6%
Programme 6	1 706.7	10.6%	4.2%	1 727.0	1 786.9	1 889.9	3.5%	4.0%
Total	38 507.4	7.6%	100.0%	42 625.7	46 667.0	50 384.9	9.4%	100.0%
Change to 2016 Budget estimate				(152.4)	(67.2)	1 014.6		
Economic classification								
Current payments	2 256.6	9.2%	5.2%	2 404.7	2 663.6	2 835.2	7.9%	5.7%
Compensation of employees	857.3	10.7%	2.1%	760.0	828.8	894.3	1.4%	1.9%
Goods and services	1 399.3	8.3%	3.1%	1 644.7	1 834.8	1 940.9	11.5%	3.8%
Transfers and subsidies	35 664.6	7.5%	93.7%	39 355.4	43 118.2	46 623.3	9.3%	92.5%
Provinces and municipalities	33 981.0	7.1%	89.4%	37 520.4	41 216.5	44 615.2	9.5%	88.3%
Departmental agencies and accounts	1 494.7	21.2%	3.7%	1 649.8	1 705.7	1 801.3	6.4%	3.7%
Higher education institutions	3.3	-	-	-	-	-	-100.0%	-
Foreign governments and international organisations	14.4	-	-	-	-	-	-100.0%	-
Non-profit institutions	167.2	-5.7%	0.5%	185.2	195.9	206.8	7.3%	0.4%
Households	4.0	556.5%	-	-	-	-	-100.0%	-
Payments for capital assets	586.0	7.9%	1.1%	865.6	885.2	926.5	16.5%	1.8%
Buildings and other fixed structures	471.9	2.4%	0.9%	714.6	748.1	792.1	18.8%	1.5%
Machinery and equipment	114.1	62.8%	0.2%	146.0	132.1	134.4	5.6%	0.3%
Software and other intangible assets	-	-	-	5.0	5.0	-	-	-
Payments for financial assets	0.3	-	-	-	-	-	-100.0%	-
Total	38 507.4	7.6%	100.0%	42 625.7	46 667.0	50 384.9	9.4%	100.0%

Goods and services expenditure trends and estimates

Table 16.4 Vote goods and services expenditure trends and estimates

	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
	2013/14	2014/15	2015/16				2016/17	2017/18	2018/19		
R thousand											
Administrative fees	228	740	689	842	54.6%	0.1%	4 586	2 536	2 569	45.0%	0.2%
Advertising	11 839	9 311	10 402	11 778	-0.2%	1.0%	12 804	16 178	16 999	13.0%	0.8%
Minor assets	2 420	8 235	7 055	6 284	37.4%	0.6%	11 379	6 292	6 485	1.1%	0.4%
Audit costs: External	30 561	27 921	20 132	31 125	0.6%	2.5%	39 554	39 659	42 381	10.8%	2.2%
Bursaries: Employees	1 115	1 076	1 553	2 201	25.4%	0.1%	2 000	2 110	2 228	0.4%	0.1%
Catering: Departmental activities	2 833	3 222	3 150	4 427	16.0%	0.3%	3 485	3 417	3 668	-6.1%	0.2%
Communication	12 292	15 723	19 550	19 780	17.2%	1.5%	25 449	25 791	28 040	12.3%	1.4%
Computer services	6 573	13 776	11 915	16 940	37.1%	1.1%	36 046	33 101	34 888	27.2%	1.8%
Consultants: Business and advisory services	156 678	54 815	65 595	138 034	-4.1%	9.5%	207 008	370 096	387 644	41.1%	16.0%
Infrastructure and planning services	-	4 286	-	8 000	-	0.3%	37 069	14 043	14 830	22.8%	1.1%
Laboratory services	-	-	-	263	-	-	-	1 259	1 056	58.9%	-
Legal services	4 085	6 197	6 990	970	-38.1%	0.4%	9 306	9 135	9 877	116.7%	0.4%
Science and technological services	11 113	11 743	-	11 489	1.1%	0.8%	15 843	15 234	15 940	11.5%	0.8%
Contractors	16 854	95 289	286 243	302 168	161.7%	16.1%	353 805	376 080	398 455	9.7%	20.7%
Agency and support/outsourced services	3 673	92 363	154 287	211 297	286.0%	10.6%	175 035	299 399	312 442	13.9%	14.5%
Entertainment	56	18	2	302	75.4%	-	436	200	212	-11.1%	-
Fleet services (including government motor transport)	16 444	27 201	60 757	19 853	6.5%	2.9%	29 747	29 719	34 644	20.4%	1.7%
Housing	-	-	24	-	-	-	-	-	-	-	-
Inventory: Clothing material and accessories	39	2 708	494	2 000	271.5%	0.1%	1 500	-	-	-100.0%	0.1%
Inventory: Farming supplies	-	1	-	-	-	-	-	-	-	-	-
Inventory: Food and food supplies	80	93	114	348	63.2%	-	200	534	559	17.1%	-
Inventory: Fuel, oil and gas	1 125	1 076	2 040	1 693	14.6%	0.1%	1 832	2 708	2 855	19.0%	0.1%
Inventory: Materials and supplies	196	334	131	782	58.6%	-	2 059	2 303	2 427	45.9%	0.1%
Inventory: Medical supplies	70 519	209 556	77 538	178 073	36.2%	12.3%	122 752	161 788	173 843	-0.8%	9.2%
Inventory: Medicine	474	177 192	98 338	174 046	616.1%	10.3%	176 901	2 373	2 651	-75.2%	5.2%

Table 16.4 Vote goods and services expenditure trends and estimates

R thousand	Audited outcome			Adjusted appropriation 2016/17	Average growth rate (%) 2013/14 - 2016/17	Average: Expenditure/ Total (%) 2016/17	Medium-term expenditure estimate			Average growth rate (%) 2016/17 - 2019/20	Average: Expenditure/ Total (%) 2016/17 - 2019/20
	2013/14	2014/15	2015/16				2017/18	2018/19	2019/20		
Inventory: Other supplies	7 872	10 332	11 994	12 431	16.5%	1.0%	16 836	13 655	13 027	1.6%	0.8%
Consumable supplies	617	1 687	3 007	2 800	65.6%	0.2%	9 800	6 714	7 096	36.3%	0.4%
Consumables: Stationery, printing and office supplies	22 230	18 359	20 196	23 065	1.2%	1.9%	25 342	30 079	32 021	11.6%	1.6%
Operating leases	86 892	93 532	131 666	136 116	16.1%	10.3%	155 697	165 716	184 479	10.7%	9.3%
Rental and hiring	-	97	98	289	-	-	200	600	678	32.9%	-
Property payments	11 389	22 592	23 661	13 166	5.0%	1.6%	21 201	25 575	22 180	19.0%	1.2%
Transport provided: Departmental activity	259	-	-	1 000	56.9%	-	-	-	-	-100.0%	-
Travel and subsistence	81 895	82 745	92 748	83 663	0.7%	7.8%	87 065	83 800	90 986	2.8%	5.0%
Training and development	3 479	4 789	4 546	12 520	53.2%	0.6%	8 545	12 042	12 717	0.5%	0.7%
Operating payments	60 472	50 262	49 569	48 039	-7.4%	4.8%	39 165	70 929	70 549	13.7%	3.3%
Venues and facilities	10 069	6 490	19 410	8 392	-5.9%	1.0%	12 005	11 700	12 442	14.0%	0.6%
Total	634 371	1 053 761	1 183 894	1 484 176	32.8%	100.0%	1 644 652	1 834 765	1 940 868	9.4%	100.0%

Transfers and subsidies expenditure trends and estimates

Table 16.5 Vote transfers and subsidies trends and estimates

R thousand	Audited outcome			Adjusted appropriation 2016/17	Average growth rate (%) 2013/14 - 2016/17	Average: Expenditure/ Total (%) 2016/17	Medium-term expenditure estimate			Average growth rate (%) 2016/17 - 2019/20	Average: Expenditure/ Total (%) 2016/17 - 2019/20
	2013/14	2014/15	2015/16				2017/18	2018/19	2019/20		
Provinces and municipalities											
Provincial revenue funds											
Current	22 196 363	24 669 087	26 487 703	28 708 332	9.0%	78.8%	31 865 897	35 300 854	38 368 185	10.2%	81.5%
National health insurance grant	50 953	76 956	61 077	94 227	22.7%	0.2%	-	-	-	-100.0%	0.1%
Comprehensive HIV and AIDS grant	10 334 687	12 102 108	13 670 730	-	-100.0%	27.9%	-	-	-	-	-
Human papillomavirus vaccine grant	-	-	-	-	-	-	-	200 000	211 200	-	0.2%
Comprehensive HIV, AIDS and tuberculosis grant	-	-	-	15 290 603	-	11.8%	17 557 903	19 921 697	22 038 995	13.0%	45.4%
Health professions training and development grant	2 190 366	2 321 788	2 374 722	2 476 724	4.2%	7.2%	2 631 849	2 784 496	2 940 428	5.9%	6.6%
National tertiary services grant	9 620 357	10 168 235	10 381 174	10 846 778	4.1%	31.7%	11 676 145	12 394 661	13 177 562	6.7%	29.2%
Capital	5 290 816	5 501 981	5 417 045	5 272 680	-0.1%	16.6%	5 654 495	5 915 694	6 246 973	5.8%	14.0%
Health facility revitalisation grant	5 290 816	5 501 981	5 417 045	5 272 680	-0.1%	16.6%	5 654 495	5 915 694	6 246 973	5.8%	14.0%
Departmental agencies and accounts											
Social security funds											
Current	3 062	3 215	3 363	3 541	5.0%	-	3 718	3 934	4 154	5.5%	-
Compensation Commissioner	3 062	3 215	3 363	3 541	5.0%	-	3 718	3 934	4 154	5.5%	-
Departmental agencies and accounts											
Departmental agencies (non-business entities)											
Current	1 086 031	1 174 867	1 416 059	1 491 128	11.1%	4.0%	1 646 079	1 701 807	1 797 127	6.4%	4.0%
Health and Welfare Sector Education and Training Authority	1 259	1 276	2 439	2 808	30.7%	-	2 252	2 455	2 612	-2.4%	-
Public Service Sector Education and Training Authority	50	90	-	-	-100.0%	-	-	-	-	-	-
South African Medical Research Council	419 460	446 331	623 892	657 590	16.2%	1.7%	614 961	624 829	659 819	0.1%	1.6%
South African National AIDS Council	25 951	15 000	19 340	16 711	-13.6%	0.1%	17 547	17 547	18 529	3.5%	-
National Health Laboratory Service	603 534	674 052	678 926	711 871	5.7%	2.1%	746 464	789 759	833 986	5.4%	1.9%
Office of Health Standards Compliance	31 252	33 367	88 906	100 535	47.6%	0.2%	125 711	133 003	140 451	11.8%	0.3%
Council for Medical Schemes	4 525	4 751	2 556	1 613	-29.1%	-	5 496	5 815	6 141	56.1%	-
South African Health Product Regulatory Authority	-	-	-	-	-	-	133 648	128 399	135 589	-	0.2%
Higher education institutions											
Current	-	-	-	3 304	-	-	-	-	-	-100.0%	-
University of Cape Town	-	-	-	1 101	-	-	-	-	-	-100.0%	-
University of Limpopo	-	-	-	2 203	-	-	-	-	-	-100.0%	-
Foreign governments and international organisations											
Current	-	2 622	-	14 370	-	-	-	-	-	-100.0%	-
International AIDS Society	-	-	-	14 370	-	-	-	-	-	-100.0%	-
World Health Organisation	-	2 622	-	-	-	-	-	-	-	-	-

Table 16.5 Vote transfers and subsidies trends and estimates

R thousand	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
	2013/14	2014/15	2015/16				2016/17	2017/18	2018/19		
Public corporations and private enterprises											
Other transfers to private enterprises											
Current	150	-	-	-	-100.0%	-	-	-	-	-	-
Public Health Association of South Africa	100	-	-	-	-100.0%	-	-	-	-	-	-
Albinism Society of South Africa	50	-	-	-	-100.0%	-	-	-	-	-	-
Non-profit institutions											
Current	209 554	215 283	155 073	167 249	-7.2%	0.6%	185 237	195 909	206 811	7.3%	0.5%
South African Medical Research Council	428	512	471	496	5.0%	-	520	550	581	5.4%	-
Wits University Foundation	-	-	-	650	-	-	-	-	-	-100.0%	-
Non-profit institutions	-	13 670	-	-	-	-	-	-	-	-	-
Health information systems programme	4 979	-	12 103	12 745	36.8%	-	13 382	14 158	14 951	5.5%	-
Health Systems Trust	10 252	12 867	11 367	11 969	5.3%	-	15 019	15 890	16 780	11.9%	-
Non-governmental organisations: Lifeline	18 308	19 023	19 898	20 953	4.6%	0.1%	22 000	23 276	24 579	5.5%	0.1%
Non-governmental organisations: lovelife	70 430	69 843	54 396	57 808	-6.4%	0.2%	61 200	64 750	68 376	5.8%	0.2%
Non-governmental organisations: Soul City	22 820	15 561	16 277	17 140	-9.1%	0.1%	19 226	20 270	21 336	7.6%	-
Non-governmental organisations: HIV and AIDS	76 079	79 919	38 131	42 948	-17.4%	0.2%	51 450	54 434	57 482	10.2%	0.1%
South African Federation for Mental Health	305	320	335	353	5.0%	-	371	393	415	5.5%	-
South African National Council for the Blind	684	718	752	792	5.0%	-	832	880	929	5.5%	-
Inter-Academy Medical Panel	100	-	-	-	-100.0%	-	-	-	-	-	-
Non-governmental organisations: Mental health	169	82	-	200	5.8%	-	-	-	-	-100.0%	-
National Council Against Smoking	5 000	768	803	845	-44.7%	-	887	938	991	5.5%	-
National Kidney Foundation of South Africa	-	-	350	350	-	-	350	370	391	3.8%	-
Health Systems Global: South Africa	-	2 000	-	-	-	-	-	-	-	-	-
Mental Health and Substance Abuse	-	-	190	-	-	-	-	-	-	-	-
Households											
Social benefits											
Current	1 469	3 397	2 858	3 700	36.1%	-	-	-	-	-100.0%	-
Employee social benefits	1 469	3 397	2 858	3 700	36.1%	-	-	-	-	-100.0%	-
Households											
Other transfers to households											
Current	-	100	52	261	-	-	-	-	-	-100.0%	-
Employee social benefits	-	-	-	261	-	-	-	-	-	-100.0%	-
Other transfers to households	-	-	52	-	-	-	-	-	-	-	-
Donation for conference on paediatric cardiology and cardiac surgery	-	100	-	-	-	-	-	-	-	-	-
Total	28 787 445	31 570 552	33 482 153	35 664 565	7.4%	100.0%	39 355 426	43 118 198	46 623 250	9.3%	100.0%

Personnel information

Table 16.6 Vote personnel numbers and cost by salary level and programme¹

Programmes																			
1. Administration																			
2. National Health Insurance, Health Planning and Systems Enablement																			
3. HIV and AIDS, Tuberculosis, and Maternal and Child Health																			
4. Primary Health Care Services																			
5. Hospitals, Tertiary Health Services and Human Resource Development																			
6. Health Regulation and Compliance Management																			
	Number of posts estimated for 31 March 2017		Number and cost ² of personnel posts filled / planned for on funded establishment										Number						
	Number of funded posts	Number of posts additional to the establishment	Actual		Revised estimate		Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)					
			2015/16		2016/17		2017/18		2018/19		2019/20				2016/17 - 2019/20				
			Number	Unit Cost cost	Number	Unit Cost cost	Number	Unit Cost cost	Number	Unit Cost cost	Number	Unit Cost cost							
Health	1 597	47	1 776	750.1	0.4	1 858	857.3	0.5	1 504	760.0	0.5	1 520	828.8	0.5	1 524	894.3	0.6	-6.4%	100.0%
Salary level																			
1 – 6	527	-	603	106.7	0.2	607	116.1	0.2	482	109.9	0.2	486	119.2	0.2	487	128.6	0.3	-7.1%	32.2%
7 – 10	744	-	772	320.4	0.4	785	355.0	0.5	717	348.7	0.5	724	380.6	0.5	727	412.2	0.6	-2.5%	46.1%
11 – 12	209	41	284	198.3	0.7	334	239.8	0.7	185	157.9	0.9	189	174.6	0.9	189	188.6	1.0	-17.3%	14.0%
13 – 16	117	6	117	124.7	1.1	132	146.4	1.1	120	143.5	1.2	121	154.5	1.3	121	164.9	1.4	-2.9%	7.7%
Programme	1 597	47	1 776	750.1	0.4	1 858	857.3	0.5	1 504	760.0	0.5	1 520	828.8	0.5	1 524	894.3	0.6	-6.4%	100.0%
Programme 1	444	1	448	177.7	0.4	449	192.5	0.4	420	197.2	0.5	422	215.1	0.5	421	232.0	0.6	-2.1%	26.7%
Programme 2	166	6	177	98.4	0.6	183	112.1	0.6	175	114.7	0.7	177	125.1	0.7	178	135.0	0.8	-0.9%	11.1%
Programme 3	123	-	122	71.3	0.6	123	77.5	0.6	117	79.4	0.7	119	86.6	0.7	119	93.4	0.8	-1.1%	7.5%
Programme 4	421	-	404	167.7	0.4	403	181.2	0.4	381	185.6	0.5	384	202.4	0.5	383	218.4	0.6	-1.7%	24.2%
Programme 5	312	40	291	110.9	0.4	345	141.0	0.4	293	128.5	0.4	297	140.1	0.5	301	151.1	0.5	-4.4%	19.3%
Programme 6	131	-	334	124.0	0.4	355	153.0	0.4	118	54.6	0.5	121	59.6	0.5	122	64.4	0.5	-30.0%	11.2%

1. Data has been provided by the department and may not necessarily reconcile with official government personnel data.

2. Rand million.

Departmental receipts

Table 16.7 Departmental receipts by economic classification

R thousand	Audited outcome			Adjusted estimate	Revised estimate	Average growth rate (%)	Average: Receipt item/ Total (%)	Medium-term receipts estimate			Average growth rate (%)	Average: Receipt item/ Total (%)
	2013/14	2014/15	2015/16					2016/17	2013/14 - 2016/17	2017/18		
Departmental receipts	71 606	66 140	53 885	69 125	68 586	-1.4%	100.0%	8 112	8 386	8 522	-50.1%	100.0%
Sales of goods and services produced by department	67 091	54 031	46 052	63 867	63 905	-1.6%	88.8%	4 658	4 882	5 118	-56.9%	83.9%
Sales by market establishments of which:	165	154	160	168	175	2.0%	0.3%	184	193	202	4.9%	0.8%
Parking	165	154	160	168	175	2.0%	0.3%	184	193	202	4.9%	0.8%
Administrative fees of which:	66 677	53 594	45 395	63 206	63 237	-1.8%	88.0%	4 197	4 406	4 626	-58.2%	81.7%
Medical (drug control) licences	3 193	2 961	2 264	1 632	1 663	-19.5%	3.9%	3 000	3 150	3 307	25.8%	11.9%
Drug control	63 484	50 633	42 380	60 434	60 434	-1.6%	83.4%	-	-	-	-100.0%	64.6%
Inspection fees	-	-	751	1 140	1 140	-	0.7%	1 197	1 256	1 319	5.0%	5.2%
Other sales of which:	249	283	497	493	493	25.6%	0.6%	277	283	290	-16.2%	1.4%
Yellow fever	33	33	334	116	116	52.0%	0.2%	121	127	134	4.9%	0.5%
Replacement of security cards	10	8	5	15	15	14.5%	-	6	6	6	-26.3%	-
Commission on insurance	206	242	158	362	362	20.7%	0.4%	150	150	150	-25.4%	0.9%
Sales of scrap, waste, arms and other used current goods of which:	45	3	44	-	-	-100.0%	-	4	4	4	-	-
Scrap paper	16	3	-	-	-	-100.0%	-	4	4	4	-	-
Scrap	29	-	44	-	-	-100.0%	-	-	-	-	-	-
Interest, dividends and rent on land	1 858	6 337	6 536	3 718	3 718	26.0%	7.1%	2 500	2 600	2 600	-11.2%	12.2%
Interest	1 858	6 337	6 536	3 718	3 718	26.0%	7.1%	2 500	2 600	2 600	-11.2%	12.2%
Transactions in financial assets and liabilities	2 612	5 769	1 253	1 540	963	-28.3%	4.1%	950	900	800	-6.0%	3.9%
Total	71 606	66 140	53 885	69 125	68 586	-1.4%	100.0%	8 112	8 386	8 522	-50.1%	100.0%

Programme 1: Administration

Programme purpose

Provide strategic leadership, management and support services to the department.

Expenditure trends and estimates

Table 16.8 Administration expenditure trends and estimates by subprogramme and economic classification

Subprogramme	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
	2013/14	2014/15	2015/16				2016/17	2013/14 - 2016/17	2017/18		
R thousand											
Ministry	27 595	28 851	29 952	31 534	4.5%	7.2%	31 840	34 264	36 377	4.9%	6.4%
Management	13 878	20 885	19 846	20 069	13.1%	4.6%	19 646	21 905	23 270	5.1%	4.0%
Corporate Services	157 816	178 331	199 693	205 733	9.2%	45.4%	232 421	246 854	263 171	8.6%	45.0%
Office Accommodation	93 532	110 449	147 624	143 695	15.4%	30.3%	165 179	174 912	185 995	9.0%	31.8%
Financial Management	54 521	47 960	41 386	60 933	3.8%	12.5%	63 752	69 535	73 662	6.5%	12.7%
Total	347 342	386 476	438 501	461 964	10.0%	100.0%	512 838	547 470	582 475	8.0%	100.0%
Change to 2016 Budget estimate				(1 500)			(3 802)	(1 601)	(1 443)		
Economic classification											
Current payments	340 637	381 821	426 936	454 238	10.1%	98.1%	505 989	540 056	576 020	8.2%	98.6%
Compensation of employees	149 850	167 468	177 729	191 150	8.5%	42.0%	197 170	215 120	232 027	6.7%	39.7%
Goods and services ¹ of which:	190 787	214 353	249 207	263 088	11.3%	56.1%	308 819	324 936	343 993	9.3%	59.0%
Audit costs: External	30 560	27 921	20 110	29 025	-1.7%	6.6%	36 255	37 156	39 527	10.8%	6.7%
Communication	8 372	8 895	9 815	13 576	17.5%	2.5%	16 432	17 655	19 477	12.8%	3.2%
Computer services	3 672	8 835	6 151	10 951	43.9%	1.8%	18 446	14 998	12 927	5.7%	2.7%
Operating leases	83 940	90 241	128 104	131 440	16.1%	26.5%	147 579	155 654	174 899	10.0%	29.0%
Property payments	11 374	22 311	23 330	10 644	-2.2%	4.1%	20 000	20 827	18 217	19.6%	3.3%
Travel and subsistence	15 415	15 664	15 565	16 781	2.9%	3.9%	20 257	20 134	21 443	8.5%	3.7%

Table 16.8 Administration expenditure trends and estimates by subprogramme and economic classification

R thousand	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
	2013/14	2014/15	2015/16				2016/17	2017/18	2018/19		
Transfers and subsidies¹	2 041	2 150	3 413	3 179	15.9%	0.7%	2 252	2 455	2 612	-6.3%	0.5%
Departmental agencies and accounts	1 309	1 366	2 439	2 808	29.0%	0.5%	2 252	2 455	2 612	-2.4%	0.5%
Households	732	784	974	371	-20.3%	0.2%	–	–	–	-100.0%	–
Payments for capital assets	4 158	2 322	7 942	4 451	2.3%	1.2%	4 597	4 959	3 843	-4.8%	0.8%
Machinery and equipment	4 158	2 322	7 942	4 451	2.3%	1.2%	4 597	4 959	3 843	-4.8%	0.8%
Payments for financial assets	506	183	210	96	-42.5%	0.1%	–	–	–	-100.0%	–
Total	347 342	386 476	438 501	461 964	10.0%	100.0%	512 838	547 470	582 475	8.0%	100.0%
Proportion of total programme expenditure to vote expenditure	1.1%	1.2%	1.2%	1.2%	–	–	1.2%	1.2%	1.2%	–	–
Details of transfers and subsidies											
Departmental agencies and accounts											
Departmental agencies (non-business entities)											
Current	1 309	1 366	2 439	2 808	29.0%	0.5%	2 252	2 455	2 612	-2.4%	0.5%
Health and Welfare Sector	1 259	1 276	2 439	2 808	30.7%	0.5%	2 252	2 455	2 612	-2.4%	0.5%
Education and Training Authority	50	90	–	–	-100.0%	–	–	–	–	–	–
Public Service Sector Education and Training Authority	–	–	–	–	–	–	–	–	–	–	–
Households											
Social benefits											
Current	732	784	974	371	-20.3%	0.2%	–	–	–	-100.0%	–
Employee social benefits	732	784	974	371	-20.3%	0.2%	–	–	–	-100.0%	–

1. Estimates of National Expenditure data tables are available and can be downloaded from www.treasury.gov.za. These data tables contain detailed information by goods and services, and transfers and subsidies item by programme.

Personnel information

Table 16.9 Administration personnel numbers and cost by salary level¹

Number of posts estimated for 31 March 2017		Number and cost ² of personnel posts filled / planned for on funded establishment												Number					
Number of funded posts	Number of posts additional to the establishment	Actual			Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)				
		2015/16		Unit cost	2016/17		Unit cost	2017/18		Unit cost	2018/19		Unit cost			2019/20		Unit cost	
Administration		Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost			
Salary level	444	1	448	177.7	0.4	449	192.5	0.4	420	197.2	0.5	422	215.1	0.5	421	232.0	0.6	-2.1%	100.0%
1 – 6	229	–	234	47.7	0.2	234	51.6	0.2	217	51.8	0.2	217	56.1	0.3	216	60.4	0.3	-2.6%	51.6%
7 – 10	130	–	132	57.0	0.4	132	62.0	0.5	123	62.7	0.5	123	67.9	0.6	123	73.4	0.6	-2.3%	29.3%
11 – 12	49	1	50	36.7	0.7	51	40.8	0.8	48	41.7	0.9	50	47.1	0.9	50	51.0	1.0	-0.7%	11.6%
13 – 16	36	–	32	36.3	1.1	32	38.1	1.2	32	40.9	1.3	32	44.0	1.4	32	47.2	1.5	–	7.5%

1. Data has been provided by the department and may not necessarily reconcile with official government personnel data.

2. Rand million.

Programme 2: National Health Insurance, Health Planning and Systems Enablement

Programme purpose

Improve access to quality health services through the development and implementation of policies to achieve universal health coverage, health financing reform, integrated health systems planning, monitoring and evaluation, and conduct research.

Objectives

- Achieve universal health coverage through the phased implementation of the national health insurance scheme by 2030.
- Improve equity in the distribution of funding by developing a funding modality for resource allocation to public primary health care facilities in the district health system by 2017/18.
- Strengthen revenue collection by implementing a revenue retention model in all 10 central hospitals by 2019/20.

- Improve access to chronic medicines and alleviate pressure on primary health care facilities by ensuring that 1.5 million patients receive chronic medicine through a centralised chronic medicine-dispensing and distribution system by 2019/20.
- Strengthen the monitoring of the availability of medicine by establishing a national stock management surveillance centre that reports on stock availability at all health facilities by 2019/20.
- Improve health information and operational processes in primary health care facilities by implementing the health patient registration system in all primary health care facilities by 2019/20.

Subprogrammes

- *Programme Management* provides leadership to the programme in order to improve access to quality health services by developing and implementing universal health coverage policies, health financing reform, integrated health systems planning, reporting, monitoring and evaluation, and research.
- *Technical Policy and Planning* provides advisory and strategic technical assistance on policy and planning, and supports policy analysis and implementation.
- *Health Information Management, Monitoring and Evaluation* develops and maintains a national health information system, commissions and coordinates research, implements disease notification surveillance programmes, and monitors and evaluates strategic health programmes.
- *Sector-Wide Procurement* is responsible for developing systems to ensure access to essential pharmaceutical commodities. This is achieved through the selection of essential medicines, the development of standard treatment guidelines, the administration of health tenders, and the licensing of persons and premises that deliver pharmaceutical services and related policies.
- *Health Financing and National Health Insurance* develops and implements policies, legislation and frameworks to achieve universal health coverage by designing and implementing national health insurance. It commissions health financing research, develops policy for the medical schemes industry, provides technical oversight over the Council for Medical Schemes, and manages the *national health insurance indirect grant*.
- *International Health and Development* develops and implements bilateral and multilateral agreements with strategic partners, such as the Southern African Development Community, the African Union and United Nations agencies, and economic groupings of countries, such as Brazil-Russia-India-South Africa, to strengthen the health system; manages processes involving the provision of technical capacity and financial assistance to South Africa; strengthens cooperation in areas of mutual interest globally; coordinates international development support; and profiles and lobbies for South Africa's policy position internationally.

Expenditure trends and estimates

Table 16.10 National Health Insurance, Health Planning and Systems Enablement expenditure trends and estimates by subprogramme and economic classification

Subprogramme	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
	2013/14	2014/15	2015/16				2016/17	2017/18	2018/19		
R thousand					2013/14 - 2016/17		2017/18	2018/19	2019/20	2016/17 - 2019/20	
Programme Management	353	331	597	3 184	108.2%	0.3%	3 752	4 293	3 940	7.4%	0.5%
Technical Policy and Planning	16 704	9 979	14 028	22 011	9.6%	3.7%	97 961	223 504	236 263	120.6%	17.2%
Health Information Management, Monitoring and Evaluation	44 355	51 800	57 421	74 349	18.8%	13.4%	67 533	67 810	71 897	-1.1%	8.4%
Sector-Wide Procurement	20 817	24 347	26 282	39 550	23.9%	6.5%	139 445	242 316	254 453	86.0%	20.1%
Health Financing and National Health Insurance	76 029	177 446	367 663	383 528	71.5%	59.0%	346 709	362 370	384 153	0.1%	43.9%
International Health and Development	64 298	74 296	87 062	65 998	0.9%	17.1%	79 687	92 529	96 645	13.6%	10.0%
Total	222 556	338 199	553 053	588 620	38.3%	100.0%	735 087	992 822	1 047 351	21.2%	100.0%
Change to 2016				28 858			(4 655)	(5 663)	(9 308)		
Budget estimate											

Table 16.10 National Health Insurance, Health Planning and Systems Enablement expenditure trends and estimates by subprogramme and economic classification

Economic classification	Audited outcome				Adjusted appropriation	Average growth rate (%)	Average Expenditure/Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average Expenditure/Total (%)
	2013/14	2014/15	2015/16	2016/17				2017/18	2018/19	2019/20		
	R thousand											
Current payments	154 761	233 458	467 496	466 096	44.4%	77.6%	700 068	955 862	1 014 550	29.6%	93.2%	
Compensation of employees	85 612	91 491	98 433	97 182	4.3%	21.9%	114 740	125 075	135 011	11.6%	14.0%	
Goods and services ¹	69 149	141 967	369 063	368 914	74.7%	55.7%	585 328	830 787	879 539	33.6%	79.2%	
of which:												
Computer services	181	646	453	366	26.5%	0.1%	10 100	11 662	12 315	222.8%	1.0%	
Consultants: Business and advisory services	9 823	9 698	12 564	22 707	32.2%	3.2%	84 717	210 755	221 918	113.8%	16.1%	
Contractors	5 106	75 735	278 074	274 325	277.3%	37.2%	324 251	339 775	365 478	10.0%	38.8%	
Agency and support/outourced services	789	239	6 536	2 773	52.0%	0.6%	91 400	194 246	204 023	319.0%	14.6%	
Travel and subsistence	21 208	24 925	28 260	18 343	-4.7%	5.4%	20 543	16 992	18 246	-0.2%	2.2%	
Operating payments	23 182	24 054	31 634	27 287	5.6%	6.2%	33 828	36 500	36 008	9.7%	4.0%	
Transfers and subsidies¹	66 368	103 745	84 667	119 680	21.7%	22.0%	28 401	30 048	31 731	-35.8%	6.2%	
Provinces and municipalities	50 953	76 956	61 077	94 227	22.7%	16.6%	-	-	-	-100.0%	2.8%	
Non-profit institutions	15 231	26 537	23 470	25 364	18.5%	5.3%	28 401	30 048	31 731	7.8%	3.4%	
Households	184	252	120	89	-21.5%	-	-	-	-	-100.0%	-	
Payments for capital assets	1 409	940	828	2 822	26.1%	0.4%	6 618	6 912	1 070	-27.6%	0.5%	
Machinery and equipment	1 409	765	828	2 822	26.1%	0.3%	1 618	1 912	1 070	-27.6%	0.2%	
Software and other intangible assets	-	175	-	-	-	-	5 000	5 000	-	-	0.3%	
Payments for financial assets	18	56	62	22	6.9%	-	-	-	-	-100.0%	-	
Total	222 556	338 199	553 053	588 620	38.3%	100.0%	735 087	992 822	1 047 351	21.2%	100.0%	
Proportion of total programme expenditure to vote expenditure	0.7%	1.0%	1.5%	1.5%	-	-	1.7%	2.1%	2.1%	-	-	
Details of transfers												
Non-profit institutions												
Current	15 231	26 537	23 470	25 364	18.5%	5.3%	28 401	30 048	31 731	7.8%	3.4%	
Wits University Foundation	-	-	-	650	-	-	-	-	-	-100.0%	-	
Non-profit institutions	-	13 670	-	-	-	0.8%	-	-	-	-	-	
Health information systems programme	4 979	-	12 103	12 745	36.8%	1.8%	13 382	14 158	14 951	5.5%	1.6%	
Health Systems Trust	10 252	12 867	11 367	11 969	5.3%	2.7%	15 019	15 890	16 780	11.9%	1.8%	
Households												
Social benefits												
Current	184	252	68	89	-21.5%	-	-	-	-	-100.0%	-	
Employee social benefits	184	252	68	89	-21.5%	-	-	-	-	-100.0%	-	
Households												
Other transfers to households												
Current	-	-	52	-	-	-	-	-	-	-	-	
Other transfers to households	-	-	52	-	-	-	-	-	-	-	-	
Provinces and municipalities												
Provinces												
Provincial revenue funds												
Current	50 953	76 956	61 077	94 227	22.7%	16.6%	-	-	-	-100.0%	2.8%	
National health insurance grant	50 953	76 956	61 077	94 227	22.7%	16.6%	-	-	-	-100.0%	2.8%	

1. Estimates of National Expenditure data tables are available and can be downloaded from www.treasury.gov.za. These data tables contain detailed information by goods and services, and transfers and subsidies item by programme.

Personnel information

Table 16.11 National Health Insurance, Health Planning and Systems Enablement personnel numbers and cost by salary level¹

National Health Insurance, Health Planning and Systems Enablement	Number of posts estimated for 31 March 2017		Number and cost ² of personnel posts filled / planned for on funded establishment										Number						
	Number of funded posts	Number of posts additional to the establishment	Actual		Revised estimate			Medium-term expenditure estimate					Average growth rate (%)	Average: Salary level/Total (%)					
			2015/16		2016/17			2017/18		2018/19		2019/20							
			Number	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost			Unit cost				
	166	6	177	98.4	0.6	183	112.1	0.6	175	114.7	0.7	177	125.1	0.7	178	135.0	0.8	-0.9%	100.0%
1 – 6	37	-	42	9.6	0.2	43	10.5	0.2	41	10.8	0.3	41	11.5	0.3	41	12.3	0.3	-1.6%	23.3%
7 – 10	70	-	73	31.8	0.4	73	34.4	0.5	71	36.0	0.5	72	39.5	0.5	73	43.3	0.6	-	40.5%
11 – 12	34	-	36	28.0	0.8	36	30.6	0.9	34	31.4	0.9	35	35.1	1.0	35	38.0	1.1	-0.9%	19.6%
13 – 16	25	6	26	29.1	1.1	31	36.6	1.2	29	36.6	1.3	29	39.0	1.3	29	41.5	1.4	-2.2%	16.5%

1. Data has been provided by the department and may not necessarily reconcile with official government personnel data.

2. Rand million.

Programme 3: HIV and AIDS, Tuberculosis, and Maternal and Child Health

Programme purpose

Develop national policies, guidelines, norms and standards, and targets to decrease the burden of disease related to the HIV and tuberculosis epidemics; support the implementation of these; and monitor and evaluate their impact. Minimise maternal and child mortality and morbidity; and optimise good health for children, adolescents and women.

Objectives

- Reduce the maternal mortality ratio to under 100 per 100 000 live births by 2019/20 through implementing and sustaining essential training in obstetric emergencies, conducting maternal mortality reviews and ensuring that appropriate interventions are implemented.
- Reduce the neonatal mortality rate to fewer than 8 per 1 000 live births by 2019/20 by capacitating health care workers to manage sick and small neonates, and procuring essential equipment such as continuous positive airway pressure machines.
- Improve access to sexual and reproductive health services by ensuring that at least 75 per cent of couples are accessing modern contraceptive methods by 2019/20.
- Protect girls against contracting cervical cancer in later stages of life by vaccinating 90 per cent of girls in grade 4 against the human papilloma virus by 2018/19.
- Reduce the mother-to-child HIV transmission rate to below 1.3 per cent by 2019/20 through the effective implementation of the guidelines on prevention of mother-to-child transmission.
- Reduce the mortality rate, for children under five years, to less than 33 per 1 000 live births by 2019/20 by implementing the committee's recommendations on morbidity and mortality.
- Contribute to the health and wellbeing of learners by screening 40 per cent of grade 1 learners and 25 per cent of grade 8 learners for health-related barriers to learning per year by 2019/20.
- Achieve a tuberculosis treatment success rate of 90 per cent and a 5 per cent or less tuberculosis loss to follow-up rate by 2019/20 through increased identification of tuberculosis patients and by ensuring completion of treatment.
- Increase the life expectancy of people living with HIV by increasing the number of people accessing antiretroviral treatment to 5.5 million by 2019/20.
- Reduce new HIV infections by implementing a combination of prevention interventions such as HIV counselling and testing, medical male circumcisions and condom distribution over the medium term.

Subprogrammes

- *Programme Management* is responsible for ensuring that all efforts by all stakeholders are harnessed to support the overall purpose of the programme. This includes ensuring that the efforts and resources of development partners, funders, academic and research organisations, non-governmental and civil society organisations, all contribute in a coherent, integrated way.
- *HIV and AIDS* is responsible for policy formulation, coordination, and the monitoring and evaluation of HIV and sexually transmitted disease services. This entails coordinating the implementation of the 2012-2016 national strategic plan on HIV, sexually transmitted infections and tuberculosis. Other important functions of this subprogramme are the management and oversight of the large conditional grant implementation by the provinces, and the coordination and direction of donor funding for HIV and AIDS.
- *Tuberculosis* develops national policies and guidelines, sets norms and standards for tuberculosis services, and monitors the implementation of these in line with the vision of achieving zero infections, mortality, stigma and discrimination from tuberculosis and HIV and AIDS, as outlined in the 2012-2016 national strategic plan on HIV, sexually transmitted infections and tuberculosis.
- *Women's Maternal and Reproductive Health* develops and monitors policies and guidelines, sets norms and standards for maternal and women's health services, and monitors the implementation of these. Over the medium term, key initiatives will be implemented as indicated in the maternal and child health strategic plan.
- *Child, Youth and School Health* is responsible for the policy formulation, coordination, and monitoring and evaluation of child, youth and school health services. Each province also has a unit responsible for fulfilling this role, and for facilitating implementation at the provincial level. The subprogramme is also responsible

for implementing the human papilloma virus vaccination programme and coordinates stakeholders outside of the health sector, to play key roles in promoting improved child and youth health and nutrition.

Expenditure trends and estimates

Table 16.12 HIV and AIDS, Tuberculosis, and Maternal and Child Health expenditure trends and estimates by subprogramme and economic classification

Subprogramme	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average Expenditure/ Total (%)
	2013/14	2014/15	2015/16				2016/17	2017/18	2018/19		
R thousand											
Programme Management	3 905	4 225	5 388	4 736	6.6%	–	6 458	6 510	6 382	10.5%	–
HIV and AIDS	10 705 079	12 572 819	13 962 474	15 745 915	13.7%	98.5%	18 004 547	20 463 809	22 611 465	12.8%	98.6%
Tuberculosis	23 800	21 783	20 094	27 370	4.8%	0.2%	26 498	29 837	31 790	5.1%	0.1%
Women's Maternal and Reproductive Health	14 117	12 422	13 717	18 924	10.3%	0.1%	18 390	21 334	22 796	6.4%	0.1%
Child, Youth and School Health	16 603	207 447	177 328	212 664	134.0%	1.1%	222 451	224 105	236 998	3.7%	1.1%
Total	10 763 504	12 818 696	14 179 001	16 009 609	14.1%	100.0%	18 278 344	20 745 595	22 909 431	12.7%	100.0%
Change to 2016 Budget estimate				(8 959)			(154 332)	(109 413)	884 878		
Economic classification											
Current payments	213 779	515 858	358 495	536 837	35.9%	3.0%	532 751	442 151	467 959	-4.5%	2.5%
Compensation of employees	62 475	65 285	71 345	75 733	6.6%	0.5%	79 420	86 619	93 394	7.2%	0.4%
Goods and services ¹	151 304	450 573	287 150	461 104	45.0%	2.5%	453 331	355 532	374 565	-6.7%	2.1%
of which:											
Consultants: Business and advisory services	12 914	10 901	19 647	55 886	63.0%	0.2%	97 636	104 764	107 839	24.5%	0.5%
Fleet services (including government motor transport)	3 277	11 418	34 036	5 578	19.4%	0.1%	11 577	11 137	11 761	28.2%	0.1%
Inventory: Medical supplies	70 134	209 221	76 540	176 739	36.1%	1.0%	118 909	158 801	170 494	-1.2%	0.8%
Inventory: Medicine	1	177 110	98 280	172 000	5461.3%	0.8%	176 100	1 000	1 056	-81.7%	0.4%
Consumables: Stationery, printing and office supplies	6 059	2 447	2 744	2 514	-25.4%	–	9 300	12 403	13 144	73.6%	–
Travel and subsistence	15 499	11 892	15 120	20 784	10.3%	0.1%	15 422	13 804	14 535	-11.2%	0.1%
Transfers and subsidies¹	10 548 544	12 301 747	13 819 482	15 463 883	13.6%	97.0%	17 729 326	20 301 974	22 440 497	13.2%	97.4%
Provinces and municipalities	10 334 687	12 102 108	13 670 730	15 290 603	13.9%	95.6%	17 557 903	20 121 697	22 250 195	13.3%	96.5%
Departmental agencies and accounts	25 951	15 000	19 340	16 711	-13.6%	0.1%	17 547	17 547	18 529	3.5%	0.1%
Higher education institutions	–	–	–	3 304	–	–	–	–	–	-100.0%	–
Foreign governments and international organisations	–	–	–	14 370	–	–	–	–	–	-100.0%	–
Non-profit institutions	187 637	184 346	128 702	138 849	-9.6%	1.2%	153 876	162 730	171 773	7.4%	0.8%
Households	269	293	710	46	-44.5%	–	–	–	–	-100.0%	–
Payments for capital assets	1 170	531	799	8 862	96.4%	–	16 267	1 470	975	-52.1%	–
Machinery and equipment	1 170	531	799	8 862	96.4%	–	16 267	1 470	975	-52.1%	–
Payments for financial assets	11	560	225	27	34.9%	–	–	–	–	-100.0%	–
Total	10 763 504	12 818 696	14 179 001	16 009 609	14.1%	100.0%	18 278 344	20 745 595	22 909 431	12.7%	100.0%
Proportion of total programme expenditure to vote expenditure	35.6%	38.2%	39.4%	41.5%	–	–	42.9%	44.5%	45.5%	–	–
Details of transfers and subsidies											
Departmental agencies and accounts											
Departmental agencies (non-business entities)											
Current	25 951	15 000	19 340	16 711	-13.6%	0.1%	17 547	17 547	18 529	3.5%	0.1%
South African National AIDS Council	25 951	15 000	19 340	16 711	-13.6%	0.1%	17 547	17 547	18 529	3.5%	0.1%
Foreign governments and international organisations											
Current	–	–	–	14 370	–	–	–	–	–	-100.0%	–
International AIDS Society	–	–	–	14 370	–	–	–	–	–	-100.0%	–
Non-profit institutions											
Current	187 637	184 346	128 702	138 849	-9.6%	1.2%	153 876	162 730	171 773	7.4%	0.8%
Non-governmental organisations: Lifeline	18 308	19 023	19 898	20 953	4.6%	0.1%	22 000	23 276	24 579	5.5%	0.1%
Non-governmental organisations: loveLife	70 430	69 843	54 396	57 808	-6.4%	0.5%	61 200	64 750	68 376	5.8%	0.3%
Non-governmental organisations: Soul City	22 820	15 561	16 277	17 140	-9.1%	0.1%	19 226	20 270	21 336	7.6%	0.1%
Non-governmental organisations: HIV and AIDS	76 079	79 919	38 131	42 948	-17.4%	0.4%	51 450	54 434	57 482	10.2%	0.3%
Households											
Social benefits											
Current	269	293	710	46	-44.5%	–	–	–	–	-100.0%	–
Employee social benefits	269	293	710	46	-44.5%	–	–	–	–	-100.0%	–
Higher education institutions											
Current	–	–	–	3 304	–	–	–	–	–	-100.0%	–
University of Cape Town	–	–	–	1 101	–	–	–	–	–	-100.0%	–
University of Limpopo	–	–	–	2 203	–	–	–	–	–	-100.0%	–
Provinces and municipalities											
Provinces											
Provincial revenue funds											
Current	10 334 687	12 102 108	13 670 730	15 290 603	13.9%	95.6%	17 557 903	20 121 697	22 250 195	13.3%	96.5%
Comprehensive HIV and AIDS grant	10 334 687	12 102 108	13 670 730	–	-100.0%	67.2%	–	–	–	–	–
Human papillomavirus vaccine grant	–	–	–	–	–	–	–	200 000	211 200	–	0.5%
Comprehensive HIV, AIDS and tuberculosis grant	–	–	–	15 290 603	–	28.4%	17 557 903	19 921 697	22 038 995	13.0%	96.0%

1. Estimates of National Expenditure data tables are available and can be downloaded from www.treasury.gov.za. These data tables contain detailed information by goods and services, and transfers and subsidies item by programme.

Personnel information

Table 16.13 HIV and AIDS, Tuberculosis, and Maternal and Child Health personnel numbers and cost by salary level¹

Number of posts estimated for 31 March 2017		Number and cost ² of personnel posts filled / planned for on funded establishment											Number						
Number of funded posts	Number of posts additional to the establishment	Actual			Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)				
		2015/16		Unit cost	2016/17		Unit cost	2017/18		2018/19		2019/20				2016/17 - 2019/20			
HIV and AIDS, Tuberculosis, and Maternal and Child Health		Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost			
Salary level	123	–	122	71.3	0.6	123	77.5	0.6	117	79.4	0.7	119	86.6	0.7	119	93.4	0.8	-1.1%	100.0%
1 – 6	18	–	20	4.7	0.2	20	5.1	0.3	19	5.1	0.3	20	5.8	0.3	20	6.2	0.3	–	16.5%
7 – 10	64	–	61	29.0	0.5	62	32.3	0.5	59	33.2	0.6	60	36.5	0.6	60	39.6	0.7	-1.1%	50.4%
11 – 12	25	–	24	19.6	0.8	24	21.4	0.9	23	22.3	1.0	23	24.1	1.0	23	26.1	1.1	-1.4%	19.5%
13 – 16	16	–	17	18.0	1.1	17	18.8	1.1	16	18.8	1.2	16	20.2	1.3	16	21.5	1.3	-2.0%	13.6%

1. Data has been provided by the department and may not necessarily reconcile with official government personnel data.

2. Rand million.

Programme 4: Primary Health Care Services

Programme purpose

Develop and oversee the implementation of legislation, policies, systems, and norms and standards for a uniform district health system, environmental health, communicable and non-communicable diseases prevention, health promotion and improved nutrition.

Objectives

- Improve district governance and strengthen the management and leadership of the district health system by establishing approved, standardised district management structures in all 52 health districts by 2019/20.
- Improve access to community-based primary health care services by establishing 2 000 ward-based primary health care outreach teams by 2019/20.
- Improve the quality of care at clinics by ensuring that all fixed primary health care facilities qualify as ideal clinics by 2019/20.
- Improve the quality of services at district hospitals through the ideal district hospital programme by implementing the ideal district hospital framework at 25 per cent of all district hospitals by 2019/20.
- Reduce risk factors and improve the management of non-communicable diseases by implementing the strategic plan for the prevention and control of non-communicable diseases over the medium term.
- Improve inter-sectoral collaboration, with a focus on population-wide interventions, to promote healthy lifestyles, and address social and economic determinants by establishing a national health commission by 2019/20.
- Strengthen health promotion, surveillance, vector control and the case management of malaria in order to eliminate malaria by 2019/20.
- Improve South Africa's influenza-prevention and control by implementing a vaccination programme among high-risk groups over the medium term.
- Expand the provision of rehabilitation services by increasing the number of districts resourced with a multi-disciplinary rehabilitation team by 10 per cent by 2019/20
- Improve accessibility of primary health services to people with physical disabilities, by ensuring that 70 per cent of primary health care facilities have wheelchair ramps, compacted access from gate to entrance, appropriate toilets and signage by 2019/20.
- Ensure the compliance of port health services to international health regulations by 2019/20 by regularly auditing points of entry and addressing findings from these at all 35 commercial points of entry in South Africa.

Subprogrammes

- *Programme Management* supports and provides leadership for the development and implementation of legislation, policies, systems, and norms and standards for a uniform district health system, environmental health, communicable and non-communicable diseases, health promotion, and nutrition.
- *District Health Services* promotes, coordinates and institutionalises the district health system; integrates programme implementation using the primary health care approach; and coordinates primary health care re-engineering through ward-based primary health care outreach teams.
- *Communicable Diseases* develops policies and supports provinces to ensure the control of infectious diseases and supports the National Institute for Communicable Diseases, a division of the National Health Laboratory Service. It improves surveillance for disease detection; strengthens preparedness and core response capacity for public health emergencies, in line with international health regulations; and facilitates the implementation of influenza prevention and control programmes, tropical disease prevention and control programmes, and malaria elimination.
- *Non-Communicable Diseases* establishes policy, legislation and guidelines, and assists provinces in implementing and monitoring services for chronic, non-communicable diseases, disability, eye care, oral health, mental health, substance abuse and injury.
- *Health Promotion and Nutrition* formulates and monitors policies, guidelines and norms and standards for health promotion and nutrition. Focusing on South Africa's quadruple burden of disease, it implements the approved health promotion strategy to reduce risk factors for disease, and promotes an integrated approach to working towards an optimal nutritional status for all South Africans.
- *Environmental and Port Health Services* coordinates the delivery of environmental health, including the monitoring and delivery of municipal health services, and ensures compliance with international health regulations by coordinating and implementing port health services in all of South Africa's 44 points of entry.

Expenditure trends and estimates

Table 16.14 Primary Health Care Services expenditure trends and estimates by subprogramme and economic classification

Subprogramme	Audited outcome				Adjusted appropriation	Average growth rate (%)	Average Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average Expenditure/ Total (%)
	2013/14	2014/15	2015/16	2016/17				2017/18	2018/19	2019/20		
R thousand												
Programme Management	1 689	2 834	3 245	2 994	21.0%	1.3%	3 136	3 530	3 393	4.3%	1.2%	
District Health Services	13 970	25 790	9 784	26 047	23.1%	8.8%	46 266	67 462	71 519	40.0%	18.7%	
Communicable Diseases	13 784	23 366	21 133	21 561	16.1%	9.3%	21 923	22 867	24 450	4.3%	8.0%	
Non-Communicable Diseases	25 541	25 282	20 562	21 598	-5.4%	10.8%	22 491	23 587	25 256	5.4%	8.2%	
Health Promotion and Nutrition	23 880	18 353	22 107	22 723	-1.6%	10.1%	26 456	24 804	26 562	5.3%	8.9%	
Environmental and Port Health Services	104 624	110 697	135 740	161 616	15.6%	59.7%	144 027	150 839	163 891	0.5%	54.9%	
Total	183 488	206 322	212 571	256 539	11.8%	100.0%	264 299	293 089	315 071	7.1%	100.0%	
Change to 2016				(1 300)			(21 995)	(24 081)	(24 449)			
Budget estimate												
Economic classification												
Current payments	174 750	195 103	207 024	249 918	12.7%	96.3%	256 084	289 666	311 633	7.6%	98.1%	
Compensation of employees	140 861	151 285	167 726	212 643	14.7%	78.3%	185 583	202 371	218 383	0.9%	72.5%	
Goods and services ¹	33 889	43 818	39 298	37 275	3.2%	18.0%	70 501	87 295	93 250	35.8%	25.5%	
of which:												
Consultants: Business and advisory services	86	1 347	3 198	2 663	214.0%	0.8%	11 600	31 222	32 959	131.3%	6.9%	
Science and technological services	11 113	11 743	-	3 032	-35.1%	3.0%	5 416	4 212	4 476	13.9%	1.5%	
Fleet services (including government motor transport)	1 539	1 283	10 623	3 700	34.0%	2.0%	8 343	8 216	8 670	32.8%	2.6%	
Consumable supplies	18	27	2 256	2 600	424.7%	0.6%	5 100	5 300	5 592	29.1%	1.6%	
Travel and subsistence	8 659	7 325	9 879	6 963	-7.0%	3.8%	13 510	14 513	15 527	30.6%	4.5%	
Operating payments	3 424	10 182	2 115	2 951	-4.8%	2.2%	4 900	3 979	4 201	12.5%	1.4%	
Transfers and subsidies¹	6 935	7 169	3 417	4 726	-12.0%	2.6%	2 960	3 131	3 307	-11.2%	1.3%	
Foreign governments and international organisations	-	2 622	-	-	-	0.3%	-	-	-	-	-	
Public corporations and private enterprises	150	-	-	-	-100.0%	-	-	-	-	-	-	
Non-profit institutions	6 686	4 400	2 901	3 036	-23.1%	2.0%	2 960	3 131	3 307	2.9%	1.1%	
Households	99	147	516	1 690	157.5%	0.3%	-	-	-	-100.0%	0.1%	
Payments for capital assets	661	4 015	2 098	1 881	41.7%	1.0%	5 255	292	131	-58.9%	0.7%	
Machinery and equipment	661	4 015	2 098	1 881	41.7%	1.0%	5 255	292	131	-58.9%	0.7%	
Payments for financial assets	1 142	35	32	14	-76.9%	0.1%	-	-	-	-100.0%	-	
Total	183 488	206 322	212 571	256 539	11.8%	100.0%	264 299	293 089	315 071	7.1%	100.0%	
Proportion of total programme expenditure to vote expenditure	0.6%	0.6%	0.6%	0.7%	-	-	0.6%	0.6%	0.6%	-	-	

Table 16.14 Primary Health Care Services expenditure trends and estimates by subprogramme and economic classification

Details of transfers and subsidies	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average: Expenditure/Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/Total (%)
	2013/14	2014/15	2015/16				2016/17	2013/14 - 2016/17	2017/18		
	R thousand										
Foreign governments and international organisations											
Current	-	2 622	-	-	-	0.3%	-	-	-	-	-
World Health Organisation	-	2 622	-	-	-	0.3%	-	-	-	-	-
Non-profit institutions											
Current	6 686	4 400	2 901	3 036	-23.1%	2.0%	2 960	3 131	3 307	2.9%	1.1%
South African Medical Research Council	428	512	471	496	5.0%	0.2%	520	550	581	5.4%	0.2%
South African Federation for Mental Health	305	320	335	353	5.0%	0.2%	371	393	415	5.5%	0.1%
South African National Council for the Blind	684	718	752	792	5.0%	0.3%	832	880	929	5.5%	0.3%
Inter-Academy Medical Panel	100	-	-	-	-100.0%	-	-	-	-	-	-
Non-governmental organisations: Mental health	169	82	-	200	5.8%	0.1%	-	-	-	-100.0%	-
National Council Against Smoking	5 000	768	803	845	-44.7%	0.9%	887	938	991	5.5%	0.3%
National Kidney Foundation of South Africa	-	-	350	350	-	0.1%	350	370	391	3.8%	0.1%
Health Systems Global: South Africa	-	2 000	-	-	-	0.2%	-	-	-	-	-
Mental Health and Substance Abuse	-	-	190	-	-	-	-	-	-	-	-
Households											
Social benefits											
Current	99	47	516	1 690	157.5%	0.3%	-	-	-	-100.0%	0.1%
Employee social benefits	99	47	516	1 690	157.5%	0.3%	-	-	-	-100.0%	0.1%
Households											
Other transfers to households											
Current	-	100	-	-	-	-	-	-	-	-	-
Donation for conference on paediatric cardiology and cardiac surgery	-	100	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises											
Private enterprises											
Other transfers to private enterprises											
Current	150	-	-	-	-100.0%	-	-	-	-	-	-
Public Health Association of South Africa	100	-	-	-	-100.0%	-	-	-	-	-	-
Albinism Society of South Africa	50	-	-	-	-100.0%	-	-	-	-	-	-

1. Estimates of National Expenditure data tables are available and can be downloaded from www.treasury.gov.za. These data tables contain detailed information by goods and services, and transfers and subsidies item by programme.

Personnel information

Table 16.15 Primary Health Care Services personnel numbers and cost by salary level¹

Salary level	Number of posts estimated for 31 March 2017		Number and cost ² of personnel posts filled / planned for on funded establishment												Number				
	Number of funded posts	Number of posts additional to the establishment	Actual			Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)			
			2015/16		2016/17		2017/18		2018/19		2019/20		2016/17 - 2019/20						
			Number	Unit cost	Number	Unit cost	Number	Unit cost	Number	Unit cost	Number	Unit cost							
Primary Health Care Services			Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost					
	421	-	404	167.7	0.4	403	181.2	0.4	381	185.6	0.5	384	202.4	0.5	383	218.4	0.6	-1.7%	100.0%
1 - 6	98	-	87	17.3	0.2	87	18.8	0.2	82	19.2	0.2	83	21.0	0.3	83	22.7	0.3	-1.6%	21.6%
7 - 10	282	-	272	111.9	0.4	272	121.9	0.4	258	125.5	0.5	260	137.2	0.5	259	148.0	0.6	-1.6%	67.6%
11 - 12	25	-	31	23.8	0.8	30	25.1	0.8	28	25.4	0.9	28	27.6	1.0	28	29.9	1.1	-2.3%	7.4%
13 - 16	16	-	14	14.8	1.1	14	15.5	1.1	13	15.5	1.2	13	16.6	1.3	13	17.8	1.4	-2.4%	3.4%

1. Data has been provided by the department and may not necessarily reconcile with official government personnel data.

2. Rand million.

Programme 5: Hospitals, Tertiary Health Services and Human Resource Development

Programme purpose

Develop policies, delivery models and clinical protocols for hospitals and emergency medical services. Provide human resources for health planning, development and management as well as clinical training platforms for health professional's education. Ensure that planning of health infrastructure meets the health needs of the country.

Objectives

- Accelerate the construction and maintenance of health infrastructure by enhancing the capacity to deliver health infrastructure on an ongoing basis.

- Increase the management capacity of central hospitals through training, coaching and mentoring to facilitate semi-autonomy and the implementation of cost centre management in all 10 central hospitals by 2018/19.
- Ensure equitable access to specialised health care by increasing the training platform for medical specialists by 2019/20.
- Ensure appropriate and affordable staffing levels and staffing mixes at all health facilities by developing and implementing staffing norms and standards in the health workforce over the medium term.
- Improve the quality of nursing-education and practice by ensuring that all 17 nursing colleges are accredited to offer the new nursing qualification by 2019/20.
- Ensure access to the efficient and effective delivery of quality emergency medical services by ensuring that all provinces fully comply with regulations pertaining to emergency medical services by 2019/20.
- Improve the functioning of the criminal justice system by eliminating backlogs for blood alcohol, toxicology and food tests in forensic chemistry laboratories by 2017/18, and reducing turnaround times on an ongoing basis.
- Improve the management of health facilities at all levels of care by ensuring that 90 per cent of all hospital chief executives and primary health-care facility managers benefit from a coaching and mentoring programme, implemented through the knowledge-management hub by 2019/20.

Subprogrammes

- *Programme Management* supports and provides leadership for the development of policies, delivery models and clinical protocols for hospitals and emergency medical services. It also supports the alignment of academic medical centres with health workforce programmes.
- *Health Facilities Infrastructure Management* coordinates and funds health-care infrastructure to enable provinces to plan, manage, modernise, rationalise and transform infrastructure, health technology and hospital management, and improve the quality of care. This subprogramme is responsible for the direct *health facility revitalisation grant* and, since 2013/14, the health facility revitalisation component of the *national health insurance indirect grant*.
- *Tertiary Health Care Planning and Policy* focuses on the provision of tertiary hospital services in a modernised and reconfigured manner; identifies tertiary and regional hospitals that should serve as centres of excellence for disseminating quality improvements; and is responsible for the management of the *national tertiary services grant*.
- *Hospital Management* deals with national policy on hospital services by focusing on developing an effective referral system to ensure clear delineation of responsibilities by level of care; providing clear guidelines for referral and improved communication; developing specific and detailed hospital plans; and facilitating quality improvement plans for hospitals.
- *Human Resources for Health* is responsible for medium to long term human resources planning in the national health system. This entails implementing the national human resources for health strategy, facilitating capacity development for the planning of a sustainable health workforce, and developing and implementing human resources information systems for planning and monitoring purposes.
- *Nursing Services* is responsible for developing and overseeing the implementation of a policy framework to oversee the development of required nursing skills and capacity, developing nursing norms and standards, and facilitating the development of the curriculum for nursing-education.
- *Forensic Chemistry Laboratories* is responsible for ante- and post-mortem analyses of blood alcohol levels for drunken driving; toxicology analyses of biological fluids and human organs in the event of unnatural deaths, such as murder and suicide; and analyses of foodstuffs.
- *Violence, Trauma and EMS* formulates and monitors policies, guidelines, and norms and standards for the management of violence, trauma and emergency medical services.

Expenditure trends and estimates

Table 16.16 Hospitals, Tertiary Health Services and Human Resource Development expenditure trends and estimates by subprogramme and economic classification

Subprogramme	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
	2013/14	2014/15	2015/16				2016/17	2013/14 - 2016/17	2017/18		
R thousand											
Programme Management	2 263	4 191	3 738	3 713	17.9%	–	3 692	3 971	4 258	4.7%	–
Health Facilities Infrastructure Management	5 546 053	5 807 614	6 092 904	6 078 821	3.1%	31.6%	6 623 670	6 934 642	7 323 260	6.4%	31.1%
Tertiary Health Care Planning and Policy	9 624 393	10 172 223	10 384 336	10 851 438	4.1%	55.1%	11 680 763	12 399 642	13 182 903	6.7%	55.5%
Hospital Management	5 664	4 583	4 771	5 659	–	–	5 155	5 539	5 931	1.6%	–
Human Resources for Health	2 208 908	2 340 618	2 394 258	2 500 069	4.2%	12.7%	2 653 788	2 807 792	2 965 500	5.9%	12.6%
Nursing Services	1 093	2 563	4 229	6 627	82.3%	–	6 562	7 076	7 600	4.7%	–
Forensic Chemistry Laboratories	93 851	110 056	112 764	120 533	8.7%	0.6%	127 405	134 795	143 091	5.9%	0.6%
Violence, Trauma and EMS	11 024	6 730	5 315	7 138	-13.5%	–	7 149	7 673	8 213	4.8%	–
Total	17 493 249	18 448 578	19 002 315	19 573 998	3.8%	100.0%	21 108 184	22 301 130	23 640 756	6.5%	100.0%
Change to 2016 Budget estimate				500			35 764	76 624	168 776		
Economic classification											
Current payments	227 726	239 485	284 070	409 831	21.6%	1.6%	315 518	337 606	356 315	-4.6%	1.6%
Compensation of employees	94 956	104 678	110 874	131 606	11.5%	0.6%	128 470	140 052	151 102	4.7%	0.6%
Goods and services ¹	132 770	134 807	173 196	278 225	28.0%	1.0%	187 048	197 554	205 213	-9.6%	1.0%
of which:											
Consultants: Business and advisory services	104 472	916	1 652	24 134	-38.6%	0.2%	9 068	18 324	19 326	-7.1%	0.1%
Infrastructure and planning services	–	4 286	–	8 000	–	–	36 869	13 943	14 724	22.5%	0.1%
Contractors	1 644	4 976	5 318	5 550	50.0%	–	13 469	12 137	13 071	33.0%	0.1%
Agency and support/outsource services	1 641	88 115	131 620	201 262	396.8%	0.6%	79 045	101 621	104 886	-19.5%	0.6%
Inventory: Other supplies	7 477	10 247	11 612	11 379	15.0%	0.1%	13 200	12 442	11 641	0.8%	0.1%
Travel and subsistence	9 010	9 502	9 835	8 165	-3.2%	–	11 878	12 077	13 491	18.2%	0.1%
Transfers and subsidies¹	17 101 605	17 992 739	18 173 324	18 596 302	2.8%	96.4%	19 962 489	21 094 851	22 364 963	6.3%	94.7%
Provinces and municipalities	17 101 539	17 992 004	18 172 941	18 596 182	2.8%	96.4%	19 962 489	21 094 851	22 364 963	6.3%	94.7%
Households	66	735	383	120	22.1%	–	–	–	–	-100.0%	–
Payments for capital assets	163 891	216 301	544 782	567 724	51.3%	2.0%	830 177	868 673	919 478	17.4%	3.7%
Buildings and other fixed structures	113 726	168 329	470 641	471 883	60.7%	1.6%	714 646	748 073	792 125	18.8%	3.1%
Machinery and equipment	50 165	47 972	74 141	95 841	24.1%	0.4%	115 531	120 600	127 353	9.9%	0.5%
Payments for financial assets	27	53	139	141	73.5%	–	–	–	–	-100.0%	–
Total	17 493 249	18 448 578	19 002 315	19 573 998	3.8%	100.0%	21 108 184	22 301 130	23 640 756	6.5%	100.0%
Proportion of total programme expenditure to vote expenditure	57.9%	55.0%	52.8%	50.7%	–	–	49.5%	47.8%	46.9%	–	–
Details of transfers and subsidies											
Households											
Social benefits											
Current	66	735	383	120	22.1%	–	–	–	–	-100.0%	–
Employee social benefits	66	735	383	120	22.1%	–	–	–	–	-100.0%	–
Provinces and municipalities											
Provinces											
Provincial revenue funds											
Current	11 810 723	12 490 023	12 755 896	13 323 502	4.1%	67.6%	14 307 994	15 179 157	16 117 990	6.6%	68.0%
Health professions training and development grant	2 190 366	2 321 788	2 374 722	2 476 724	4.2%	12.6%	2 631 849	2 784 496	2 940 428	5.9%	12.5%
National tertiary services grant	9 620 357	10 168 235	10 381 174	10 846 778	4.1%	55.0%	11 676 145	12 394 661	13 177 562	6.7%	55.5%
Capital	5 290 816	5 501 981	5 417 045	5 272 680	-0.1%	28.8%	5 654 495	5 915 694	6 246 973	5.8%	26.7%
Health facility revitalisation grant	5 290 816	5 501 981	5 417 045	5 272 680	-0.1%	28.8%	5 654 495	5 915 694	6 246 973	5.8%	26.7%

1. Estimates of National Expenditure data tables are available and can be downloaded from www.treasury.gov.za. These data tables contain detailed information by goods and services, and transfers and subsidies item by programme.

Personnel information

Table 16.17 Hospitals, Tertiary Health Services and Human Resource Development personnel numbers and cost by salary level¹

Number of posts estimated for 31 March 2017		Number and cost ² of personnel posts filled / planned for on funded establishment												Number							
		Actual			Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)						
Number of funded posts	Number of posts additional to the establishment	2015/16			2016/17			2017/18		2018/19		2019/20		2016/17 - 2019/20							
		Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost						
Hospitals, Tertiary Health Services and Human Resource Development		312	40		291	110.9	0.4	345	141.0	0.4	293	128.5	0.4	297	140.1	0.5	301	151.1	0.5	-4.4%	100.0%
Salary level																					
1 – 6	71	–			68	12.9	0.2	70	14.2	0.2	67	14.4	0.2	67	15.4	0.2	68	16.7	0.2	-1.0%	22.0%
7 – 10	160	–			168	61.3	0.4	180	72.5	0.4	173	74.4	0.4	175	80.6	0.5	178	87.6	0.5	-0.4%	57.1%
11 – 12	63	40			38	21.4	0.6	78	38.5	0.5	37	23.8	0.6	38	26.3	0.7	38	28.1	0.7	-21.3%	15.5%
13 – 16	18	–			17	15.3	0.9	17	15.8	0.9	16	15.8	1.0	17	17.7	1.0	17	18.7	1.1	–	5.4%

1. Data has been provided by the department and may not necessarily reconcile with official government personnel data.

2. Rand million.

Programme 6: Health Regulation and Compliance Management

Programme purpose

Regulate the procurement of medicines and pharmaceutical supplies, including food control, and the trade in health products and health technology. Promote accountability and compliance by regulatory bodies and public entities, for effective governance and improving the quality of health care.

Objectives

- Strengthen food safety by expanding laboratory-testing capabilities for adulterants, such as colourants, protein and allergens, and creating partnerships with food laboratories over the medium term.
- Ensure that all five public health entities and six statutory health professional councils are compliant with good governance practices by providing advice and technical support over the medium term.
- Provide for coordinated disease and injury surveillance and research by establishing a national public health institute by 2019/20, pending approval from Cabinet.
- Ensure that the compensation commissioner eliminates the backlog of audited annual financial statements by 2019/20 by appointing external actuarial and financial experts to support this process.

Subprogrammes

- *Programme Management* provides leadership to the programme by supporting the development of regulations for the procurement of medicines and pharmaceutical supplies, food control and the trade of health products and health technology. This subprogramme also provides oversight to regulatory bodies and public entities for effective governance and quality health care.
- *Food Control* regulates foodstuffs and non-medical health products for human and animal use, with the aim of ensuring that they are safe, efficacious and of high quality.
- *Radiation Control and Health Technology* performs regulatory functions related to all medical, industrial, research and agricultural facilities and also performs activities related to radionuclides in South Africa, outside the nuclear fuel cycle. The radiation control inspectorate issues end-user licences for all generators ionizing radiation (and supervises and inspects x-ray generators and low level radioisotope installations).
- *Public Entities Management* supports the executive authority's oversight function and provides guidance to health entities and statutory councils that fall within the mandate of health legislation, with regard to planning and budget procedures, performance and financial reporting, remuneration, governance and accountability.
- *Compensation Commissioner for Occupational Diseases and Occupational Health* is responsible for the payment of benefits to active miners and ex-miners certified to be suffering from lung-related diseases as a result of the high-risk work performed in controlled mines and works. It is also responsible for providing benefit medical examinations for ex-workers in controlled mines and works.

Expenditure trends and estimates

Table 16.18 Health Regulation and Compliance Management expenditure trends and estimates by subprogramme and economic classification

Subprogramme	Audited outcome			Adjusted appropriation	Average growth rate (%)	Average: Expenditure/Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/Total (%)
	2013/14	2014/15	2015/16				2016/17	2013/14 - 2016/17	2017/18		
R thousand											
Programme Management	2 834	3 758	3 502	4 062	12.7%	0.2%	4 532	4 866	5 213	8.7%	0.3%
Food Control	7 156	6 871	8 347	9 972	11.7%	0.6%	11 728	11 503	12 336	7.3%	0.6%
Radiation Control and Health Technology	105 781	120 504	138 303	156 072	13.8%	8.9%	18 956	19 606	23 258	-47.0%	3.1%
Public Entities Management	1 062 170	1 162 942	1 399 104	1 474 937	11.6%	87.0%	1 630 082	1 685 129	1 779 554	6.5%	92.4%
Compensation Commissioner for Occupational Diseases and Occupational Health	36 440	46 626	50 164	61 643	19.2%	3.3%	61 673	65 762	69 502	4.1%	3.6%
Total	1 214 381	1 340 701	1 599 420	1 706 686	12.0%	100.0%	1 726 971	1 786 866	1 889 863	3.5%	100.0%
Change to 2016 Budget estimate				16 500			(3 391)	(3 077)	(3 890)		
Economic classification											
Current payments	150 674	174 365	189 970	224 654	14.2%	12.6%	94 274	98 238	108 737	-21.5%	7.4%
Compensation of employees	94 202	106 122	123 990	149 084	16.5%	8.1%	54 649	59 577	64 429	-24.4%	4.6%
Goods and services ¹	56 472	68 243	65 980	75 570	10.2%	4.5%	39 625	38 661	44 308	-16.3%	2.8%
<i>of which:</i>											
<i>Audit costs: External</i>	1	-	22	2 100	1180.6%	-	3 299	2 503	2 854	10.8%	0.2%
<i>Computer services</i>	2 135	1 822	4 119	2 795	9.4%	0.2%	4 000	3 500	6 668	33.6%	0.2%
<i>Consumables: Stationery, printing and office supplies</i>	1 466	1 944	1 977	2 611	21.2%	0.1%	1 490	4 044	3 673	12.0%	0.2%
<i>Operating leases</i>	938	1 307	1 163	1 813	24.6%	0.1%	1 347	4 822	3 976	29.9%	0.2%
<i>Property payments</i>	15	257	322	522	226.5%	-	1 201	4 148	3 335	85.6%	0.1%
<i>Travel and subsistence</i>	12 104	13 437	14 089	12 627	1.4%	0.9%	5 455	6 280	7 744	-15.0%	0.5%
Transfers and subsidies¹	1 061 952	1 163 002	1 397 850	1 476 795	11.6%	87.0%	1 629 998	1 685 739	1 780 140	6.4%	92.4%
Departmental agencies and accounts	1 061 833	1 161 716	1 397 643	1 475 150	11.6%	87.0%	1 629 998	1 685 739	1 780 140	6.5%	92.4%
Households	119	1 286	207	1 645	140.0%	0.1%	-	-	-	-100.0%	-
Payments for capital assets	1 751	3 288	11 368	5 237	44.1%	0.4%	2 699	2 889	986	-42.7%	0.2%
Buildings and other fixed structures	-	536	-	-	-	-	-	-	-	-	-
Machinery and equipment	1 751	2 752	7 160	5 237	44.1%	0.3%	2 699	2 889	986	-42.7%	0.2%
Software and other intangible assets	-	-	4 208	-	-	0.1%	-	-	-	-	-
Payments for financial assets	4	46	232	-	-100.0%	-	-	-	-	-	-
Total	1 214 381	1 340 701	1 599 420	1 706 686	12.0%	100.0%	1 726 971	1 786 866	1 889 863	3.5%	100.0%
Proportion of total programme expenditure to vote expenditure	4.0%	4.0%	4.4%	4.4%	-	-	4.1%	3.8%	3.8%	-	-
Details of transfers and subsidies											
Departmental agencies and accounts											
Departmental agencies (non-business entities)											
Current	1 058 771	1 158 501	1 394 280	1 471 609	11.6%	86.7%	1 626 280	1 681 805	1 775 986	6.5%	92.2%
South African Medical Research Council	419 460	446 331	623 892	657 590	16.2%	36.6%	614 961	624 829	659 819	0.1%	36.0%
National Health Laboratory Service	603 534	674 052	678 926	711 871	5.7%	45.5%	746 464	789 759	833 986	5.4%	43.3%
Office of Health Standards Compliance	31 252	33 367	88 906	100 535	47.6%	4.3%	125 711	133 003	140 451	11.8%	7.0%
Council for Medical Schemes	4 525	4 751	2 556	1 613	-29.1%	0.2%	5 496	5 815	6 141	56.1%	0.3%
South African Health Product Regulatory Authority	-	-	-	-	-	-	133 648	128 399	135 589	-	5.6%
Households											
Social benefits											
Current	119	1 286	207	1 384	126.6%	0.1%	-	-	-	-100.0%	-
Employee social benefits	119	1 286	207	1 384	126.6%	0.1%	-	-	-	-100.0%	-
Households											
Other transfers to households											
Current	-	-	-	261	-	-	-	-	-	-100.0%	-
Employee social benefits	-	-	-	261	-	-	-	-	-	-100.0%	-
Departmental agencies and accounts											
Social security funds											
Current	3 062	3 215	3 363	3 541	5.0%	0.2%	3 718	3 934	4 154	5.5%	0.2%
Compensation Commissioner	3 062	3 215	3 363	3 541	5.0%	0.2%	3 718	3 934	4 154	5.5%	0.2%

1. Estimates of National Expenditure data tables are available and can be downloaded from www.treasury.gov.za. These data tables contain detailed information by goods and services, and transfers and subsidies item by programme.

Personnel information

Table 16.19 Health Regulation and Compliance Management personnel numbers and cost by salary level¹

Number of posts estimated for 31 March 2017		Number and cost ² of personnel posts filled / planned for on funded establishment												Number					
Number of funded posts	Number of posts additional to the establishment	Actual			Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)				
		2015/16		2016/17		2017/18		2018/19		2019/20		2016/17 - 2019/20							
Health Regulation and Compliance Management		Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost			
Salary level	131	–	334	124.0	0.4	355	153.0	0.4	118	54.6	0.5	121	59.6	0.5	122	64.4	0.5	-30.0%	100.0%
1 – 6	74	–	152	14.5	0.1	153	15.9	0.1	56	8.6	0.2	58	9.4	0.2	59	10.3	0.2	-27.2%	45.5%
7 – 10	38	–	66	29.4	0.4	66	32.0	0.5	33	16.9	0.5	34	18.8	0.6	34	20.3	0.6	-19.8%	23.3%
11 – 12	13	–	105	68.9	0.7	115	83.4	0.7	15	13.3	0.9	15	14.5	1.0	15	15.7	1.0	-49.3%	22.3%
13 – 16	6	–	11	11.2	1.0	21	21.7	1.0	14	15.8	1.1	14	16.9	1.2	14	18.1	1.3	-12.6%	8.8%

1. Data has been provided by the department and may not necessarily reconcile with official government personnel data.

2. Rand million.

Entities¹

National Health Laboratory Service

Mandate

The National Health Laboratory Service was established in 2001 in terms of the National Health Laboratory Service Act (2000). The entity is mandated to support the Department of Health by providing cost effective diagnostic laboratory services to all state clinics and hospitals. It also provides health science training and education, and supports health research. It is the biggest diagnostic pathology service in South Africa, servicing more than 80 per cent of the population, through a national network of 268 laboratories. Its specialised divisions include the National Institute for Communicable Diseases, the National Institute for Occupational Health, the National Cancer Registry and the Anti-Venom Unit.

Selected performance indicators

Table 16.20 National Health Laboratory Service performance indicators by programme/objective/activity and related outcome

Indicator	Programme/objective/activity	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Percentage of CD4 tests performed within 48 hours	Laboratory tests	Outcome 2: A long and healthy life for all South Africans	90%	89%	89%	90%	90%	90%	90%
			(3 540 662/ 3 934 069)	(3 229 535/ 3 628 691)	(3 043 404/ 3 419 555)				
Percentage of viral load tests performed within 96 hours	Laboratory tests		86%	81%	64%	90%	70%	75%	80%
			(2 449 051/ 2 905 873)	(2 931 375/ 3 618 981)	(2 757 422/ 4 308 472)				
Percentage of tuberculosis microscopy/GeneXPert tests performed within 48 hours	Laboratory tests		92%	92%	91%	90%	90%	90%	90%
			(3 392 935/ 3 687 973)	(3 388 492/ 3 683 144)	(3 005 801/ 3 303 078)				
Percentage of HIV polymerase chain reaction tests performed within 96 hours	Laboratory tests		82%	70%	73%	90%	75%	80%	80%
		(293 832/ 358 332)	(327 897/ 468 424)	(408 296/ 559 310)					
Percentage of cervical smear tests performed within five weeks	Laboratory tests	63%	57%	48%	90%	55%	70%	80%	
		(525 850/ 834 683)	(503 645/ 883 587)	(445 827/ 928 806)					
Percentage of academic laboratories accredited (national central)	Research	– ¹	– ¹	84% (59/70)	90%	95%	99%	100%	
Percentage laboratories achieving proficiency testing schemes performance standards at a level of at least 80%	Laboratory tests	– ¹	– ¹	– ¹	80%	82%	83%	85%	

¹ This section has been compiled with the latest available information from the entities concerned.

Table 16.20 National Health Laboratory Service performance indicators by programme/objective/activity and related outcome

Indicator	Programme/objective/activity	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Number of research reports submitted to influence policy per year	Research	Outcome 2: A long and healthy life for all South Africans	- ¹	- ¹	4	4	4	4	3
Number of peer reviewed journals published per year	Surveillance of communicable diseases		- ¹	- ¹	120	120	120	120	120
Number of occupational hygiene assessments conducted per year	Occupational health		- ¹	- ¹	- ¹	17	22	40	48
Percentage of autopsy examinations completed and reported	Occupational health		- ¹	- ¹	- ¹	100%	100%	100%	100%

1. No historical data available.

Expenditure analysis

The National Health Laboratory Service will, over the medium term, continue to conduct affordable, sustainable and high quality laboratory services to health care facilities, mainly in the public sector. The organisation will focus on the national priority programmes, created in 2010 to address the Department of Health's need to increase access to patient testing, including HIV and associated opportunistic infections, such as tuberculosis, cryptococcus and hepatitis. The organisation will also continue to provide a training platform for pathologists and other health professionals, and conduct research through the National Institute of Communicable Diseases and the National Institute for Occupational Health, both housed within the service. These are seen as important contributions to the National Development Plan's goal of improving the quality of health care services and controlling epidemics, and to the realisation of outcome 2 (a long and healthy life for all South Africans) of government's 2014-2019 medium-term strategic framework.

The laboratory testing programme, which makes up 77.7 per cent of the service's total expenditure over the medium term, is set to grow by 7.4 per cent per year. This is expected to allow for increased test volumes and improved turnaround times. In addition, seven uninterrupted power supply systems are being installed nationwide to ensure that processing continues in spite of power failures. This will ensure that the most important tests, such as CD4 count, TB GeneXpert and polymerase chain reaction (for diagnosis of HIV) are conducted within their respective timeframes. An increase of 2.4 per cent in total test volumes, from 84 891 560 in 2014/15 to 86 891 560 in 2015/16, translated into an increase of R697 million in test revenue. The increase in volume was largely due to the increase in HIV viral load and HIV-PCR tests. As a result of increased gate keeping efforts by provincial departments of health, test volumes are estimated to grow at 2 per cent over the medium term, to 94 665 115 by 2019/20. The increased test volumes, coupled with annual tariff adjustments, will increase laboratory test revenue by 5.3 per cent per year over the medium term, from R6.5 billion in 2016/17 to R7.6 billion in 2019/20. Laboratory tests are expected to generate 86.3 per cent of total revenue.

Through the National Institute for Communicable Diseases and the National Institute for Occupational Health, and through its own research programme, the service contributes to research and development and provides a training platform for students of pathology. Altogether, these three programmes are allocated R2.8 billion over the MTEF period. A total of 242 registrars are in training to become pathologists and 27 intern scientists are in training to become scientists. In 2015/16, 27 pathologists and 10 scientists were qualified and the plan is to admit 35 registrars and 50 intern medical scientists per year over the MTEF period. The funding will also enable the National Institute of Communicable Diseases to publish 120 peer-reviewed articles per year and the National Institute for Occupational Health to increase the number of occupational hygiene assessments from 17 in 2016/17 to 48 in 2019/20.

Programmes/objectives/activities

Table 16.21 National Health Laboratory Service expenditure trends and estimates by programme/objective/activity

R thousand	Audited outcome			Revised estimate 2016/17	Average growth rate (%)	Average: Expenditure/Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/Total (%)
	2013/14	2014/15	2015/16				2017/18	2018/19	2019/20		
Administration	473 588	621 173	1 202 615	640 352	10.6%	11.5%	843 838	908 552	978 044	15.2%	10.7%
Surveillance of communicable diseases	161 249	167 042	271 645	319 659	25.6%	3.6%	326 111	352 518	372 259	5.2%	4.4%
Occupational health	71 186	72 666	90 101	108 335	15.0%	1.3%	117 645	125 126	132 133	6.8%	1.5%
Laboratory tests	4 717 831	4 919 247	4 930 781	5 464 043	5.0%	79.1%	5 890 476	6 292 737	6 761 742	7.4%	77.7%
Research	365 048	179 799	190 990	409 000	3.9%	4.5%	438 400	462 038	487 912	6.1%	5.7%
Total	5 788 902	5 959 927	6 686 132	6 941 389	6.2%	100.0%	7 616 470	8 140 971	8 732 090	8.0%	100.0%

Statements of historical financial performance and position

Table 16.22 National Health Laboratory Service statements of historical financial performance and position

Statement of financial performance									
R thousand	Audited outcome		Audited outcome		Audited outcome		Revised estimate		Average: Outcome/Budget (%)
	Budget	Budget	Budget	Budget	Budget	Budget	Budget		
	2013/14	2014/15	2014/15	2015/16	2015/16	2016/17	2016/17	2013/14 - 2016/17	
Revenue									
Non-tax revenue	4 328 595	4 802 780	4 970 361	5 340 359	5 819 767	6 104 658	6 143 703	6 599 056	107.5%
Sale of goods and services other than capital assets	4 267 295	4 598 261	4 906 361	5 066 294	5 742 732	5 763 268	6 008 256	6 463 609	104.6%
<i>of which:</i>									
<i>Sales by market establishment</i>	4 267 295	4 598 261	4 906 361	5 066 294	5 742 732	5 763 268	6 008 256	6 463 609	104.6%
Other non-tax revenue	61 300	204 519	64 000	274 065	77 035	341 390	135 447	135 447	282.9%
Transfers received	105 463	833 923	225 280	799 315	678 926	860 761	711 871	711 871	186.2%
Total revenue	4 434 058	5 636 703	5 195 641	6 139 674	6 498 693	6 965 419	6 855 574	7 310 927	113.4%
Expenses									
Current expenses	4 399 583	5 788 902	5 057 290	5 959 927	6 147 112	6 686 132	6 602 302	6 941 389	114.3%
Compensation of employees	2 333 593	2 090 509	2 107 700	2 112 434	2 423 485	2 565 987	2 571 778	3 064 721	104.2%
Goods and services	1 910 254	3 625 681	2 898 470	3 744 069	3 672 684	4 001 393	3 975 989	3 746 181	121.4%
Depreciation	145 736	66 691	44 720	101 769	40 442	118 568	44 535	130 303	151.5%
Interest, dividends and rent on land	10 000	6 021	6 400	1 655	10 500	184	10 000	184	21.8%
Total expenses	4 399 583	5 788 902	5 057 290	5 959 927	6 147 112	6 686 132	6 602 302	6 941 389	114.3%
Surplus/(Deficit)	34 475	(152 199)	138 351	179 747	351 581	279 287	253 272	369 538	
Statement of financial position									
Carrying value of assets	620 467	551 049	676 309	521 893	764 229	554 145	685 955	784 809	87.8%
<i>of which:</i>									
<i>Acquisition of assets</i>	(194 000)	(186 042)	(213 400)	(47 641)	(526 425)	(155 344)	(250 000)	(200 000)	49.8%
Inventory	97 447	81 042	100 281	88 970	103 201	104 218	110 276	110 276	93.5%
Receivables and prepayments	2 505 106	2 408 606	1 549 228	2 862 359	2 135 463	3 154 924	2 742 572	3 090 945	128.9%
Cash and cash equivalents	639 308	347 952	677 421	651 166	699 424	738 975	889 856	707 078	84.1%
Total assets	3 862 328	3 388 649	3 003 239	4 124 388	3 702 317	4 552 262	4 428 659	4 693 107	111.7%
Accumulated surplus/(deficit)	1 365 989	1 468 835	1 363 770	1 643 151	2 043 836	1 922 439	2 297 108	2 291 977	103.6%
Capital and reserves	42 837	42 837	42 837	332	42 837	332	332	332	34.0%
Capital reserve fund	80 000	-	80 000	-	-	-	-	-	-
Finance lease	-	137	-	-	-	-	-	-	-
Deferred income	-	57 992	-	52 264	-	4 137	58 171	58 171	296.6%
Trade and other payables	1 282 475	759 825	436 407	1 080 795	439 431	914 172	696 723	932 434	129.1%
Benefits payable	-	-	-	-	-	21 003	24 839	24 839	184.6%
Provisions	1 091 027	1 059 023	1 080 225	1 321 709	1 176 213	1 621 283	1 351 486	1 385 354	114.7%
Derivatives financial instruments	-	-	-	26 137	-	68 896	-	-	-
Total equity and liabilities	3 862 328	3 388 649	3 003 239	4 124 388	3 702 317	4 552 262	4 428 659	4 693 107	111.7%

Statements of estimates of financial performance and position

Table 16.23 National Health Laboratory Service statements of estimates of financial performance and position

Statement of financial performance		Revised estimate	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
R thousand	2016/17				2013/14 - 2016/17	2017/18	2018/19		
Revenue									
Non-tax revenue	6 599 056	11.2%	87.5%	6 924 274	7 255 901	7 741 309	5.5%	88.4%	
Sale of goods and services other than capital assets	6 463 609	12.0%	83.8%	6 751 134	7 080 039	7 554 039	5.3%	86.3%	
<i>of which:</i>									
<i>Sales by market establishment</i>	6 463 609	12.0%	83.8%	6 751 134	7 080 039	7 554 039	5.3%	86.3%	
Other non-tax revenue	135 447	-12.8%	3.7%	173 140	175 862	187 270	11.4%	2.1%	
Transfers received	711 871	-5.1%	12.5%	964 717	1 022 465	1 082 222	15.0%	11.6%	
Total revenue	7 310 927	9.1%	100.0%	7 888 991	8 278 366	8 823 531	6.5%	100.0%	
Expenses									
Current expenses	6 941 389	6.2%	100.0%	7 616 470	8 140 971	8 732 090	8.0%	137.2%	
Compensation of employees	3 064 721	13.6%	38.5%	3 454 939	3 806 089	4 189 899	11.0%	46.1%	
Goods and services	3 746 181	1.1%	59.8%	4 026 914	4 198 859	4 402 530	5.5%	52.2%	
Depreciation	130 303	25.0%	1.6%	134 417	135 774	139 362	2.3%	1.7%	
Interest, dividends and rent on land	184	-68.7%	0.0%	200	250	300	17.7%	0.0%	
Total expenses	6 941 389	6.2%	100.0%	7 616 470	8 140 971	8 732 090	8.0%	100.0%	
Surplus/(Deficit)	369 538	(2)		272 521	137 395	91 441	-37.2%		
Statement of financial position									
Carrying value of assets	784 809	12.5%	14.5%	989 918	1 175 964	1 329 687	19.2%	20.3%	
<i>of which:</i>									
<i>Acquisition of assets</i>	(200 000)	2.4%	-3.6%	(235 000)	(225 000)	(200 000)	-	-4.1%	
Inventory	110 276	10.8%	2.3%	111 379	112 492	113 617	1.0%	2.2%	
Receivables and prepayments	3 090 945	8.7%	68.9%	3 411 911	3 473 173	3 460 933	3.8%	64.5%	
Cash and cash equivalents	707 078	26.7%	14.3%	623 308	731 106	649 800	-2.8%	13.1%	
Total assets	4 693 107	11.5%	100.0%	5 136 516	5 492 735	5 554 038	5.8%	100.0%	
Accumulated surplus/(deficit)	2 291 977	16.0%	43.6%	2 564 498	2 701 893	2 793 334	6.8%	49.6%	
Capital and reserves	332	-80.2%	0.3%	332	332	332	-	0.0%	
Deferred income	58 171	0.1%	1.1%	61 371	64 746	68 307	5.5%	1.2%	
Trade and other payables	932 434	7.1%	22.1%	1 098 310	1 311 946	1 276 430	11.0%	22.0%	
Benefits payable	24 839	-	0.2%	24 864	24 889	24 914	0.1%	0.5%	
Provisions	1 385 354	9.4%	32.1%	1 387 141	1 388 929	1 390 721	0.1%	26.7%	
Total equity and liabilities	4 693 107	11.5%	100.0%	5 136 516	5 492 735	5 554 038	5.8%	100.0%	

Personnel information

Table 16.24 National Health Laboratory Service personnel numbers and cost by salary level

Number of posts estimated for 31 March 2017			Number and cost ¹ of personnel posts filled / planned for on funded establishment												Number				
Number of funded posts	Number of posts on approved establishment	Number of posts on approved establishment	Actual		Revised estimate		Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)					
			2015/16	Unit cost	2016/17	Unit cost	2017/18		2018/19		2019/20				2016/17 - 2019/20				
National Health Laboratory Service			Number	Cost	Number	Cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost				
Salary level	7 965	7 965	6 987	2 566.0	0.4	7 965	3 064.7	0.4	7 965	3 454.9	0.4	7 965	3 806.1	0.5	7 965	4 189.9	0.5	11.0%	100.0%
1 - 6	3 505	3 505	3 005	494.1	0.2	3 505	590.1	0.2	3 505	662.6	0.2	3 505	729.9	0.2	3 505	803.6	0.2	10.8%	44.0%
7 - 10	3 097	3 097	2 797	920.0	0.3	3 097	1 098.9	0.4	3 097	1 233.9	0.4	3 097	1 359.2	0.4	3 097	1 496.5	0.5	10.8%	38.9%
11 - 12	1 085	1 085	907	759.0	0.8	1 085	906.5	0.8	1 085	1 031.5	1.0	1 085	1 136.5	1.0	1 085	1 250.7	1.2	11.3%	13.6%
13 - 16	277	277	277	390.7	1.4	277	466.6	1.7	277	523.9	1.9	277	577.1	2.1	277	635.4	2.3	10.8%	3.5%
17 - 22	1	1	1	2.2	2.2	1	2.7	2.7	1	3.0	3.0	1	3.3	3.3	1	3.7	3.7	10.8%	0.0%

1. Rand million.

Compensation Commissioner for Occupational Diseases in Mines and Works

Mandate

The Compensation Commissioner for Occupational Diseases in Mines and Works was established in terms of the Occupational Diseases in Mines and Works Act (1973). The act gives the commissioner the mandate to: collect levies from controlled mines and works, to compensate workers and ex-workers in controlled mines and works for occupational diseases of the cardiorespiratory organs, and reimburse workers for loss of earnings

incurred during tuberculosis treatment. The commissioner compensates the dependants of deceased workers and also administers pensions for qualifying ex-workers or their dependants.

Selected performance indicators

Table 16.25 Compensation Commissioner for Occupational Diseases in Mines and Works performance indicators by programme/ objective/ activity and related outcome

Indicator	Programme/objective/activity	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Number of workers and ex-workers in controlled mines and works accessing benefit medical examinations per year	Compensation of ex-miners	Outcome 2: A long and healthy life for all South Africans	10 694	9 718	15 318	15 000	16 000	20 000	22 000
Number of claims processed by the certification committee of the Medical Bureau for Occupational Diseases per year	Compensation of ex-miners		4 444	6 324	7 233	10 000	12 000	14 000	15 400
Number of claims paid by the commissioner (other than pensioners) per year	Compensation of ex-miners		3 124	1 979	1 775	3 300	6 000	7 000	7 700
Number of outreach and awareness activities with service providers, unions, employers, workers and ex-workers conducted per year	Compensation of ex-miners		6	8	34	60	70	80	88
Number of workers in controlled mines and works paid for loss of earnings while undergoing tuberculosis treatment per year	Compensation of tuberculosis		1 923	459	598	770	850	950	1 045
Annual reports, including the financial statements of the Mines and Works Compensation Fund, submitted to the auditor general	Administration		-1	-1	-1	2010/11 and 2011/12 annual reports and financial statements	2012/13 and 2013/14 annual reports and financial statements	2014/15 and 2015/16 annual reports and financial statements	2016/17 and 2017/18 annual report and annual financial statement

1. No historical data available.

Expenditure analysis

The commissioner's focus over the medium term will be on decentralising and increasing the number of service centres to bring service delivery closer to ex-miners and increase the number of claims paid out. This activity supports the National Development Plan's goal of providing welfare for vulnerable groups, outcome 13 (a comprehensive, responsive and sustainable social protection system) and outcome 2 (a long and healthy life for all South Africans) of government's 2014-2019 medium-term strategic framework.

To increase the number of paid-out claims, the commissioner has partnered with provincial departments of health to set up two additional services centres to conduct medical assessments in Northern Cape and Limpopo within close proximity to public health facilities. The commissioner is also partnering with neighbouring-country governments to expand operations in their countries, and minimise travel to South Africa for the submission of claims. Ex-mineworker associations have also been invited to assist with tracking and tracing ex-miners. These partnerships are aimed at informing qualifying ex-workers of their rights and of correct procedures in lodging claims, and have already yielded results. At the end of the third quarter in 2016/17, 3 530 claims had been paid, already exceeding the annual target of 3 300. The number of people accessing benefit medical examinations is expected to increase from 15 318 in 2015/16 to 22 000 in 2019/20 and the number of claims paid out will reach 7 700 in 2019/20. This growth is expected to increase transfers to households in the compensation of ex-miners programme, and the compensation of tuberculosis programme, by 6.8 per cent annually from R163 million in 2016/17 to R198.5 million in 2019/20. The commissioner also plans to follow up on outstanding levies by conducting onsite visits to controlled mines and works over the medium term. In December 2016, these efforts generated additional revenue of R22.9 million, which will be used to fund the expected increase in the payout of claims. An actuarial valuation is being finalised during 2016/17 to determine the liability of the fund and will then be used to inform how levies should be adjusted to cover the liability. Although the amount of the expected increase in levies has not yet been determined, it is anticipated that this process will strengthen the financial position of the fund.

The Minister of Health has approved an increase in pension levels. This will be funded by the annual transfer from the department, and is expected to grow at an average annual rate of 5.5 per cent over the medium term from R3.5 million in 2016/17 to R4.2 million in 2019/20.

Programmes/objectives/activities

Table 16.26 Compensation Commissioner for Occupational Diseases in Mines and Works expenditure trends and estimates by programme/objective/activity

R thousand	Audited outcome			Revised estimate 2016/17	Average growth rate (%) 2013/14 - 2016/17	Average Expenditure/Total (%)	Medium-term expenditure estimate			Average growth rate (%) 2016/17 - 2019/20	Average Expenditure/Total (%)
	2013/14	2014/15	2015/16				2017/18	2018/19	2019/20		
Administration	7 724	7 411	7 839	8 127	1.7%	4.8%	8 393	7 360	7 772	-1.5%	4.1%
Compensation of pensioners	3 062	3 215	3 363	3 215	1.6%	2.0%	3 718	3 904	4 154	8.9%	1.9%
Compensation of ex-miners	113 996	132 244	134 244	140 956	7.3%	79.3%	148 003	151 300	159 773	4.3%	77.0%
Compensation of tuberculosis	18 961	22 068	25 599	22 068	5.2%	13.5%	34 445	36 650	38 702	20.6%	16.8%
Eastern Cape project	843	981	860	981	5.2%	0.6%	670	75	79	-56.8%	0.2%
Total	144 586	165 919	171 905	175 347	6.6%	100.0%	195 229	199 289	210 481	6.3%	100.0%

Statements of historical financial performance and position

Table 16.27 Compensation Commissioner for Occupational Diseases in Mines and Works statements of historical financial performance and position

R thousand	Audited outcome		Audited outcome		Audited outcome		Budget estimate	Revised estimate	Average Outcome/Budget (%) 2013/14 - 2016/17
	Budget	Audited outcome	Budget	Audited outcome	Budget	Audited outcome			
	2013/14	2014/15	2014/15	2015/16	2015/16	2016/17	2016/17		
Statement of financial performance									
Revenue									
Tax revenue	255 995	269 202	346 354	260 939	296 795	296 795	311 635	311 635	94.0%
Non-tax revenue	94 607	130 851	152 435	172 104	201 170	201 170	193 123	193 123	108.7%
Sale of goods and services other than capital assets	-	-	-	1 621	-	-	-	-	-
of which:									
Other sales	-	-	-	1 621	-	-	-	-	-
Other non-tax revenue	94 607	130 851	152 435	170 483	201 170	201 170	193 123	193 123	108.5%
Transfers received	3 100	3 062	3 215	3 215	3 363	3 363	3 541	3 541	99.7%
Total revenue	353 702	403 115	502 004	436 258	501 328	501 328	508 299	508 299	99.1%
Expenses									
Current expenses	768	7 724	7 016	7 411	7 839	7 839	8 127	8 127	131.0%
Goods and services	173	7 480	6 975	7 175	7 614	7 614	7 908	7 908	133.1%
Interest, dividends and rent on land	595	244	41	236	225	225	219	219	85.5%
Transfers and subsidies	155 786	136 862	248 100	158 508	164 066	164 066	167 220	167 220	85.2%
Total expenses	156 554	144 586	255 116	165 919	171 905	171 905	175 347	175 347	86.7%
Surplus/(Deficit)	197 147	258 529	246 888	270 339	329 423	329 423	332 952	332 952	
Statement of financial position									
Investments	2 469 866	2 606 886	2 593 359	2 963 136	3 163 067	3 163 067	3 336 253	3 336 253	104.4%
Receivables and prepayments	30 611	29 578	35 000	40 488	27 338	27 338	18 360	18 360	104.0%
Cash and cash equivalents	49 000	74 618	52 000	58 995	60 000	60 000	70 000	70 000	114.1%
Total assets	2 549 477	2 711 082	2 680 359	3 062 619	3 250 405	3 250 405	3 424 613	3 424 613	104.6%
Accumulated surplus/(deficit)	112 454	1 353 934	238 359	1 891 950	2 176 824	2 176 824	2 467 229	2 467 229	158.0%
Trade and other payables	3 500	45 753	3 600	27 024	19 560	19 560	16 363	16 363	252.7%
Provisions	2 433 523	1 311 395	2 438 400	1 143 645	1 054 021	1 054 021	941 021	941 021	64.8%
Total equity and liabilities	2 549 477	2 711 082	2 680 359	3 062 619	3 250 405	3 250 405	3 424 613	3 424 613	104.6%

Statements of estimates of financial performance and position

Table 16.28 Compensation Commissioner for Occupational Diseases in Mines and Works statements of estimates of financial performance and position

R thousand	Revised estimate 2016/17	Average growth rate (%) 2013/14 - 2016/17	Average Expenditure/Total (%)	Medium-term estimate			Average growth rate (%) 2016/17 - 2019/20	Average Expenditure/Total (%)
				2017/18	2018/19	2019/20		
Statement of financial performance								
Revenue								
Tax revenue	311 635	5.0%	61.8%	320 984	346 662	366 075	5.5%	62.8%
Non-tax revenue	193 123	13.9%	37.5%	183 467	196 310	207 303	2.4%	36.5%
Other non-tax revenue	193 123	13.9%	37.4%	183 467	196 310	207 303	2.4%	36.5%
Transfers received	3 541	5.0%	0.7%	3 718	3 934	4 154	5.5%	0.7%
Total revenue	508 299	8.0%	100.0%	508 169	546 906	577 532	4.3%	100.0%
Expenses								
Current expenses	8 127	1.7%	4.8%	8 393	7 360	7 772	-1.5%	4.8%
Goods and services	7 908	1.9%	4.6%	8 188	7 165	7 566	-1.5%	4.0%
Interest, dividends and rent on land	219	-3.5%	0.1%	205	195	206	-2.0%	0.1%
Transfers and subsidies	167 220	6.9%	95.2%	186 836	191 929	202 709	6.6%	95.9%
Total expenses	175 347	6.6%	100.0%	195 229	199 289	210 481	6.3%	100.0%
Surplus/(Deficit)	332 952			312 940	347 617	367 051	3.3%	

Table 16.28 Compensation Commissioner for Occupational Diseases in Mines and Works statements of estimates of financial performance and position

Statement of financial position	Revised estimate	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
				2017/18	2018/19	2019/20		
R thousand	2016/17	2013/14 - 2016/17		2017/18	2018/19	2019/20	2016/17 - 2019/20	
Investments	3 336 253	8.6%	96.9%	3 283 545	3 462 257	3 823 457	4.6%	97.6%
Receivables and prepayments	18 360	-14.7%	0.9%	4 200	14 650	15 470	-5.5%	0.4%
Cash and cash equivalents	70 000	-2.1%	2.1%	75 000	85 000	65 000	-2.4%	2.1%
Total assets	3 424 613	8.1%	100.0%	3 362 745	3 561 907	3 903 927	4.5%	100.0%
Accumulated surplus/(deficit)	2 467 229	22.1%	62.7%	2 444 745	2 784 687	2 958 951	6.2%	74.7%
Trade and other payables	16 363	-29.0%	0.9%	3 230	12 450	13 147	-7.0%	0.3%
Provisions	941 021	-10.5%	36.4%	914 770	764 770	931 829	-0.3%	25.0%
Total equity and liabilities	3 424 613	8.1%	100.0%	3 362 745	3 561 907	3 903 927	4.5%	100.0%

Council for Medical Schemes

Mandate

The Council for Medical Schemes was established in terms of the Medical Schemes Act (1998), as a regulatory authority responsible for overseeing the medical schemes industry in South Africa. Section 7 of the act sets out the functions of the council, which include protecting the interests of beneficiaries, controlling and coordinating the functioning of medical schemes, collecting and disseminating information about private health care, and advising the Minister of Health on any matter concerning medical schemes.

Selected performance indicators

Table 16.29 Council for Medical Schemes performance indicators by programme/objective/activity and related outcome

Indicator	Programme/objective/activity	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Number of brokers and broker organisations that comply with the accreditation requirements accredited within 21 working days of receipt of complete applications per year	Accreditation	Outcome 2: A long and healthy life for all South Africans	5 564	5 027	5 192	4 580	4 045	4 980	4 980
Percentage of interim rule amendments processed within 14 days of receipt of all information	Benefit management		100% (212)	100% (242)	100% (212)	100%	100%	100%	100%
Percentage of non-compliance cases against regulated entities where enforcement interventions are undertaken	Compliance and investigation		- ¹	100% (52)	100% (45)	100%	100%	100%	100%
Number of research projects and support projects finalised per year	Research and monitoring		13	11	8	8	8	9	9
Percentage of clinical complaints reviewed within 30 days of receipt	Strategy office		839 ²	623 ²	1 472 ²	90%	95%	100%	100%

1. No historical data available.

2. Indicator previously measured number of clinical complaints processed not the percentage against the total complaints received.

Expenditure analysis

The council's focus over the medium term will be on strengthening its monitoring and compliance activities to ensure that registered medical schemes comply with the Medical Schemes Act (1998); providing a platform for the resolution of complaints by medical scheme beneficiaries; and developing a national register of patients covered by medical schemes.

The council has started to prepare for the impact of the demarcation regulations, which come into effect in 2017/18 (when it will need to adjudicate on whether health insurance products need to be registered in terms of the Medical Schemes Act (1998) or not and register low cost benefit options in the medical schemes industry). The council will also advise the National Department of Health on the future role of medical schemes in a national health insurance context, and conduct investigations into irregularities in governance of medical schemes to ensure compliance with the act and other applicable legislation. Over the MTEF period, the council aims to undertake enforcement interventions on 100 per cent of non-compliance cases against regulated entities, which will increase spending in the compliance and investigation programme by 6.9 per cent per year from

R8.4 million in 2016/17 to R10.3 million in 2019/20. Enforcement interventions result in lengthy litigation processes that contribute to high legal costs. Legal fees are therefore a key cost driver in the administration programme, and expenditure in this programme is set to grow at an average annual rate of 6.1 per cent, from R75.4 million in 2016/17 to R90 million in 2019/20.

The council has improved the turnaround time for resolving complaints from medical scheme beneficiaries and is aiming to ensure that by 2019/20, 85 per cent of all complaints are resolved within 120 days. The complaints adjudication programme will grow by 10.5 per cent per year from R5.9 million in 2016/17 to R7.9 million in 2019/20. In addition, to further clarify members' rights, a project has been initiated to define prescribed minimum benefits. The council will collaborate with academic institutions and experts to fast-track this process and increase the capacity of the strategy office programme to complete this project and to review complex clinical complaints. The programme budget is expected to grow at an average annual rate of 10.9 per cent over the medium term, from R8.3 million in 2016/17 to R11.4 million in 2019/20 to accommodate the recruitment of additional personnel. Clinical complaints reviewed within 30 days of receipt are expected to rise from 90 per cent in 2016/17 to 100 per cent each year over the MTEF period.

Government recognises the importance and need for a database of funded medical scheme patients in South Africa. For this reason, the Minister of Health has conferred the function of establishing and administering a registry of beneficiaries on the council. The data collected will be used for health resource planning and claim verification, among other regulatory functions. The council aims to increase the number of research and support projects from 8 in 2016/17 to 9 in 2019/20. These projects will be funded from the annual transfer from the department, which is set to increase from R1.6 million in 2016/17 to R6.1 million in 2019/20.

Given the highly specialised and labour intensive nature of the work to deliver on these focus areas, personnel numbers are expected to increase from 107 in 2015/16 to 114 in 2019/20, and spending on compensation of employees is expected to increase from 64.3 per cent, or R90.7 million, of total expenditure in 2016/17 to 66.3 per cent, or R113.4 million, in 2019/20. This is largely due to efforts made to strengthen the strategy office, the impact of the demarcation regulations and the development of low-cost benefit options.

The council's revenue is almost wholly derived from levies collected from medical schemes. It is expected that 95 per cent of income, increasing from R137.2 million in 2016/17 to R159.8 million in 2019/20, will be derived from levy income. Approximately 3 per cent will come from the grants received from the department and 2 per cent from other income.

Programmes/objectives/activities

Table 16.30 Council for Medical Schemes expenditure trends and estimates by programme/objective/activity

R thousand	Audited outcome				Revised estimate 2016/17	Average growth rate (%) 2013/14 - 2016/17	Average: Expenditure/Total (%) 2013/14 - 2016/17	Medium-term expenditure estimate			Average growth rate (%) 2016/17 - 2019/20	Average: Expenditure/Total (%) 2016/17 - 2019/20
	2013/14	2014/15	2015/16	2016/17				2017/18	2018/19	2019/20		
Administration	63 292	72 408	67 983	75 367	6.0%	56.0%	82 621	86 483	89 992	6.1%	53.3%	
Accreditation	6 116	7 166	7 693	8 500	11.6%	5.9%	9 150	9 597	10 335	6.7%	6.0%	
Benefit management	4 574	4 758	5 124	6 276	11.1%	4.1%	6 721	7 194	7 725	7.2%	4.4%	
Complaints adjudication	4 435	5 010	5 227	5 864	9.8%	4.1%	6 294	6 714	7 921	10.5%	4.3%	
Compliance and investigation	5 307	6 719	6 505	8 438	16.7%	5.4%	9 041	9 769	10 313	6.9%	6.0%	
Financial supervision	8 816	9 742	10 278	11 081	7.9%	8.0%	11 964	12 867	13 422	6.6%	7.9%	
Research and monitoring	5 683	6 045	6 794	7 565	10.0%	5.2%	7 998	8 638	8 016	1.9%	5.1%	
Stakeholder relations	7 670	8 596	9 009	9 728	8.2%	7.0%	10 404	11 147	12 033	7.3%	6.9%	
Strategy office	3 823	4 935	4 611	8 333	29.7%	4.3%	8 939	9 607	11 354	10.9%	6.1%	
Total	109 716	125 379	123 224	141 152	8.8%	100.0%	153 132	162 016	171 111	6.6%	100.0%	

Statements of historical financial performance and position

Table 16.31 Council for Medical Schemes statements of historical financial performance and position

Statement of financial performance									
R thousand	Budget	Audited outcome	Budget	Audited outcome	Budget	Audited outcome	Budget estimate	Revised estimate	Average: Outcome/Budget (%)
	2013/14		2014/15		2015/16		2016/17		2013/14 - 2016/17
Revenue									
Non-tax revenue	110 131	110 106	115 348	117 448	128 791	132 332	139 539	139 539	101.1%
Sale of goods and services other than capital assets	109 291	105 836	114 448	113 815	126 358	126 715	137 198	137 198	99.2%
<i>of which:</i>									
Administrative fees	109 291	105 836	114 448	113 815	126 358	126 715	137 198	137 198	99.2%
Other non-tax revenue	840	4 270	900	3 633	2 433	5 617	2 341	2 341	243.5%
Transfers received	4 525	4 935	4 751	4 856	2 556	456	1 613	1 613	88.2%
Total revenue	114 656	115 041	120 099	122 304	131 347	132 788	141 152	141 152	100.8%
Expenses									
Current expenses	114 656	109 709	123 075	125 359	131 295	123 179	141 098	141 098	97.9%
Compensation of employees	73 417	66 198	77 008	74 357	82 412	78 380	90 790	90 790	95.7%
Goods and services	39 542	40 874	43 656	47 230	45 111	40 780	47 884	47 884	100.3%
Depreciation	1 697	2 637	2 411	3 772	3 772	4 019	2 424	2 424	124.7%
Transfers and subsidies	-	7	-	20	52	45	54	54	118.9%
Total expenses	114 656	109 716	123 075	125 379	131 347	123 224	141 152	141 152	97.9%
Surplus/(Deficit)	-	5 325	(2 976)	(3 075)	-	9 564	-	-	
Statement of financial position									
Carrying value of assets	6 370	13 737	14 665	17 521	19 852	18 355	19 852	19 852	114.4%
<i>of which:</i>									
Acquisition of assets	(2 619)	(1 957)	(2 200)	(7 612)	(6 103)	(5 112)	(2 424)	(2 424)	128.2%
Receivables and prepayments	3 622	5 627	3 738	6 835	6 836	7 131	6 836	6 836	125.7%
Cash and cash equivalents	10 123	15 086	14 134	10 515	7 749	24 687	7 749	7 749	146.0%
Total assets	20 115	34 450	32 537	34 871	34 437	50 173	34 437	34 437	126.7%
Accumulated surplus/(deficit)	8 130	20 147	13 018	17 072	16 637	26 636	16 637	16 637	147.9%
Capital reserve fund	-	-	-	-	-	2 254	-	-	-
Trade and other payables	7 897	13 147	19 519	16 771	16 772	20 098	16 772	16 772	109.6%
Provisions	4 088	1 156	-	1 028	1 028	1 185	1 028	1 028	71.6%
Total equity and liabilities	20 115	34 450	32 537	34 871	34 437	50 173	34 437	34 437	126.7%

Statements of estimates of financial performance and position

Table 16.32 Council for Medical Schemes statements of estimates of financial performance and position

Statement of financial performance									
R thousand	Revised estimate	Average growth rate (%)	Average: Expenditure/Total (%)	Medium-term estimate			Average growth rate (%)	Average: Expenditure/Total (%)	
	2016/17	2013/14 - 2016/17		2017/18	2018/19	2019/20	2016/17 - 2019/20		
Revenue									
Non-tax revenue	139 539	8.2%	97.6%	147 636	156 201	164 970	5.7%	97.0%	
Sale of goods and services other than capital assets	137 198	9.0%	94.4%	145 155	153 575	159 800	5.2%	95.0%	
<i>of which:</i>									
Administrative fees	137 198	9.0%	94.4%	145 155	153 575	159 800	5.2%	95.0%	
Other non-tax revenue	2 341	-18.2%	3.1%	2 481	2 626	5 170	30.2%	2.0%	
Transfers received	1 613	-31.1%	2.4%	5 496	5 815	6 141	56.1%	3.0%	
Total revenue	141 152	7.1%	100.0%	153 132	162 016	171 111	6.6%	100.0%	
Expenses									
Current expenses	141 098	8.7%	100.0%	153 074	161 955	171 045	6.6%	126.8%	
Compensation of employees	90 790	11.1%	61.9%	97 537	103 850	113 434	7.7%	64.6%	
Goods and services	47 884	5.4%	35.5%	52 972	55 391	53 939	4.0%	33.6%	
Depreciation	2 424	-2.8%	2.6%	2 565	2 714	3 672	14.8%	1.8%	
Transfers and subsidies	54	97.6%	-	58	61	66	6.9%	-	
Total expenses	141 152	8.8%	100.0%	153 132	162 016	171 111	6.6%	100.0%	
Surplus/(Deficit)		(1)							
Statement of financial position									
Carrying value of assets	19 852	13.1%	46.1%	19 852	19 852	19 852	-	57.6%	
<i>of which:</i>									
Acquisition of assets	(2 424)	7.4%	-11.2%	(2 564)	(2 713)	(3 670)	14.8%	-8.3%	
Receivables and prepayments	6 836	6.7%	17.5%	6 836	6 836	6 836	-	19.9%	
Cash and cash equivalents	7 749	-19.9%	36.4%	7 749	7 749	7 749	-	22.5%	
Total assets	34 437	-0.0%	100.0%	34 437	34 437	34 437	-	100.0%	
Accumulated surplus/(deficit)	16 637	-6.2%	52.2%	16 637	16 637	16 637	-	48.3%	
Trade and other payables	16 772	8.5%	43.8%	16 772	16 772	16 772	-	48.7%	
Provisions	1 028	-3.8%	2.9%	1 028	1 028	1 028	-	3.0%	
Total equity and liabilities	34 437	-	100.0%	34 437	34 437	34 437	-	100.0%	

Personnel information

Table 16.33 Council for Medical Schemes personnel numbers and cost by salary level

Number of posts estimated for 31 March 2017		Number and cost ¹ of personnel posts filled / planned for on funded establishment												Number					
Number of funded posts	Number of posts on approved establishment	Actual			Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)				
		2015/16			2016/17			2017/18		2018/19		2019/20				2016/17 - 2019/20			
		Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost						
Council for Medical Schemes	109	109	107	78.4	0.7	109	90.8	0.8	109	97.5	0.9	109	103.9	1.0	114	113.4	1.0	7.7%	100.0%
Salary level																			
1 – 6	–	–	3	0.4	0.1	–	–	–	–	–	–	–	–	–	3	0.5	0.2	–	0.7%
7 – 10	46	46	48	22.1	0.5	46	23.7	0.5	39	20.4	0.5	34	18.3	0.5	31	17.2	0.6	-10.2%	34.1%
11 – 12	40	40	38	30.7	0.8	40	33.6	0.8	41	34.6	0.8	40	34.1	0.9	41	35.7	0.9	2.0%	36.7%
13 – 16	22	22	17	24.8	1.5	22	31.0	1.4	28	39.9	1.4	35	51.4	1.5	38	57.3	1.5	22.7%	27.8%
17 – 22	1	1	1	0.5	0.5	1	2.5	2.5	1	2.6	2.6	–	–	–	1	2.8	2.8	4.5%	0.7%

1. Rand million.

Office of Health Standards Compliance

Mandate

The Office of Health Standards Compliance was established in terms of the National Health Amendment Act (2013). The office is mandated to: monitor and enforce the compliance of health establishments with the norms and standards prescribed by the Minister of Health in relation to the national health system; and ensure the consideration, investigation and disposal of complaints relating to non-compliance with prescribed norms and standards in a procedurally fair, economical and expeditious manner.

Selected performance indicators

Table 16.34 Office of Health Standards Compliance performance indicators by programme/objective/activity and related outcome

Indicator	Programme/objective/activity	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Percentage of public-sector health facilities inspected	Compliance inspectorate, certification and enforcement	Outcome 2: A long and healthy life for all South Africans	– ¹	– ¹	13% (496/ 3 816)	17% (649/ 3 816)	18% (689/ 3 816)	19% (725/ 3 816)	20% (763/ 3 816)
Percentage of private sector health establishments inspected annually by the Office of Health Standard Ccompliance	Compliance inspectorate, certification and enforcement		– ¹	– ¹	– ¹	20% (74/ 369)	– ²	25% (92/ 369)	30% (111/ 369)
Percentage of compliant health establishments certified within 60 days after the final inspection report	Compliance inspectorate, certification and enforcement		– ¹	– ¹	– ¹	100%	– ²	100%	100%
Percentage of investigations finalised by the ombud within six months	Complaints management and office of the ombud		– ¹	– ¹	– ¹	60%	70%	80%	85%
Percentage of ombud recommendations monitored for implementation by health establishments within six months of tabling to the office	Complaints management and office of the ombud		– ¹	– ¹	– ¹	60%	70%	80%	85%
Number of relevant authorities responsible for supporting health establishments that have received guidance for compliance with norms and standards per year	Health standards design, analysis and support budget		– ¹	– ¹	6	7	8	12	14

1. No historical data available.

2. Commencement of these activities is contingent on the relevant regulations being finalised.

Expenditure analysis

The Office of Health Standards Compliance was established to improve the quality of health care services, which is one of the key priorities in the National Development Plan. Over the medium term, the office will focus on inspecting public health establishments, investigating complaints on the quality of the health service, and analysing and further developing norms and standards for the quality of health establishments. The inspection of private health establishments and certification of health establishments will begin in 2018/19, once the relevant regulations have been finalised.

The 2015 White Paper on National Health Insurance stipulates that public and private providers must meet the minimum quality norms and standards and be certified by the office before they can be contracted by the National Health Insurance Fund. Over the medium term, the office plans to increase inspections of private health establishments to 30 per cent by 2019/20 and inspections of public health facilities from 17 per cent in 2016/17 to 20 per cent by 2019/20. To assist the office in achieving its inspection targets over the MTEF period, five additional inspectors will be recruited into the compliance inspectorate programme. Expenditure in this programme is projected to grow at an average annual rate of 13.2 per cent from R39.4 million in 2016/17 to R57.2 million in 2019/20, thus making it the entity's largest spending programme.

In 2016/17, the Minister of Health appointed the first ombud to ensure that complaints are investigated and resolved within six months. In this timeframe, the percentage of complaints resolved is expected to increase from 60 per cent in 2016/17 to 85 per cent by 2019/20. The complaints management and office of the ombud programme will be capacitated with a fully operational call centre, a team of complaints assessors, and investigators who will work jointly with the ombud. Expenditure in the programme is expected to grow from R13 million in 2016/17 to R17 million in 2019/20.

The health standards design, analysis and support programme supports the office's core functions and provides high level technical, analytical and educational support with regards to the development and analysis of norms and standards. The programme plans to provide guidance and support to healthcare establishments by developing new norms and standards and reviewing existing ones. The programme accounts for the smallest percentage of the office's budget at 9.2 per cent, accounting for R37.2million of total expenditure over the medium term.

The office is a labour intensive organisation and allocates 64.2 per cent of total expenditure to compensation of employees over the medium term. This will increase the number of employees from 108 in 2016/17 to 121 in 2017/18, after which the number of employees is expected to remain constant. The office is currently funded entirely by a transfer from the department, which will increase from R100.5 million in 2016/17 to R140.5 million in 2019/20 at an average annual rate of 11.8 per cent.

Programmes/objectives/activities

Table 16.35 Office of Health Standards Compliance expenditure trends and estimates by programme/objective/activity

R thousand	Audited outcome			Revised estimate 2016/17	Average growth rate (%) 2013/14 - 2016/17	Average: Expenditure/ Total (%) 2016/17	Medium-term expenditure estimate			Average growth rate (%) 2016/17 - 2019/20	Average: Expenditure/ Total (%) 2016/17 - 2019/20
	2013/14	2014/15	2015/16				2017/18	2018/19	2019/20		
Administration	–	16 054	24 465	39 242	–	31.6%	50 115	51 217	53 339	10.8%	38.8%
Compliance inspectorate, certification and enforcement	31 252	12 482	30 493	39 430	8.1%	56.3%	49 110	53 377	57 210	13.2%	39.8%
Complaints management and office of the ombud	–	2 116	3 499	13 000	–	6.2%	14 770	15 836	16 956	9.3%	12.2%
Health standards design, analysis and support	–	2 715	4 155	8 864	–	5.9%	11 716	12 573	12 946	13.5%	9.2%
Total	31 252	33 367	62 612	100 535	47.6%	100.0%	125 711	133 003	140 451	11.8%	100.0%

Statements of historical financial performance and position

Table 16.36 Office of Health Standards Compliance statements of historical financial performance and position

Statement of financial performance	Budget		Audited outcome		Budget		Audited outcome		Average: Outcome/ Budget (%) 2013/14 - 2016/17
	2013/14	2014/15	2014/15	2015/16	2015/16	2016/17	2016/17		
R thousand									
Revenue									
Non-tax revenue	–	–	–	–	–	194	–	–	–
Other non-tax revenue	–	–	–	–	–	194	–	–	–
Transfers received	34 305	31 252	76 953	33 367	88 906	88 906	100 535	100 535	84.5%
Total revenue	34 305	31 252	76 953	33 367	88 906	89 100	100 535	100 535	84.6%
Expenses									
Current expenses	34 296	31 243	76 203	33 042	88 906	62 612	100 535	100 535	75.8%
Compensation of employees	20 754	20 754	31 174	13 517	53 100	39 479	64 645	64 644	81.6%
Goods and services	13 542	10 489	45 028	19 525	35 806	23 133	35 890	35 890	68.4%
Transfers and subsidies	9	9	750	325	–	–	–	–	44.0%
Total expenses	34 305	31 252	76 953	33 367	88 906	62 612	100 535	100 535	75.7%
Surplus/(Deficit)	–	–	–	–	–	26 488	–	–	–

Table 16.36 Office of Health Standards Compliance statements of historical financial performance and position

Statement of financial position									
R thousand	Audited		Audited		Audited		Budget estimate	Revised estimate	Average: Outcome/Budget (%)
	Budget	outcome	Budget	outcome	Budget	outcome			
	2013/14	2014/15	2014/15	2015/16	2015/16	2016/17	2016/17	2016/17	2013/14 - 2016/17
Carrying value of assets	1 121	1 121	1 509	1 510	2 162	4 133	1 900	9 355	240.9%
of which:									
Acquisition of assets	–	(379)	–	(3 991)	(4 363)	(3 636)	(8 928)	(8 929)	127.4%
Receivables and prepayments	1 470	1 470	1 211	1 211	1 329	89	1 677	30	49.2%
Cash and cash equivalents	758	758	796	796	796	32 150	796	32 150	2 093.3%
Total assets	3 349	3 349	3 516	3 517	4 287	36 372	4 373	41 535	546.0%
Accumulated surplus/(deficit)	–	–	–	–	–	26 488	–	26 488	–
Finance lease	60	60	63	63	–	–	–	–	100.0%
Trade and other payables	2 775	2 775	2 914	2 914	2 685	6 101	2 626	7 595	176.2%
Provisions	514	514	540	540	1 602	3 489	1 747	7 192	266.5%
Derivatives financial instruments	–	–	–	–	–	294	–	260	–
Total equity and liabilities	3 349	3 349	3 517	3 517	4 287	36 372	4 373	41 535	546.0%

Statements of estimates of financial performance and position

Table 16.37 Office of Health Standards Compliance statements of estimates of financial performance and position

Statement of financial performance									
R thousand	Revised estimate	Average growth rate (%)	Average: Expenditure/Total (%)	Medium-term estimate			Average growth rate (%)	Average: Expenditure/Total (%)	
				2017/18	2018/19	2019/20			
	2016/17	2013/14 - 2016/17	2016/17 - 2019/20	2016/17 - 2019/20	2016/17 - 2019/20	2016/17 - 2019/20	2016/17 - 2019/20	2016/17 - 2019/20	
Revenue									
Transfers received	100 535	47.6%	99.9%	125 711	133 003	140 451	11.8%	100.0%	
Total revenue	100 535	47.6%	100.0%	125 711	133 003	140 451	11.8%	100.0%	
Expenses									
Current expenses	100 535	47.6%	99.7%	125 711	133 003	140 451	11.8%	260.9%	
Compensation of employees	64 644	46.0%	58.6%	79 161	85 353	91 822	12.4%	64.2%	
Goods and services	35 890	50.7%	41.2%	46 550	47 650	48 629	10.7%	35.8%	
Total expenses	100 535	47.6%	100.0%	125 711	133 003	140 451	11.8%	100.0%	
Surplus/(Deficit)	–	–	–	–	–	–	–	–	
Statement of financial position									
Carrying value of assets	9 355	102.8%	27.6%	15 867	18 425	21 690	32.4%	32.9%	
of which:									
Acquisition of assets	(8 929)	186.7%	-39.1%	(4 562)	(3 248)	(3 635)	-25.9%	-11.0%	
Receivables and prepayments	30	-72.7%	19.7%	36	519	540	162.1%	0.5%	
Cash and cash equivalents	32 150	248.7%	52.8%	32 150	32 150	32 150	–	66.6%	
Total assets	41 535	131.5%	100.0%	48 053	51 094	54 380	9.4%	100.0%	
Accumulated surplus/(deficit)	26 488	–	34.1%	26 488	26 488	26 488	–	54.9%	
Trade and other payables	7 595	39.9%	50.2%	10 912	13 163	15 712	27.4%	23.9%	
Provisions	7 192	141.0%	14.4%	10 264	11 014	11 670	17.5%	20.4%	
Derivatives financial instruments	260	–	0.4%	389	429	510	25.2%	0.8%	
Total equity and liabilities	41 535	131.5%	100.0%	48 053	51 094	54 380	9.4%	100.0%	

Personnel information

Table 16.38 Office of Health Standards Compliance personnel numbers and cost by salary level

Number of posts estimated for 31 March 2017		Number and cost ¹ of personnel posts filled / planned for on funded establishment												Number					
Number of funded posts	Number of posts on approved establishment	Actual			Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)				
		2015/16		Unit cost	2016/17		Unit cost	2017/18		Unit cost	2018/19		Unit cost			2019/20		Unit cost	
		Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	2016/17 - 2019/20	2016/17 - 2019/20	
Office of Health Standards Compliance																			
Salary level	108	225	88	39.5	0.4	108	64.6	0.6	121	79.2	0.7	121	85.4	0.7	121	91.8	0.8	12.4%	100.0%
1 – 6	4	5	1	0.2	0.2	4	0.7	0.2	5	1.0	0.2	5	1.1	0.2	5	1.2	0.2	19.5%	4.0%
7 – 10	61	156	56	18.7	0.3	61	26.6	0.4	70	34.0	0.5	70	36.8	0.5	70	39.5	0.6	14.1%	57.5%
11 – 12	24	42	21	11.8	0.6	24	17.8	0.7	27	22.5	0.8	27	24.2	0.9	27	26.1	1.0	13.6%	22.3%
13 – 16	19	22	10	8.8	0.9	19	19.6	1.0	19	21.6	1.1	19	23.2	1.2	19	25.0	1.3	8.5%	16.2%

1. Rand million.

South African Health Products Regulatory Authority

Mandate

The South African Health Products Regulatory Authority was established in terms of the Medicines Amendment Act (2015). The authority is the national medicines regulatory authority of South Africa. It is responsible for the regulation and control of registration, licensing, manufacturing, importation, and all other

aspects pertaining to active pharmaceutical ingredients, medicines, medical devices; and for conducting clinical trials in a manner compatible with the national medicines policy.

Selected performance indicators

Table 16.39 South African Health Products Regulatory Authority performance indicators by programme/objective/activity and related outcome

Indicator	Programme/objective/activity	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Percentage of dossiers allocated to the appropriate evaluator for professional assessment within predefined timelines	Authorisation management	Outcome 2: A long and healthy life for all South Africans	-1	-1	-1	-1	65%	70%	75%
Percentage of evaluations, assessments and registrations of medicines, medical and radiation emitting devices processed within predefined timelines	Authorisation management		-1	-1	-1	-1	65%	70%	75%
Percentage of inspections conducted within predefined turnaround times	Inspectorate and regulatory compliance		-1	-1	-1	-1	60%	70%	80%
Fast track applications and priority products reviewed by evaluators within three months from allocation	Medicines evaluation and registration		-1	-1	-1	-1	55%	65%	75%
Percentage of post-marketing surveillance and vigilance activities performed within predefined timelines	Medicines evaluation and registration		-1	-1	-1	-1	35%	40%	45%
Percentage of allocated generic applications backlog reduced	Medicines evaluation and registration		-1	-1	-1	-1	10%	20%	30%
Regulations for medical devices and in vitro diagnostics developed and gazetted	Devices and radiation control		-1	-1	-1	-1	Regulations developed and gazetted	-2	-2
Percentage of applications for the use of unregistered medical devices and in vitro diagnostics for specified purposes processed within predefined timelines	Devices and radiation control		-1	-1	-1	-1	90%	95%	100%

1. No historical data available.

2. This indicator will be replaced once regulations are developed.

Expenditure analysis

As of April 2017, The South African Health Products Regulatory Authority is to be established as a schedule 3A public entity responsible for the regulation of medicines, medical devices and radiation control. These functions are currently performed by the Medicines Control Council, which is managed by a unit within the department. The Medicines Control Council will transition into the South African Health Products Regulatory Authority in April 2017. The transition will allow the authority to operate more independently and retain the revenue collected from the pharmaceutical industry. The key focus areas of the authority over the medium term will be evaluating and registering pharmaceuticals and medical devices, managing and coordinating the registration process, ensuring access to safe medicines and enforcing regulatory compliance.

The sole mandate of the council is to regulate medicine. However, the mandate of the authority will expand the core mandate of the council to include the regulation of medical devices. Over the MTEF period, the medicines evaluation and registration programme will grow by an average annual rate of 19 per cent and account for 32.9 per cent of the authority's expenditure. The bulk of expenditure will be on compensation of employees and evaluator fees. Over time, the authority aims to absorb some of the external evaluators as employees. This expenditure should allow the authority to reduce the current backlog of applications and gradually improve turnaround times for applications and priority products to 75 per cent within three months by 2019/20. By improving turnaround times, the authority expects to increase the volumes of applications processed and therefore to generate more revenue. Once regulations for medical and diagnostic devices have been developed and gazetted in 2017/18, the authority will also regulate these products and control certain non-medical products for hazardous radiation. As this is a new area of regulation for the authority and South Africa as a whole, the capacity to administer the required functions will need to be built in the devices and radiation control programme. The programme accounts for 8 per cent, or R59 million of expenditure, at an average annual growth of 13 per cent over the medium term.

Effective management and coordination of the registration process and other processes, such as licensing, is important for the authority to improve turnaround times. In the past, the Medicines Control Council struggled to allocate dossiers and related documentation to appropriate evaluators. By strengthening capacity in the authorisation management programme, the new authority aims to ensure that 65 per cent of all applications will be allocated to evaluators within the prescribed timelines in 2017/18. The programme accounts for 14.4 per cent, or R106.7 million, of expenditure over the medium term.

In order to ensure public access to safe medicine and to monitor compliance with applicable legislation in the Medicines and Related Substances Act (1965) and Hazardous Substances Act (1973) the inspectorate and regulatory compliance programme will conduct inspections of manufacturers, wholesalers, laboratories and clinical trial sites. Efficiency will be measured by monitoring the percentage of site inspections conducted within predefined turnaround times, which is expected to reach 80 per cent by 2019/20. The programme accounts for 15.9 per cent, or R117.8 million, of expenditure over the medium term.

It is estimated that revenue generated from fees will grow from R77.6 million in 2017/18 to R150.3 million in 2019/20, as drug registration fees increase. In addition to the revenue from fees, the authority will be funded by a R133.6 million transfer in 2017/18 from the department, which will grow moderately over the MTEF period. The overall number of personnel employed by the department for the authority is expected to increase from 209 posts in 2016/17 to 282 posts in 2019/20, thus growing expenditure on compensation of employees by an average of 23.3 per cent per year over the medium term.

Programmes/objectives/activities

Table 16.40 South African Health Products Regulatory Authority expenditure trends and estimates by programme/objective/activity

R thousand	Audited outcome			Revised estimate 2016/17	Average growth rate (%) 2013/14 - 2016/17	Average: Expenditure/Total (%)	Medium-term expenditure estimate			Average growth rate (%) 2016/17 - 2019/20	Average: Expenditure/Total (%)
	2013/14	2014/15	2015/16				2017/18	2018/19	2019/20		
Administration	-	-	-	-	-	-	62 044	68 274	82 442	-	-
Authorisation management	-	-	-	-	-	-	31 416	32 764	42 510	-	-
Inspectorate and regulatory compliance	-	-	-	-	-	-	35 574	35 530	46 735	-	-
Medicines evaluation and registration	-	-	-	-	-	-	65 264	85 139	92 509	-	-
Devices and radiation control	-	-	-	-	-	-	16 980	20 349	21 741	-	-
Total	-	-	-	-	-	-	211 278	242 056	285 937	-	-

Statements of estimates of financial performance and position

Table 16.41 South African Health Products Regulatory Authority statements of estimates of financial performance and position

Statement of financial performance										
R thousand	Revised estimate 2016/17	Average growth rate (%) 2013/14 - 2016/17	Average: Expenditure/Total (%)	Medium-term estimate			Average growth rate (%) 2016/17 - 2019/20	Average: Expenditure/Total (%)		
				2017/18	2018/19	2019/20				
Revenue										
Non-tax revenue	-	-	-	77 630	113 657	150 349	-	-		
Sale of goods and services other than capital assets	-	-	-	77 630	113 657	150 349	-	-		
of which:										
Administrative fees	-	-	-	77 630	113 657	150 349	-	-		
Transfers received	-	-	-	133 648	128 399	135 589	-	-		
Total revenue	-	-	-	211 278	242 056	285 938	-	-		
Expenses										
Current expenses	-	-	-	211 278	242 056	285 937	-	-		
Compensation of employees	-	-	-	146 771	191 683	223 105	-	-		
Goods and services	-	-	-	64 507	50 373	62 832	-	-		
Total expenses	-	-	-	211 278	242 056	285 937	-	-		
Surplus/(Deficit)	-	-	-	-	-	-	-	-		

Table 16.41 South African Health Products Regulatory Authority statements of estimates of financial performance and position

Statement of financial position	Revised estimate	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
				2016/17	2013/14 - 2016/17	2017/18		
R thousand								
Carrying value of assets of which:				11 550	12 668	13 225		
Acquisition of assets				(8 550)	(5 763)	(5 709)		
Receivables and prepayments				2 000	2 500	3 000		
Total assets				13 550	15 168	16 225		
Deferred income				3 050	2 168	1 225		
Trade and other payables				3 000	5 000	6 000		
Provisions				7 500	8 000	9 000		
Total equity and liabilities				13 550	15 168	16 225		

Personnel information

Table 16.42 South African Health Products Regulatory Authority personnel numbers and cost by salary level

Number of posts estimated for 31 March 2017	Number and cost ¹ of personnel posts filled / planned for on funded establishment														Number			
	Number of funded posts	Number of posts on approved establishment	Actual		Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average: Salary level/Total (%)			
			2015/16		2016/17			2017/18		2018/19		2019/20				2016/17 - 2019/20		
South African Health Products Regulatory Authority			Number	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost		
Salary level																		
7 – 10								102	34.2	0.3	110	39.7	0.4	112	43.1	0.4		
11 – 12								67	53.4	0.8	87	74.1	0.9	101	91.5	0.9		
13 – 16								53	59.2	1.1	65	78.0	1.2	69	88.4	1.3		

1. Rand million.

South African Medical Research Council

Mandate

The South African Medical Research Council (SAMRC) was established in terms of the South African Medical Research Council Act (1969). The Intellectual Property Rights from Publicly Financed Research and Development Act (2008) also informs the SAMRC's mandate. The SAMRC is mandated to promote the improvement of health and quality of life through research, development and technology transfers. Research and innovation are primarily conducted through funded research units located within the council (intramural units) and in higher education institutions (extramural units) and play a key role in achieving outcome 2 (a long and healthy life for all South Africans) of government's 2014-2019 medium-term strategic framework.

Selected performance indicators

Table 16.43 South African Medical Research Council performance indicators by programme/objective/activity and related outcome

Indicator	Programme/objective/activity	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16		2016/17	2017/18	2018/19
Number of articles with an author affiliated to the council that are published in International Science Index journals per year	Core research		376	481	680	500	700	750	800
Number of articles published in International Science Index journals with the acknowledgement of support from the council per year	Core research		89	100	101	130	183	198	214
Number of published indexed impact factor journal articles with an author affiliated to the council per year	Core research	Outcome 2: A long and healthy life for all South Africans	- ¹	- ¹	602	550	650	700	750
Number of International Science Index journal articles published per year where all authors are affiliated to the council	Core research		- ¹	- ¹	417	170	450	500	550
Number of new local/international policies and guidelines that reference the council per year	Core research		4	4	4	4	6	6	7
Number of research grants awarded by the council per year	Core research		55	100	112	120	168	176	186

Table 16.43 South African Medical Research Council performance indicators by programme/objective/activity and related outcome

Indicator	Programme/objective/activity	Outcome	Past			Current	Projections		
			2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Number of new innovation and technology projects funded to develop new diagnostics, devices, vaccines and therapeutics per year	Innovation and technology	Outcome 2: A long and healthy life for all South Africans	34	30	34	30	40	40	40
Number of new diagnostics, devices, vaccines and therapeutics developed during the reporting period per year	Innovation and technology		-1	-1	-1	2	2	2	2
Number of bursaries/scholarships/fellowships provided for postgraduate study at masters, doctoral and postdoctoral levels per year	Capacity development		72	60	66	70	98	101	106
Number of masters and doctoral students who graduated during the reporting period per year	Capacity development		-1	-1	-1	50	55	60	65

1. No historical data available.

Expenditure analysis

The focus of the South African Medical Research Council over the medium term will be on the enhancement of health and medical research; capacity development; and innovation and technology transfer. These focus areas support outcome 2 (a long and healthy life for all South Africans) of government's 2014-2019 medium-term strategic framework.

The council conducts and funds health research through intramural research programmes, financial support and assistance to various extramural research units and centres, and research grants to scientists and scholars. Core research is the largest area of the council's spending, making up 55.8 per cent of its total budget over the MTEF period. The council plans to extend the three-year memorandum of understanding with the National Institutes of Health in the United States of America by two more years. This is to fund biomedical and behavioural health research in HIV/TB and HIV-associated malignancies, and to build long term collaborations between the service provider, South African universities and other institutions. This collaboration is projected to make a significant impact on HIV and TB outcomes in South Africa. As a result of government's economic competitiveness support package being phased out, the budget allocation to this programme will decrease by an average of 4 per cent per year over the MTEF period from R603.2 million in 2016/17 to R534.3 million in 2019/20. Despite this decrease, the council is aiming to increase the number of research articles published in international science index journals from 680 in 2015/16 to 800 in 2019/20, and to increase the number of research grants awarded, from 112 to 186 over the same period.

The council will continue to develop partnerships with national and international universities, thereby ensuring that investigators who receive council funding are committed to developing the next generation of scientists. The national health scholars programme is a collaboration between industry and government and aims to support the education and training of 1 000 doctoral students in clinical, pharmacy, nursing or dental professions by 2022, and is funded through the public health innovation fund. As of 2016, a total of 15 candidates have already graduated. An additional six candidates are expected to graduate and 17 candidates are to enrol for the 2017 academic year. In total, the capacity development programme will increase the number of bursaries, scholarships and fellowships provided from 66 in 2015/16 to 106 in 2019/20. The council will continue to contribute towards transformation, by awarding research grants to medical scientists and early-stage investigators who reflect the diversity of the country, based on race, gender and geography and by setting aside funding for historically disadvantaged institutions.

The council has launched a three-year R30 million grand challenges South Africa programme on maternal, infant and neonatal health, in collaboration with the Bill and Melinda Gates Foundation, to identify innovations in gestational diabetes, perinatal haemorrhage, pre-eclampsia and neonatal survival. The council also collaborates with a number of other research partners, including the Newton Fund, the British Medical Research Council, GlaxoSmithKline and Canadian Institutes of Health Research. Expenditure growth on innovation and technology is expected to slow down to 2.5 per cent per year over the medium term. The number of projects funded under this programme is expected to remain stable at 40 projects per year.

Over the past three years, the council's total income grew at an average annual rate of 11.5 per cent while expenditure grew by 12.5 per cent in the same period. This shortfall was funded from the council's cash

reserves. Over the MTEF period, the council's income is projected to increase by an average annual rate of 0.4 per cent and expenditure to decrease by an average rate of 0.1 per cent. This negative growth in the transfer from the department will require the council to use its cash reserves to honour its existing commitments over the MTEF period. Core research is mainly funded with transfers from the department and international development partners.

Programmes/objectives/activities

Table 16.44 South African Medical Research Council expenditure trends and estimates by programme/objective/activity

R thousand	Audited outcome				Revised estimate	Average growth rate (%)	Average: Expenditure/ Total (%)	Medium-term expenditure estimate			Average growth rate (%)	Average: Expenditure/ Total (%)
	2013/14	2014/15	2015/16	2016/17				2017/18	2018/19	2019/20		
Administration	175 327	163 146	170 348	182 450	1.3%	20.6%	199 232	214 799	228 466	7.8%	20.0%	
Core research	471 099	444 501	535 096	603 212	8.6%	60.3%	603 247	559 907	534 311	-4.0%	55.8%	
Innovation and technology	59 015	112 058	151 747	199 598	50.1%	14.8%	190 992	168 230	215 254	2.5%	18.8%	
Capacity development	22 312	34 229	45 059	50 484	31.3%	4.4%	58 153	58 807	55 160	3.0%	5.4%	
Total	727 753	753 934	902 250	1 035 744	12.5%	100.0%	1 051 624	1 001 743	1 033 191	-0.1%	100.0%	

Statements of historical financial performance and position

Table 16.45 South African Medical Research Council statements of historical financial performance and position

Statement of financial performance									
R thousand	Budget	Audited outcome	Budget	Audited outcome	Budget	Audited outcome	Budget estimate	Revised estimate	Average: Outcome/ Budget (%)
	2013/14	2014/15	2014/15	2015/16	2015/16	2016/17	2016/17	2016/17	2013/14 - 2016/17
Revenue									
Non-tax revenue	349 135	315 827	308 056	303 854	413 480	339 097	381 154	356 154	90.6%
Sale of goods and services other than capital assets	321 885	287 805	283 006	278 813	359 221	306 766	322 954	322 954	93.0%
<i>of which:</i>									
Sales by market establishment	321 885	287 805	283 006	278 813	359 221	306 766	322 954	322 954	93.0%
Other non-tax revenue	27 250	28 022	25 050	25 041	54 259	32 331	58 200	33 200	72.0%
Transfers received	416 460	416 460	460 638	446 331	623 892	623 892	657 590	657 590	99.3%
Total revenue	765 595	732 287	768 694	750 185	1 037 372	962 989	1 038 744	1 013 744	95.8%
Expenses									
Current expenses	767 406	676 609	808 694	699 122	990 754	825 632	979 987	954 987	89.0%
Compensation of employees	330 722	298 099	235 811	277 270	312 162	283 168	334 638	334 638	98.3%
Goods and services	417 483	356 022	553 358	402 460	658 192	522 591	624 849	599 849	83.5%
Depreciation	19 100	16 556	19 500	18 022	20 400	18 627	20 500	20 500	92.7%
Interest, dividends and rent on land	101	5 932	25	1 370	-	1 246	-	-	6 784.1%
Total expenses	767 406	727 753	808 694	753 934	1 067 372	902 250	1 060 744	1 035 744	92.3%
Surplus/(Deficit)	(1 811)	4 534	(40 000)	(3 749)	(30 000)	60 739	(22 000)	(22 000)	-
Statement of financial position									
Carrying value of assets	137 000	124 093	142 000	120 602	146 475	143 990	152 820	152 820	93.6%
<i>of which:</i>									
Acquisition of assets	(24 402)	(25 602)	(24 500)	(16 667)	(47 348)	(44 163)	(15 662)	(45 812)	118.2%
Investments	42 200	5 884	44 440	6 571	6 500	6 371	6 800	6 800	25.6%
Inventory	140	-	-	-	-	-	-	-	-
Receivables and prepayments	37 000	35 741	37 500	31 886	32 438	15 825	31 950	31 950	83.1%
Cash and cash equivalents	282 761	335 127	237 660	313 790	288 699	449 954	266 812	358 646	135.5%
Taxation	-	8 294	-	-	-	12 495	-	-	-
Total assets	499 101	509 139	461 600	472 849	474 112	628 635	458 382	550 216	114.1%
Accumulated surplus/(deficit)	245 493	245 892	206 640	243 218	212 124	303 958	190 124	281 958	125.8%
Capital and reserves	2 859	-	3 330	-	-	-	-	-	-
Capital reserve fund	180 000	122 717	180 000	123 425	141 939	206 001	165 728	165 728	92.5%
Deferred income	1 099	-	1 130	-	-	-	-	-	-
Trade and other payables	58 000	97 476	58 500	64 929	81 448	102 237	73 360	73 360	124.6%
Taxation	1 250	-	1 300	-	16 250	-	12 450	12 450	39.8%
Provisions	10 400	43 054	10 700	41 277	22 351	16 439	16 720	16 720	195.3%
Total equity and liabilities	499 101	509 139	461 600	472 849	474 112	628 635	458 382	550 216	114.1%

Statements of estimates of financial performance and position

Table 16.46 South African Medical Research Council statements of estimates of financial performance and position

Statement of financial performance		Average growth rate (%)	Average Expenditure/Total (%)	Medium-term estimate			Average growth rate (%)	Average Expenditure/Total (%)
Revised estimate	2013/14 - 2016/17	2017/18	2018/19	2019/20	2016/17 - 2019/20			
R thousand	2016/17	2013/14	2016/17	2017/18	2018/19	2019/20	2016/17 - 2019/20	
Revenue								
Non-tax revenue	356 154	4.1%	38.5%	372 762	332 496	366 562	1.0%	35.8%
Sale of goods and services other than capital assets	322 954	3.9%	35.0%	342 414	300 024	335 079	1.2%	32.6%
<i>of which:</i>								
Sales by market establishment	322 954	3.9%	35.0%	342 414	300 024	335 079	1.2%	32.6%
Other non-tax revenue	33 200	5.8%	3.4%	30 348	32 472	31 483	-1.8%	3.2%
Transfers received	657 590	16.4%	61.5%	614 961	624 829	659 819	0.1%	64.2%
Total revenue	1 013 744	11.5%	100.0%	987 723	957 325	1 026 381	0.4%	100.0%
Expenses								
Current expenses	954 987	12.2%	92.4%	976 185	925 009	952 160	-0.1%	111.5%
Compensation of employees	334 638	3.9%	35.4%	357 394	378 124	399 300	6.1%	35.7%
Goods and services	599 849	19.0%	54.5%	597 791	524 667	529 398	-4.1%	54.6%
Depreciation	20 500	7.4%	2.2%	21 000	22 218	23 462	4.6%	2.1%
Total expenses	1 035 744	12.5%	100.0%	1 051 624	1 001 743	1 033 191	-0.1%	100.0%
Surplus/(Deficit)	(22 000)	(3)		(63 901)	(44 418)	(6 810)	-32.4%	
Statement of financial position								
Carrying value of assets	152 820	7.2%	25.1%	145 670	135 270	129 775	-5.3%	28.8%
<i>of which:</i>								
Acquisition of assets	(45 812)	21.4%	-6.0%	(21 915)	(19 000)	(16 450)	-28.9%	-5.1%
Investments	6 800	4.9%	1.2%	7 000	7 560	7 750	4.5%	1.5%
Receivables and prepayments	31 950	-3.7%	5.5%	40 980	38 858	34 500	2.6%	7.5%
Cash and cash equivalents	358 646	2.3%	67.2%	301 311	268 291	290 055	-6.8%	62.1%
Total assets	550 216	2.6%	100.0%	494 961	449 979	462 080	-5.7%	100.0%
Accumulated surplus/(deficit)	281 958	4.7%	49.8%	218 057	173 639	166 830	-16.0%	42.5%
Capital reserve fund	165 728	10.5%	28.3%	178 201	185 735	198 450	6.2%	37.6%
Trade and other payables	73 360	-9.0%	15.6%	71 152	70 203	73 450	0.0%	14.8%
Taxation	12 450	-	0.6%	9 761	10 542	12 000	-1.2%	2.3%
Provisions	16 720	-27.0%	5.7%	17 790	9 860	11 350	-12.1%	2.8%
Total equity and liabilities	550 216	2.6%	100.0%	494 961	449 979	462 080	-5.7%	100.0%

Personnel information

Table 16.47 South African Medical Research Council personnel numbers and cost by salary level

Number of posts estimated for 31 March 2017		Number and cost ¹ of personnel posts filled / planned for on funded establishment												Number					
Number of funded posts	Number of posts on approved establishment	Actual			Revised estimate			Medium-term expenditure estimate						Average growth rate (%)	Average Salary level/Total (%)				
		2015/16		Unit cost	2016/17		Unit cost	2017/18		Unit cost	2018/19		Unit cost			2019/20		Unit cost	
		Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost	Number	Cost	Unit cost			
South African Medical Research Council		544			544	334.6	0.6	544	357.4	0.7	544	378.1	0.7	544	399.3	0.7	6.1%	100.0%	
Salary level																			
1 – 6	121	121	119	29.7	0.2	121	23.4	0.2	121	26.4	0.2	121	25.8	0.2	121	29.8	0.2	8.4%	22.2%
7 – 10	294	294	275	118.2	0.4	294	139.1	0.5	294	151.3	0.5	294	154.2	0.5	294	168.3	0.6	6.6%	54.0%
11 – 12	67	67	60	51.4	0.9	67	66.3	1.0	67	70.0	1.0	67	71.1	1.1	67	76.8	1.1	5.0%	12.3%
13 – 16	59	59	55	75.2	1.4	59	95.8	1.6	59	99.3	1.7	59	116.3	2.0	59	111.9	1.9	5.3%	10.8%
17 – 22	3	3	3	8.7	2.9	3	10.0	3.3	3	10.5	3.5	3	10.8	3.6	3	12.5	4.2	7.6%	0.6%

1. Rand million.

Additional tables

Table 16.A Summary of conditional grants to provinces and municipalities¹

R thousand	Audited outcome			Adjusted appropriation	Medium-term expenditure estimate		
	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20
Conditional grants to provinces							
National Health Insurance, Health Planning and Systems Enablement							
National health insurance grant	50 953	76 956	61 077	94 227	–	–	–
HIV and AIDS, Tuberculosis, and Maternal and Child Health							
Comprehensive HIV and AIDS grant	10 334 687	12 102 108	13 670 730	–	–	–	–
Human papillomavirus vaccine grant	–	–	–	–	–	200 000	211 200
Comprehensive HIV, AIDS and tuberculosis grant	–	–	–	15 290 603	17 557 903	19 921 697	22 038 995
Hospitals, Tertiary Health Services and Human Resource Development							
Health professions training and development grant	2 190 366	2 321 788	2 374 722	2 476 724	2 631 849	2 784 496	2 940 428
National tertiary services grant	9 620 357	10 168 235	10 381 174	10 846 778	11 676 145	12 394 661	13 177 562
Health facility revitalisation grant	5 290 816	5 501 981	5 417 045	5 272 680	5 654 495	5 915 694	6 246 973
Total	27 487 179	30 171 068	31 904 748	33 981 012	37 520 392	41 216 548	44 615 158

¹ Detail provided in the Division of Revenue Act (2017).

Table 16.B Summary of expenditure on infrastructure

Project name R thousand	Service delivery outputs	Current project stage	Total project cost	Audited outcome			Adjusted appropriation 2016/17	Medium-term expenditure estimate		
				2013/14	2014/15	2015/16		2017/18	2018/19	2019/20
Departmental infrastructure										
Mega projects (total project cost of at least R1 billion over the project life cycle)										
Limpopo: Tshidzini Hospital	Replacement of hospital (initial design stages only)	Site identification	2 301 442	-	-	-	20 000	26 000	9 000	50 000
Limpopo: Elim Hospital	Replacement of hospital	Site identification	1 869 891	-	-	-	20 000	26 000	6 000	50 000
Limpopo: Sileam Hospital	Replacement of hospital	Construction	1 598 990	-	36 391	94 653	87 000	18 300	172 933	211 000
Free State: Dhlabeng Hospital	Replacement of hospital	Site identification	2 018 888	-	-	-	1 000	3 000	50 000	100 000
Large projects (total project cost of at least R250 million but less than R1 billion over the project life cycle)										
Eastern Cape: Bambisana Hospital	Revitalisation of hospital	Site identification	664 322	-	-	155	7 000	49 500	125 000	125 000
Eastern Cape: Zithulele Hospital	Revitalization of hospital	Site identification	510 825	-	-	111	7 000	49 500	150 000	125 000
Free State: Dhlabeng Hospital emergency ward	Emergency repairs	Design	168 614	-	-	7 431	30 750	50 000	22 000	-
Small projects (total project cost of less than R250 million over the project life cycle)										
Limpopo: Limpopo Academic Hospital	Planning and design of a new hospital	Site identification	59 000	-	-	-	39 000	20 000	-	-
Eastern Cape: Nelson Mandela Hospital (public private partnership feasibility study)	Development of a feasibility study	Site identification	3 867	3 867	-	-	-	-	-	-
KwaZulu-Natal: Kind Edward Hospital (public private partnership feasibility study)	Development of a feasibility study	Site identification	5 560	4 352	228	-	-	1 000	-	-
Gauteng: Chris Hani Baragwanath Hospital (public private partnership feasibility study)	Development of a feasibility study	Site identification	7 401	4 365	3 035	-	-	-	-	-
Gauteng: Dr George Mukhari Academic Hospital (public private partnership feasibility study)	Development of a feasibility study	Site identification	13 672	11 633	1 040	-	-	1 000	-	-
Eastern Cape: Nolutha Clinic	Replacement of clinic	Construction	31 169	-	1 971	8 495	3 500	17 203	-	-
Eastern Cape: Nkanga Clinic	Replacement of clinic	Construction	30 424	-	1 812	15 789	6 300	6 523	-	-
Eastern Cape: Lutubeni Clinic	Replacement of clinic	Construction	31 369	-	2 523	9 103	12 000	7 743	-	-
Eastern Cape: Maxwele Clinic	Replacement of clinic	Construction	28 927	-	1 898	10 668	9 534	6 827	-	-
Eastern Cape: Lotana Clinic	Replacement of clinic	Construction	31 599	-	3 200	14 385	7 940	6 074	-	-
Eastern Cape: Lusikisiki Clinic	Replacement of clinic	Construction	61 473	-	1 458	20 015	15 000	30 000	-	-
Eastern Cape: Gengge Clinic	Replacement of clinic	Construction	28 143	-	1 556	5 228	3 500	17 859	-	-
Eastern Cape: Sakhela Clinic	Replacement of clinic	Construction	30 668	-	1 184	10 837	9 000	9 647	-	-
Free State: Clocolan Clinic	Replacement of clinic (initial design stages only)	Construction	48 479	70	81	921	4 000	-	-	-
Free State: Bonwa Clinic	Replacement of clinic (initial design stages only)	Design	84 942	260	91	917	4 000	-	-	-
Free State: Lusaka Community Health Centre	Replacement of community health centre	Design	124 710	-	-	935	3 000	-	-	-
Limpopo: Magwedzha Clinic	Replacement of clinic (initial design stages only)	Design	52 166	-	-	959	5 000	-	-	-
Limpopo: Thengwe Clinic	Replacement of clinic (initial design stages only)	Design	49 638	-	-	959	5 000	-	-	-
Limpopo: Molenzhe Clinic	Replacement of clinic (initial design stages only)	Design	50 165	-	-	959	5 000	-	-	-

Table 16.B Summary of expenditure on infrastructure

Project name	Service delivery outputs	Current project stage	Total project cost	Audited outcome			Adjusted appropriation	Medium-term expenditure estimate		
				2013/14	2014/15	2015/16		2017/18	2018/19	2019/20
R thousand Limpopo: Makonde Clinic	Replacement of clinic (initial design stages only)	Design	52 163	-	-	959	5 000	-	-	-
Limpopo: Chebeng Community Health Centre	Replacement of community health centre	Design	136 135	-	-	959	5 000	-	-	-
Mpumalanga: Muskaligwa Community Day Centre	Replacement of clinic (initial design stages only)	Design	146 761	-	-	432	3 000	-	-	-
Mpumalanga: Ehandakukhanya Community Day Centre	Replacement of clinic (initial design stages only)	Design	146 761	-	-	432	3 000	-	-	-
Mpumalanga: Vukuzakhe Clinic	Replacement of clinic (initial design stages only)	Design	54 565	-	-	432	3 000	-	-	-
Mpumalanga: Balfour Community Health Centre (24-hour mini-hospital)	Replacement of community health centre	Design	299 123	-	-	432	-	-	-	-
Mpumalanga: Nhlazathse 6 Clinic	Replacement of clinic (initial design stages only)	Design	54 565	-	-	432	3 000	-	-	-
Eastern Cape: Buttenworth Nursing College	Rehabilitation of existing nursing education institute facility	Construction	17 288	-	1 654	10 283	4 935	416	-	-
Gauteng: Baragwanath Nursing College	Rehabilitation of existing nursing education institute facility	Construction	20 919	-	789	11 973	6 500	5 657	-	-
Limpopo: Thohoyandou Nursing College	Rehabilitation of existing nursing education institute facility	Construction	23 646	-	2 133	15 951	3 500	2 061	-	-
Mpumalanga: Middelburg Nursing College	Rehabilitation of existing nursing education institute facility	Construction	15 899	-	1 796	11 603	4 500	-	-	-
Northern Cape: Henrietta Nursing College	Rehabilitation of existing nursing education institute facility	Feasibility	14 136	-	-	-	850	13 286	-	-
Doctors consulting rooms	Provision of doctors consulting rooms	Handed over	346 115	115 929	76 404	64 908	88 875	-	-	-
Eastern Cape: backlog Maintenance through the Development Bank of Southern Africa	Backlog Maintenance	Construction	46 009	-	33 759	-	9 000	3 250	-	-
Eastern Cape: Additions to clinics through the Development Bank of Southern Africa	Upgrades and renovations of 37 clinics	Construction	226 314	-	-	-	8 780	38 938	50 000	50 000
National health insurance backlog maintenance	Rehabilitation and maintenance	Construction	2 985 451	-	-	25 048	242 377	469 000	387 426	293 707
Health technology for national health insurance facilities	Various	Construction	97 332	-	33 344	58 988	10 000	-	-	-
Non-capital infrastructure projects, including maintenance	Maintenance, provision of provincial management support units and project management information systems, conditional assessments of facilities in NHI pilot districts, in-loco supervision, monitoring of 10 year health infrastructure plan	Ongoing	490 519	42 215	85 998	209 194	83 912	69 200	10 000	-
North West: Witrand Nursing college refurbishment - initial investigations only	Rehabilitation of existing nursing education institute facility	Site identification	7 000	-	-	-	-	1 000	6 000	-
Various organisational development and quality assurance projects at hospitals	Various organisational development and quality assurance Projects	Site identification	39 000	-	-	-	-	-	-	39 000

Table 16.B Summary of expenditure on infrastructure

Project name R thousand	Service delivery outputs	Current project stage	Total project cost	Audited outcome			Adjusted appropriation	Medium-term expenditure estimate		
				2013/14	2014/15	2015/16		2017/18	2018/19	2019/20
Infrastructure transfers to other spheres, agencies and departments										
Mega projects (total project cost of at least R1 billion over the project life cycle)										
Health facility revitalisation grant: Eastern Cape	Construction of new facilities, upgrades of existing health facilities	Ongoing	4 197 512	562 792	599 231	592 073	619 041	620 757	568 144	599 961
Health facility revitalisation grant: Free State	Construction of new facilities, upgrades of existing health facilities	Ongoing	3 863 185	538 962	466 962	586 910	474 692	552 157	491 134	518 638
Health facility revitalisation grant: Gauteng	Construction of new facilities, upgrades of existing health facilities	Ongoing	5 148 372	771 033	671 033	313 630	777 818	890 665	845 975	893 350
Health facility revitalisation grant: KwaZulu-Natal	Construction of new facilities, upgrades of existing health facilities	Ongoing	8 205 637	1 072 531	1 362 469	1 229 775	1 114 693	1 149 355	1 128 018	1 191 186
Health facility revitalisation grant: Limpopo	Construction of new facilities, upgrades of existing health facilities	Ongoing	3 145 342	457 442	467 442	358 512	379 089	508 144	450 991	476 247
Health facility revitalisation grant: Mpumalanga	Construction of new facilities, upgrades of existing health facilities	Ongoing	2 367 483	283 721	343 509	287 942	281 174	325 617	339 676	358 696
Health facility revitalisation grant: Northern Cape	Construction of new facilities, upgrades of existing health facilities	Ongoing	3 257 786	478 428	451 428	582 841	472 267	443 753	380 829	402 156
Health facility revitalisation grant: North West	Construction of new facilities, upgrades of existing health facilities	Ongoing	3 737 609	496 121	500 121	695 261	480 434	558 261	500 821	528 867
Health facility revitalisation grant: Western Cape	Construction of new facilities, upgrades of existing health facilities	Ongoing	4 609 358	629 786	639 786	770 101	673 472	605 786	595 363	628 703
Health facility revitalisation grant: Incentive-based portion yet to be allocated to provinces	Construction of new facilities, upgrades of existing health facilities	Ongoing	1 195 786	-	-	-	-	-	614 743	649 169
Total			54 854 235	5 473 507	5 794 326	6 031 591	6 062 433	6 603 479	6 904 053	7 290 680

Table 16.C Summary of donor funding

Donor	Project	Programme	Period of commitment	Amount committed	Main economic classification	Spending focus	Audited outcome		Estimate	Medium-term expenditure estimate		
							2013/14	2014/15		2015/16	2017/18	2018/19
R thousand												
Foreign In cash												
United States: Centres for Disease Control	Cooperation in the prevention and control of HIV and AIDS, and other related infectious diseases	HIV and AIDS, Tuberculosis, and Maternal and Child Health	2009 - 2012	199 657	Goods and services	Strengthen HIV and AIDS programmes and capacity building	8 342	34 114	18 709	34 500	48 088	51 563
United States: Centres for Disease Control	Implementation of a primary health care programme in South Africa under the United States President's Emergency Plan for AIDS Relief	HIV and AIDS, Tuberculosis, and Maternal and Child Health	2012 - 2014	40 721	Goods and services	Strengthen the capacity of the Department of Health to scale up primary health care services to improve the management of HIV and AIDS services.	-	4 572	5 622	13 000	7 812	8 437
European Union	Primary health care sector policy support programme	National Health Insurance, Health Planning and Systems Enablement	2011 - 2014	1 100 000	Goods and services	Improve access to public health services and increase the quality of service delivery of primary health care	164 601	250 468	321 800	280 603	-	-
European Union	Masibambane	Primary Health Care Services	2009-2011	1 551	Goods and services	Collaborate with the Department of Water Affairs	238	526	558	33	-	-
Global Fund to Fight AIDS, Tuberculosis and Malaria	New Funding Model	National Health Insurance, Health Planning and Systems Enablement	2016 - 2019	1 683 008	Goods and services	Reduce the rate of new HIV infections in South Africa by 50 per cent; provide appropriate packages of treatment, care and support to 80 per cent of HIV positive people and their families	-	-	-	644 350	512 411	526 247
Global Fund to Fight AIDS, Tuberculosis and Malaria	Single stream funding	National Health Insurance, Health Planning and Systems Enablement	2013 - 2016	1 937 000	Goods and services	Reduce the rate of new HIV infections in South Africa by 50 per cent; provide appropriate packages of treatment, care and support to 80 per cent of HIV positive people and their families	460 747	658 118	818 135	-	-	-
Foreign In kind												
United Nations Population Fund	Sexual and reproductive health and rights and HIV prevention	HIV and AIDS, Tuberculosis, and Maternal and Child Health	2013 - 2014	31 804	Goods and services	Donate reproductive health commodities, such as female condoms, lubricant sachets and sub-dermal implants	31 804	-	-	-	-	-
Local In cash												
Health and Welfare Sector Education and Training Authority	National skills fund growth and development strategy	Hospitals, Tertiary Health Services and Human Resource Development	2010 - 2014	6 488	Goods and services	Improve the skills of data captureurs at health facilities	534	67	26	534	-	-
Total				5 000 229			666 266	947 865	1 164 850	973 020	568 311	586 247

BUDGET 2017

ESTIMATES OF NATIONAL EXPENDITURE

Private Bag X115, Pretoria, 0001 | 40 Church Square, Pretoria, 0002
Tel +27 12 315 5944 | Fax +27 12 395 6697



national treasury

Department:
National Treasury
REPUBLIC OF SOUTH AFRICA

