# **Department of Health**

To be appropriated by Vote in 2009/10 R 2 213 662 000
Responsible MEC MEC of Health
Administrating Department Department of Health
Accounting Officer Head of Department: Health

#### 1. Overview

#### **Core functions**

The Department's core function is the provision of health care, which focuses on the District Health System as the major focus of implementation. Health care services are provided at a primary, secondary and tertiary level. Primary health care service is achieved through clinics, community health centres and district hospitals. Secondary health care is available at Gordonia and Kimberley Hospitals with almost the complete range of tertiary services currently available at Kimberley Hospital. In addition the department funds the training of student nurses as well as a range of post diploma qualifications through the Henrietta Stockdale Nursing College.

The health service delivery scope has expanded significantly due to the incorporation of Kgalagadi area, the expansion of health's service package and the increase in number of facilities. There are various strategic decisions the sector has under taken with regards to TB, HIV and Aids, EMS, Health Information System and Primary Health Care. All these decisions will to a great extent improve service delivery to communities and will assist in achieving the millennium development goals that the sector has set. These priorities have a significant impact on the available resources.

#### Vision

Health service excellence for all

#### Mission

Empowered by the peoples' contract, we are committed to provide quality health care services, we will promote a healthy society in which we care for one another and take responsibility for our health. Our caring, multi-skilled professionals will integrate comprehensive services using evidence-based care strategies and partnerships to maximise efficiencies for the benefit of all.

#### Types of services rendered

The following services are provided by the department:

- Mother, child and women's health services
- The integrated nutrition program
- Pharmaceutical services
- Community mental health services
- Non communicable diseases
- Communicable disease services viz. HIV and AIDS and Tuberculosis
- Environmental and occupational health services
- Emergency medical services
- Oral health services
- Outreach support services

- Forensic pathology services
- Health promotion services

## Acts, Rules and Regulations

Services provided by the Northern Cape Department of Health are governed by the following legislation in addition to all other legislation governing service delivery in the public sector:

- The Constitution of South Africa, Act 108 of 1996
- Health Sector Strategic Framework 2004-2009
- National Health Act
- Provincial Health Bill
- Public Finance Management Act, Act 1 of 1999 as amended by Act 29 of 1999

## **Key strategic objectives**

In line with millennium development goals and the national health priorities the department has outlined the following strategic priorities for 2009/10:

- Strengthen Governance and management at service delivery level
- Implement the Provincial Strategic Plan on HIV & AIDS and TB
- Reduce maternal and child mortality and morbidity
- Improve the Information Management component and District Health Information Systems
- Strengthen Human Resources Development
- Adoption and implementation of the Service Transformation Plan
- Implementation of the doctors Occupational Specific Dispensation (OSD).
- Improve the Risk Management Section under the security component
- Improve the Revenue Management Section under the finance component
- Improve the Finance and Supply Chain Management (SCM) components

## 2. Review of the current financial year (2008/09)

A number of deliverables based on the key strategic priority areas of the Department of Health were highlighted in the outlook for 2008/09 as the critical areas that need urgent attention. Below is a report indicating progress made in each of these deliverables up to the end of the current financial year.

#### **Hospital services**

- The construction of Upington hospital commenced in November 2008 and is a 36 month contract.
  The packaging of the business case and project brief for De Aar Hospital is in progress documents
  will be produced in February 2009 for submission to National Department of Health. These
  projects had previously been shelved due to financial constraints within the national Hospital
  Revitalisation Programme.
- The Kimberley Mental Health Hospital has reached 68 per cent progress on site and the projected date for completion is 2009/10 financial year

#### Infrastructure projects

- The department experienced challenges with the projects planned for 2008/09 but the development of business cases for the new Kuruman, Postmasburg and Kimberley hospitals will commence during the third quarter of 2009/10 financial year. All business cases will be aligned to the Service Transformation Plan (STP).
- The construction of Hartswater, Pampierstad and Olifantshoek clinics has commenced. The construction of Hondeklipbaai clinic will only commence in February 2009.

#### HIV & Aids

- One of the main responsibilities of provinces following the launch of the National Strategic Plan for HIV & AIDS was to start working towards the development of their Provincial Strategic Plans (PSP's). In this regard the Northern Cape Department of Health successfully hosted a Provincial Stakeholders' Conference on HIV & AIDS in June 2008. The main aim was to obtain inputs from various stakeholders in order to finalize the PSP. The process is now at a very advanced stage and the document will be presented to the high level structures such as the Provincial Executive Council and AIDS Council for ratification.
- The province is engaging various efforts in order to improve access to Voluntary Crisis and Training services. In addition to the ACCESS project by Right to Care, a massive VCT campaign occurred in November 2008 where mass VCT counselling and testing was conducted in a week, involving a number of role players. The current number of operational VCT sites stands at 203.
- The number of accredited ARV sites is 15 with an additional 11 outreach service points to ensure increased coverage of ART services at every Municipality. These outreach services are offered at primary health care level at least once a week.

#### **Tuberculosis (TB) Control**

- The TB programme has seen an improvement in the budget allocation over the last 2 years. Funding still remains a challenge as more is required for TB infrastructure development, especially for Drug Resistant TB (MDR and XDR TB).
- The refurbishment of the MDR unit at West End Hospital has been completed and patients have also been relocated to these premises. Plans are underway to establish an XDR TB wing at West End Hospital.
- The number of new patients diagnosed with TB has increased over the past few years. 7'495 new cases were diagnosed in 2007 in comparison to 7'372 new TB cases reported in 2006. This could be attributed to the vigorous province-wide TB awareness campaigns, the discovery of new cases.
- One of the main objectives of the programme is to improve cure rate of new smear positive
  patients at first attempt, ensure compliance to TB treatment and minimize interruption rate by
  ensuring uninterrupted supply of quality drugs with reliable drug procurement and distribution
  systems. Review and strengthen DOT support model and increase DOT coverage to 90 per cent of
  patients.

#### Forensic medical services

- 21 registered nurses were trained earlier this year in clinical forensic medicine under the auspices of the Maternal Child Women's Health Programme (National)/Medical Research Council. These nurses still have to do their practical's in Sexual Assault Examination. The unit is currently busy designing the IEC material in conjunction with the Health Promotion Unit. All Forensic Pathology Officers are undergoing continuous in-house training with regard to special dissection techniques and the application/practice of the Occupational Health and Safety Act.
- The mortuaries (Kimberley, Kuruman, De Aar, Postmasburg, Kakamas, Keimoes and Pofadder) will be completed in 2008/09; however this is under threat due to the problems we are currently having with the contractor for these projects.

## **Human resource management**

- According to Resolution 1 of 2007, the implementation of the Occupation Specific Dispensation
  (OSD) will be phased in over a three year period. There is a scheduled programme for the
  development of OSDs for Doctors, Emergency Medical Services and Pharmacists categories
  which were due for implementation in the 2008/09 financial year. The National Bargaining
  Council is still busy with the categories and once that process is completed the department will
  implement the resolution
- These are some of the highlights of the Health Department for the 2008/09 financial year. More
  details of the department's objectives are documented in the Annual Performance Plan 2009/10 –
  2011/12. The amendments to the departmental organogram have been approved by Executive
  Council.

#### 3. Outlook for the coming year (2009/10)

The outlook for the current year is based on the challenges and achievements of the past five years of the current government. At the heart of it all is the commitment to do what is necessary within the constraints of available resources creating a better life without compromising the principles of Batho Pele and improving accessibility to health care services as well as investing and appreciating our staff. The following activities are intended in the respective key performance areas during the 2009/10 financial year:

#### **Service Transformation Plan (STP)**

The department is in the process of finalizing the Service Transformation which will assist in redefining the shape and size of the health system. Once this document is finalised, consultations will resume with the goal of getting it approved and thereafter progressively implemented. This plan does not only look at infrastructure provision but also the resources required to maximize the operationalisation of these facilities. There is a need therefore to train and recruit scarce skills required making all facilities progressively optimally functional. The department is in the process of drafting the Human Resources Strategic Planning Framework as part of strengthening its Human Resources capacity based on the STP.

#### Implementation of the amended Organogram

The amended organizational structure will be implemented and it will ensure that the department addresses the capacity shortcomings that have a negative impact on service delivery. The administration of the department has been under-capacitated and this has led to either undesired or unsatisfactory performance on compliance issues.

The revised organizational structure will create sufficient and appropriate capacity to meet both management and health care delivery challenges. New directorates have been created in order to strengthen the capacity of health priority programmes so as to achieve PGDS and MDG targets. The implementation of the organogram will be phased in over the MTEF.

#### **Health Professional Training**

The availability of Health professionals remains a challenge; there has been a substantial increase in the number of bursary allocations through the Health Professions Training and Development (HPTD) Grant. The department intends giving bursaries to 150 students in the 2009/10 financial year to study in various fields in Health Sciences. In addition to this there will be an intake of 35 students to study medicine and 100 students to be enrolled for Nursing; these are depended on applicants who meet the minimum criteria. Also to address the shortage of doctors, the department be retaining 50 Community service doctors.

#### Improvement of financial management

Due to a lack of capacity in the financial management units at Provincial and district level, the department has received five consecutive disclaimer opinions. To address capacity issues the department will appoint additional personnel in all units especially the revenue section. Effective Internal Controls and Procedures will be implemented. The departmental financial policies will be fully implemented in 2009/10.

#### **Implementation of Occupational Specific Dispensation**

Once the framework for the OSD for Doctors, Emergency Medical Services and Pharmacists is finalised the implementation will commence, negotiations at national are behind schedule. Similarly as in the case of the OSD for nurses it is expected that it will improve the quantity of doctors in the public service.

#### **Improvement of Health Information**

For any positive impact and meaningful strategies, it is important to have access to accurate information to ensure efficient and effective planning. It is for this reason that Health Information System in districts is strengthened. Additional capacity has been added through the appointment of data capturers driven through the Expanded Public Works Programme (EPWP) programme. The data capturers will assist in collecting and capturing reliable health information from all districts and institutions.

## Maternal, infant and child mortality

Various interventions will be implemented to reduce maternal, infant and child mortality. With regards to maternal mortality continuous training will be provided to capacitate professional nurses and doctors, they will be trained on second trimester CTOP in order for the services to be provided at a district level. Professional nurses have been trained on the new vaccines (Pneumococcal Vaccine and the Rotavirus Vaccine) which will be implemented in April 2009. It is estimated that approximately 22 000 children will be immunized with the new vaccines.

#### HIV & Aids and TB

- The most important challenge facing South Africa and the World today with regard to HIV and AIDS is the prevention of new HIV infections. With more than an estimated 18 000 HIV positive adults and children residing in Northern Cape, the HIV & AIDS epidemic is in need of aggressive treatment and care options. At the same time, an increase in TB prevalence is seen, leading to comorbidity for HIV and TB.
- The department is providing care and support to people living with HIV and AIDS and the number of people supported will increase from 13 000 to 19 500 in 2009/10. A notable increase will be seen in the provision of Anti Retroviral Treatment. To improve access to Anti Retroviral Treatment, the number of fixed PHC facilities accredited as ART service points will increase from 15 to 21 and the number of registered ART patients will increase from 15 000 to 18 000 in 2009.
- The department also plans to improve the HIV testing rate (excluding antenatal) to 98 per cent. In trying to improve the health status of people living with HIV and AIDS, the percentage of accredited ART service points with nutritional services will increase to 100 per cent and an effective community and home based care will be improved as part of the comprehensive plan by increasing the number of home-based carers from 1300 to 1 400.
- The management of Sexually Transmitted Infections (STI's) will be improved by training more Health Care Professionals in the Syndromic Management of STI's and the distribution of at least 50 000 female condoms and 6 500 000 male condoms in of 2009.
- Tuberculosis is a major cause of illness and death worldwide. The province has put in place the Provincial TB Crisis Management Plan which is aimed at reducing the burden of TB in the province in line with national TB Control Strategies. The department is planning to improve the cure rate of new smear positive patients at first attempt to 75 per cent in the 2009/2010 financial year and MDR & XDR facilities will be upgraded to address the cross-contamination of TB.

#### Forensic medical services

The upgrading of mortuaries will be completed, with 80 per cent of autopsies completed within two days of arrival in all forensic facilities. 100 per cent of mortuary staff will be utilizing the Employee Assistance Programme (EAP). All our health care facilities will administer the Post Exposure Prophylaxis (PEP) for HIV/ADS as well as other sexually transmitted infections. The total number of forensic-trained nurses will have reached the target of 30. Each of our provincial health care facilities will have at least one trained forensic nurse.

#### **Infrastructure projects**

The department is committed to improving access to health care services. It will accelerate the infrastructure improvement programmes through the following projects in the 2009/10 financial years:

- Construction of the following clinics: Hondeklipbaai, Norvalspond, Groot Mier, Boitshoko, Mapoteng, Kutlwanong CHC and Greenpoint clinic.
- Construction of staff accommodation at the following clinics: De Aar, Phillipstown, Diben, Platfontein, Hartswater, Hondeklipbaai, Olifantshoek, Pampierstad, Groblershoop and Douglas
- Completion of upgrading works at the following facilities: Prieska Hospital, Manne Dipico Hospital, House no.2, Transport Office and Dr A. Letele Medical Logistics
- Construction of Upington Hospital
- Completion of Kimberley Mental Health Hospital
- Feasibility study and planning for the new Kimberley Hospital and Postmasburg Hospital

## 4. Receipts and financing

## 4.1 Summary of receipts

Table 4.1: Summary of receipts: Department of Health

		Outcome		Main	Adjusted	Revised	Madi	um-term estimate	oc .
	Audited	Audited	Audited	appropriation	appropriation	estimate	ivieui	um-term estimate	:5
R thousand	2025/07	000/107	2027/20		2000/00		0000/40	0040/44	0044/40
R HIOUSAHU	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Equitable share	797 996	936 409	1 092 130	1 170 538	1 257 972	1 359 895	1 425 464	1 578 852	1 705 935
Conditional grants	298 579	470 064	464 464	603 050	599 501	544 853	788 198	954 482	979 154
Departmental Receipts	21 164	21 341	24 319	33 902	33 902	20 101	26 456	28 441	29 294
Total receipts	1 117 739	1 427 814	1 580 913	1 807 490	1 891 375	1 924 849	2 240 118	2 561 775	2 714 383

## 4.2 Departmental receipts collection

Table 4.2: Departmental receipts: Department of Health

		Outcome		Main	Adjusted	Revised	Modi	um-term estimate	vc.
	Audited	Audited	Audited	appropriation	appropriation	estimate	Weun	um-term estimate	:5
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Tax receipts									
Sales of goods and services other than									
capital assets	21 162	19 758	24 319	33 902	33 902	19 460	26 456	28 441	29 294
Transfers received									
Fines, penalties and forfeits									
Interest, dividends and rent on land									
Sales of capital assets	2	768							
Financial transactions in assets and									
liabilities		815				641			
Total departmental receipts	21 164	21 341	24 319	33 902	33 902	20 101	26 456	28 441	29 294

The primary source of revenue for the department is patient fees with insurance commission which constitutes a small percentage of the total revenue generated. Patient fees are mainly generated at Kimberley Hospital, Springbok District Hospital, Kuruman District Hospital and Gordonia Hospital. These facilities however constitute a significant amount of debtor's balances.

The department has not been able to collect all the projected revenue in the past for a number of reasons. Among those are the lack capacity in the districts and institutions, lack of case managers and under-utilisation of debtors system. The projected revenue collected has been reduced for the new MTEF as the previous revenue budget was over-stated. The above revenue budget is based on estimated number of patients based past trends and associated costs for services provided.

In the new financial year the department will implement a strategy which will increase the collectability of revenue, ensure adequate administration of debtors and provide a framework on which the revenue budget should be compiled.

#### 5. Payment summary

The MTEF baseline allocations for the period 2009/2010 to 2011/2012 are:

Financial year 2009/2010: R 2.213 billion Financial year 2010/2011: R 2.533 billion Financial year 2011/2012: R 2.685 billion

#### 5.1 Key Assumptions

The following broad key assumptions were made while preparing the budget of the Department of Health for the MTEF period commencing 2008/09:

- The assumptions for the salary increases for the ensuing 3 years of the MTEF cycle are 6.5 per cent, 6.2 per cent and 5.7 per cent
- The assumption for the general CPIX used for the recurrent budget of the department is 5.0 per cent in 2009/10, 5.2 per cent in 2010/11 and 4.7 per cent in 2011/12
- Medical inflation is estimated at 15.5 per cent for 2009/10, 14.9 per cent for 2010/11 and 14.5 per cent in 2011/12
- Funding has been allocated to address national and provincial priorities such as:
  - Reduction of infant and child mortality
  - Occupational Dispensation: Nurses
  - MDR & XDR TB
  - Building capacity in Primary Health Care Services
  - Implementation of the amended organogram

#### 5.2 Programme Summary

Table 5.2: Summary of Payments and Estimates: Department of Health

		Outcome		Main	Adjusted	Revised	Modi	um-term estimate	oc.
	Audited	Audited	Audited	appropriation	appropriation	estimate	weui	um-term estimate	:5
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Administration	56 491	66 683	66 733	79 407	80 625	74 883	92 261	104 788	113 989
District Health Services	421 305	526 246	763 508	830 097	894 542	942 864	988 906	1 138 560	1 236 433
Emergency Medical Services	72 688	105 816	87 487	100 664	107 739	119 498	126 581	142 229	150 493
Provincial Hospital Services	295 230	336 294	401 171	431 616	454 443	496 449	532 721	597 784	648 770
Health Science	26 749	30 584	23 146	28 719	29 572	30 786	32 898	34 617	36 009
Health Care Support Services	87 809	99 641	13 905	10 549	10 716	11 569	17 532	28 642	30 214
Health Facilities Services	136 303	241 209	200 644	292 536	279 836	228 699	422 763	486 714	469 181
Total payments and estimates	1 096 575	1 406 473	1 556 594	1 773 588	1 857 473	1 904 748	2 213 662	2 533 334	2 685 089

2009/10: MEC remuneration payable. Basic Salary: R796 536. Allowances: R531 024

The 2009/10 budget has increased by 14 per cent from the adjusted budget of 2008/09 and by 18 per cent from the main appropriated budget. The significant increase is as a result of additional allocation for health priorities such as OSD, inflation on medical goods and services and reduction of infant and child mortality. These priorities are mainly driven through the District Health Services and Provincial Hospital Services programmes. The nominal growth rate from 2008/09 to 2011/12 is 12.1 per cent.

#### 5.3 Summary of economic classification

Table 5.3 Summary of Provincial Payments and Estimates by Economic Classification: Department of Health

		Outcome		Main	Adjusted	Revised	Mar all	um-term estimate	_
·	Audited	Audited	Audited	appropriation	appropriation	estimate	wear	um-term estimate	es
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Current payments	906 661	1 079 267	1 304 555	1 443 456	1 520 274	1 637 869	1 750 892	1 991 070	2 158 900
Compensation of employees	522 587	620 209	786 438	915 369	949 898	918 286	1 050 683	1 108 100	1 163 489
Goods and services	383 090	458 858	518 117	528 087	570 376	717 237	700 209	882 970	995 411
Interest and rent on land									
Financial transactions in assets and liabilities	984	200				2 342			
Unauthorised expenditure						4			
Transfers and subsidies:	20 071	28 891	24 592	31 378	32 478	32 487	38 901	48 845	51 335
Provinces and municipalities	5 430	11 196	6 444	7 003	8 103	5 817	7 390	7 879	8 327
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises						1 155			
Foreign governments and international									
organisations									
Non-profit institutions	13 622	16 499	17 204	23 450	23 450	24 629	30 531	39 941	41 943
Households	1 019	1 196	944	925	925	886	980	1 025	1 065
Payments for capital assets	169 843	298 315	227 447	298 754	304 721	234 392	423 869	493 419	474 854
Buildings and other fixed structures	126 696	215 373	212 913	257 000	254 007	206 467	347 941	432 285	409 752
Machinery and equipment	43 060	82 885	13 718	41 754	50 714	27 441	75 928	61 134	65 102
Cultivated assets						151			
Software and other intangible assets	87	57	816			333			
Land and subsoil assets									
Total economic classification	1 096 575	1 406 473	1 556 594	1 773 588	1 857 473	1 904 748	2 213 662	2 533 334	2 685 089

Compensation of employees is the department's main cost driver and constitutes 48 per cent of the department's allocation for 2009/10; this is followed by goods and services at 32 per cent and payment for capital assets at 18 per cent.

Compensation of employees' budget in 2009/10 has increased by 10 per cent from the adjusted budget of 2008/09. The increase is mainly due to the revised salary increase rate and shortfalls on OSD. The nominal increase from the 2008/08 to 2011/12 for personnel is 8.2 per cent. Goods and services budget has increased by 15.5 per cent from the 2008/09 to 2011/12 years.

#### **5.4 Infrastruture payments**

The department as part of its infrastructure development programme will continue with some projects as well as commence some new projects. The projects are mainly related to the construction of primary health facilities (clinics and community health centres) and hospitals which are exclusively funded by the Infrastructure Grant for Provinces and the Hospital Revitalisation Grant. The details are spelt out in the infrastructure tables in the annexure.

Category/type of structure		Outcome			Adjusted appropriation	Revised Medium-term estimate			es
R thousands	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
New and replacement assets(R thousand)	120 964	11 993	184 434	283 644	270 944	247 177	377 851	479 714	475 210
Hopsital	116 959	-	176 822	241 364	241 364	204 897	335 177	415 218	405 892
Clinic	4 005	4 155	7 612	29 280	16 580	29 280	33 700	25 500	22 800
Community Health	-	7 838	-	13 000	13 000	13 000	8 974	38 996	46 518
Mortuaries	-	-	-	-	-	-	-	-	-
Maintenance and Repairs(R thousand)									
Hopsital	-	=	-	-	E .	-	5 183	14 359	14 292
Clinic	- 1	-	-	-	-	-	-		
Community Health	-	-	-	-	=		-		
Mortuaries	<u> </u>	-	-	-	-	-	-	-	
Upgrades and additions(R thousand)									
Hopsital	-	-		-	-	-	39 892	2 000	1 671
Clinic	-	-		-	-	-	-	-	
Community Health	-	-		-	-	-	-	-	
Mortuaries	-	-	-	-	-	-	-	-	
Rehabilitation/upgrading	15 338	_	15 676	21 980	21 980	21 980	1 800	2 608	3 645
Hospital	15 338		15 676	9 600	9 600	9 600	-		
Community Health Centre				2 380	2 380	2 380	-		
Other	- 11			10 000	10 000	10 000	1 800	2 608	3 645

#### 5.5 Transfers to other institutions

Total departmental infrastructure

In an effort to enhance service delivery with regard to HIV-AIDS the department makes transfers to Non-Governmental Organisations (Home based Care). Allocations made to the institutions are to fund the stipends of the home based care workers and administrative costs of the institutions. The allocation to non-profitable organisation has increased by 30 per cent from 2008/09 to 2009/10 as can be noted under transfers to non-profit institutions.

200 110

292 924

494 818

## 5.6 Transfers to local government

Local government provides environmental health and primary health care services on behalf of the department.

Table 5.6: Summary of departmental transfers to local government by category

		Outcome	,	Main	Adjusted	Revised	NA 10	um-term estimate	
	Audited	Audited	Audited	appropriation	appropriation	estimate	iviedi	um-term estimate	es
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Category B	2 996	10 391	6 148	6 449	6 449	6 449	6 772	7 179	7 596
Category C		112	296	353	353	353	372	395	418
Total departmental transfers	2 996	10 503	6 444	6 802	6 802	6 802	7 144	7 574	8 014

## 6. Programme description

## 6.1 Programme 1 - Administration

## **Programme Objective**

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

## **Sub-programme objectives**

## Office of the MEC

The rendering of advisory, secretarial and office support services to the political office bearer.

#### Management

Policy formulation, overall management and administration and support of the department and the respective regions and institutions within the department in accordance with the Public Service Act, 1994, as amended, the Public Finance Management Act, 1 of 1999 (as amended by Act 29 of 1999) and other applicable legislation.

This includes policy formulation by the MEC and other members of management, implementing policy and organising the Health Department, managing personnel and financial administration, determining working methods and procedures and exercising centralised control.

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

		Outcome		Main	Adjusted	Revised	Medi	um-term estimate	96
	Audited	Audited	Audited	appropriation	appropriation	estimate	wear	um term estimate	,3
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Office of the MEC	3 012	3 187	4 896	4 629	5 013	4 906	6 808	6 781	7 129
Management	53 479	63 496	61 837	74 778	75 612	69 977	85 453	98 007	106 860
Total	56 491	66 683	66 733	79 407	80 625	74 883	92 261	104 788	113 989

2009/10: MEC remuneration payable. Basic Salary: R796 536. Allowances: R531 024

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

_		Outcome		Main	Adjusted	Revised	Modi	um-term estimate	nc.
_	Audited	Audited	Audited	appropriation	appropriation	estimate	ivieui	um-term estimati	:5
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Current payments	52 742	65 651	65 634	78 477	79 695	73 689	90 562	103 843	113 039
Compensation of employees	30 344	35 884	37 839	47 678	48 896	42 915	51 447	54 300	57 109
Goods and services	22 068	29 567	27 795	30 799	30 799	28 428	39 115	49 543	55 930
Interest and rent on land									
Financial transactions in assets and liabilities									
	330	200				2 342			
Unauthorised expenditure						4			
Transfers and subsidies:	174	222	74	80	80	73	80	80	80
Provinces and municipalities	120	58	26			28			
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international									
organisations									
Non-profit institutions									
Households	54	164	48	80	80	45	80	80	80
Payments for capital assets	3 575	810	1 025	850	850	1 121	1 619	865	870
Buildings and other fixed structures						82			
Machinery and equipment	3 575	756	1 025	850	850	1 039	1 619	865	870
Cultivated assets									
Software and other intangible assets		54							
Land and subsoil assets									
Total economic classification	56 491	66 683	66 733	79 407	80 625	74 883	92 261	104 788	113 989

The budget for administration has increased by 15 per cent from 2008/09 to 2011/12 which is mainly attributed to the 26 per cent increase in goods and services and compensation of employees has increased by 5 per cent.

The department has revised its organogram, when implemented this will ensure that the department addresses the structural shortcomings that have a negative impact on service delivery. The administration of the department has been under-capacitated and this has led to either undesired or unsatisfactory performance on compliance issues. The implementation of the revised organizational structure will ensure that there is sufficient and appropriate capacity to meet both management and health care service delivery challenges.

#### **Service delivery Measures**

Table 6.1.2: Performance Information: Administration

Performance Measures	Esti	mated Annual Targe	ets
Performance weasures	2009/10	2010/11	2011/12
Human Resource and Quality Assurance			
Number of medical officers per 100 000 people	22	22	21
Number of medical officers per 100 000 people in rural districts			
Number of professional nurses per 100 000 people	100	100	101
Number of professional nurses per 100 000 people in rural districts			
Number of pharmacists per 100 000 people	7	8	10
Number of pharmacists per 100 000 people in rural districts			
Vacancy rate for professional nurses	24	20	18
Attrition rate for doctors	32	25	25
Attrition rate for professional nurses	27	25	25
Absenteeism rate for professional nurses	7	5	5
Percentage hospitals with employee satisfaction surveys	50	75	75
Nurse clinical workload (PHC)	40	40	40
Doctor clinical workload (PHC)	27	30	30
Supernumerary staff as percentage of establishment	23	20	15

Table 6.1.3: Performance Information: Administration

Performance Measures	Estir	mated Annual Tai	gets
Performance weasures	2009/2010	2010/2011	2011/2012
Human Resource			
Percentage reduction in vacancy rate	30	25	20
Percentage reduction in staff turnover rate	5	10	10
Number of Registrars trained	15	15	20
Number of learnership programmes implemented	4	5	7
Number of internship programmes implemented	22	22	22
Percentage of community service doctors retained	50	60	100
Financial Management			
Amount of revenue collected - R'million	30	34	36
Percentage of outstanding debts older than one year or less recovered	65	75	80

## 6.2 Programme 2 - District Health Services

#### Programme objective

To render Primary Health Care Services and District Hospital Services.

## Sub programme objectives

## **District Management**

Planning and administration of services, managing personnel- and financial administration and the coordination and management of the Day Hospital Organisation and Community Health Services rendered by Local Authorities and Non-Governmental Organisations within the district and determining working methods and procedures and exercising district control.

## **Community Health Clinic Services**

Rendering a nurse driven primary health care service at clinic level including visiting points, mobileand local authority clinics.

#### **Community Health Centres**

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

#### **Community Based Services**

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

## **Other Community Services**

Rendering environmental, port health and part-time district surgeon services.

#### HIV / Aids

Rendering primary health care service in respect of HIV/Aids campaigns and special projects.

#### Nutrition

Rendering nutrition service aimed at specific target groups and that combines direct and indirect nutrition interventions to address malnutrition.

#### **Sub-programme 2.8 – Coroner Services**

Rendering forensic and medico-legal services in order to establish the circumstances and causes surrounding unnatural deaths.

#### **Sub-programme 2.9 – District Hospitals**

Rendering of a hospital service at primary health care level.

Table 6.2: Summary of payments and estimates: Programme 2 District Health Services

		Outcome		Main	Adjusted	Revised	Modi	um-term estimate	nc.
	Audited	Audited	Audited	appropriation	appropriation	estimate	Weul	um-term estimate	:5
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
District Management	24 904	24 825	50 919	36 254	36 797	42 834	43 507	47 823	50 473
Community Health Clinic Services	64 855	87 917	146 923	153 017	164 203	189 953	192 064	216 729	250 813
Community Health Centres	47 449	59 716	82 922	97 081	112 127	123 574	121 997	136 571	143 968
Community Based Services	915	1 466	93						
Other Community Services	35 038	38 104	37 195	38 348	38 348	43 301	41 888	49 291	52 271
HIV/AIDS	53 314	74 127	80 832	129 041	134 641	134 641	145 268	187 107	193 045
Nutrition	4 020	2 800	1 996	4 528	4 528	4 142	5 800	6 727	7 100
Coroner Services	770	14 949	35 344	19 169	29 376	20 049	20 187	22 868	24 240
District Hospitals	190 040	222 342	327 284	352 659	374 522	384 370	418 195	471 444	514 523
Total	421 305	526 246	763 508	830 097	894 542	942 864	988 906	1 138 560	1 236 433

The budget for district health services has increased by average of 9.5 per cent from 2008/09 to 2011/12. This is mainly attributed to the 17 per cent increase in Community Health Clinic Services, 9 per cent increase in Community Health Centres and 11 per cent in District Hospital Services.

The HIV-AIDS budget which includes the conditional grant and equitable share allocation has increased by 8 per cent from 2008/09 to 2009/10.

Coroner services budget has increased by 5 per cent from the main appropriation of 2008/09 to 2009/10. The decrease of 31 per cent between the adjusted appropriation and 2009/10 is mainly due the additional allocation made to the department as a result of good spending trends on the Forensic Pathology Grant.

Table 6.2.1. Summary of nayments and estimate	s by economic classification: Programme 2 District Health Services
Table 0.2.1. Sullillally of payments and estimate	s by economic classification. Frogramme 2 district nearth services

		Outcome		Main	Adjusted	Revised	Modi	ne.	
_	Audited	Audited	Audited	appropriation	appropriation	estimate	ivieui	um-term estimate	:5
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Current payments	394 863	479 054	715 363	785 930	835 568	899 269	936 581	1 074 122	1 167 776
Compensation of employees	242 811	283 843	414 032	503 191	526 416	503 052	574 018	606 305	640 810
Goods and services	152 052	195 211	301 331	282 739	309 152	396 217	362 563	467 817	526 966
Interest and rent on land									
Financial transactions in assets and liabilities Unauthorised expenditure									
Transfers and subsidies:	18 722	27 583	24 079	30 863	31 963	31 963	38 308	48 169	50 625
Provinces and municipalities	4 470	10 345	6 279	6 813	7 913	5 598	7 157	7 588	8 032
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises						1 155			
Foreign governments and international									
organisations									
Non-profit institutions	13 622	16 499	17 204	23 450	23 450	24 629	30 531	39 941	41 943
Households	630	739	596	600	600	581	620	640	650
Payments for capital assets	7 720	19 609	24 066	13 304	27 011	11 632	14 017	16 269	18 032
Buildings and other fixed structures	303	2 284	21 824		9 707	3 509			
Machinery and equipment	7 417	17 325	2 242	13 304	17 304	7 798	14 017	16 269	18 032
Cultivated assets									
Software and other intangible assets						325			
Land and subsoil assets									
Total economic classification	421 305	526 246	763 508	830 097	894 542	942 864	988 906	1 138 560	1 236 433

Compensation of employees has increased by 12 per cent from 2008/09 to 2009/10 which indicates that the department has made provision for the revised salary increases as well as funded additional posts to be filled. Goods and services have increased by 23 per cent and this is mainly attributed to the additional allocation towards inflationary adjustment on medical goods and services and vaccines to reduce infant and child mortality. Payments for capital assets has been allocated an amount of R14 million to address the shortfall of medical equipment in the districts.

# **Service delivery Measures**

Table 6.2.2: Performance Information: District Health Services

Performance Measures		mated Annual Targe	
1 citorniance measures	2009/10	2010/11	2011/12
Provincial expenditure per uninsured person	242	266	293
Sub-districts offering full package of PHC services	85	100	100
PHC total headcount	3 683 830	3 960 118	4 257 126
Utilization rate - PHC	3.5	3.5	3.5
Jtilization rate - PHC under 5 years	5	5	5
Supervision rate	80	100	100
Fixed PHC facilities supported by a doctor at least once a week	100	100	100
Provincial PHC Expenditure per headcount at Provincial PHC facilities	75	82	82
2.1 District Hospitals			
Caesarean section rate for district hospitals	11	11	11
Separations - Total	89 720	96 449	103 683
Patient Day Equivalents	257 448	276 756	297 513
DPD Total Headcounts	149 005	160 181	172 194
Percentage district hospitals with patient satisfaction survey using DoH template	100	100	100
Percentage of district hospitals with clinical audit meetings every month	100	100	100
Percentage complaints resolved with 25 days	100	100	100
Average length of stay in district hospitals	3.5	4	4
Bed utilization rate (based on usable beds) in district hospitals	75	75	75
Expenditure per patient day equivalent in district hospitals	858	944	1038
Case fatality rate in district hospitals for surgery separations	1	1	1
2.2 HIV and AIDS, TB and STI Control			
Fixed PHC facilities offering PMTCT	100	100	100
Fixed PHC facilities offering VCT to non-antenatal clients	100	100	100
Percentage hospitals offering PEP for occupation HIV exposure	100	100	100
Percentage hospitals offering PEP for sexual abuse	100	100	100
ART Service points registered	35	47	61
ART patients - total registered	18 000	21 000	22 400
TB cases with a DOT supporter	95	95	95
Wale condom distribution rate from public sector health facilities	7	8	8
Percentage fixed facilities with any ARV drug stock out	0	0	0
Percentage fixed facilities referring patients to ARV sites for assessment	100	100	100
STI partner treatment rate	35	39	39
Nevirapine dose to baby coverage rate	85	90	100
Nevirapine uptake - antenatal clients	95	100	100
Clients HIV pre-test counseled rate in fixed PHC facilities	100	100	100
HIV testing rate (excluding antennal)	98	98	100
TB treatment interruption rate	6	5.8	5.5
CD4 test at ARV treatment service points with turnaround time > 6 days	0	0	0
TB sputa specimens with turnaround time > 48 days	70	75	80
HIV and AIDS budget spent	100	100	100
Percentage of new smear positive PTB cases cured at first attempt	68	70	75
Annual percentage change of new MDR TB cases reported	0.3	0.2	0.1
2.3 Maternal. Child and Woman Health	0.5	0.2	0.1
	52	68	68
Percentage of hospitals offering TOP services			
Percentage of CHCs offering TOP services Percentage of fixed PHC facilities with DTP - Hib vaccine stock out	17	25	25
<u> </u>	95	95	95
mmunization coverage under 1 year			
/itamin A coverage under 1 year	100	100	100
Measles coverage under 1 year	95	95	95
Cervical cancer screening coverage	10	20	30
Percentage of facilities certified as baby friendly	42	42	42
Percentage of fixed PHC facilities certified as youth friendly	60	60	60
Percentage of fixed PHC facilities implementing IMCI	90	90	90
Facility delivery rate			
Delivery rate for women under 18 years	8.3	8.3	8.3
2.4 Non-Communicable Diseases Control			
Outbreak responded to within 24 hours	24	24	24
Malaria fatality rate	0	0	0
Cholera fatality rate	0.5	0.5	0.5
Cataract surgery rate	1 415	1 574	1 744

Table 6.2.3: Performance Information: District Health Services

Performance Measures	Estimated Annual Targets				
Performance weasures	2009/10	2010/11	2011/12		
2.1 District Management					
Quality Assurance					
Percentage of public hospitals submitting clinical audit reports	90	100	100		
Percentage of compliants resolved within 25 days	100	100	100		
Percentage of facilities that have conducted an external CSS	80	90	100		
Number of clinic committee establised	20	20	20		
2.2 Community Health Clinics, Centres & Services					
Maternal, Child and Women's Health					
Number of facilities doing deliveries using MCR and MCG	71	71	71		
Number of Maternal Deaths reported in the province					
Percentage of HIV infected pregnant women that access ARV treatment	80	80	80		
Number of facilities that offer PMTCT	135	135	135		
Percentage of pergnant women testing for HIV through the implementation of provider initiated	95	95	95		
2.3 Forensic Services					
Number of mortuaries being upgraded	5	6	0		
Percentage of autopsies completed within two days of arrival	80	100	100		

## **6.3 Programme 3 – Emergency Medical Services (EMS)**

## Programme objective

The rendering of pre-hospital EMS including Inter-Hospital Transfer and Planned Patient Transport.

## **Emergency Medical Services**

Rendering EMS including Ambulance Services, Special Operations, Communications and Air Ambulance Services.

## **Planned Patient Transport**

Rendering Planned Patient Transport including Local Outpatient Transport (within the boundaries of a given town or local area) and Inter City / Town Outpatient Transport (into referral centres).

Table 6.3: Summary of payments and estimates: Programme 3 Emergency Medical Services

		Outcome		Main	Adjusted	Revised	Medium-term estimates		oc .
	Audited	Audited	Audited	appropriation	appropriation	estimate	Wear	um-term estimate	
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Emergency Transport	72 688	105 816	87 487	100 664	107 739	119 498	126 581	142 229	150 493
Planned Patient Transport									
Total	72 688	105 816	87 487	100 664	107 739	119 498	126 581	142 229	150 493

|--|

Rithousand   2005/06   2006/07   2007/08   2008/09   2009/10   2010/11   3132   133   133   133   133   134   135   135   135   135   135   135   135   135   135   135   135   135   135   136   136   136   136   1360	tos	um-term estimate	Modiu	Revised	Adjusted	Main		Outcome		<u> </u>
Current payments	ies	uni-term estimate	Weult	estimate	appropriation	appropriation	Audited	Audited	Audited	_
Compensation of employees   31 093   48 288   55 580   58 806   59 974   60 050   64 022   67 423	2011/12	2010/11	2009/10		2008/09		2007/08	2006/07	2005/06	R thousand
Goods and services   26 306   26 307   31 711   33 263   36 210   53 858   53 121   64 710	139 193	132 133	117 143	113 908	96 184	92 069	87 291	74 595	57 399	Current payments
Interest and rent on land   Financial transactions in assets and liabilities   Unauthorised expenditure   Transfers and subsidies:   115   155   150   195   195   198   238   296   296   297	66 996	67 423	64 022	60 050	59 974	58 806	55 580	48 288	31 093	Compensation of employees
Unauthorised expenditure   Transfers and subsidies:   115   155   150   195   195   198   238   296	72 197	64 710	53 121	53 858	36 210	33 263	31 711	26 307	26 306	Goods and services
Unauthorised expenditure  Transfers and subsidies: 115 155 150 195 195 198 238 296  Provinces and municipalities 99 155 139 180 180 191 223 281  Departmental agencies and accounts Universities and technikons Public corporations and private enterprises Foreign governments and international organisations Non-profit institutions Households 16 11 15 15 7 15 15  Payments for capital assets 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800  Cultivated assets										Interest and rent on land
Transfers and subsidies:   115   155   150   195   195   198   238   296										Financial transactions in assets and liabilities
Provinces and municipalities   99   155   139   180   180   191   223   281										Unauthorised expenditure
Departmental agencies and accounts	300	296	238	198	195	195	150	155	115	Transfers and subsidies:
Universities and technikons Public corporations and private enterprises Foreign governments and international organisations Non-profit institutions Households 16 11 15 15 7 15 15 Payments for capital assets 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800 Buildings and other fixed structures Machinery and equipment 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800 Cultivated assets	285	281	223	191	180	180	139	155	99	Provinces and municipalities
Public corporations and private enterprises Foreign governments and international organisations Non-profit institutions Households  16 11 15 7 15 7 15 15 Payments for capital assets 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800 Buildings and other fixed structures Machinery and equipment 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800 Cultivated assets										Departmental agencies and accounts
Foreign governments and international organisations Non-profit institutions Households 16 11 15 7 15 7 15 15 Payments for capital assets 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800 8 800 Cultivated assets										Universities and technikons
organisations Non-profit institutions Households 16 11 15 15 7 15 15 Payments for capital assets 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800 Buildings and other fixed structures Machinery and equipment 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800 Cultivated assets										Public corporations and private enterprises
Non-profit institutions         16         11         15         15         7         15         15           Payments for capital assets         15 174         31 066         46         8 400         11 360         5 392         9 200         9 800           Buildings and other fixed structures         Machinery and equipment         15 174         31 066         46         8 400         11 360         5 392         9 200         9 800           Cultivated assets         15 174         31 066         46         8 400         11 360         5 392         9 200         9 800										Foreign governments and international
Households         16         11         15         15         7         15         15           Payments for capital assets         15 174         31 066         46         8 400         11 360         5 392         9 200         9 800           Bulldings and other fixed structures         Machinery and equipment         15 174         31 066         46         8 400         11 360         5 392         9 200         9 800           Cultivated assets         15 174         31 066         46         8 400         11 360         5 392         9 200         9 800										organisations
Payments for capital assets 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800  Buildings and other fixed structures  Machinery and equipment 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800  Cultivated assets										Non-profit institutions
Buildings and other fixed structures  Machinery and equipment 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800  Cultivated assets	15	15	15	7	15	15	11		16	Households
Machinery and equipment 15 174 31 066 46 8 400 11 360 5 392 9 200 9 800 Cultivated assets	11 000	9 800	9 200	5 392	11 360	8 400	46	31 066	15 174	Payments for capital assets
Cultivated assets										Buildings and other fixed structures
	11 000	9 800	9 200	5 392	11 360	8 400	46	31 066	15 174	Machinery and equipment
										Cultivated assets
Software and other intangible assets										Software and other intangible assets
Land and subsoil assets										Land and subsoil assets
Total economic classification 72 688 105 816 87 487 100 664 107 739 119 498 126 581 142 229	150 493	142 229	12/ 501	110 400	107 720	100 ///	07.407	105 014	72 (00	T. I

The budget for this programme has increased at an average annual nominal growth rate of 8 per cent from the 2008/09 to 2011/12. The increase is mainly attributed to the increase of 26 per cent in goods and services as a result of impact of fuel costs and the shifting of the costs related to the aeroplane used for emergency transport, previously located in Programme 2 (District Health Services). The allocation of R9. 200 million for payment for capital assets is to increase the number of patient transport and emergency vehicles (sedans).

In preparation for the 2010 FIFA World Cup the department is planning to change from the existing one control centre model that requires one control centre per district. This will ensure prompt response to emergencies. The department has also planned to address the capacity constraints within EMS by the appointment of additional personnel and training the current personnel.

## Service delivery Measures

Table 6.3.2: Performance Information: Emergency Medical Services

Derformance Macaurae	Esti	Estimated Annual Targets						
Performance Measures	2009/10	2010/11	2011/12					
Total rostered ambulances	185	200	215					
Rostered ambulances per 1000 people	0.2	0.2	0.2					
Percentage of hospitals with patient transporters	31	25	20					
Average kilometers travelled per ambulance	57 000	57 000	57 000					
Total kilometers travelled by all ambulances	5 500 000	5 500 000	5 500 000					
Percentage of locally based staff with training in BAA	46.8	34.5	29.5					
Percentage of locally based staff with training in AEA	53	65	70					
Percentage of locally based staff with training in ALS (paramedics)	0.2	0.5	0.5					
P1 (red calls) calls with a response of time <15 minutes in an urban area	85	90	95					
P1 (red calls) calls with a response of time <40 minutes in an urban area	70	80	95					
Percentage of all calls with response time within 60 minutes	60	70	80					
Percentage of operational rostered ambulances with single person crews	40	20	0					
Percentage green code patients transported by ambulance	55	50	45					
Percentage of ambulances with less than 200 000 kms on the clock	100	100	100					
EMS emergency cases - total	87 365	96 101	105 711					

Table 6.3.3: Performance Information: Emergency Medical Services

Performance Measures	Esti	Estimated Annual Targets			
Performance Measures	2009/10	2010/11	2011/12		
3.1 Emergency Transport					
Number of ambulances operational	185	200	215		
Vehicles less than 300 000km	180	190	210		
3.2 Planned Patient Transport					
Green code patients transported by ambulance	55 %	0.5	0.45		

## **6.4 Programme 4 - Provincial Hospital Services**

## Programme objective

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

## General (Regional) Hospitals

Rendering of hospitals services at a general specialist level and a platform for training of health workers and research.

## Tuberculosis (TB) Hospitals

To convert the present TB hospital into strategically placed centres for excellence in which a small percentage of patients may undergo hospitalization under conditions which allows for isolation during the intensive phase of treatment, as well as the application of the standardized multi-drug resistant (MDR) protocols.

## **Psychiatric Mental Hospitals**

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

Table 6.4: Summary of payments and estimates: Programme 4 Provincial Hospital Services

•		Outcome		Main	Adjusted	Revised	Medium-term estimates		
	Audited	Audited	Audited	appropriation	appropriation	estimate	Wicui	um term estimati	23
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
General Hospitals	280 211	319 348	389 049	416 917	439 744	480 582	506 924	566 446	612 864
TB Hospitals	4 958	5 039	3 681	6 527	6 527	3 669	9 587	12 795	16 358
Psychriatric Mental Hospital	10 061	11 907	8 441	8 172	8 172	12 198	16 210	18 543	19 548
Total	295 230	336 294	401 171	431 616	454 443	496 449	532 721	597 784	648 770

The budget for this programme has increase at an average annual nominal growth rate of 9.3 per cent from the 2008/09 to 2011/12. The increase is mainly as result of the 98 per cent increase in the Psychiatric Mental Hospital. It is envisage that the new mental hospital will be completed during the 2009/2010 when it will be operationalised.

Kimberley Hospital is the only tertiary level facility in the province, thus the increase of 18 per cent in the 2009/10 allocation. The construction of the Upington hospital as a regional hospital will eventually alleviate the pressure on Kimberley Hospital.

		Outcome		Main	Adjusted	Revised	Medium-term estimates		
_	Audited	Audited	Audited	appropriation	appropriation	estimate			:5
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Current payments	287 217	329 884	396 764	424 386	445 213	486 767	524 456	588 494	638 450
Compensation of employees	194 938	225 324	257 948	277 469	285 367	284 436	327 081	344 620	361 912
Goods and services	91 627	104 560	138 816	146 917	159 846	202 331	197 375	243 874	276 538
Interest and rent on land									
Financial transactions in assets and liabilities									
	652								
Unauthorised expenditure									
Transfers and subsidies:	975	464	275	230	230	241	265	290	320
Provinces and municipalities	659	189							
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international									
organisations									
Non-profit institutions									
Households	316	275	275	230	230	241	265	290	320
Payments for capital assets	7 038	5 946	4 132	7 000	9 000	9 441	8 000	9 000	10 000
Buildings and other fixed structures	3		288			3 858			
Machinery and equipment	7 034	5 943	3 844	7 000	9 000	5 575	8 000	9 000	10 000
Cultivated assets									
Software and other intangible assets	1	3				8			
Land and subsoil assets									
Total economic classification	295 230	336 294	401 171	431 616	454 443	496 449	532 721	597 784	648 770

Compensation of employees has increased by 15 per cent and this can be attributed to the implementation of OSD for nurses.

The significant increase of 25 per cent in goods and services is as a result of the new mental hospital and the additional allocation towards inflationary adjustment on medical goods and services.

## **Service delivery Measures**

Table 6.4.2: Performance Information: Provincial Hospital Services

Performance Measures	Esti	mated Annual Targe	ets
Performance weasures	2009/10	2010/11	2011/12
Caesarean section rate for regional hospitals	35	25	25
Separations - total	37285	31150	31500
OPD total headcounts	155 962	149 950	158 945
Percentage of Regional hospitals with patient satisfaction survey using DoH template	100	100	100
Percentage regional hospitals with clinical audit meetings every month	100	100	100
Average length of stay in regional hospitals	5	4.8	4.8
Bed utilization rate (based on usable beds) in regional hospitals	75	75	75
Expenditure per patient day equivalent in regional hospitals	1 389	1 350	1 200
Case fatality rate in regional hospitals for surgery separations	2.3	2.1	2

Table 6.4.3: Performance Information: Provincial Hospital Services

Performance Measures	Estimated Annual Targets					
Performance measures	2009/10	2010/11	2011/12			
Percentage of inappropriate referrals reduced	80%	90%	100%			
Dedicated day theatre operational	6 hrs 5 days a week	6 hrs 5 days a week	8 hrs 5 days per week			

## 6.5 Programme 5 - Health Science and Training

#### Programme objective

Rendering of training and development opportunities for actual and potential employees of the Department of Health.

## Sub programme objectives

## **Nursing Training College**

Training of nurses at undergraduate and post basic level, target group includes actual and potential employees.

## **Other Training**

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

Table 6.5: Summary of payments and estimates: Programme 5 Health Sciences

		Outcome		Main	Adjusted	Revised	Medi	um-term estimate	es
	Audited	Audited	Audited	appropriation	appropriation	estimate			
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Nursing Training College	20 527	17 249	17 225	20 386	21 239	21 812	24 038	25 416	26 449
Other Training	6 222	12 727	5 921	8 333	8 333	8 974	8 860	9 201	9 560
Primary Health Care Training		429							
Total	26 749	30 584	23 146	28 719	29 572	30 786	32 898	34 617	36 009

The department is in the process of ensuring the accreditation of the College with the South African Nursing Council by addressing practical learning opportunities for psychiatry and midwifery and by ensuring that the new premises are compliant with the nursing council's requirements.

The budget for this programme has increase at an average annual nominal growth rate of 5.4 per cent from the 2008/09 to 2011/12. The increase is mainly attributed to the 13 per cent increase in the Nursing Training College's allocation.

Table 6.5.1: Summary of payments and estimates by economic classification: Programme 5 Health Sciences

_		Outcome		Main	Adjusted	Revised	Medi	um-term estimate	is
	Audited	Audited	Audited	appropriation	appropriation	estimate	····oui	um tom ostimut	.5
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Current payments	26 453	30 130	23 140	28 519	29 372	30 309	32 698	34 417	35 809
Compensation of employees	19 734	18 602	16 427	20 217	21 070	21 237	23 646	24 538	25 417
Goods and services	6 719	11 528	6 713	8 302	8 302	9 072	9 052	9 879	10 392
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
Transfers and subsidies:	69	454							
Provinces and municipalities	69	446							
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international									
organisations									
Non-profit institutions									
Households		8							
Payments for capital assets	227		6	200	200	477	200	200	200
Buildings and other fixed structures									
Machinery and equipment	227		6	200	200	326	200	200	200
Cultivated assets						151			
Software and other intangible assets									
Land and subsoil assets									
Total economic classification	26 749	30 584	23 146	28 719	29 572	30 786	32 898	34 617	36 009

Compensation of employees has increased by 15 per cent and goods and services have increased by 8 per cent.

#### **Service delivery Measures**

Table 6.5.2: Performance Information: Health Sciences

Performance Measures	Esti	mated Annual Targe	ets
Performance weasures	2009/10	2010/11	2011/12
Intake of medical students	35	40	45
Intake of nurse students	100	100	100
Students with bursaries from the province	150	175	180
Attrition rates in first year of medical school	0	0	5
Attrition rates in first year of nursing school	3	2	5
Basic medical students graduating	10	15	20
Basic nurse students graduating	120	150	100
Medical registrars graduating	2	1	5
Advanced nurse students graduating	20	25	38
Average training cost per basic nursing graduate	R 300 000	R 310 000	R 350 000
Development component of HPT & D grant spent	100	100	100

Table 6.5.3: Performance Information: Health Sciences

Performance Measures	Esti	Estimated Annual Targets				
renormance weasures	2009/10	2010/11	2011/12			
6.1 Nurse Training Colleges						
Number of 1st year students trained in General Nursing Science	30	30	30			
Number of 3rd year students trained in General Psychiatry & Community & Midwifery	60	0	60			
Number of 4th year students trained in General Psychiatry & Community & Midwifery	67	60	0			

#### **6.6 Programme 6 – Health Care Support Services**

## Programme objective

To render support services required by the department to realise its aims.

#### **Laundry Services**

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

## **Engineering**

Rendering a maintenance service to equipment and engineering installations as well as minor maintenance to buildings.

## **Orthotic and Prosthetic Services**

Rendering specialised orthotic and prosthetic services.

Table 6.6: Summary of payments and estimates: Programme 6 Health Care Support Services

		Outcome		Main	Adjusted	Revised	Madi	um-term estimate	ne .
	Audited	Audited	Audited	appropriation	appropriation	estimate	Wedi	um-term estimate	.3
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Laundries	3 006	3 424	3 380	3 353	3 520	5 992	3 687	4 029	4 232
Engineering	238	438	427	2 400	2 400	1 187	6 983	16 894	17 859
Orthotic and Prostetic Services	1 892	6 091	3 055	4 796	4 796	4 390	6 862	7 719	8 123
Medicine Trading Account	82 601	89 592	7 043						
Forensic Services	72	96							
Total	87 809	99 641	13 905	10 549	10 716	11 569	17 532	28 642	30 214

The budget for this programme has increase at an average annual nominal growth rate of 37.7 per cent from the 2008/09 to 2011/12. This is as a result of additional allocation from the previous MTEF for assistive devices and a dedicated budget for both planned and ad hoc maintenance. The department is in the process of refurbishing the laundry system by replacing the current boiler system.

		Outcome		Main	Adjusted	Revised	Modi	um-term estimate	nc .
	Audited	Audited	Audited	appropriation	appropriation	estimate	ivieui	um-term estimati	23
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Current payments	87 764	99 628	13 860	10 539	10 706	11 557	17 522	28 632	30 20
Compensation of employees	3 667	8 276	4 612	4 144	4 311	5 285	6 579	6 914	7 24!
Goods and services	84 097	91 352	9 248	6 395	6 395	6 272	10 943	21 718	22 959
Interest and rent on land									
Financial transactions in assets and liabilities									
Unauthorised expenditure									
Transfers and subsidies:	16	13	14	10	10	12	10	10	10
Provinces and municipalities	13	3		10	10		10	10	10
Departmental agencies and accounts									
Universities and technikons									
Public corporations and private enterprises									
Foreign governments and international									
organisations									
Non-profit institutions									
Households	3	10	14			12			
Payments for capital assets	29		31						
Buildings and other fixed structures	12								
Machinery and equipment	17		31						
Cultivated assets									
Software and other intangible assets									
Land and subsoil assets									
Total economic classification	87 809	99 641	13 905	10 549	10 716	11 569	17 532	28 642	30 214

## **Health Facilities Management**

## **Programme objective**

To render professional and technical services within the Department in respect of buildings and related structures. To construct new facilities, to upgrade, rehabilitate and maintain existing facilities.

Table 6.7: Summary of payments and	Table 6.7: Summary of payments and estimates: Programme 7 Health Facilities Management											
		Outcome		Main	Adjusted	Revised	Medium-term estimates					
	Audited	Audited	Audited	appropriation	appropriation	estimate			:5			
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12			
District Health Services	81 080	141 712	56 211	128 172	115 472	74 925	242 871	431 714	374 181			
Provincial Health Services	55 223	99 497	144 433	164 364	164 364	153 774	179 892	55 000	95 000			
Total	136 303	241 209	200 644	292 536	279 836	228 699	422 763	486 714	469 181			

The health facilities management budget mainly constitutes of the hospital revitalisation and the infrastructure to provinces grant. The budget for this programme has increase at an average annual nominal growth rate of 27.1 per cent from the 2008/09 to 2011/12. The allocation will be utilised to fund the construction of clinics and hospitals as indicated in the infrastructure annexure.

		Outcome		Main	Adjusted	Revised	Modi	um-term estimate	ne.
	Audited	Audited	Audited	appropriation	appropriation	estimate	ivieui	um-term estimati	25
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Current payments	223	325	2 503	23 536	23 536	22 370	31 930	29 429	34 429
Compensation of employees		-8		3 864	3 864	1 311	3 890	4 000	4 000
Goods and services	221	333	2 503	19 672	19 672	21 059	28 040	25 429	30 429
Interest and rent on land									
Financial transactions in assets and									
liabilities	2								
Unauthorised expenditure									
Transfers and subsidies:									
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	136 080	240 884	198 141	269 000	256 300	206 329	390 833	457 285	434 752
Buildings and other fixed structures	126 378	213 089	190 801	257 000	244 300	199 018	347 941	432 285	409 752
Machinery and equipment	9 616	27 795	6 524	12 000	12 000	7 311	42 892	25 000	25 000
Cultivated assets									
Software and other intangible assets	86		816						
Land and subsoil assets									
Total economic classification	136 303	241 209	200 644	292 536	279 836	228 699	422 763	486 714	469 181

# Service delivery Measures

Table 6.7.2: Performance Information: Health Facilities Management

Performance Measures	Esti	mated Annual Targe	ets		
Performance weasures	2009/10	3			
Hospitals funded on revitalization programme	6	5	4		
Hospitals with up to date asset register	0	2	3		
Health districts with up to date PHC asset regsiter (excl hospitals)	0	2	5		
Fixed PHC facilities with access to piped water	5	5	5		
Fixed PHC facilities with access to mains electricity	5	5	5		
Fixed PHC facilities with access to fixed line telephone	5	5	5		
Projects completed on time	5	5	5		
Project budget over run	0	0	0		

# 7. Other programme information

## 7.1 Personnel numbers and costs

Table 7.1:Personnel numbers and costs: Department of Health

	As at 31 March						
Personnel numbers	2006	2007	2008	2009	2010	2011	2012
Administration	236	264	228	256	272	272	272
District Health Services	2 351	2 483	3 126	3 023	3 210	3 210	3 210
Emergency Medical Services	428	620	589	590	590	590	590
Provincial Hospital Services	1 665	1 673	1 680	1 543	1 580	1 580	1 580
Health Science	411	334	370	366	368	370	370
Health Care Support Services	56	51	44	44	45	45	45
Health Facilities Services							
Total personnel numbers *	5 147	5 425	6 037	5 822	6 065	6 067	6 067
Total personnel cost (R thousand)	522 587	620 209	786 438	918 286	949 898	918 286	1 050 683
Unit cost (R thousand)	102	114	130	158	157	151	173

Table 7.1.1:Summary of departmental personnel numbers and costs

		Outcome		Main	Adjusted	Revised	Madi	um-term estimate	oc .
	Audited	Audited	Audited	appropriation	appropriation	estimate	Weui	um-term estimate	25
	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12
Total for the department									
Personnel numbers	5 147	5 425	6 037	6 287	5 822	5 822	6 065	6 067	6 067
Personnel costs	522 587	620 209	786 438	915 369	949 898	918 286	1 050 683	1 108 100	1 163 489
Human resources component									
Personnel numbers (head count)	52	52	45	50	48	48	58	58	58
Finance component									
Personnel numbers (head count)	37	45	44	47	40	40	57	57	57
Full time workers									
Personnel numbers (head count) Personnel cost	4 516	4 833	5 395	5 626	5 379	5 379	5 628	5 640	5 640
Part-time workers									
Personnel numbers (head count)	117	83	69	70	73	73	80	80	80
Contract workers									
Personnel numbers (head count)	513	505	582	598	398	398	401	391	391

# **Annexure to Budget Statement 2**

Table B.3: Summary of Payments and estimates by economic classification

		Outcome		Main	Adjusted	Revised	Medium-term estimates			
	Audited	Audited	Audited	appropriation	appropriation	estimate	Wedie	am term estimate	3	
R thousand	2005/06	2006/07	2007/08		2008/09		2009/10	2010/11	2011/12	
Current payments	906 661	1 079 267	1 304 555	1 443 456	1 520 274	1 637 869	1 750 892	1 991 070	2 158 900	
Compensation of employees	522 587	620 209	786 438	915 369	949 898	918 286	1 050 683	1 108 100	1 163 489	
Salaries and wages	456 763	545 693	686 500	792 484	821 458	798 092	894 315	941 011	978 362	
Social contributions	65 824	74 516	99 938	122 885	128 440	120 194	156 368	167 089	185 127	
Goods and services	383 090	458 858	518 117	528 087	570 376	717 237	700 209	882 970	995 411	
Consultants, contractors and special services	42 704	46 542	59 111	53 476	58 476	88 660	106 016	123 881	142 253	
Inventory: Food and food supplies	10 763	11 831	27 958	12 528	18 128	32 711	33 537	42 158	46 621	
Inventory: Fuel, oil and gas	14 891	17 944	39 361	28 628	32 575	57 203	64 382	78 472	87 292	
Inventory: Medical supplies	122 436	155 199	173 813	82 301	83 643	90 258	177 267	209 658	245 967	
Leases payments	27 402	36 012	36 301	29 918	31 918	43 132	51 091	62 757	66 172	
Owned & leasehold property expenditure	32 036	43 272	49 479	8 273	8 273	55 279	72 936	98 742	103 983	
Travel and subsistence	22 519	19 001	23 323	12 722	12 722	13 332	19 747	24 311	28 000	
Training & staff development	504	8 424	262	5 065	5 065		1 189	1 577	1 751	
Advertising	1 354	2 462	1 877	3 098	3 098	2 032	4 248	5 536	5 978	
Assets <r5000< td=""><td>2 121</td><td>2 261</td><td>5 537</td><td>1 919</td><td>2 419</td><td>3 558</td><td>2 789</td><td>3 539</td><td>4 439</td></r5000<>	2 121	2 261	5 537	1 919	2 419	3 558	2 789	3 539	4 439	
Other	106 360	115 910	101 095	290 159	314 059	331 072	167 007	232 339	262 955	
Interest and rent on land										
Financial transactions in assets and liabilities										
	984	200				2 342				
Unauthorised expenditure						4				
Transfers and subsidies:	20 071	28 891	24 592	31 378	32 478	32 487	38 901	48 845	51 335	
Provinces and municipalities	5 430	11 196	6 444	7 003	8 103	5 817	7 390	7 879	8 327	
Departmental agencies and accounts										
Universities and technikons										
Public corporations and private enterprises						1 155				
Foreign governments and international										
organisations										
Non-profit institutions	13 622	16 499	17 204	23 450	23 450	24 629	30 531	39 941	41 943	
Households	1 019	1 196	944	925	925	886	980	1 025	1 065	
Payments for capital assets	169 843	298 315	227 447	298 754	304 721	234 392	423 869	493 419	474 854	
Buildings and other fixed structures	126 696	215 373	212 913	257 000	254 007	206 467	347 941	432 285	409 752	
Machinery and equipment	43 060	82 885	13 718	41 754	50 714	27 441	75 928	61 134	65 102	
Cultivated assets						151				
Software and other intangible assets	87	57	816			333				
Land and subsoil assets										
Total economic classification	1 096 575	1 406 473	1 556 594	1 773 588	1 857 473	1 904 748	2 213 662	2 533 334	2 685 089	

Table B.5: Details of payments for infrastructure by category: Department of Health

No.	3.5: Details of payments for infrastructure by category: Depar Project name	Region/ district	Municipality	Type of structure	Regional/District/ Central Hospital,	Project (	duration	Project cost		Main Budget	MTEF Forward Estimate	
					Clinic/Community Health	Date: Start	Date: Finish	At start	At completion	MTEF 2009/10	MTEF 2010/11	MTEF 2011/12
1. New	constructions (buildings and infrastructure) (R thousand)											
1	Barkly West Hospital	Frances Baard	Dikgatlong	Hospital	District Hospital	Oct-05	Nov-08	68 000		9 000	-	-
2	Mental Hospital	Frances Baard	Sol Plaatje	Hospital	Regional Hospital	Jan-05	Jul-09	420 000		140 000	10 000	
3	Upington Hospital	Siyanda	Khara Hais	Hospital	District Hospital	Nov-08	Nov-13	835 000		155 890	164 718	135 392
4	De Aar Hospital	Karoo	Emthanjeni	Hospital	District Hospital	Jun-09	Jun-13	400 000		18 307	130 000	110 000
5	Postmasburg Hospital	Siyanda	Tsantsabane	Hospital	District Hospital	Jun-09	Jun-12	300 000		6 000	70 500	70 500
6	Kimberly Hospital	Frances Baard	Sol Plaatje	Hospital	Regional Hospital	Jun-10	Jun-17	1 300 000		6 000	40 000	90 000
7	De Aar Clinic	Karoo	Emthanjeni	Clinic	Staff acoomodation	Nov-07	Jul-08	3 460		1 000	-	-
8	Douglas Clinic	Karoo	Siyancuma	Clinic	Staff acoomodation	Nov-07	Jul-08	4 240		1 000	-	-
9	Phillipstown Clinic	Karoo	Renosterberg	Clinic	Staff acoomodation	Nov-07	May-08	3 165		1 000	-	-
10	Dibeng Clinic	Kgalagadi	Gamagara	Clinic	Staff acoomodation	Nov-07	May-08	3 080		500		
11	Platfontein Clinic	Frances Baard	Sol Plaatje	Clinic	Staff acoomodation	Jun-07	Jun-08	3 000		1 000	-	
12	Pampierstad Clinic	Frances Baard	Phokwane	Clinic	Staff acoomodation	Mar-08	Dec-08	3 550		1 000	-	
13	Hartswater Clinic	Frances Baard	Phokwane	Clinic	Staff acoomodation	Mar-08	Dec-08	3 500		1 000	-	
14	Hondeklipbaai Clinic	Namakwa	Kamiesberg	Clinic	Staff acoomodation	Jan-09	Dec-09	3 600		3 900	-	_
15	Olifantshoek Clinic	Siyanda	Tsantsabane	Clinic	Staff acoomodation	Mar-08	Dec-08	4 210		800	-	
16	Kutlwanong CHC	Frances Baard	Sol Plaatje	Community Health Centre	Community Health Centre	Jun-09	Jun-11	35 000		8 974	19 836	6 026
17	Greenpoint clinic	Frances Baard	Sol Plaatje	Clinic	Clinic	Mar-09	Feb-10	6 000		4 500	1 500	-
18	Boitshoko clinic			Clinic	Clinic	Mar-09	Feb-10	6 000		4 500	1 500	
19	Mapoteng clinic			Clinic	Clinic	Mar-09	Feb-10	6 000		4 500	1 500	-
20	Novalspond clinic			Clinic	Clinic	Mar-09	Feb-10	6 000		4 500	1 500	-
21	Groot Mier clinic			Clinic	Clinic	Mar-09	Feb-10	6 000		4 500	1 500	-
22	Danielskuil clinic					Mar-10	Feb-11	6 800			3 000	3 800
23	Griekwastad clinic Mapiniki clinic					Mar-10	Feb-11	6 800			3 000	3 800
24 25	Mapiniki ciinic Homevale CHC					Mar-10 Mar-10	Feb-11 Feb-12	6 800 45 000			3 000 10 578	3 800 20 000
26	Pampierstaad CHC					IVIdI - IU	Feb-12	45 000 45 000			4 082	10 492
27	Richie CHC					Mar-11	Feb-13	45 000			4 500	10 000
28	Vioolsdrift clinic					Mar-10	Feb-11	6 800			3 000	3 800
29	Kuboes clinic					Mar-10	Feb-11	6 800			3 000	3 800
30	Griekwastad clinic		ĺ			Mar-10	Feb-11	6 800			3 000	3 800
31	Smitchsdrift Clinic							7 300				
Total n	ew constructions (buildings and infrastructure)							3 602 905		377 871	479 714	475 210

No.	Project name	Region/ district	Municipality	Number of Hospitals	Number of Clinics (including Community	Project duration		Project cost		Main Budget	MTEF Forward Estimate	
					Health Centres)	Date: Start	Date: Finish	At start	At completion	MTEF 2009/10	MTEF 2010/11	MTEF 2011/12
2. Rehabilitation	/upgrading (R thousand)											
<ol> <li>Kimberl</li> </ol>	ey Hospital Boilers									24 892		
2 District	Pharmacies	All	Vaious Municipalities							5 000	2 000	1 671
4 Kimberl	ey Hospital Lifts									4 000		
5 Kimberl	ey Hospital Laundry Equipments									6 000		
Total M	TEF Allocation							0		39 892	2 000	1 671
Total rehabilitat	ion/upgrading									417 763	481 714	476 881

No.	Project name	Region/ district	Municipality	Number of Hospitals	Number of Clinics (including Community	Project duration		Project cost		Main Budget	MTEF Forw	orward Estimate	
					Health Centres)	Date: Start	Date: Finish	At start	At completion	MTEF 2009/10	MTEF 2010/11	MTEF 2011/12	
3. Recurrent mainte	nance (R thousand)												
1													
<li>2 District Hosp</li>	pital									5 183	14 359	14 292	
Office Accor	modation									1 800	2 608	3 645	
To	tal MTEF Allocation Including Maintenance												
Total recurrent maintenance 6 983									16 967	17 937			