

## VOTE 4: DEPARTMENT OF HEALTH

To be appropriated:	R 8 731 007 0000
Responsible MEC:	MEC for Health
Administering Department:	Department of Health
Accounting Officer:	Head of Department

### I. Overview

#### Vision

'Health for a better life'.

#### Mission

The mission of the Department of Health is 'to promote and protect the health of our people, especially those most vulnerable to illness and injury. Through innovative leadership and management including appropriate service delivery models we provide quality health services and strive to:

- Implement appropriate best practice health care strategies and models
- Create a positive work environment;
- Ensure a caring climate for service users
- Obtain the greatest benefit from public monies;
- Forge partnerships with others;
- Provide appropriate training for health workers.
- Establish management systems for effective decision making

Our work is reflected in the enhanced well-being of our staff and clients, the social and economic development of our Province and a more just society.

#### Core functions of the Department of health

The Department renders the following services:

- *Primary health care (PHC)* is rendered through the district health system. A network of provincial clinics and community health centres provide ambulatory care through doctors, nurses and other professionals; and local government clinics are also subsidized to render care.
- *Ambulance services* throughout the province
- Secondary health care services are rendered through regional hospitals that provide outpatient and in-patient care at general specialist level.
- *Specialised health care services* provide specialised inpatient care for psychiatric, rehabilitation and tuberculosis patients on an outsourced basis.
- *Academic health care services* (both inpatient and outpatient) are rendered through our four central hospitals as well as the three Dental hospitals. (Teaching also takes place within other service levels).
- *Health sciences teaching colleges* provide training for future health care professionals.

These services are supported through human resource development, management and support services (such as laundries, facility management, cookfreezer and medical and pharmaceutical supplies).

#### Constitutional and Legislative Mandate of the Department

##### ■ Specific National Legislation and Policies including

- The Department receives its mandate from Section 27 of the Constitution, which states that everyone has a right to health care services, and from relevant public service legislation.
- Public Service Act 1994
- Labour relations Act, 1983
- The Public Finance Management Act, Act 1 of 1999
- Employment Equity Act

- Skills Development Act, Act No 99 of 1998
  - Access to information Act, Act No 2 of 2000
  - Criminal Procedure Act, 1977
  - Inquest Act, 1959
  - The Mental Health Act, Act 18 of 1973 as amended.
  - Medical Dental and Supplementary Health Services Professions Act (Act 56 of 1974) as amended
  - The Health Act (63 of 1977), currently under revision, defines in more detail the role of the various spheres of government in health service provision.
  - Child care Act, 1983
  - Human Tissue Act, 1983
  - Sterilization Act, Act 44 of 1988
  - Choice of Termination of Pregnancy Act, 1996
  - Nursing Act (Act 50 of 1978) as amended in 1997
  - Medicines and Related Substance Control Act (Act 101 of 1965) as amended in 1997
  - Pharmacy Act (Act 53 of 1953) as amended in 1997
  - Medical Schemes Act 1998
  - Patients' Rights Charter, 2000
  - White Paper on the transformation of the health sector.
  - The Batho Pele principles of consultation, service standards, access, courtesy, information, openness, transparency and redress are a clear focus in the delivery of improved and quality social service delivery. The Batho Pele White Paper also mentions "a guiding principle of the public service in South Africa will be that of service to the people."
- *Specific Provincial Health Legislation including*
- The Hospital Ordinance No 14 of 1958, as amended in 1999
  - District Health Services Act 2000.
  - Emergency Medical Services Bill, 2002

### **Key Challenges**

The Department faces the following key challenges in providing an efficient and effective quality health service:

#### Demographic Factors

- The large in - migration as shown by census 2001.
- Gauteng experienced a 20% increase in the population as compared to 10.4% nationally
- Increasing demands for services and high quality as shown in the 2003 social audit survey
- Overall economic indicators of growth and inflation with higher medical inflation than CPI or CPIX

#### Epidemiological factors

- Triple burden of diseases:
  - (a) Poverty related illnesses; HIV/AIDS; TB; emerging communicable diseases such as SARS
  - (b) Trauma and Violence
  - (c) Chronic Diseases of Lifestyle such as hypertension, diabetes etc.

#### Health Services

- Implementation of the Departmental Service Improvement Plan to ensure appropriate utilisation of services
- Effective response to the HIV and AIDS epidemic including comprehensive approach to care and treatment, coping with a phase of pressure on hospitals with acutely ill patients and HIV/AIDS orphans      Implementation of community based services
- Greater demands on quality assurance with special focus on improving perception and actual quality of frontline service and reduction in waiting times
- Addressing in particular the problem of violence, including sexual abuse, against women and children
- Transfer of South African Police Services (SAPS) mortuaries to the Department
- Need for significant investment to provide quality emergency medical services

#### Value for money

- High cost per capita health care expenditure in Gauteng relative to the rest of the country
- Reduction in certain national conditional grants.
- Spending patterns within the Department
- Retention of highly skilled and scarce skilled professionals in public sector

- Implementation of information systems and technology investment with special focus on medical equipment and Information Technology infrastructure and costs Improving ethos of care and ethics
- Gender, disability and youth mainstreaming
- Management of migration to the GSSC

**Overall Strategic Thrusts /Goals and Strategic Objectives**

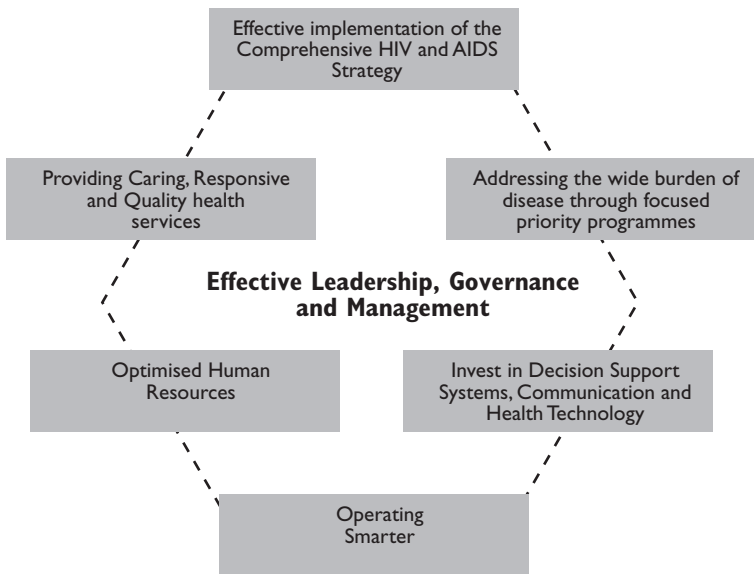
The Department is in the process of developing 2014 vision and strategy including the development of 10-year review of the last 10 years of Democracy. This is done in line with the national and provincial planning processes. The development of vision 2014 was done through generating key driving forces and scenarios. An extensive consultative process included internal and external key stakeholders and is continuing through January 2004. The vision 2014 process was followed by a series of strategic and budget-planning workshops for development of 2004/2007 Departmental integrated strategic plan.

The 2004/2007 integrated strategic plan is considered as a tool for implementation of the first 3-5 years of the 2014 vision and strategy with special focus on 2004/05 priorities and budget. In order to implement 2014 vision and strategy and to address the key challenges, 7 strategic thrusts for Gauteng Health were defined for the Medium Term Expenditure Framework (MTEF). These are summarised below. The strategic objectives are outlined in the 2004/2007 strategic plan.

**Overall Strategic Thrusts**

1. Effective Leadership, Governance and Management
2. Effective implementation of the comprehensive HIV and AIDS strategy
3. Addressing the wide burden of disease through focused priority programmes
4. Providing Caring, Responsive and Quality health services
5. Optimised Human Resources
6. Invest in Decision Support Systems, Communication and Health Technology
7. Operating smarter

The relationship of the Departmental strategic thrusts/goals is outlined in the hexagon indicated below.



## **2. REVIEW OF 2003/04 FINANCIAL YEAR**

A summary of progress in the key areas highlighted in the budget statement is given below.

### **2.1 Improving health status**

#### a) Improving Child Health

The Integrated management of Childhood illnesses (IMCI) strategy continues and has improved. A total of 683 health workers have been trained in case management or as clinical supervisors. The Prevention of Maternal to Child Transmission Programmes (PMTCT) has been implemented in all public hospitals and community health centres with maternity units and 56 PHC clinics with antenatal services, this will assist in decreasing childhood mortality and morbidity over time. We have met all the criteria to be declared polio free by 2005.

Almost 80% of children in the province have been vaccinated against vaccine preventable conditions. Flaccid Paralysis (AFP) polio eradication is on target at 22 cases per annum.

The nutrition programme continues to support children. Children 0-60 months at nutritional risk receive the supplements through the health facilities and a plan has been developed for nutrition supplementation for PLWA who are malnourished and all TB patients.

The implementation of the Perinatal Problem Identification Programme (PPIP) in the province continues to be a priority for reducing preventable causes of perinatal morbidity and mortality. The Department has 17 operational PPIP sites. During this financial year, the implementation of the PPIP programme was extended to South Rand, Dr George Mukhari, Tambo Memorial, Natalspruit and Coronation hospitals. The 'Kangaroo Mother' Care is implemented in 14 hospitals including new units established at the Far East Rand, Tembisa, Dr George Mukhari, Heidelberg, Coronation and Edenvale hospitals during this financial year. Saving mothers campaign was launched and 10 key recommendations are being implemented and monitored.

#### b) Promote Healthy lifestyles

Thirty-nine youth friendly services have been established in the province, which includes the National Adolescent Friendly Clinic Initiative (NAFCI). A youth summit was held. Five hundred youth have been trained on peer education programme focusing on reproductive health services for young people, impact on teenage pregnancy, STI, and HIV infection.

#### c) Women's health

Since April 2003 a cervical cancer screening reached more than 25 000 women between the ages of 35 and 55. The cervical cancer screening policy has been being implemented in all the primary health care facilities. Celebration of Breast Cancer awareness month was held in October 2003, focusing on teaching breast self-examinations, hearing testimonials and giving talks.

Every year the Choice on termination of Pregnancy (TOP) Act continues to benefit women who choose to exercise such rights. Since 1997 there are more than 94 000 TOPs in 12 hospitals with 5 hospitals providing 2nd trimester terminations, and 10 primary health care facilities providing 1st trimester. These figures constitute more than 43% of the country's TOPs.

Contraceptive services are implemented in all primary health care facilities and benefit more than 62% of eligible women. The National Policy guidelines policy are being implemented in all the health care facilities.

The Department participates in the overall GPG programme, which aims at the prevention of violence against women. Post-exposure prophylaxis (PEP) is being implemented in 29 sites that include the 26 designated medico legal centres for survivors of violence. Five additional sites are in the process of implementing PEP. The centres have reached more than 10 200 clients since the inception of the programme in July 2002 with 71.6% of patients seen within 72 hours. 207 health care personnel were trained and 85 attended a debriefing session. First group of 19 professional nurses commenced training in Sexual Assault Care Practice (Forensic Nursing) and received their certificates in November 2003.

d) Emerging and re-emerging communicable diseases*Tuberculosis*

Tuberculosis control programme is a major priority and the appointment of TB coordinators in all the regions will improve implementation of the TB control programmes in the province.

*Notifiable Medical Conditions*

Since 1999 the number of meningococcal meningitis, cholera and viral hepatitis continues to decline. Since April this year, 127 meningococcal meningitis cases were reported. During 2003, a measles outbreak resulted in 44 cases being reported. Outbreak teams have been established in each District.

f) The expanded response on HIV and AIDS epidemic

The 2002 HIV antenatal sero-prevalence survey revealed a rate of 31.6%, showing stabilising albeit at very high levels. The comprehensive management of sexually transmitted infections will continue.

The comprehensive and expanded response to HIV and AIDS continues to deliver. This programme continues to reach the entire population through cultural activities, campaigns, role modelling, leadership and media. A successful AIDS "Care Week" was held in May 2003. The 2003 World AIDS Day campaign will include extensive door-to-door campaigns, mixed media messages, and social mobilisation.

STI management (syndromic) is implemented in 90% of clinics. An average of 7 million condoms is distributed per month. Female condoms are distributed in 24 sites in the province. The HIV and AIDS workplace policy is being implemented. 148 Voluntary Counselling and Testing sites (VCT) have been established in the province with 64 new sites established since April 2003.

Funding is provided to 100 NGO based Home Based Care (HBC) projects and support groups for People Living with AIDS (PLWA) to provide home-based care, support services and other related services. All sub districts have home based care projects.

The Department continues to subsidise 148 hospice beds across the Province. 260 step down beds have been established in six provincial hospitals and the Department funds 1495 beds for TB patients.

More than 80% of local clinics provide basic AIDS care, counselling and HIV tests as well as Sexually Transmitted Infections (STI) services. Diflucan donation programme is operational in all hospitals and large community health centres.

The ARVs will be rolled out, commencing during 2004/05. The provincial plan was developed and adopted during the second half of 2003.

The Premier continues to provide political leadership that both profiles the epidemic and a comprehensive response to it. The Premier's Committee on AIDS and Gauteng AIDS Council meet quarterly and continue to provide the leadership necessary to fight the epidemic. The process of implementing the GPG Monitoring and Evaluation Plan is underway.

*Non-communicable diseases*

Non-communicable diseases present a major health burden to our country. Our primary health care facilities undertake extensive management of chronic conditions, notably hypertension and diabetes with more than one million visits in the past year. Our health promotion campaigns in all health districts stress the importance of exercise, nutrition, no smoking and stress reduction.

In 1999, Gauteng received the first-time award of the trophy for cataract surgery as more than 9,000 operations were performed. Gauteng cataract operations continued to increase from 5 000 in 2000 to 6 156 in 2002.

**2.2 Improving health services**a) Service Improvement plan

The Service Improvement Plan formulated within the context of the original STP, Hospital Planning Norms, National Health Care Transformation and Equity Drive (e.g. the Strategic Position Statement), PFMA and Resolutions 7 and 8 of the Public Service Coordinating Bargaining Council (PSCBC) has been approved. The three regional service plans have been aligned with the Departmental Service Improvement plan. Rationalisation of tertiary services in the four central hospitals and de-linking of level 1 beds is underway.

b) Strengthening Primary Health Care (PHC)

The finalisation of signed agreements with local government on primary care service delegation is underway. The City of Johannesburg signed agreement in April 2003 and Sedibeng in October 2003. West Rand, Ekurhuleni Metro, City of Tshwane and Metsweding to be signed during quarter 4.

At the core of the ongoing reforms are interventions to establish a strong district health system. The utilisation and access to Primary Health Care facilities has increased by 3% since the last financial year. An estimated 85% of Primary Health Care package of services is being offered in all the sub districts.

The Department continues to supply pre-packed medications and other medicines (on the Essential Drug List (EDL), and surgical sundries to most Local Government clinics to facilitate the introduction of a more comprehensive range of services. Monitoring of EDL based on Clinic Supervisory Manual (CSM) is done at 70% of facilities.

*Rehabilitation Services*

The development of multidisciplinary services on a project basis has been a key focus for rehabilitation staff. One such project is the Spinal Cord Affliction management project, with participants from all the different disciplines. Policy on spinal unit has been finalised and Strategy for Orthotist and Prosthetist services developed.

During this financial year the provision of assistive devices has been expanded to include artificial limbs and white canes, as well as hearing aids. The provision of wheelchairs, both manual and battery operated, has remained a priority objective. 870 manual wheelchairs, and 26 battery-operated wheelchairs, 381 hearing aids were supplied. All patients on grants receive free assistive devices.

Free health care for the disabled has been implemented as part of the UPFS.

c) Revitalisation of hospital services

Twenty-eight hospitals in Gauteng continue to see millions of patients in the province. The hospitals efficiency is demonstrated by average length of stay 5.5 days and the Bed occupancy rate on the average of 76% for all public hospitals excluding specialised hospitals. These hospitals have attended to more than one million outpatients since April 2003.

The Department is in the process of reorganising three specialised units of Cardio thoracic surgery, oncology and Orthopaedics. 40% of paediatric oncology and 60% Orthopaedics has been completed at CHB hospital.

*Implementation of Fofateng initiatives*

The development of differentiated amenities through the implementation of "Fofateng" is underway. The Fofateng units have experienced a very positive response. The pre-existing, high standard of care delivered at the hospitals has attracted a large number of private paying patients. Presently there are 3 Fofateng units operating at the following institutions:

- The Johannesburg hospital opened in May 2002 has a total of 92 beds with a bed occupancy rate of above 80%. The total revenue collected until the end of October is R31 million.
- The Helen Joseph hospital opened on the 18 June 2003 has a total 40 beds with a bed occupancy rate of 40%.
- The Pretoria West Hospital opened on 08 June 2003 has a total of 47 beds with bed occupancy rate of 40%.
- A 32-bed ward being built at Sebokeng Hospital is on track and should be ready for occupation by March 2004.

*Pharmaceutical Services*

The implementation of Project Tokiso for refurbishment and re-organisation of pharmacies in the province is underway. The refurbishment is completed at Pretoria Academic, Pretoria West, Tembisa, Mamelodi, Coronation and Johannesburg hospitals. Eighty percent of hospitals and regional pharmacies have comply with Essential Drug List (EDL). The annual stock tacking is in progress in all hospitals.

**CAPEX**

A comprehensive Capital Works Plan for Gauteng Health Facilities in line with Departmental Capital Investment strategy and maintenance plans (using the PREMIS programme) has been developed and approved. A new professional and health technology unit has been established. The Department is in the process of completing a number of the following new and upgraded infra-structural projects shown in budget statement 3.

**d) Ensure rapid and effective emergency care**

Ninety eight new vehicles will be purchased during this financial year. Seventy new ambulances have been purchased including the City of Johannesburg. Twenty-eight more have been ordered. Twenty four percent of locally based staff has intermediate life support training and 4% with advanced life support training. Since April 2003 trained ambulance personnel attended to 82 930 critically ill or injured patients. The norms and standards for Emergency Medical Services are being implemented

**e) Improve Quality of Care**

- Eighty seven percent of the public hospitals and Community Health Centres have been evaluated through the Accreditation process.
- Seventy percent of hospitals and community health centres comply fully or partially with the first levels standards.
- The 2003 provincial Cecilia Makiwane Nurses Excellence awards and the Khanyisa Service Excellence including the Kickstart awards and including awards for other categories of staff ceremony was in October 2003 following the Departmental Health Summit. The provincial Cecilia Makiwane winner was also the national winner.
- Disabled access according to the national norms and standards has been established in 95% of our health facilities.
- QA framework and clinical Audit policy has been approved by senior management
- Community Social Audit (Survey) used eight Batho Pele principles and was aimed at getting perceptions on service delivery, service use & access as well as the impact of service delivery showed 82% satisfaction of people who have used services in last year. Problems with attitudes were revealed, and these are being addressed. The Department has a dedicated functional Quality Assurance Directorate since October 2002.

**1.3 Ensure value for money and effective organisation****a) Human Resource**

Human Resources strategy focusing on people management, recruitment and retention, implementation of the Public Service Coordinating Bargaining Council (PSCBC) resolutions 7 and 8 of 2002, and the development of a human resource information system has been developed. The process of transformation of the Public sector through Resolution 7 of 2002 came to an end in September 2003. The Human Resource Road shows were completed at 35 institutions.

Workplace skills plan approved by Gauteng Public Health and Welfare Chamber (GPHWC) and pending approval by the national Public Health and Welfare Sector Bargaining Council (PHWSBC). Skills development committee were established at central and regional levels.

The Student Exchange Programme with Kings college Hospital in the United Kingdom commenced in August 2003. The first group of 18 nurses left and is guaranteed their jobs upon return to the country. These nurses will be expected to serve the Department for at least three years.

The Department continues to implement Department of Public Service & Administration (DPSA) framework for the Senior Management Service (SMS). The performance management system for levels 1-12 developed as part of the GPG process is being rolled out in all the institutions. Four hundred and ninety staff members including twenty senior managers were trained on train the trainer programme and more than thirty four thousands (85%) staff members have been trained on the system.

The Department continues to comply with the Equity Act 55 of 1998 and other redress legislative imperatives. The current employment equity status of the Department indicates 86% blacks and 77% women with 42% of women in middle and senior management positions and 0.2% are people with disabilities.

An Employee Assistance Programme (EAP) has been initiated, in conjunction with the Gauteng Shared Services Centre. The proposal for integration of HIV/ AIDS Workplace Programme, Occupational Health & Safety has been developed. Occupational Health and Safety committees have been established. Disciplinary cases are being managed actively and there is a significant reduction in disciplinary cases.

Draft Human Resource Development strategy has been developed and staff development training programmes continue to be implemented in the Department.

- 30 staff commenced training on primary health care services and hospital management
- 120 Ward Clerks are being trained on Medicom and ward management



**b) Health information and communication**

- Computerised Patient Information System (MIS) is implemented in 9 hospitals and 5 clinics. The State Information Technology Agency (SITA) is undertaking the maintenance/rollout of this system.
- The hospital minimum dataset has been completed and is being implemented in 78.5% of the Hospitals
- The revised and rationalised Primary Health Care Minimum Data set is being implemented in all the PHC facilities
- Patient Administration and billing (PAAB) system and Pharm-Assist is implemented in all non-Medicom hospitals
- Marketing and communication strategy is being implemented across the Department.

**c) Revenue Strategy**

- The Department will continue to use the Folateng initiative as an incentive scheme and strategy to encourage and improve revenue collection at institutions, and this initiative is implemented at three hospitals
- The Uniform Patient Fee Schedule (UPFS) is being implemented in the health facilities
- A debt management project has been implemented for the institutions on a quantum priority basis
- Revenue collected since April 2003 was R100 728 million

**d) Financial Management**

- Seventy five percent of institutions implement an inventory and asset system.
- The process of cost centre implementation started in 13 hospitals with an average of 43% completion.
- Fraud prevention plan is being implemented
- Risk assessment completed and risk management training planned for senior managers

**e) Community participation and Partnerships**

- 93% of hospitals have functional hospital boards. The Department is in the process of filling all the hospital board vacant posts.
- The process of realigning ward health sub committees in accordance with legislation as a joint venture with Local Government is underway. 43% of ward health sub committees are functional.
- Functional Provincial Health Authority (PHA) and inter governmental forum for Emergency Medical Services
- Continued MEC's visits to institutions and communities held once per month.

### **3. OUTLOOK OF 2004/2005 FINANCIAL YEAR**

The Department will continue to provide services jointly with other Departments through the implementation of Intersectoral projects. The Department's major priorities aligned to the strategic goals are summarised below:

#### **3.1 Effective Leadership, Governance and Management**

- Ensuring the implementation of a Performance Management System that incorporates clear rewards and sanctions and enforcement of discipline
- Establishing and maintaining governance systems and structures
- Ensure compliance with legislation (Mental Health Act, Pharmacy Act, and New Employment equity, PFMA, New Health Act etc.)

#### **3.2 Effective implementation of the comprehensive HIV and AIDS strategy**

As part of the social services cluster the Department continues to play a key role in leading the implementation of the Intersectoral HIV and AIDS Programme. The main focus is on the following priority areas.

- Provide ongoing social mobilization, communication and prevention to reduce new HIV infection rates especially in under 20 years of age and babies through maintaining 100% PMTCT coverage and improving follow up of babies
- Provide comprehensive care, treatment and support for people living with HIV and AIDS, care givers and affected children including mainstreaming in all programmes through the roll out of ARV programme and continue with roll out of PEP in hospitals.

#### **3.3 Addressing the wide burden of disease through focused priority programmes**

The Department will continue to strengthen strategies and programmes with special emphasis on vulnerable groups, mostly women and children in the following areas

- Programmes to reduce infant and maternal morbidity and mortality support implementation of different section of the intersectoral project (Poverty Alleviation, Childhood Development, Protection of Women and Children, Youth Development)
- Establishment of Community Obstetrics Unit
- Implementation of integrated food security programme in conjunction with other departments;



- Strengthening TB control programme
- Programmes to reduce or alleviate the impact of trauma and violence

### 3.4 Providing Caring, Responsive and Quality health services

- Significant increases in district health services (primary health care and district hospitals)
- Developing smaller and more cost effective central hospitals with centres of excellence
- A much stronger reliance on referral networks as against off-the street care
- Improving Emergency Medical Services in the province
- Improving customer care with special focus on clinical audit and reduction in waiting times
- Developing strategies to address attitude and improve morale of frontline staff

### 3.5 Optimised Human Resources

The Department will continue strengthening Human Resources through alignment of staff establishment with service plans, implementation of the Gauteng health integrated wellness programme, implementation of skills development and Human Resource strategy and ensure retention of scarce skills and long term relations

### 3.6 Invest in Decision Support Systems, Communication and Health Technology

Develop and implement Information Management Strategic Plan aligned to the Service Improvement Plan and Departmental Strategic Plan

### 3.7 Operating smarter

- Improving Financial Management by ensuring PFMA reporting through cost centres and strengthen financial controls
- Development and implementation of risk management strategies in the Department
- Implementation of CAPEX programme including participation in the Zivuseni project
- Partnerships with universities, the private sector, organised labour and communities

## 4 RECEIPTS AND FINANCING

Table 1: Summary of receipts: Gauteng: Department of Health

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
<b>Tax receipts</b>									
Equitable share	3 842 579	4 412 768	4 945 977	5 512 610	5 551 911	5 750 242	6 055 595	6 379 624	6 664 213
Conditional grants	2 113 673	2 358 606	2 522 107	2 599 153	2 614 231	2 629 941	2 675 412	2 836 220	2 978 312
Departmental receipts									
<b>Total receipts</b>	<b>5 956 252</b>	<b>6 771 374</b>	<b>7 468 084</b>	<b>8 111 763</b>	<b>8 166 142</b>	<b>8 380 183</b>	<b>8 731 007</b>	<b>9 215 844</b>	<b>9 642 525</b>

**Table 2: Departmental receipts: Gauteng: Department of Health**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Tax receipts									
Non-tax receipts	118 579	154 432	166 231	162 584	162 584	162 584	175 608	192 920	204 496
Sale of goods and services other than capital assets	117 450	149 313	161 899	155 742	155 742	155 742	169 300	185 858	197 011
Fines, penalties and forfeits		2	3						
Interest, dividends and rent on land	1 129	5 117	4 329	6 842	6 842	6 842	6 308	7 062	7 485
Transfers received									
Sale of capital assets	0	3 048	436	1 819	1 819	1 819	1 985	2 356	2 497
Financial transactions									
<b>Total departmental receipts</b>	<b>118 579</b>	<b>157 480</b>	<b>166 667</b>	<b>164 403</b>	<b>164 403</b>	<b>164 403</b>	<b>177 593</b>	<b>195 276</b>	<b>206 993</b>

\*Receipts does not include the National Conditional grant for Antiretroviral (R 45 465).

## 5. PAYMENT SUMMARY

**Table 3: Summary of payments and estimates: Gauteng: Department of Health**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Programme 1:									
Administration	199 830	328 675	271 790	233 750	233 750	256 504	220 800	230 450	242 000
Programme 2:									
District Health Services	1 293 701	1 306 577	1 573 435	1 796 386	1 791 827	1 857 554	2 012 090	2 244 148	2 392 102
Programme 3:									
Emergency Medical Services	165 053	206 787	214 480	259 810	268 810	268 810	280 600	290 545	305 100
Programme 4:									
Provincial Hospital Services	1 288 405	1 368 349	2 115 906	2 345 371	2 369 226	2 352 678	2 471 502	2 629 077	2 760 600
Programme 5:									
Central Hospital Services	2 892 627	3 092 936	2 831 224	2 680 340	2 700 491	2 840 480	2 841 282	2 937 722	3 067 960
Programme 6:									
Health Training and Sciences	45 776	94 420	121 139	164 265	170 301	170 301	187 283	198 915	208 800

Programme 7:									
Health Care									
Support Services	71 359	83 566	89 056	93 761	93 657	90 448	98 771	106 401	111 101
Programme 8 :									
Health Facilities									
Management	0	354 120	493 361	538 080	538 080	538 080	618 679	578 586	554 862
Special Functions	6 771	4 347	1 181						
Internal Charges	-21 314	-2 201	-23 533			5 328			

**Total payments****and estimates:****Gauteng: Department**

<b>of Health</b>	<b>5 942 208</b>	<b>6 837 576</b>	<b>7 688 039</b>	<b>8 111 763</b>	<b>8 166 142</b>	<b>8 380 183</b>	<b>8 731 007</b>	<b>9 215 844</b>	<b>9 642 525</b>
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1) MEC remuneration payable as from 1 April 2003. Salary: R389 037. Car allowance: R107 256.

2) The Special Functions expenditure is included under Goods and Services under Programme 1 in the economic classification

**Table 4: Summary of provincial payments and estimates by economic classification: Gauteng: Department of Health**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited	Audited	Audited				2004/05	2005/06	2006/07
	2000/01	2001/02	2002/03						
<b>Current payments</b>	<b>5 168 572</b>	<b>5 859 264</b>	<b>6 603 447</b>	<b>6 801 209</b>	<b>6 891 344</b>	<b>7 126 582</b>	<b>7 423 498</b>	<b>7 769 210</b>	<b>8 189 923</b>
Compensation of employees	3 411 825	3 659 829	3 906 729	4 264 598	4 273 851	4 250 938	4 535 600	4 780 900	4 992 860
Goods and services	1 756 747	2 199 435	2 696 718	2 536 611	2 617 493	2 875 644	2 887 898	2 988 310	3 197 063
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
<b>Transfers and subsidies to:</b>	<b>519 761</b>	<b>486 397</b>	<b>614 307</b>	<b>686 445</b>	<b>693 324</b>	<b>678 156</b>	<b>760 880</b>	<b>788 580</b>	<b>828 840</b>
Provinces and municipalities	270 981	236 665	290 061	341 100	347 979	332 811	382 340	387 130	406 940
Departmental agencies and accounts	163 334	164 847	179 026	240 910	240 910	240 910	256 030	269 130	282 930
Universities and technikons	391	397	449	550	550	550	600	650	700
Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions	85 055	84 488	144 771	103 885	103 885	103 885	121 910	131 670	138 270
Households									

<b>Payments for capital assets</b>	<b>253 875</b>	<b>491 915</b>	<b>470 285</b>	<b>624 109</b>	<b>581 474</b>	<b>575 445</b>	<b>546 629</b>	<b>658 054</b>	<b>623 762</b>
Buildings and other fixed structures	0	323 156	297 147	323 924	323 924	323 924	287 009	380 854	336 612
Machinery and equipment	253 875	168 759	173 138	300 185	257 550	251 521	259 620	277 200	287 150
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
<b>Total economic classification: Gauteng:</b>									
<b>Department of Health</b>	<b>5 942 208</b>	<b>6 837 576</b>	<b>7 688 039</b>	<b>8 111 763</b>	<b>8 166 142</b>	<b>8 380 183</b>	<b>8 731 007</b>	<b>9 215 844</b>	<b>9 642 525</b>

1 Amounts for Internal Charges for the financial years 2000-2003 is included in Goods and Services on this sheet

2 An amount of R5 328 000 regarding Special Functions expenditure is included in Goods and Services under the Revised Estimate column on this sheet

**Table 5: Summary of departmental transfers to departmental agencies and accounts**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited	Audited	Audited				2004/05	2005/06	2006/07
	2000/01	2001/02	2002/03						
				2003/04					
Lifecare - Mental Hospitals	131 552	124 933	123 586	155 000	155 000	155 000	165 100	173 200	182 080
Lifecare - Tuberculosis Hospitals			49 852	31 250	31 250	31 250	33 100	35 000	36 800
SANTA - Tuberculosis Hospitals	31 782	39 914	5 588	28 200	28 200	28 200	29 860	31 600	33 300
Alexander Health Care Centre			18 000	19 000	19 000	19 000	20 000	21 000	22 000
Witkoppen Clinic			1 100	1 300	1 300	1 300	1 400	1 500	1 550
Phillip Moyo			4 877	6 160	6 160	6 160	6 520	6 830	7 200
Other	35	35	737						
<b>Total</b>	<b>163 369</b>	<b>164 882</b>	<b>203 740</b>	<b>240 910</b>	<b>240 910</b>	<b>240 910</b>	<b>255 980</b>	<b>269 130</b>	<b>282 930</b>

**Table 6: Summary of departmental transfers to local government by category**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited	Audited	Audited				2004/05	2005/06	2006/07
	2000/01	2001/02	2002/03						
				2003/04					
Category A	140 990	155 708	214 991	255 400	262 279	262 279	288 349	292 320	307 290
Category B									
Category C	25 375	74 503	75 071	85 700	85 700	85 700	93 991	94 810	99 650
<b>Total departmental transfers to local government</b>	<b>166 365</b>	<b>230 211</b>	<b>290 062</b>	<b>341 100</b>	<b>347 979</b>	<b>347 979</b>	<b>382 340</b>	<b>387 130</b>	<b>406 940</b>

## 6. Programme Description

### Programme 1: Administration

Table 7: Summary of payments and estimates: Programme 1: Administration

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Sub-programme 1:									
Office of the Provincial Minister	2 390	2 287	2 607	3 000	3 050	3 050	4 090	3 400	3 600
Sub-programme 2:									
Management	197 440	326 388	269 183	230 750	230 700	253 454	216 710	227 050	238 400
<b>Total payments and estimates:</b>									
<b>Programme 1:</b>									
<b>Administration</b>	<b>199 830</b>	<b>328 675</b>	<b>271 790</b>	<b>233 750</b>	<b>233 750</b>	<b>256 504</b>	<b>220 800</b>	<b>230 450</b>	<b>242 000</b>

1) MEC salary scale as from 1 April 2003 :R441 288 - R485 412. Car allowance: R110 322 - R121 353.

2) Sub Programme Management excludes R11 353 in 2002/03 for the Directorate: Human Resource Development. This amount was shifted to programme 6.

Table 8: Summary of provincial payments and estimates by economic classification: Programme 1: Administration

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
<b>Current payments</b>	<b>149 288</b>	<b>242 104</b>	<b>252 031</b>	<b>216 595</b>	<b>216 595</b>	<b>239 349</b>	<b>202 640</b>	<b>208 450</b>	<b>219 900</b>
Compensation of employees	58 522	63 077	88 538	72 590	66 475	88 971	94 300	95 000	100 000
Goods and services	90 766	179 027	163 493	144 005	150 120	150 378	108 340	113 450	119 900
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
<b>Transfers and subsidies to:</b>	<b>18 424</b>	<b>29 073</b>							
Provinces and municipalities									
Departmental agencies and accounts									
Universities and technikons	391	397							
Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions	18 033	28 676							
Households									

<b>Payments for capital assets</b>	<b>38 889</b>	<b>61 845</b>	<b>20 940</b>	<b>17 155</b>	<b>17 155</b>	<b>17 155</b>	<b>18 160</b>	<b>22 000</b>	<b>22 100</b>
Buildings and other fixed structures									
Machinery and equipment	38 889	61 845	20 940	17 155	17 155	17 155	18 160	22 000	22 100
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
<b>Total economic classification:</b>									
<b>Programme 1:</b>									
<b>Administration</b>	<b>206 601</b>	<b>333 022</b>	<b>272 971</b>	<b>233 750</b>	<b>233 750</b>	<b>256 504</b>	<b>220 800</b>	<b>230 450</b>	<b>242 000</b>

**6.1 Description and Objectives**

- Provide political and strategic direction and leadership
- Develop and implement policy and legislative framework for health care
- Ensure an enabling environment for quality service delivery
- Promote co-operative governance
- Provide conducive work environment for staff
- Ensure value for money and effective organisation
- Ensure equity and efficiency in distribution and use of resources
- Monitor and evaluate performance of the department

**6.2 Service delivery measures**

Description of outputs	Performance Measures	Performance Targets	
		2003/04 Estimated actual	2004/05 Estimate
Implementation of Management Information System (MIS) in all hospitals and clinics	Percentage of provincial hospitals implementing the national minimum data set	80	90
Implementation of the prescribed staff performance management system	Percentage of provincial hospitals and clinics implementing the prescribed system	70	80
Inventory and asset recording system in place at all institutions	Percentage of institutions with an inventory and asset system	80	100
Increase in revenue generation	Percentage increase in revenue collected from previous year	3	5
Increased utilisation of Folateng facilities	Number of Folateng wards established	3	4
Cost Centers implemented in hospitals=	Number of hospitals implementing cost centres	13	14
Implementation of patient focussed quality accreditation system in all clinics and hospital	Percentage of provincial hospitals and Community Health Centres evaluated	87	100
Service excellence awards			
Assistive devices to people with disabilities	Number of assistive devices issued.	896	1000
Improved pharmaceutical management	Percentage compliance of hospital pharmacies with annual stock taking	100	100
Availability of medicines on the EDL	Percentage of hospital and regional pharmacies with EDL medicines	90	100
Strengthened community based services	Number of community health workers trained	3170	4670
# Information not available			



**Programme 2: District Health Services**

Table 9: Summary of payments and estimates: Programme 2: District Health Services

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited	Audited	Audited				2004/05	2005/06	2006/07
	2000/01	2001/02	2002/03						
				2003/04					
Sub-programme 1:									
District management	522 377	550 813	566 390	337 403	338 098	401 454	357 540	390 247	410 500
Sub-programme 2:									
Community health clinics	102 108	272 945	524 063	375 513	376 520	376 520	401 940	425 440	446 800
Sub-programme 3:									
Community health centres	173 860	85 147		254 190	254 190	254 190	272 060	290 360	305 000
Sub-programme 4:									
Community based services				216 000	216 000	216 000	232 500	263 000	276 100
Sub-programme 5:									
HIV/AIDS			64 725	155 275	140 712	140 712	334 142	435 048	502 695
Sub-programme 6:									
Nutrition	62 692	64 601	70 453	80 285	80 285	80 285	10 307	11 333	
Sub-programme 7:									
District hospitals	432 664	333 071	347 641	377 720	386 022	388 379	403 601	428 720	451 007
Thefts and Losses			163			14			
<b>Total payments and estimates:</b>									
<b>Programme 2:</b>									
<b>District Health Services</b>	<b>1 293 701</b>	<b>1 306 577</b>	<b>1 573 435</b>	<b>1 796 386</b>	<b>1 791 827</b>	<b>1 857 554</b>	<b>2 012 090</b>	<b>2 244 148</b>	<b>2 392 102</b>

Table 10: Summary of provincial payments and estimates by economic classification: Programme 2: District Health Services

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited	Audited	Audited				2004/05	2005/06	2006/07
	2000/01	2001/02	2002/03						
				2003/04					
<b>Current payments</b>	<b>1 008 536</b>	<b>1 088 455</b>	<b>1 205 635</b>	<b>1 384 191</b>	<b>1 382 732</b>	<b>1 448 459</b>	<b>1 569 310</b>	<b>1 774 988</b>	<b>1 899 562</b>
Compensation of employees	663 417	666 839	743 062	802 458	827 977	827 977	878 000	922 000	968 000
Goods and services	345 119	421 616	462 573	581 733	554 755	620 482	691 310	852 988	931 562
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
<b>Transfers and subsidies to:</b>	<b>265 169</b>	<b>204 338</b>	<b>353 789</b>	<b>380 045</b>	<b>380 045</b>	<b>380 045</b>	<b>412 780</b>	<b>438 160</b>	<b>460 540</b>
Provinces and municipalities	166 365	108 612	153 578	190 250	190 250	190 250	200 340	211 130	221 940
Departmental agencies and accounts	31 782	39 914	55 440	85 910	85 910	85 910	90 530	95 360	100 330
Universities and technikons									

Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions	67 022	55 812	144 771	103 885	103 885	103 885	121 910	131 670	138 270
Households									
<b>Payments for capital assets</b>	<b>19 996</b>	<b>13 784</b>	<b>14 011</b>	<b>32 150</b>	<b>29 050</b>	<b>29 050</b>	<b>30 000</b>	<b>31 000</b>	<b>32 000</b>
Buildings and other fixed structures									
Machinery and equipment	19 996	13 784	14 011	32 150	29 050	29 050	30 000	31 000	32 000
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
<b>Total economic classification:</b>									
<b>Programme 2:</b>									
<b>District Health</b>									
<b>Services</b>	<b>1 293 701</b>	<b>1 306 577</b>	<b>1 573 435</b>	<b>1 796 386</b>	<b>1 791 827</b>	<b>1 857 554</b>	<b>2 012 090</b>	<b>2 244 148</b>	<b>2 392 102</b>

\*National Health has not allocated budget for 2006/2007 to all provinces and will be reviewing the allocation at a later stage.

## 2.1 Description and Objectives

- To render primary health care services
- To manage district health services
- To deliver a comprehensive primary health care package
- To render emergency services and patient transport
- To render a nutrition programme
- To render a HIV and AIDS programme

## 2.2 Service delivery measures

Description of outputs	Performance Measures	Performance Targets	
		2003/04 Estimated actual	2004/05 Estimate
Strengthened hospital and facility management	Percentage of hospitals with appointed CEOs	100	100
	Percentage of CHCs with appointed facility managers	#	100
Development of performance work plans for all CEOs and CHC managers	Percentage of hospital CEOs and CHCs managers with performance work plans	#	100
Development of high level business plan for strengthening of the District Health system	Availability of high level business plan	0	1
Access to the core package of primary care services available in each sub-district through the DHS	Number of visits (head count) at public PHC facilities	10.6 million	11 million
	Percentage of sub-districts offering the full package of primary care services	100	100
	Percentage of sub-districts with at least one 24 hour PHC facility	75	80

Availability of EDL drugs	Essential drugs out of stock at PHC facilities	2	1.5%
Feeding programmes in crèches	Number of crèches with feeding programmes	2 594	2 600
	Number of pre-scholars fed	61 113	62 000
Immunisation coverage among children under 1 year increased	Immunisation coverage for under 1 year (%)	79	90
Reduced new infections among antenatal care women	Antenatal sero-prevalence rate (%)	31.6	Stabilise 32
Strengthened HIV/AIDS programme implementation in all districts	Percentage of Regions and health districts with dedicated HIV/AIDS coordinators	100	100
Rollout of ARV in public health facilities	Number of health facilities offering ARV	0	22
Maintaining full coverage of PMTCT	Percentage hospitals, large community health centres and clinics with maternity services implementing the programme	100% hospitals and CHC's and 56 clinics	100% hospitals, CHC's and clinics with ANC services
Support for victims of sexual assault	The number of health facilities implementing PEP for victims of sexual assault	34	47
Improved TB cure rate in new positive cases	Percentage of new positive TB cure rate	68	70
Shorter waiting times for patients	Percentage reduction in overall waiting times	10	15
Hospital boards established and maintained	Percentage of hospitals with operational hospital Boards	83	100
Community participation structure established and maintained	Percentage fixed PHC clinics with functioning community participation structure	43	60
Improved hospital efficiency	Average length of stay (ALOS)	3	3
	Bed Occupancy Rate (BOR)	75	78

# New indicator, Data not available

### Programme 3: Emergency Medical Services

Table 11: Summary of payments and estimates: Programme 3: Emergency Medical Services

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Sub-programme 1:									
Emergency transport	165 053	206 787	214 480	259 760	268 760	268 760	280 500	290 445	305 000
Sub-programme 2:									
Planned patient transport				50	50	50	100	100	100
<b>Total payments and estimates:</b>									
<b>Programme 3:</b>									
<b>Emergency Medical Services</b>	<b>165 053</b>	<b>206 787</b>	<b>214 480</b>	<b>259 810</b>	<b>268 810</b>	<b>268 810</b>	<b>280 600</b>	<b>290 545</b>	<b>305 100</b>

**Table 12: Summary of provincial payments and estimates by economic classification: Programme 3: Emergency Medical Services**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
<b>Current payments</b>	<b>8 691</b>	<b>78 661</b>	<b>77 992</b>	<b>24 960</b>	<b>51 480</b>	<b>66 648</b>	<b>54 600</b>	<b>49 545</b>	<b>50 100</b>
Compensation of employees	1 716	443	445	4 900	5 226	2 442	7 400	5 900	6 300
Goods and services	6 975	78 218	77 547	20 060	46 254	64 206	47 200	43 645	43 800
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
<b>Transfers and subsidies to:</b>	<b>104 616</b>	<b>128 053</b>	<b>136 483</b>	<b>150 850</b>	<b>157 729</b>	<b>142 561</b>	<b>182 000</b>	<b>176 000</b>	<b>185 000</b>
Provinces and municipalities	104 616	128 053	136 483	150 850	157 729	142 561	182 000	176 000	185 000
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions									
Households									
<b>Payments for capital assets</b>	<b>51 746</b>	<b>73</b>	<b>5</b>	<b>84 000</b>	<b>59 601</b>	<b>59 601</b>	<b>44 000</b>	<b>65 000</b>	<b>70 000</b>
Buildings and other fixed structures									
Machinery and equipment	51 746	73	5	84 000	59 601	59 601	44 000	65 000	70 000
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
<b>Total economic classification:</b>									
<b>Programme 3:</b>									
<b>Emergency Medical Services</b>	<b>165 053</b>	<b>206 787</b>	<b>214 480</b>	<b>259 810</b>	<b>268 810</b>	<b>268 810</b>	<b>280 600</b>	<b>290 545</b>	<b>305 100</b>

**3.1 Description and Objectives**

- Ensure rapid and effective Emergency Medical care and transport
- Ensure efficient planned patient transport
- Ensure implementation of provincial norms and standards

### 3.2 Service Delivery Measures

Description of outputs	Performance Measures	Performance Targets	
		2003/04 Estimated actual	2004/05 Estimate
Priority one patient (critically ill or injured patients) responded to within 15 minutes	Percentage of priority one patients responded to within 15 minutes	70	80
Increased number Ambulance personnel with life support training	Percentage of emergency care staff trained to Basic Life Support Level	67*	73*
	Percentage of staff trained to Intermediate Life Support Level	30*_	20*_
	Percentage of emergency care staff trained to Advanced Life Support Level	3*	5*
	Number of vehicles replaced per year	95	80

\*According to Emergency Medical Services norms and standards staff complement should be Basic Life Support (73%), Intermediate Life Support (18%), Advanced Life Support (9%)

In some districts staff complements provides joint fire and EMS services

### Programme 4: Provincial Hospital Services

Table 13: Summary of payments and estimates: Programme 4: Provincial Hospital Services

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Sub-programme 1:									
General hospitals	840 411	906 466	1 639 179	1 766 091	1 778 469	1 771 136	1 881 461	1 989 301	2 088 800
Sub-programme 2:									
Psychiatric/mental hospitals	327 286	322 557	341 840	421 230	427 196	417 981	431 341	466 530	489 900
Sub-programme 3:									
Other Specialised Hospitals	26 229	31 836	30 444	43 950	44 119	44 119	45 700	47 350	49 700
Sub-programme 4:									
Dental training hospitals	94 479	107 490	104 443	114 100	119 442	119 442	113 000	125 896	132 200
<b>Total payments and estimates:</b>									
<b>Programme 4:</b>									
<b>Provincial Hospital Services</b>	<b>1 288 405</b>	<b>1 368 349</b>	<b>2 115 906</b>	<b>2 345 371</b>	<b>2 369 226</b>	<b>2 352 678</b>	<b>2 471 502</b>	<b>2 629 077</b>	<b>2 760 600</b>

**Table 14: Summary of provincial payments and estimates by economic classification: Programme 4: Provincial Hospital Services**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
<b>Current payments</b>	<b>1 121 374</b>	<b>1 211 916</b>	<b>1 938 353</b>	<b>2 121 871</b>	<b>2 147 157</b>	<b>2 130 609</b>	<b>2 228 002</b>	<b>2 381 807</b>	<b>2 500 800</b>
Compensation of employees	864 892	914 776	1 360 083	1 504 700	1 491 221	1 479 004	1 590 500	1 660 000	1 745 000
Goods and services	256 482	297 140	578 270	617 171	655 936	651 605	637 502	721 807	755 800
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
<b>Transfers and subsidies to:</b>	<b>131 552</b>	<b>124 933</b>	<b>123 586</b>	<b>155 000</b>	<b>155 000</b>	<b>155 000</b>	<b>165 500</b>	<b>173 770</b>	<b>182 600</b>
Provinces and municipalities									
Departmental agencies and accounts	131 552	124 933	123 586	155 000	155 000	155 000	165 500	173 770	182 600
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions									
Households									
<b>Payments for capital assets</b>	<b>35 479</b>	<b>31 500</b>	<b>53 967</b>	<b>68 500</b>	<b>67 069</b>	<b>67 069</b>	<b>78 000</b>	<b>73 500</b>	<b>77 200</b>
Buildings and other fixed structures									
Machinery and equipment	35 479	31 500	53 967	68 500	67 069	67 069	78 000	73 500	77 200
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
<b>Total economic classification:</b>									
<b>Programme 4:</b>									
<b>Provincial Hospital Services</b>	<b>1 288 405</b>	<b>1 368 349</b>	<b>2 115 906</b>	<b>2 345 371</b>	<b>2 369 226</b>	<b>2 352 678</b>	<b>2 471 502</b>	<b>2 629 077</b>	<b>2 760 600</b>



#### 4.1 Description and Objectives

- To render a general and specialised hospital services
- To provide chronic mental and tuberculosis in-patient care on an agency basis for the Department
- To render hospital services provided by general specialists
- Rendering oral health care services and a platform for the training of health workers

#### 4.2 Service Delivery measures

Description of outputs	Performance Measures	Performance Targets	
		2003/04 Estimated actual	2004/05 Estimate
Strengthened hospital management	Percentage of hospitals with appointed CEOs	100	100
Development of performance work plans for all hospital CEOs	Percentage of hospital CEO's with performance work plans	14	100
Improve monitoring of SANTA and Life Care hospitals	Number of contracts signed	#	6
Reduction of beds in private institutions for patients with chronic mental illness	Number of beds for chronic mentally ill patients	3 300	3 200
Maintain number of beds for TB patient cared for by private institutions	Number of beds for TB patients	1495	1 495
Strengthened and capacitated management team in hospitals	Percentage filled top management posts	100	100
Shorter waiting times for patients	Percentage reduction in overall waiting times	10	15
Hospital boards established and maintained	Percentage of hospitals with operational hospital Boards	94	100
Improved hospital efficiency	Average length of stay (ALOS)	4.3	4
	Bed Occupancy Rate (BOR)	67	70

#New indicator, Data not available

### Programme 5 : Central Hospital Services

Table 15: Summary of payments and estimates: Programme 5: Central Hospital Services

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Central Hospitals									
Sub-programme 1:									
Chris Hani Baragwanth									
Hospital	681 269	755 702	903 503	827 355	830 383	903 514	882 200	906 972	946 949
Sub-programme 2:									
Johannesburg									
Hospital	673 040	681 301	798 858	747 332	753 657	805 922	776 800	818 940	854 952
Sub-programme 3:									
Pretoria Academic									
Hospital	534 168	572 706	579 509	583 939	591 983	604 505	636 250	640 590	669 247
Sub-programme 4:									
Dr George Mukhari									
Hospital	454 732	488 102	530 391	521 714	524 468	526 474	546 032	571 220	596 812
Incorrect Allocations	549 418	595 125	18 963			65			
<b>Total payments and estimates:</b>									
<b>Programme 5:</b>									
<b>Central Hospital</b>									
<b>Services</b>	<b>2 892 627</b>	<b>3 092 936</b>	<b>2 831 224</b>	<b>2 680 340</b>	<b>2 700 491</b>	<b>2 840 480</b>	<b>2 841 282</b>	<b>2 937 722</b>	<b>3 067 960</b>

**Table 16: Summary of provincial payments and estimates by economic classification: Programme 5: Central Hospital Services**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
<b>Current payments</b>	<b>2 787 283</b>	<b>3 036 341</b>	<b>2 753 942</b>	<b>2 592 340</b>	<b>2 625 291</b>	<b>2 771 309</b>	<b>2 761 282</b>	<b>2 861 722</b>	<b>299 966</b>
Compensation of employees	1 736 656	1 887 647	1 565 415	1 705 000	1 698 250	1 667 842	1 770 000	1 892 000	1 956 760
Goods and services	1 050 627	1 148 694	1 188 527	887 340	927 041	1 103 467	991 282	969 722	1 035 200
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
<b>Transfers and subsidies to:</b>									
Provinces and municipalities									
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions									
Households									
<b>Payments for capital assets</b>	<b>105 344</b>	<b>56 595</b>	<b>77 282</b>	<b>88 000</b>	<b>75 200</b>	<b>69 171</b>	<b>80 000</b>	<b>76 000</b>	<b>76 000</b>
Buildings and other fixed structures									
Machinery and equipment	105 344	56 595	77 282	88 000	75 200	69 171	80 000	76 000	76 000
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
<b>Total economic classification:</b>									
<b>Programme 5:</b>									
<b>Central</b>									
<b>Hospital Services</b>	<b>2 892 627</b>	<b>3 092 936</b>	<b>2 831 224</b>	<b>2 680 340</b>	<b>2 700 491</b>	<b>2 840 480</b>	<b>2 841 282</b>	<b>2 937 722</b>	<b>3 067 960</b>

**5.1 Objectives and Objectives:**

- Provision of a platform for the training of health workers
- Provision of highly specialised health care services
- Serve as specialist referral centres for neighbouring provinces and regional hospitals

## 5.2 Service Delivery measures

Description of outputs	Performance Measures	Performance Targets	
		2003/04 Estimated actual	2004/05 Estimate
Strengthened hospital management	Percentage of hospitals with appointed CEOs	100	100
Development of performance work plans for all hospital CEOs	Percentage of hospital CEOs with performance work plans	#	100
Gate way clinics established at central hospitals	Number of Gate way clinics established	0	2
Re-organised highly specialised units for improved efficiency e.g. - Cardio thoracic - Oncology unit - Orthopaedics	Percentage completion of re-organised units	80	100
Strengthened and capacitated management team in hospital	Percentage filled top management posts	100	100
Outreach programmes by academic medical staff to secondary and other hospitals	Number of outreach programmes maintained	10	10
Shift primary ambulatory care patient from central hospitals to level I facilities	Percentage shift completed	50	60
Shorter waiting times for patients	Percentage reduction in overall waiting times	10	15
Reduced waiting list for surgical backlog	Percentage reduction in waiting list for cataract	5	10
Hospital boards established And maintained	Percentage of hospitals with operational hospital Boards	87	100
Improved hospital efficiency	Average length of stay (ALOS)	6	6
	Bed Occupancy Rate (BOR)	75	80

#New indicator, Data not available

## Programme 6: Health Training and Sciences

Table 17: Summary of payments and estimates: Programme 6: Health Training and Sciences

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Sub-programme 1:									
Nurse training colleges	41 690	79 814	100 495	128 915	136 951	136 951	155 933	163 515	172 000
Sub-programme 2:									
EMS training colleges	2 148	1 267	3 530	4 500	4 500	4 500	4 750	4 900	5 200
Sub-programme 3:									
Bursaries	1 544	2 078	5 761	13 000	11 000	11 000	11 000	11 500	12 000
Sub-programme 4:									
Primary health care training									
Sub-programme 5:									
Training other	394	11 261	11 353	17 850	17 850	17 850	15 600	19 000	19 600
<b>Total payments and estimates:</b>									
<b>Programme 6: Health Training and Sciences</b>	<b>45 776</b>	<b>94 420</b>	<b>121 139</b>	<b>164 265</b>	<b>170 301</b>	<b>170 301</b>	<b>187 283</b>	<b>198 915</b>	<b>208 800</b>

**Table 18: Summary of provincial payments and estimates by economic classification: Programme 6: Health Training and Sciences**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
<b>Current payments</b>	<b>43 869</b>	<b>90 293</b>	<b>114 880</b>	<b>154 115</b>	<b>161 176</b>	<b>161 176</b>	<b>178 083</b>	<b>189 565</b>	<b>199 300</b>
Compensation of employees	38 206	75 834	98 599	118 700	128 661	128 661	136 000	143 000	150 700
Goods and services	5 663	14 459	16 281	35 415	32 515	32 515	42 083	46 565	48 600
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
<b>Transfers and subsidies to:</b>			<b>449</b>	<b>550</b>	<b>550</b>	<b>550</b>	<b>600</b>	<b>650</b>	<b>700</b>
Provinces and municipalities									
Departmental agencies and accounts									
Universities and technikons			449	550	550	550	600	650	700
Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions									
Households									
<b>Payments for capital assets</b>	<b>1 907</b>	<b>4 127</b>	<b>5 810</b>	<b>9 600</b>	<b>8 575</b>	<b>8 575</b>	<b>8 600</b>	<b>8 700</b>	<b>8 800</b>
Buildings and other fixed structures									
Machinery and equipment	1 907	4 127	5 810	9 600	8 575	8 575	8 600	8 700	8 800
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
<b>Total economic classification: Programme 6: Health Training and Sciences</b>	<b>45 776</b>	<b>94 420</b>	<b>121 139</b>	<b>164 265</b>	<b>170 301</b>	<b>170 301</b>	<b>187 283</b>	<b>198 915</b>	<b>208 800</b>

**6.1 Description and Objectives**

- Training of nursing and ambulance personnel
- Granting of bursaries and promoting research and development of health systems

## 6.2 Service Delivery measures

Description of outputs	Performance Measures	Performance Targets	
		2003/04 Estimated actual	2004/05 Estimate
Increased number of Ambulance personnel with life support training.	Number of emergency care staff trained to Basic Life Support Level	53	144
	Number of emergency care staff trained to Intermediate Life Support Level	45	48
	Number of emergency care staff trained to Advanced Life Support Level	19	20
Health Sciences Graduates	Number of nursing students all years	3022	3121
	Number of all nursing graduates	1213	1148
Bursaries granted	Number of bursaries granted and / or maintained	972	1072
Training of clinical practitioners in HIV/AIDS/ARV	Number of clinical practitioners trained on comprehensive HIV/AIDS/ARV care	1000	1000
Training of supervisors in comprehensive PHC	Number of health managers trained in comprehensive PHC	59	60
Implementation of supervisors manual	Percentage of clinics/CHCs supervisors trained in supervisory requirements	70	85
	Number of modules implemented per district	6	8
Strengthened and capacitated management	Percentage of middle & emerging management trained	#	30
Capacitated senior, middle and supervisors in labour management	Percentage of senior, middle and supervisors in labour management trained in labour management	#	25
Establishment of hospital best practices manual	Availability of hospital best practice manual	#	1
Retraining of health professionals on priority programs, transformation issues and content of new syllabus	Number of tutors trained	#	80
	Percentage of health professionals trained	12.5	25
Implementation of learnership programme	Number of people trained in learnership programme	#	#

# new indicator, information not available

## Programme 7: Health Care Support Services

Table 19: Summary of payments and estimates: Programme 7: Health Care Support Services

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Sub-programme 1:									
Laundries	59 695	70 919	71 039	79 980	79 876	75 491	81 310	91 000	95 000
Sub-programme 2:									
Food Supply Services	11 664	12 647	18 017	13 780	13 780	14 956	17 460	15 400	16 100
Sub-programme 3:									
Medical trading account				1	1	1	1	1	1
<b>Total payments and estimates:</b>									
<b>Programme 7:</b>									
<b>Health Care</b>									
<b>Support Services</b>	<b>71 359</b>	<b>83 566</b>	<b>89 056</b>	<b>93 761</b>	<b>93 657</b>	<b>90 448</b>	<b>98 771</b>	<b>106 401</b>	<b>111 101</b>

**Table 20: Summary of provincial payments and estimates by economic classification: Programme 7: Health Care Support Services**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited	Audited	Audited				2004/05	2005/06	2006/07
	2000/01	2001/02	2002/03						
				2003/04					
Current payments	70 845	82 731	87 933	92 981	92 757	89 548	97 911	105 401	110 051
Compensation of employees	48 416	51 213	50 587	56 250	56 041	56 041	59 400	63 000	66 100
Goods and services	22 429	31 518	37 346	36 731	36 716	33 507	38 511	42 401	43 951
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
Transfers and subsidies to:									
Provinces and municipalities									
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions									
Households									
Payments for capital assets	514	835	1 123	780	900	900	860	1 000	1 050
Buildings and other fixed structures									
Machinery and equipment	514	835	1 123	780	900	900	860	1 000	1 050
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
Total economic classification:									
Programme 7: Health Care Support									
Services	71 359	83 566	89 056	93 761	93 657	90 448	98 771	106 401	111 101

**7.1 Description and Objectives**

- To render support services required by the department to fulfil its aims
- Non-clinical Services: Rendering non-clinical services as may be applicable for research, laundry and food supply services.
- Capital augmentation



## 7.2 Service Delivery Measures

Description of outputs	Performance Measures	Performance Targets	
		2003/04 Estimated actual	2004/05 Estimate
Comprehensive linen inventory register	Percentage of hospitals with an inventory register	80	100
Improved management and administration of laundries	Number of laundries functioning as trading entities		2
Efficient supply of pharmaceuticals and surgical sundries	Percentage orders supplied to institutions on first request	89	94
Improved security over assets	Percentage of assets bar-coded	80	100

## Programme 8: Health Facilities Management

Table 21: Summary of payments and estimates: Programme 8: Health Facilities Management

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Sub-programme 1:									
Community health facilities				31 707	31 707	31 707	63 619	50 595	33 715
Sub-programme 2:									
Emergency medical rescue services				500	500	500	4 785	4 000	4 000
Sub-programme 3:									
District hospital services				38 235	38 235	38 235	126 232	179 579	206 642
Sub-programme 4:									
Provincial hospital services				210 885	210 885	210 885	176 649	163 172	131 685
Sub-programme 5:									
Central hospital services				211 966	211 966	211 966	146 845	135 820	132 820
Sub-programme 6:									
Other facilities		354 120	493 361	44 787	44 787	44 787	100 549	45 420	46 000
<b>Total payments and estimates: Programme 8: Health Facilities Management</b>		<b>354 120</b>	<b>493 361</b>	<b>538 080</b>	<b>538 080</b>	<b>538 080</b>	<b>618 679</b>	<b>578 586</b>	<b>554 862</b>

Table 22: Summary of provincial payments and estimates by economic classification: Programme 8: Health Facilities Management

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
<b>Current payments</b>		<b>30 964</b>	<b>196 214</b>	<b>214 156</b>	<b>214 156</b>	<b>214 156</b>	<b>331 670</b>	<b>197 732</b>	<b>218 250</b>
Compensation of employees									
Goods and services		30 964	196 214	214 156	214 156	214 156	331 670	197 732	218 250
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									

<b>Transfers and subsidies to:</b>									
Provinces and municipalities									
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international organisations									
Non-profit institutions									
Households									
Payments for capital assets	323 156	297 147	323 924	323 924	323 924	287 009	380 854	336 312	
Buildings and other fixed structures	323 156	297 147	323 924	323 924	323 924	287 009	380 854	336 612	
Machinery and equipment									
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
<b>Total economic classification:</b>									
<b>Programme 8:</b>									
<b>Health Facilities</b>									
<b>Management</b>	<b>354 120</b>	<b>493 361</b>	<b>538 080</b>	<b>538 080</b>	<b>538 080</b>	<b>618 679</b>	<b>578 586</b>	<b>554 862</b>	

**8.1 Description and Objectives**

- To provide for new health facilities, upgrading and maintenance of the existing facilities
- Provision of community health centres, clinics, community, provincial, specialised and academic hospitals
- Upgrading of community health centres, clinics, community, provincial, specialised and academic hospitals
- Maintenance of community health centres, clinics, community, specialised and academic hospitals.

## 8.2 Service Delivery Measures

Description of outputs	Performance Measures	Performance Targets	
		2003/04 Estimated actual	2004/05 Estimate
Construction of Tshwane Central Hospital	Percentage completed	a/ 10	30
Construction of Hillbrow Community Health Centre	Percentage completed	60	100
Construction of New Mamelodi Hospital	Percentage completed	40	80
Construction of Stanza Bopape Community Health Centre: Phase 2	Percentage completed	50	90
Construction of Soshanguve Block L Community Health Centre	Percentage completed	50	90
Construction of Stretford Community Health Centre: Phase 2	Percentage completed	70	100
Revitalisation of Chris Hani Baragwanath	Percentage completed	30	50
Upgrading of Zola CHC to level I hospital for Johannesburg south area	Percentage completed	30	50
Upgrading of Lenasia CHC to Level I hospital	Percentage completed	b/ 30	50
Upgrading of existing and new Community Health Centres in CHB catchment area	Percentage completed	c/ 20	50
Relocation of Nataspruit Hospital	Percentage completed	10	30
Construction of Sterkfontein Hospital 2 new wards	Percentage completed	d/ 20	50
Construction of Sizwe Hospital new kitchen, ventilation and electrical ringfeed	Percentage completed	70	100
Construction of Far East Rand Hospital new maternity unit	Percentage completed	85	100
Renovation of OPD and casualty Sebokeng Hospital	Percentage completed	30	60
Upgrading of Germiston Hospital	Percentage completed	10	25

\* Emergency Medical Services became a programme with effect from 1 April 2003.

\*Personnel numbers not available as at 31 March 2000.

**7. Other programme information****7.1 Personnel numbers and costs****Table 23: Personnel numbers and costs<sup>1</sup>: Department of Health**

Personnel numbers	As at 31 March 2000	As at 31 March 2001	As at 31 March 2002	As at 31 March 2003	As at 31 March 2004	As at 31 March 2005
Programme 1: Administration	440	440	440	440	440	440
Programme 2: District Health Services	5 715	5 715	5 715	5 850	6 000	6 100
Programme 3: Emergency Medical Services						
Programme 4: Provincial Hospital Services	13 732	13 732	13 732	18 348	18 448	18 548
Programme 5: Central Hospital Services	22 753	22 753	22 753	18 235	18 135	18 035
Programme 6: Health Training and Sciences	832	832	832	1 232	1 282	1 332
Programme 7: Health Care Support Services	1 091	1 091	1 091	1 100	1 110	1 110
Programme 8: Health Facilities Management						
<b>Total personnel numbers:</b>						
<b>Department of Health</b>	<b>44 563</b>	<b>44 563</b>	<b>44 563</b>	<b>45 205</b>	<b>45 415</b>	<b>45 565</b>
Total personnel cost (R thousand)	3 659 829	3 906 729	4 273 851	4 553 700	4 780 900	5 026 100
Unit cost (R thousand)	82	88	96	101	105	110

1) Full-time equivalent

**7.2 Training****Table 24: Expenditure on training: Department of Health**

R thousand	Outcome			Main appropriation	Adjusted appropriation	Revised estimate	Medium-term estimates		
	Audited 2000/01	Audited 2001/02	Audited 2002/03				2004/05	2005/06	2006/07
Programme 1:									
Administration	4 246	23 465	14 130	3 113	3 113	3 113	3 200	3 300	3 400
Programme 2: District Health Services	1 610	1 024	2 688	3 200	3 200	3 200	3 200	3 200	3 200
Programme 3: Emergency Medical Services									
Programme 4: Provincial Hospital Services	84	228	455	2 648	2 648	2 648	2 700	2 700	2 700
Programme 5: Central Hospital Services	526	4 321	925	718	718	718	720	720	720
Programme 6: Health Training and Sciences	1 965	2 331	6 578	25 785	25 785	25 785	26 000	26 000	26 000
Programme 7: Health Care Support Services	41		26	62	62	62	65	65	65
Programme 8: Health Facilities Management									
<b>Total expenditure on Training:</b>									
<b>Depart of Health</b>	<b>8 472</b>	<b>31 369</b>	<b>24 802</b>	<b>35 548</b>	<b>35 548</b>	<b>35 548</b>	<b>35 915</b>	<b>36 015</b>	<b>36 115</b>

1) Full-time equivalent

## 8. GENDER BUDGETS

TABLE 25: OUTCOMES AND OUTPUTS WHICH TARGET WOMEN AND GIRLS

OUTCOME	OUTPUT	INDICATOR	GENDER ISSUE	PROGRAMME	SUB-PROGRAMME	BUDGET ALLOCATED 2004/05	2005/06	2006/07
Reduce the Impact of HIV and AIDS	Reduced new HIV infections among women and youth	Antenatal sero-prevalence rate	HIV and AIDS pandemic	Prog. 2: District Health Services	HIV and AIDS	See identified Sub -Programme		
	Female condom distribution	•Number of female condom distribution sites						
		•Number of female condoms distributed						
	Prevention of mother to child transmission (PMTCT)	Percentage hospitals, large community health centres and clinics with maternity services implementing the programme	Poverty Alleviation	Prog. 2: District Health Services	HIV and AIDS	See identified Sub -Programme		
		Percentage of Regions and health districts with dedicated HIV/AIDS coordinators						
		Number health facilities offering ARV						
Improve child health	•Feeding programmes in schools and creches	• Number of pre-schoolers fed	Poverty Alleviation	District Health Services	Nutrition	See identified Sub -Programme		
Improve women health	Caring for survivors of violence	•Number of women seen at existing medico-legal centres	Domestic violence and rape	Prog. 2, 4 and 5.		See identified Programmes		
	Post Exposure Prophylaxis (PEP) implemented in all facilities	The number of health facilities implementing PEP for sexual assault						
	Cervical cancer screening	Number of women screened	Reproductive health	Prog. 2. District Health Services	District management, community health centres and clinics and community based services	See identified sub programme		
	Breast cancer screening	Number of women reached during breast cancer months						

OUTCOME	OUTPUT	INDICATOR	GENDER ISSUE	PROGRAMME	SUB-PROGRAMME	BUDGET ALLOCATED 2004/05	2005/06	2006/07
Health lifestyles	Reduced teenage pregnancy rate Youth friendly services	Percentage reduction in teenage pregnancy •Number of youth friendly services	Youth health	Prog 2. District Health Services		See identified sub programme		
Quality of care	Access for disabled at all facilities	•Percentage of hospitals and clinics with disabled access •Number of assistive devices supplied to people with disabilities	Reproductive health	Prog 2. District Health Services Prog 8. Health facility Management Programme 2,4,5	As above	See identified Programme		
						See identified Programmes		

TABLE 26: OUTCOMES OF THE THREE LARGEST SUB PROGRAMMES AND THEIR IMPLICATIONS TO GENDER EQUALITY

OUTCOME	OUTPUT	INDICATOR	GENDER ISSUE	PROGRAMME	SUB-PROGRAMME	BUDGET/MTEF
Womens health	MOU services	Number of deliveries	Reproductive health	Prog 2, 4 and 5.	District management, community health centres and clinics an community based services (DCCC)	See identified sub programmes
	Antenatal services	Number of antenatal visits			General hospitals All central hospitals	
	Cervical and breast cancer screening programme	As above	Women's Health	Prog 2, 4 and 5.	DCCC DCCC	
	Contraception services	Number of women benefiting from contraceptive services	Reproductive health	Programme 2	DCCC	
	PEP programme	As above	Domestic violence and rape		Prog 2, 4 and 5.	DCCC General hospitals



OUTCOME	OUTPUT	INDICATOR	GENDER ISSUE	PROGRAMME	SUB-PROGRAMME	BUDGET/MTEF
	STI prevention and treatment programme	Number of women benefiting from the programme Number of outpatients visits and admissions Number of Deliveries	STI prevalence Women empowerment	Prog 2, 4 and 5.	DCCC  All central hospitals  General hospitals	
	Health education and promotion programme			Prog 2		
	Obstetric and Gynaecology services			Prog. 4 and 5		

TABLE 27: OUTCOMES AND OUTPUTS, WHICH WILL BENEFIT WOMEN/PROMOTE GENDER EQUALITY

OUTCOME	OUTPUT	INDICATOR	GENDER ISSUE	PROGRAMME	SUB-PROGRAMME	BUDGET/MTEF
Gender equality and mainstreaming	Improved gender representivity	Percentage women in middle and senior management	Recruitment and selection	Prog. 1: Administration	Management	See identified programmes
	Recruitment and retention strategy implemented	•Percentage women in scarce skills positions				
		•Percentage women with scarce skills retained				
			•Scarce skills and expertise •Employment capacity of GDOH	Prog. 1: Administration	Management	

TABLE 28: OUTCOMES AND OUTPUTS, WHICH WILL BENEFIT WOMEN EMPLOYEES WITHIN THE DEPARTMENT OF HEALTH

OUTCOME	OUTPUT	INDICATOR	GENDER ISSUE	PROGRAMME	SUB-PROGRAMME	BUDGET
Human Resource Development Quality of care	Bursaries granted	Number of female beneficiaries	Professional skills development Personnel development	Prog. 6: Health sciences and training Prog. 1: Administration	None Management	See identified programme See identified programme
	Service excellence awards	Number of women received service excellence awards				

**TABLE 29: NUMBER OF WOMEN AND MEN EMPLOYED AT DIFFERENT LEVELS IN THE DEPARTMENT OF HEALTH**

<b>Level</b>	<b>Total</b>	<b>Women</b>	<b>% Woman</b>	<b>Black</b>	<b>% Black</b>	<b>Black Women</b>	<b>% Black Woman</b>
Superintendent-General	1	1	100.0	1	100.0	1	100.0
Deputy Director: General	2	0	0	1	50.0	0	0
Chief Director	82	14	17.1	29	35.4	21	25.6
Management	7	5	71.4	4	57.1	3	42.9
Professionals	75	9	12.0	25	33.3	18	24.0
Director	166	46	27.7	65	39.2	36	21.7
Management	43	17	39.5	27	62.8	10	23.3
Professionals	123	29	23.6	38	30.9	26	21.1
Deputy Director	1342	517	38.5	671	50.0	351	26.2
Management	68	35	51.5	52	76.5	60	88.2
Professionals	1342	482	35.9	619	46.1	291	21.7
Assistant Director	1734	977	56.3	1280	73.8	555	32.0
Management	109	105	96.3	74	67.9	23	21.1
Professionals	1625	872	53.7	1206	74.2	532	32.7
Sub Total Management	3327	1556	46.8	2048	61.6	965	29.0
Non-Management	39110	31160	79.7	34344	87.8	27708	70.8
<b>Total</b>	<b>42437</b>	<b>32716</b>	<b>77.1</b>	<b>36392</b>	<b>85.8</b>	<b>28673</b>	<b>67.6</b>

*Note: Data as on PERSAL end of October 2003*