

# VOTE 7

## Health

Operational budget	R 24 483 363 486
MEC remuneration	R 1 491 514
Total amount to be appropriated	R 24 484 855 000
Responsible MEC	Dr. S. M. Dhlomo, MEC for Health
Administering department	Health
Accounting officer	Head: Health

### 1. Overview

#### Vision

The vision of the Department of Health is: *To achieve the optimal health status for all persons in the Province of KwaZulu-Natal.*

#### Mission statement

The department's mission statement is: *To develop a sustainable, co-ordinated, integrated and comprehensive health system at all levels of care, based on the primary health care approach through the district health system.*

#### Strategic objectives

**Strategic policy direction:** By focusing on its role in achieving optimal health status for the people of KZN, the department seeks to align its operations and strategic position with the overall aim of government to ensure a long and healthy life for all.

The department's three main strategic goals, each of which comprises a number of strategic objectives for the 2011/12 MTEF period and which are aligned to national and provincial priorities, are as follows:

- *Overhauling the provincial health care system* through implementing and sustaining an evidence- and results-based provincial health system aligned with the National Health System (NHS) 10-point plan, national and provincial legislative requirements and disease profiles, that are appropriately costed and funded (within the funding envelope), capacitated and capable of overseeing and managing health services in the province;
- *Improving the quality of primary health care (including community-based services) and hospital services* by implementing an adequately resourced essential package of services (within the funding envelope) and improving clinical governance systems and processes to improve the quality and continuum of care; and
- *Reducing morbidity and mortality due to communicable diseases and non-communicable illnesses and conditions* by implementing high impact strategies to improve prevention, detection, management and support of communicable diseases and non-communicable illnesses and conditions at all levels of care.

#### Core functions

The main purpose of the department is to develop and implement a sustainable, co-ordinated, integrated and comprehensive health system based on the primary health care approach, which encompasses

promotive, curative, rehabilitative, supportive and palliative care. This is guided by the principles of accessibility, equity, community participation, appropriate technology, inter-governmental and inter-sectoral co-operation.

The department provides health services primarily to the uninsured population of KZN, who comprise about 88 per cent of the province's total population of approximately 10.449 million people (2009). In addition, the department is required to provide tertiary health services to people beyond the provincial boundaries.

The following four main categories of health services are provided by the department:

***Primary health care services***

This category focuses on the prevention of illness and the provision of basic curative health services. These services include immunisation, health promotion, HIV and AIDS prevention and treatment, nutrition, maternal, child and women's health, communicable disease control, environmental health, oral and dental health, rehabilitation and disability, occupational health and chronic diseases, mental health and prevention and treatment of tuberculosis (TB).

***Hospital services***

District and provincial hospitals cater for those patients who require admission to hospital for treatment at general practitioner level, and at specialist level, respectively.

TB hospitals, psychiatric/mental hospitals and sub-acute, step-down and chronic medical hospitals provide hospitalisation for patients suffering from TB, mental illnesses and those patients requiring long-term nursing care. Central and tertiary hospitals provide facilities and expertise needed for sophisticated medical procedures.

***Forensic pathology services***

The aim is to ensure integrity of forensic evidence and to provide an Inspector of Anatomy Services.

***Emergency medical services***

The aim of this category is to provide emergency care and transport for victims of trauma, road traffic accidents, and emergency medical and obstetric conditions. Planned patient transport is provided for inter-hospital transfer, while indigent patients are transported between clinics and hospitals.

**Legislative mandate**

In carrying out its functions, the department is governed mainly by the following Acts and regulations:

- The Constitution of the Republic of South Africa (Act No. 108 of 1996)
- KwaZulu-Natal Health Act (Act No. 1 of 2009)
- National Health Act (Act No. 61 of 2003)
- Mental Health Care Act (Act No. 17 of 2002)
- Public Finance Management Act (Act No. 1 of 1999, as amended) and the Treasury Regulations
- Preferential Procurement Policy Framework Act (Act No. 5 of 2000)
- Annual Division of Revenue Act
- Public Service Act (Act No. 103 of 1994) and the Public Service Regulations
- Medicines and Related Substances Act (Act No. 101 of 1965, as amended)
- Pharmacy Act (Act No. 53 of 1974, as amended)
- Nursing Act (Act No. 33 of 2005)
- Choice of Termination of Pregnancy Act (Act No. 92 of 1996, as amended)
- Labour Relations Act (Act No. 66 of 1995)
- Basic Conditions of Employment Act (Act No. 75 of 1997)

- Skills Development Act (Act No. 97 of 1998)
- National Health Laboratories Services Act (Act No. 37 of 2000)
- Occupational Health and Safety Act (Act No. 85 of 1993)
- Traditional Health Practitioners Act (Act No. 35 of 2004)
- Health Professions Act (Act No. 56 of 1974)
- Human Tissue Act (Act No. 65 of 1983)

## 2. Review of the 2010/11 financial year

Section 2 provides a review of 2010/11, outlining the main achievements and progress made by the department, as well as providing a brief discussion on the challenges and new developments.

Cabinet approved a multi-year intervention plan to address the deteriorating state of fiscal management in the department. In August 2009, a KZN Treasury team was tasked in terms of the Section 18 of the PFMA to assist the department with financial management. The implementation of this joint Treasury/Health task team is progressing well. Some key positive results include:

- The 2010/11 projected outcome is expenditure within budget.
- Dedicated finance management posts at institutions were created.
- Investigations into fraud and corruption have resulted in disciplinary action being taken, as well as criminal investigations and trials, with resultant savings from prevented fruitless and wasteful expenditure. There were also direct recoveries from the proceeds of crime over this financial year, which are expected to increase if the legal processes currently underway are concluded in favour of the department.
- Budget planning was institutionalised and aligned to national and provincial government priorities.
- Practical tools for resource allocation and financial performance reporting were developed and are being rolled out.
- SCM reforms were implemented and the department now participates in 32 national contracts and is in the process of setting up provincial contracts.
- Delegations are under review and will be finalised and approved during 2011/12.

Despite a significant improvement in the baseline allocation in 2010/11, it should be noted that a portion of the available funds could not be utilised for service enhancement as it was specifically ring-fenced to provide for the different categories of Occupational Specific Dispensation (OSD) – e.g. for doctors, emergency workers, therapists, and psychiatric nurses, and an increase in the conditional grant allocations. However, the department did receive significant additional funding for service enhancement and, along with reprioritisation, was able to strengthen key service delivery areas in line with national and provincial strategic priorities. The following areas were strengthened:

- Funding was reprioritised to the main points of service delivery under Primary Health Care, namely Community Health Clinics and Community Health Centres. This approach has also proven to be the most cost effective manner in which to provide health services and will alleviate the bottlenecks currently being experienced with patient access at the District Hospitals.
- The department allocated additional funding towards purchasing, replacing and maintaining essential medical equipment, and provision was made to replace redundant and obsolete Information Technology (IT) and auxiliary machinery and equipment, both of which contribute to the effective and efficient rendering of health services to the public.
- Funding was reprioritised for the filling of critical medical and support posts at all levels, as well as for the use of consultants to provide for interim personnel capacity and for extensive forensic investigations related to fraud within the department.

- A decision was also taken to strengthen and maintain existing facilities and to prioritise the building of new facilities to align with the departmental strategic plan and disease profile of the province.

In line with the national and provincial priorities, the department undertook the following in 2010/11:

***Enhancing the quality of education and skills development***

The department continued to recruit students from disadvantaged communities for training as community health workers, nurses, emergency medical services recruits, and other health professionals. Bursaries were provided to assist with the recruitment of health professional staff, including doctors, pharmacists and therapists, as well as for administrative staff.

***Improving the provision of health care***

In line with the national vision of ensuring a long and healthy life for all South Africans through implementation of the NHS 10-point plan, the Medium Term Strategic Framework (MTSF) and the Millennium Development Goals (MDGs), the department achieved the following:

- *Maternal, Neo-natal Child and Women's Health (MNC&WH) and Nutrition:* The department continued to expand its services targeting women and children through implementation of the Comprehensive Plan for MNC&WH and nutrition. Special focus was made on the reduction of preventable causes of child morbidity and mortality (MDG 1 and 4), with expected performance indicators for 2010/11 improving as follows:
  - Immunisation coverage for children under one year – 4 per cent;
  - Measles coverage for children under one year – 2 per cent;
  - Pneumococcal (PCV) first dosage coverage – 2.3 per cent; and
  - Rota Virus (RV) first dosage – 51 per cent.

The improvements in maternal and neo-natal health (MDGs 1, 5 and 6) are also reflected in the performance indicators under Programme 2: District Health Services. The management of the prevention of mother to child transmission (PMTCT) of HIV and AIDS reflects the following improvements:

- New born baby Azidothymidine (AZT) uptake – 4 per cent;
  - Ante-natal client initiated on AZT during antenatal care – 5.2 per cent; and
  - Ante-natal Nivirapine uptake – 4.5 per cent.
- *Comprehensive management of HIV and AIDS:* The department scaled up the implementation of the National Strategic Plan for HIV and AIDS and sexually transmitted infections (STIs) in line with the new policy changes. The percentage of clients tested to those counselled (excluding ante-natal) remained constant at 90 per cent, and the distribution rate of male condoms is expected to increase from 8 to 10 per eligible male per annum, while the total of registered Anti-retroviral Therapy (ART) clients on treatment increased from 335 148 to 470 472. A rigorous voluntary medical circumcision programme targeting the spread of HIV and AIDS was initiated in conjunction with the Department of Co-operative Governance and Traditional Affairs (CoGTA). This was directed at males of all ages and resulted in the circumcision of approximately 27 000 patients (as at the end of November 2010).
  - *Comprehensive management of TB:* The department continued to focus on the expansion and implementation of the TB Crisis Plan in all districts, and district co-ordinators were appointed in five out of the six Multi-Drug Resistant (MDR) TB areas. Two new MDR units, namely at Catherine Booth and Doris Goodwin Hospitals, are due for completion in 2010/11, providing an additional 104 beds. Additional vehicles were purchased in order to upgrade the Directly Observed Treatment Short-course (DOTS) programme. The purpose of this programme is to ensure that patients complete their treatment and do not default, which can lead to an escalation of their infection to MDR/Extreme Drug Resistant (XDR) TB which is harder and more expensive to treat.
  - The department continued to improve its physical infrastructure. In addition to the ongoing improvement of hospital facilities, the department anticipates finalising 13 new and replacement

clinics, three community health centres, as well as four new mortuaries at Park Rynie, Pietermaritzburg, Estcourt and Madadeni.

- With the completion of four mortuaries, forensic pathology services have been strengthened. Contracts have also been put in place for 19 part-time doctors to work in the mortuaries, as the department has been unable to attract full-time doctors.

### 3. Outlook for the 2011/12 financial year

Section 3 looks at the key focus areas of 2011/12, outlining what the department is hoping to achieve, as well as briefly looking at the challenges facing the department, and proposed new developments.

#### *National core standards for Health will lead to improvements*

The National Core Standards for Health Establishment Institutions has been published by the National Department of Health, and has formed the basis of the department's "Make me Look Like a Hospital" project. It is important to note that efforts are underway to modernise the KZN public health system gradually, in order to meet the readiness requirements for introduction of the National Health Insurance (NHI) in the near future. Accordingly, the World Health Organisation health systems framework is an important anchor and reference point for the improvements that the department will be aiming for in improving the public health care system.

#### *Fiscal and economic management of the department is expected to continue improving*

From 2011/12, a period of financial stability is expected, resulting from the work carried out in the two previous financial years. Financial governance and management has improved and 2010/11 was distinctly characterised by entrenched fiscal restraint and the elimination of wasteful expenditure. Following three years of over-expenditure, the 2010/11 expenditure outcome is projected to come within budget.

Financial management of all conditional grants will be more strictly controlled, as directed by the National Health Council, to ensure improving financial management and reporting, as well as compliance to the provisions of the Division of Revenue Act.

Subscription to National Treasury contracts brought price stability in 2010/11, and the department will pursue the strategic sourcing agenda in 2011/12, with a view to extracting maximum value for money using public procurement expenditure.

2011/12 is also a period of consolidation. The budget will be focussed on key national and provincial priorities that support government's goal of improving the public health care system.

Such priorities include attainment of the following outputs over the MTEF:

- Output 1: Increasing Life Expectancy:
  - Improve clinical governance and responses to the burden of disease and consequent health needs including improving the management of HIV and AIDS, strengthening HIV and AIDS/TB treatment integration, as well as reduce TB incidence.
  - Improve the management of non-communicable diseases, and the incidence of cervical cancer.
  - Accelerate the implementation of the integrated school health and Health Promoting Schools programme, where the entire school community promotes health for all.
- Output 2: Decreasing Maternal and Child mortality:
  - Social mobilisation of civil society to reduce teenage pregnancy (through the Contraceptive Strategy and youth programmes), improve low risk pregnancies and reduce morbidity and mortality.
  - Scaling up Highly Active Anti-Retroviral Therapy (HAART) access for pregnant women.
  - Establishing waiting mothers' lodges in all district hospitals, strengthening mortality reviews at hospitals and implementing a community-based maternal and child health framework.

- Establish neo-natal experiential learning sites and outreach programmes, improve neo-natal facilities and care at all hospitals, scale up implementation of and integrate the management of childhood illnesses, as well as improve immunisation coverage.
- Output 3: Combating HIV and AIDS and decreasing the burden of diseases from TB:
  - Accelerate the implementation of the National Strategic Plan (NSP) for HIV and AIDS, including new policy changes, intensifying the voluntary male medical circumcision campaign and extending the HIV and Aids counselling and testing campaign.
  - Continue to implement the TB Crisis Plan, including social mobilisation to increase awareness in communities about TB, as well as surveillance for early detection of TB.
- Output 4: Strengthening Health System effectiveness:
  - Align provincial plans with the National Health System and priorities and finalise and implement the 2010 – 2020 Service Transformation Plan (STP).
  - Implement National Core Standards towards the accreditation of health facilities in preparation for NHI.
  - Revitalise Primary health Care (PHC) services as per the STP implementation plan, including the provincialisation of municipal clinics.

New specific priorities and concrete interventions funded in 2011/12 will include the following:

- Increase programmes for combating HIV and AIDS and TB by targeting high transmission areas, e.g. truckers' routes, as well as upscaling the medical male circumcision programme.
- Increase nurse training.
- Flagship various programmes, increase community care givers and facilitate the professionalisation of community health workers to clinical assistants.
- Investment in medical equipment and related facilities for MNC&WH, including the purchase of obstetric ambulances with a minimum of two per district.
- Establishment of maintenance teams to carry out routine scheduled preventative maintenance in all health facilities.

***Creating and increasing economic participation and creating jobs***

The South African government has declared 2011 a year for creating jobs. Small KZN companies and rural women will be given an increasing share in market opportunities presented by the department's procurement spend, in a drive to create jobs. This will be done in pursuit of supporting the job creation initiatives. As a result, the department's tender documentation and contract conditions will be reviewed accordingly, to include safeguards for job creation and payment of sector determined salaries.

***Drive to improve clinical outcomes will be increased in 2011/12***

The department has diagnosed the causes of short-comings and less than expected outcomes for Health. Without being exhaustive, key issues and areas that may be characterised as key challenges for Health include:

- Focus on curative care instead of preventative primary health care.
- Inadequate community participation and inter-sectoral collaboration.
- Funding allocation has been misaligned with service delivery needs for many years.
- Inappropriate production and deployment of Human Resource (HR), especially nursing staff.
- Huge infrastructure backlogs and lack of maintenance contribute to unfavourable working conditions for clinical and other health care staff.
- Shortage of ambulances and staff and poor roads contribute to poor emergency care response times.
- Insufficient investment in information, communication and technology.

- Fraud and corruption.
- Systemic bottlenecks (inflexible and rule based) instead of “business unusual”.

*The key strategies for improving health outcomes funded in this 2011/12 budget include:*

- Overhaul, improve the efficiency and quality of provincial health services.
- Reduce morbidity and mortality due to communicable diseases and non-communicable conditions and illnesses.
- Strengthen inter-sector collaboration.

## 4. Receipts and financing

### 4.1 Summary of receipts

Table 7.1 below gives the source of funding for Vote 7 over the seven-year period 2007/08 to 2013/14. The table also compares actual and budgeted receipts against actual and budgeted payments.

**Table 7.1: Summary of receipts and financing**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Provincial allocation	11 734 437	13 043 724	15 125 877	17 763 550	18 192 039	18 192 039	19 986 233	21 525 707	22 852 341
Conditional grants	2 190 991	2 634 190	3 114 646	3 894 131	3 924 609	3 924 609	4 434 669	4 799 417	5 337 083
Health Professionals Training & Development grant	201 992	212 092	222 425	235 771	235 771	235 771	249 917	261 860	276 262
Hospital Revitalisation grant	315 456	330 404	288 862	500 815	500 815	500 815	547 698	566 605	533 432
National Tertiary Services grant	789 578	911 892	983 948	1 102 585	1 102 585	1 102 585	1 201 831	1 303 824	1 408 053
Comprehensive HIV and AIDS grant	466 922	757 213	1 121 575	1 498 811	1 518 811	1 518 811	1 889 427	2 246 099	2 675 081
Health Infrastructure grant (was IGP)	259 758	294 832	359 717	401 055	400 238	400 238	358 471	393 367	415 002
Forensic Pathology Services grant	157 285	127 757	134 538	152 406	152 406	152 406	161 550	-	-
2010 World Cup Health Preparation Strategy grant	-	-	3 581	-	-	-	-	-	-
EPWP Grant for the Social Sector grant	-	-	-	2 688	2 676	2 676	25 775	27 662	29 253
EPWP Incentive grant	-	-	-	-	11 307	11 307	-	-	-
<b>Total</b>	<b>13 925 428</b>	<b>15 677 914</b>	<b>18 240 523</b>	<b>21 657 681</b>	<b>22 116 648</b>	<b>22 116 648</b>	<b>24 420 902</b>	<b>26 325 124</b>	<b>28 189 424</b>
<b>Total payments</b>	<b>14 959 441</b>	<b>17 103 101</b>	<b>20 349 276</b>	<b>21 657 681</b>	<b>22 120 186</b>	<b>21 638 144</b>	<b>24 484 855</b>	<b>26 325 124</b>	<b>28 189 424</b>
Surplus/(Deficit) before financing	(1 034 013)	(1 425 187)	(2 108 753)	-	(3 538)	478 504	(63 953)	-	-
Financing									
of which									
Provincial roll-overs	-	-	-	-	3 538	3 538	63 953	-	-
Provincial cash resources	-	105 071	-	-	-	-	-	-	-
<b>Surplus/(deficit) after financing</b>	<b>(1 034 013)</b>	<b>(1 320 116)</b>	<b>(2 108 753)</b>	<b>-</b>	<b>-</b>	<b>482 042</b>	<b>-</b>	<b>-</b>	<b>-</b>

The department ended 2007/08 with a deficit of R1.034 billion, mainly related to the increase in *Compensation of employees* as a result of the implementation of the OSD for nurses, the filling of unbudgeted posts, as well as the high general and medical inflation rates. This trend continued into 2008/09, with a deficit of R1.320 billion resulting mainly from the carry-through costs of the OSD for nurses, the carry-through costs for the 2007 wage agreement and the transfer of the department's laboratory services to the National Health Laboratory Service (NHLS), as well as inflationary pressures on medically related *Goods and services*. In 2008/09, an additional R105.071 million was allocated from *Provincial cash resources* to partly fund the higher than anticipated 2008 wage agreement.

The significant deficit of R2.109 billion in 2009/10 resulted from pressures in *Compensation of employees* and *Goods and services*, the carry-through costs of various under-funded mandates, such as the OSD for nurses, as well as the first charge of R758 million against the department, being the first repayment (in terms of Section 34(2) of the PFMA) of the accumulated over-spending incurred in 2007/08 and 2008/09.

As was previously mentioned, in an effort to address the persistent over-spending, a joint Treasury/Health task team was established. The effect of the intervention, as well as cost-cutting, resulted in an expected under-spending in 2010/11 of R482.042 million (as at December 2010), mainly due to curbing fraud and the savings plan implemented by the department through the task team.

Total receipts are expected to increase from R22.117 billion in the 2010/11 Adjusted Appropriation, to R28.189 billion in 2013/14. An amount of R63.953 million is included against *Provincial cash resources* in 2011/12, being an approved roll-over from 2009/10 of commitments relating to the Hospital Revitalisation grant, which was under-spent in 2009/10. An amount of R224.909 million was under-spent against the grant in 2009/10 and the department was not in a position to spend this in 2010/11, thus a request was made for the full amount to be rolled over to 2011/12. To date, only the amount of R63.953 million has been approved.

The equitable share allocation shows sustained growth from 2007/08 to 2009/10. The increase from 2010/11 onward relates mainly to additional funding allocated in the 2008/09 budget process, but with the funding only commencing in 2010/11, for various health priorities, such as emergency medical services (R60 million), modernisation of tertiary services (R150 million), infrastructure development (R282 million) and the implementation of primary health care structures (R410 million). Further detail is provided in Section 5.2 below.

The provincial allocation is expected to increase from R18.192 billion in 2010/11, to R19.986 billion in 2011/12, R21.526 billion in 2012/13 and growing to R22.852 billion in 2013/14.

Conditional grant transfers increase from R3.925 billion in the 2010/11 Adjusted Appropriation to R5.337 billion in 2013/14. The department has been allocated nine national conditional grants over the seven-year period, and these are described in more detail below.

The ***Health Professionals Training and Development grant*** supports the department in providing the funding for operational costs associated with the training and development of health professionals, development and recruitment of medical specialists in under-served provinces, and to support and strengthen undergraduate teaching and training processes in health facilities, and the increase over the MTEF is related mainly to inflationary pressures.

The ***Hospital Revitalisation grant*** provides funding to enable provinces to plan, manage, modernise, rationalise and transform the infrastructure, health technology, monitoring and evaluation of hospitals and to transform hospital management and improve quality of care, in line with national policy objectives. Note that the funding for this grant will begin to be phased into the equitable share from 2013/14, resulting in a decrease in grant funding in that year.

The ***National Tertiary Services grant*** is used to enable provinces to plan, modernise, rationalise and transform the tertiary hospital service delivery platform in line with national policy objectives, including improving access and equity.

The ***Comprehensive HIV and AIDS grant*** is provided to enable the sector to develop effective and integrated management of HIV and AIDS, to support the implementation of the National Operational Plan for Comprehensive HIV and AIDS treatment and care and to subsidise in part funding for the antiretroviral treatment programme.

The ***Health Infrastructure grant*** (previously the ***Infrastructure Grant to Provinces*** or IGP) is aimed at accelerating the construction, maintenance, upgrading and rehabilitation of new and existing health infrastructure. Note that this grant reduces as a result of National Treasury discontinuing the Infrastructure Grant to Provinces in its current form from 2011/12, and replacing it with a specific grant for Education, Health and Transport. The decrease in this grant results from a decision taken at a national level to change the way the grant is allocated between the three sectors. This grant in Health will supplement existing infrastructure budgets in health and will function in a similar manner to the IGP.

The ***Forensic Pathology Services grant*** is used to continue the development and provision of a comprehensive forensic pathology service in the province, to ensure impartial professional evidence for the criminal justice system concerning death due to unnatural causes. Note that the funding for this grant will be phased into the equitable share from 2012/13, and this will result in a decrease in funding of the grant from that year.



The **2010 World Cup Health Preparation Strategy grant** was provided as a once-off payment in the 2009/10 Adjustments Estimate as a contribution towards the final preparation strategies to be implemented by the Health sector for the 2010 World Cup.

The **Expanded Public Works Programme (EPWP) Grant for the Social Sector** is provided to subsidise non-profit organisations in home community-based care programmes to provide stipends to previously unpaid volunteers to maximise job creation and skills development in line with the EPWP guidelines.

The **EPWP Incentive grant** is used to enhance the number of full time equivalent jobs created through labour intensive infrastructure programmes.

## 4.2 Departmental receipts collection

A summary of revenue collected by the Department of Health over the seven-year period under review is reflected in Table 7.2. Details of these departmental receipts are given in *Annexure – Vote 7: Health*.

**Table 7.2: Details of departmental receipts**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Tax receipts	-	-	-	-	-	-	-	-	-
Casino taxes	-	-	-	-	-	-	-	-	-
Horse racing taxes	-	-	-	-	-	-	-	-	-
Liquor licences	-	-	-	-	-	-	-	-	-
Motor vehicle licences	-	-	-	-	-	-	-	-	-
Sale of goods and services other than capital assets	142 248	158 432	198 762	201 282	201 282	146 135	213 359	224 027	236 349
Transfers received	-	-	-	-	-	-	-	-	-
Fines, penalties and forfeits	-	-	11	-	-	8	-	-	-
Interest, dividends and rent on land	13	3	74	24	24	484	25	27	28
Sale of capital assets	29	-	14 678	19	19	-	20	21	22
Transactions in financial assets and liabilities	6 254	9 614	19 352	13 579	13 579	15 862	14 394	15 114	15 945
<b>Total</b>	<b>148 544</b>	<b>168 049</b>	<b>232 877</b>	<b>214 904</b>	<b>214 904</b>	<b>162 489</b>	<b>227 798</b>	<b>239 189</b>	<b>252 344</b>

The bulk of revenue collected by the department is received from patient fees and board for accommodation paid by staff at the department's institutions, collected under the category *Sale of goods and services other than capital assets*. In 2007/08, a standard monthly boarding allowance of R500 per person per month was introduced, which resulted in a significant increase in revenue under this category.

Most of the remaining revenue categories do not follow a predictable trend, and are not received on a regular basis. For this reason, projections for future years were formulated based on the information available (such as past trends). Other factors which influence the collection of revenue are as follows:

- Approximately 88 per cent of patients attending the department's health facilities are unable to make a meaningful contribution for the services provided;
- The provision of free services at clinics to women and children under 16 years of age, pensioners, the disabled, the unemployed and patients on the ART programme; and
- The ongoing review of the Uniform Patient Fee Structure (UPFS), resulting in more groups being included under the categories exempt from the payment of fees and the reduction in fees payable by certain categories of patients.

The department will, however, continue to strive to maximise revenue collection, and in this regard, training at the various institutions is ongoing.

The increasing trend against *Sale of goods and services other than capital assets* in 2008/09 and 2009/10 is attributable to a concerted campaign to ensure that claims for patients with private medical aid cover were made, as well as to the more stringent follow-up of claims to the Road Accident Fund. The decrease in this category in the 2010/11 Revised Estimate is partly due to patient demand over the 2010 World Cup period not materialising as anticipated. Also affecting this category in 2010/11 is the expiry of the agreement with the Road Accident Fund. The agreement allowed the department to raise older claims for

a limited period (1 February 2008 to 31 August 2010). While this will reduce revenue from 2010/11 onward, the department will be increasing the rate for boarding fees, which will largely offset the reduction. In addition, the recession has impacted on this category with more patients not able to pay for services.

The category *Sale of capital assets*, comprising income generated from the sale of redundant equipment including motor vehicles, is also expected to remain minimal over the MTEF, as most of the redundant assets are donated in line with departmental policy. The significant amount recovered in 2009/10 was mainly due to the unanticipated sale of vehicles.

*Transactions in financial assets and liabilities*, made up of income generated from the repayment of contract debt (such as bursaries), salary over-payments and refunds of previous years' expenditure, is expected to increase gradually from 2010/11 onward. The peak in 2009/10 is as a result of a concerted effort to clear debts.

### 4.3 Donor funding

Donor funding received by the department, which falls outside its voted fund allocation, is summarised in Tables 7.3 and 7.4 below.

Donor funds are used to address infrastructure requirements, service delivery needs and technical support to enhance service delivery. Spending on donor funds occurs as per the agreements concluded with the various donors. Where funds are available, the department makes arrangements for the incorporation of donor funded activities into its activities on termination of the agreements, to ensure sustainability of funded activities.

The majority of donations are small once-off allocations. The Global fund for HIV and AIDS patients was finalised in 2009/10 and the European Union PHC project is due to be finalised in 2010/11. The latter supports primary health care programmes, including HIV and AIDS.

In 2008/09 and 2009/10, the department also received a donation from Atlantic Philanthropies to the value of R12 million, which is being used to strengthen the capacity of nursing education institutions in the province. The funds will all be utilised by the end of 2011/12.

**Table 7.3: Details of donor funding**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Donor funding</b>	<b>140 895</b>	<b>91 985</b>	<b>36 072</b>	<b>2 636</b>	<b>1 102</b>	<b>1 102</b>	-	-	-
Atlantic Philanthropies	-	6 000	6 000	-	-	-	-	-	-
Bayer Health Care: Greys	-	10	-	-	-	-	-	-	-
Belgium Funding (Communicable Diseases)	800	-	-	-	-	-	-	-	-
Bhayla - Neurosurgery (IALCH)	20	-	-	-	-	-	-	-	-
Bhayla - Orthopaedic (IALCH)	60	-	-	-	-	-	-	-	-
Canadian HIV Trials Network (Edendale)	547	71	-	-	-	-	-	-	-
CoGTA	5 150	-	-	-	-	-	-	-	-
European Union PHC	21 500	20 160	9 318	2 636	-	-	-	-	-
Global fund for HIV and AIDS patients	108 503	64 194	17 353	-	-	-	-	-	-
Grey's Canadian Trial	-	674	-	-	-	-	-	-	-
HWSETA Learnership - Head Office	-	280	-	-	-	-	-	-	-
HWSETA Learnership - Mseleni and Mosvold	-	441	42	-	-	-	-	-	-
HWSETA Learnership - Pharmacy	-	-	-	-	75	75	-	-	-
HWSETA Learnership - PMMH	-	-	96	-	-	-	-	-	-
HWSETA Learnership - St Aiden's	329	115	263	-	-	-	-	-	-
Impumelelo Trust Innovation	-	40	-	-	-	-	-	-	-
Rashid Suliman & Associates	3	-	-	-	-	-	-	-	-
TB Global Fund	3 983	-	-	-	-	-	-	-	-
UNICEF: ilembe District	-	-	3 000	-	-	-	-	-	-
S.A. Breweries	-	-	-	-	100	100	-	-	-
Ben Booysen	-	-	-	-	1	1	-	-	-
CMC DI Ravenna	-	-	-	-	150	150	-	-	-
HWSETA Learnership - HIV/AIDS Support	-	-	-	-	76	76	-	-	-
HWSETA Learnership - Unemployed Graduates	-	-	-	-	700	700	-	-	-
<b>Total</b>	<b>140 895</b>	<b>91 985</b>	<b>36 072</b>	<b>2 636</b>	<b>1 102</b>	<b>1 102</b>	-	-	-

Table 7.4: Details of payments and estimates of donor funding

R thousand	Audited Outcome			Main	Adjusted	Revised	Medium-term Estimates		
	2007/08	2008/09	2009/10	Appropriation	Appropriation	Estimate	2011/12	2012/13	2013/14
<b>Donor funding</b>	<b>14 480</b>	<b>140 193</b>	<b>41 571</b>	<b>18 223</b>	<b>17 961</b>	<b>14 666</b>	<b>10 261</b>	-	-
Agouron A Pfizer (Grey's)	24	1	-	-	-	-	-	-	-
Astra Zeneca (Grey's)	25	36	7	200	216	216	-	-	-
Atlantic Philanthropies	-	-	1 537	6 000	4 463	1 920	8 543	-	-
Bayer Health Care: Greys	-	-	-	-	10	10	-	-	-
Belgium Funding (Communicable Diseases)	359	-	-	-	-	-	-	-	-
Bhayla - Neurosurgery (IALCH)	-	20	-	-	-	-	-	-	-
Bhayla - Orthopaedic (IALCH)	-	-	46	-	14	14	-	-	-
Braun (IALCH)	-	8	-	-	-	-	-	-	-
Bristol-Myers Squibb (Ladysmith)	40	43	-	-	-	-	-	-	-
Canadian HIV Trials Network (Edendale)	325	242	309	-	42	42	-	-	-
CoGTA	2 215	-	1 856	-	1 079	1 079	-	-	-
Dept of Water Affairs & Forestry (Environ HO)	31	237	-	-	124	124	-	-	-
European Union PHC	10 632	16 966	15 500	9 259	7 722	7 722	-	-	-
Global fund for HIV and AIDS patients	-	121 943	15 890	-	1 463	1 463	-	-	-
Grey's Canadian Trial	-	119	519	-	89	36	-	-	-
HWSETA Learnership - Head Office	-	-	185	-	95	95	-	-	-
HWSETA Learnership - Mseleni and Mosvold	-	456	62	-	145	145	-	-	-
HWSETA Learnership - Pharmacy	30	85	-	-	6	81	-	-	-
HWSETA Learnership - PMMH	-	-	1	-	95	95	-	-	-
HWSETA Learnership - St Aiden's	349	-	328	37	65	233	-	-	-
Impumelelo Trust Innovation	-	16	-	-	24	24	-	-	-
Johnson and Johnson (IALCH)	2	-	-	-	-	-	-	-	-
Orthomedics (IALCH)	-	1	-	-	-	-	-	-	-
Phillips Medical Systems	16	-	-	-	-	-	-	-	-
Rashid Suliman & Associates	4	-	3	-	2	2	-	-	-
Synthesis	5	13	-	-	-	-	-	-	-
TB Global Fund	423	-	2 580	1 199	1 759	41	1 718	-	-
UNICEF: ilembe District	-	-	2 721	1 500	279	279	-	-	-
Zinc Study (Nu Health & Pfizer)(Grey's)	-	7	27	28	18	18	-	-	-
S.A. Breweries	-	-	-	-	100	100	-	-	-
Ben Booysen	-	-	-	-	1	1	-	-	-
CMC DI Ravenna	-	-	-	-	150	150	-	-	-
HWSETA Learnership - HIV/AIDS Support	-	-	-	-	-	76	-	-	-
HWSETA Learnership - Unemployed Graduates	-	-	-	-	-	700	-	-	-
<b>Total</b>	<b>14 480</b>	<b>140 193</b>	<b>41 571</b>	<b>18 223</b>	<b>17 961</b>	<b>14 666</b>	<b>10 261</b>	-	-

It is noted that spending on the donor funds from 2008/09 to 2010/11 (Table 7.4) exceeds receipts (Table 7.3). This is due to the roll-over of unspent receipts from previous financial years off-setting expenditure incurred in future years. These roll-overs were mainly related to the Global fund for HIV and AIDS patients, the funding for the European Union PHC project and the funding provided by Atlantic Philanthropies. Conversely, in 2007/08, receipts exceeded spending as funding was received late in the financial year (mainly the Global fund for HIV and AIDS patients) with little time left to spend, and a roll-over to 2008/09 was necessary.

Only two sources of funding, namely Atlantic Philanthropies and the TB Global Fund, are committed for roll-over to 2011/12, at this stage.

## 5. Payment summary

This section provides information pertaining to the vote as a whole at an aggregated level, including payments and budgeted estimates in terms of programmes and economic classification. Further details are given in Section 6 below, as well as in the *Annexure – Vote 7: Health*.

### 5.1 Key assumptions

The department applied the following broad assumptions when compiling the budget:

- Provision was made for the R800 per month housing allowance for staff on levels 1 to 10 as per the 2010 wage agreement, as well as the annual 1.5 per cent pay progression.
- Provision was made for the carry-through costs of the 2010 wage agreement and an inflationary wage adjustment of 5.5 per cent for each of the three years of the 2011/12 MTEF.
- Where feasible, headline CPI indicators were used to calculate inflation related items.

- Provision has been made for the funding of the municipal clinics as transfer payments from 2010/11, as the negotiations for the provincialisation of these clinics are still not finalised.
- The cost-cutting measures as defined in Provincial Treasury Circular PT (1) of 2010/11 (as reissued by the Provincial Treasury in 2011/12) will continue to be adhered to over the 2011/12 MTEF.
- Provision has been made for the filling of vacant posts to enable the department to meet its service delivery needs. However, if the moratorium on the filling of non-critical posts is not lifted, these funds may be reallocated in the Adjustments Estimate process.

## 5.2 Additional allocations for the 2009/10 to 2011/12 MTEF

Table 7.5 shows additional funding received by the department over the three MTEF periods: 2009/10, 2010/11 and 2011/12. Note that the table reflects only the provincial additional allocations, and excludes additional allocations in respect of conditional grants.

The purpose of such a table is two-fold. Firstly, it shows the quantum of additional funding allocated to the department in the past and current MTEF periods. Secondly, it indicates the policies and purposes for which the additional funding was allocated.

In formulating allocations for the outer year, the carry-through effects of allocations in the base year are taken into account based on an incremental percentage for each of the outer years.

**Table 7.5: Summary of additional provincial allocations for 2009/10 to 2011/12 MTEF**

R thousand	2009/10	2010/11	2011/12	2012/13	2013/14
<b>2009/10 MTEF period</b>	<b>828 336</b>	<b>947 082</b>	<b>1 265 981</b>	<b>1 329 280</b>	<b>1 402 390</b>
Carry-through of 2008/09 Adjustments Estimate - 2008 wage agreement	325 292	345 460	365 152	383 410	404 497
Provincial priorities	10 000	19 785	42 000	44 100	46 526
<i>Tuberculosis - MDR/XDR</i>	10 000	-	-	-	-
<i>Reducing infant and child mortality</i>	-	19 785	42 000	44 100	46 526
National priorities	493 044	581 837	858 829	901 770	951 368
<i>Tuberculosis - MDR/XDR</i>	21 622	37 742	41 517	43 593	45 990
<i>Personnel costs for Health (shortfall OSD for nurses)</i>	237 841	237 232	236 624	248 455	262 120
<i>Reducing infant and child mortality</i>	86 488	129 399	172 090	180 695	190 633
<i>General health capacity</i>	-	-	301 158	316 216	333 608
<i>Medical goods and services</i>	147 093	177 464	107 440	112 812	119 017
<b>2010/11 MTEF period</b>		<b>891 247</b>	<b>1 046 000</b>	<b>1 110 734</b>	<b>1 160 637</b>
Carry-through of 2009/10 Adjustments Estimate		590 498	740 465	799 242	843 200
<i>2009 wage agreement</i>		373 442	417 368	461 730	487 125
<i>Variance: reallocation of OSD for Health</i>		1 390	428	(1 290)	(1 361)
<i>OSD for doctors and therapists (from Vote 6)</i>		215 666	322 669	338 802	357 436
Provincial priorities - Policy on Incapacity Leave and Ill Health Retirement (PILIR)		8 647	9 080	9 534	10 058
National priorities		292 102	296 455	301 958	307 379
<i>OSD for doctors (shares for actuarial work done)</i>		109 356	109 356	109 356	109 356
<i>OSD for therapists (shares for actuarial work done)</i>		94 947	94 047	94 047	94 047
<i>OSD for medical officers and specialists, pharmacists and EMS practitioners</i>		87 799	93 052	98 555	103 976
<b>2011/12 MTEF period</b>			<b>797 971</b>	<b>1 365 598</b>	<b>1 583 426</b>
Carry-through of 2010/11 Adjustments Estimate - 2010 wage agreement			434 471	419 915	399 439
National priorities			373 987	959 462	1 201 367
<i>Health technology</i>			3 496	5 018	5 626
<i>Nursing colleges</i>			5 593	5 352	4 501
<i>OSD doctor</i>			19 227	19 904	17 722
<i>OSD therapeutic</i>			63 449	71 254	63 151
<i>Maternal and child health</i>			39 852	83 798	98 454
<i>Personnel and goods</i>			91 241	179 472	203 097
<i>ARV 350 threshold</i>			-	83 631	70 325
<i>Registrars esp paed, obs</i>			17 479	33 452	42 195
<i>Family health team pilots/ models</i>			17 479	66 905	98 454
<i>Public hospital norms and standards</i>			41 950	81 289	74 825
<i>Phasing in of Forensic Pathology Services grant into ES</i>			-	135 594	143 481
<i>Phasing in of Hospital Revitalisation grant into ES</i>			-	-	109 695
<i>General policy adjustment (including family health teams and PHC re-engineering, public hospital norms and standards)</i>			74 221	193 792	269 840
National Cabinet decision to cut provinces by 0.3 per cent			(10 487)	(13 779)	(17 380)
<b>Total</b>	<b>828 336</b>	<b>1 838 329</b>	<b>3 109 952</b>	<b>3 805 612</b>	<b>4 146 454</b>

A summary of the additional funding (including various national and provincial priorities) allocated to the department in the 2009/10 MTEF process, is given below:

- Carry-through of the higher than anticipated 2008 wage agreement;
- Reducing child and infant mortality;
- Funding for MDR/XDR TB programmes;
- Funding for the Health Professionals Remuneration Review (OSD for nurses); and
- A provincial health baseline adjustment for general health capacity, as well as *Goods and services*.

Additional funding (again including various national and provincial priorities) was allocated to the department in the 2010/11 MTEF process, as detailed below:

- The carry-through costs of the higher than anticipated 2009 wage agreement;
- The reallocation of the funding for the OSD for doctors, pharmacists, dentists and emergency care workers from Vote 6: Provincial Treasury. Also in this regard was the carry-through costs of the variance in funding allocated in the 2009/10 Adjustments Estimate, as well as further funding for the OSD based on actuarial work done;
- Funding to provide for the Policy on Incapacity Leave and Ill Health Retirement (PILIR);
- New funding for the next phase of OSD, being that for therapists; and
- Further funding for the OSD for medical officers and medical specialists, pharmacists and EMS practitioners.

New funding in the 2011/12 MTEF includes carry-through costs of the higher than budgeted 2010 wage agreement. Also included are 13 national priorities (full list in Table 7.3), of which the main ones are:

- OSD for doctors and therapists;
- Maternal and child health;
- Personnel and goods;
- The ARV 350 CD4 count threshold;
- The phasing in of two conditional grants into the equitable share, with the Forensic Pathology Services grant beginning in 2012/13 and the Hospital Revitalisation grant commencing in 2013/14;
- A general policy adjustment (including family health teams and PHC re-engineering, public hospital norms and standards); and
- Also in the 2011/12 MTEF, National Cabinet took a decision to cut all national votes and the provincial equitable share by 0.3 per cent. The bulk of this equitable share reduction in KZN was sourced by capping the interest on the overdraft provision and by marginally decreasing the budgeted surplus of the province. The balance was sourced proportionately from all 16 provincial votes. The effect of this on the Department of Health is a slight reduction of R10.487 million, R13.779 million and R17.380 million over the 2011/12 MTEF.

As can be noted from all the above comments, the department has had additional funding for the OSDs for nurses, doctors, medical officers, specialists, pharmacists, dentists, emergency care workers and therapists. Hereafter, in this document, all the OSDs are referred to as the OSDs for medical personnel. Furthermore, there have been a number of annual wage agreements (since 2007) which have exceeded anticipated budgets and place pressure on the departments programmes. These are referred to as the various wage agreements.

### 5.3 Summary by programme and economic classification

The department has eight budget programmes in total, with four of them directly linked to the core functions of the department. Tables 7.6 and 7.7 below provide a summary of payments and estimates of these eight programmes, as well as per economic classification.

Note that, due to the over-spending from 2007/08 to 2009/10, trends are distorted in these prior years. However, despite the history of over-spending, the growth in the baseline is substantial.

**Table 7.6: Summary of payments and estimates by programme**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10		2010/11		2011/12	2012/13	2013/14
1. Administration	279 730	284 066	1 048 878	313 777	349 621	327 503	344 171	364 189	381 119
2. District Health Services	7 209 609	8 132 272	9 188 678	10 392 247	10 393 762	10 042 432	11 739 824	12 631 495	13 682 800
3. Emergency Medical Services	548 796	672 360	782 332	866 383	865 188	867 271	926 747	999 262	1 056 911
4. Provincial Hospital Services	3 883 814	4 378 814	5 071 290	5 549 184	5 736 592	5 853 243	6 366 182	6 863 490	7 199 701
5. Central Hospital Services	1 407 703	1 821 221	2 059 135	2 144 817	2 278 470	2 218 427	2 473 982	2 742 023	2 940 700
6. Health Sciences and Training	524 333	676 601	793 186	808 491	893 227	864 093	933 442	998 695	1 064 081
7. Health Care Support Services	12 649	34 209	27 528	10 764	10 764	10 764	13 971	15 170	16 004
8. Health Facilities Management	1 092 807	1 103 558	1 378 249	1 572 018	1 592 562	1 454 411	1 686 536	1 710 800	1 848 108
<b>Total</b>	<b>14 959 441</b>	<b>17 103 101</b>	<b>20 349 276</b>	<b>21 657 681</b>	<b>22 120 186</b>	<b>21 638 144</b>	<b>24 484 855</b>	<b>26 325 124</b>	<b>28 189 424</b>
Unauth. exp. (1 <sup>st</sup> charge) not available for spending	-	-	(758 000)	-	-	-	-	-	-
<b>Baseline available for spending after 1<sup>st</sup> charge</b>	<b>14 959 441</b>	<b>17 103 101</b>	<b>19 591 276</b>	<b>21 657 681</b>	<b>22 120 186</b>	<b>21 638 144</b>	<b>24 484 855</b>	<b>26 325 124</b>	<b>28 189 424</b>

Note: Programme 1 includes MEC remuneration: Salary: R1 491 514

**Table 7.7: Summary of payments and estimates by economic classification**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10		2010/11		2011/12	2012/13	2013/14
<b>Current payments</b>	<b>13 543 139</b>	<b>15 467 893</b>	<b>17 550 235</b>	<b>19 489 701</b>	<b>19 895 546</b>	<b>19 483 495</b>	<b>21 844 207</b>	<b>23 590 845</b>	<b>25 479 507</b>
Compensation of employees	8 643 767	10 077 044	11 367 849	12 739 583	13 231 652	13 153 297	14 837 633	15 854 113	17 097 169
Goods and services	4 899 372	5 390 849	6 182 386	6 750 118	6 663 894	6 330 198	7 006 574	7 736 732	8 382 338
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>345 325</b>	<b>446 661</b>	<b>495 327</b>	<b>518 832</b>	<b>565 661</b>	<b>573 015</b>	<b>522 821</b>	<b>549 953</b>	<b>576 116</b>
Provinces and municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Departmental agencies and accounts	17 119	39 957	34 312	18 640	18 401	18 401	22 137	24 133	25 009
Universities and technikons	-	40	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	199 011	243 734	278 846	313 614	296 617	296 617	266 787	280 227	295 639
Households	66 385	112 437	101 111	95 658	115 387	122 946	139 724	146 709	151 148
<b>Payments for capital assets</b>	<b>1 070 936</b>	<b>1 188 449</b>	<b>1 545 699</b>	<b>1 649 148</b>	<b>1 658 217</b>	<b>1 578 435</b>	<b>2 117 827</b>	<b>2 184 326</b>	<b>2 133 801</b>
Buildings and other fixed structures	623 762	635 593	1 005 258	1 097 525	1 117 217	916 524	1 357 938	1 295 069	1 436 729
Machinery and equipment	429 978	552 856	540 441	551 623	540 202	661 113	759 889	889 257	697 072
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	17 196	-	-	-	798	798	-	-	-
<b>Payments for financial assets</b>	<b>41</b>	<b>98</b>	<b>758 015</b>	<b>-</b>	<b>762</b>	<b>3 199</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>14 959 441</b>	<b>17 103 101</b>	<b>20 349 276</b>	<b>21 657 681</b>	<b>22 120 186</b>	<b>21 638 144</b>	<b>24 484 855</b>	<b>26 325 124</b>	<b>28 189 424</b>
Unauth. exp. (1 <sup>st</sup> charge) not available for spending	-	-	(758 000)	-	-	-	-	-	-
<b>Baseline available for spending after 1<sup>st</sup> charge</b>	<b>14 959 441</b>	<b>17 103 101</b>	<b>19 591 276</b>	<b>21 657 681</b>	<b>22 120 186</b>	<b>21 638 144</b>	<b>24 484 855</b>	<b>26 325 124</b>	<b>28 189 424</b>

In terms of Section 34(2) of the PFMA, the department was liable for the repayment of previous years' over-expenditure, resulting in a first charge against the budget. In 2009/10, an instalment of R758 million was implemented against the budget. This is reflected as a footnote in Tables 7.6 and 7.7 above. The first charge amounts are included under Programme 1: Administration against *Payments for financial assets*. This was not continued in 2010/11, as the 2009/10 first charge was not fully achieved and exacerbated the spending pressures in that year. The final decision regarding the over-spending will be taken by SCOPA.

The above tables show substantial growth in all programmes over the period under review. The increase in conditional grants accounts for a significant portion of this increase. The notable increase in 2008/09 pertains to the carry-through costs for the OSDs for medical personnel, the management of MDR/XDR TB in the province and the high headline CPI during that year. In addition, funding was provided for the wage agreement, as well as a significant increase in the Comprehensive HIV and AIDS grant.

The major growth from 2008/09 to 2009/10 is due to continued spending pressures in the service delivery programmes caused by the various OSDs for medical personnel, wage agreements, and medical inflation. Additional funding was also provided for MDR/XDR TB and for the reduction of infant and child mortality, and an additional R241 million was allocated to the Comprehensive HIV and AIDS grant to cater for an increased uptake of anti-retroviral (ARV) patients.

Additional funding provided in 2010/11, with carry-through costs for the remainder of the MTEF, included funding for emergency medical services for the 2010 World Cup, infrastructure development, the modernisation of tertiary services, the implementation of primary health care structures and PILIR. Also provided is the previously mentioned funding for the OSDs for medical personnel. Funding was also allocated in 2010/11 for the EPWP Grant for the Social Sector, to provide stipends for home/community based care-givers. The increased 2010/11 Adjusted Appropriation includes funding for the EPWP Incentive grant, the 2010 wage agreement, OSDs for medical personnel and for the Comprehensive HIV and AIDS grant, for the greater than expected uptake of male circumcision.

Apart from the carry-through costs from previous financial years, additional amounts with carry-through costs provided in 2011/12 include funding for an increase in general health capacity and national priorities, including funding for personnel and goods and services, OSDs for medical personnel, maternal and child health, and public hospitals norms and standards.

The minimal increase in Programme 1 in 2008/09 results from enforced savings aimed at reducing overall spending. Additional funding was reprioritised, mainly from Programme 2, in the 2010/11 Adjustments Estimate to provide for interim personnel capacity through the use of consultants and to cover the costs of extensive forensic investigations at head office related to fraud. Once-off funding was also reprioritised to replace redundant computer equipment and file servers in order to address the risk of loss of essential data. The decrease in the 2010/11 Revised Estimate relates mainly to the filling of posts being slower than anticipated, as well as cost-cutting. The 2011/12 MTEF figures include an inflationary increase only.

Over the seven years, Programme 2: District Health Services shows a gradual increase from approximately 48 per cent of the total allocation in 2007/08, to 49 per cent in 2013/14. The sustained increase over the period relates to the cost of living adjustments and the substantial increase in the Comprehensive HIV and AIDS grant, as well as the department's policy of improving the services within primary health care in preference to the more expensive higher level services. The significant increase from 2008/09 and 2009/10 pertains mainly to carry-through costs of the various wage agreements, the additional allocation to HIV and AIDS to assist with the uptake of ARV patients, OSDs for medical personnel and funding for the reduction of infant and child mortality. The increase in the 2010/11 Main Appropriation relate primarily to carry-through costs, funding for the implementation of primary health care structures, the implementation of PILIR and the OSDs for medical personnel. The 2010/11 Adjusted Appropriation includes additional funding for the medical personnel OSDs, as well as R20 million for the Comprehensive HIV and AIDS grant. The 2011/12 MTEF includes funding for general capacity building and additional funding for national priorities (as listed in Table 7.3).

In Programme 3: Emergency Medical Services, the continued drive to improve emergency medical services is reflected in the increasing trends over the seven-year period. The increase between 2008/09 and 2009/10 relates to funding for ambulances for the 2010 World Cup, as well as the OSDs for medical personnel. The increase in 2010/11 includes an additional R60 million for the 2010 World Cup, and the carry-through costs of previous wage agreements. The 2011/12 MTEF allocations include funding for carry-through costs of the 2010 wage agreement, as well as for improving emergency medical services in line with the policy to meet the national norms for this service.

Programme 4: Provincial Hospital Services shows a decrease in the share of total funding, in line with the department's policy of shifting funds from the higher levels of service to the more cost effective primary health care levels of service. The increase from 2009/10 onward relates mainly to additional funding for the carry-through costs of the OSDs for medical personnel, improvements to conditions of service and inflationary pressures on medical supplies, as well as for the management of MDR/XDR TB. A portion of the funding allocated in the 2010/11 MTEF for the increase in general health capacity is reflected in the 2011/12 MTEF, as well as funding for national priorities, namely health technology, registrars, improvement to public hospital norms and standards, among others.

The overall increase in the trends in Programme 5: Central Hospital Services from 2008/09 to 2013/14 relates mainly to the provision of funding for the development and improvement of tertiary services in uMgungundlovu and uThungulu. Reprioritised funding was also allocated for the enhancement of these services in line with the modernisation of the tertiary services programme. The higher trend in 2008/09 is

mainly due to approximately R51 million for *Machinery and equipment* at Inkosi Albert Luthuli Central Hospital (quarterly payment of the Public Private Partnership (PPP) unitary charge) not being paid in 2007/08, but included in the expenditure for 2008/09. The impact of the introduction of the various OSDs for medical personnel, as well as the higher than average medical inflation and the rand/dollar exchange rate (especially in 2008/09), are also reflected in the trends. Funding for the OSDs for medical personnel was provided in the 2010/11 Main Appropriation, as well as an additional R150 million, with carry-through costs, for continued improvement of the modernisation of tertiary services. The 2010/11 Adjusted Appropriation includes additional funding for the 2010 wage agreement and for OSDs for medical personnel. The 2011/12 MTEF includes funding for national priorities, namely for additional registrars, improvement to public hospital norms among others.

Programme 6: Health Sciences and Training shows consistent growth. The increases in 2008/09 and 2009/10 relate to the carry-through costs of the OSDs for medical personnel, the various wage agreements, as well as the extension of the medical internship programme to two years. The increase in the 2010/11 Adjusted Appropriation includes an additional allocation for the OSDs for medical personnel, for training personnel previously employed as youth ambassadors, for the 2010 wage agreement, as well as to offset potential over-expenditure at nursing colleges and medical interns. Additional funding was reprioritised for bursaries. In the 2011/12 MTEF, funding for national priorities was given to nursing colleges, a portion of which was for personnel and goods and services, and will be used for training personnel, previously employed as youth ambassadors, in nursing skills.

With regard to Programme 7: Health Care Support Services, funding is provided to enable the provincial Medical Supply Centre to carry sufficient medical stock to meet demand. The increase in 2008/09 relates to the increased demand for ART, as well as medication for MDR/XDR TB. The 2009/10 amount was provided to maintain current stock levels and to provide for the vaccines required for the reduction of child morbidity and mortality. The reduction from 2010/11 relates to the lack of storage facilities to store additional stock. Funding for inflationary increases only was provided from 2010/11 onward.

Programme 8: Health Facilities Management shows a steady increase from 2008/09 to 2013/14, mainly as a result of the increase in funds for the Hospital Revitalisation grant and the Health Infrastructure grant. The significant increase in 2009/10 includes approximately R143 million in respect of the Forensic Pathology Services grant, for which the department was under-funded, as well as expenditure for projects that were already on site, which could not be stopped without further costs to the department. Delays due to a lack of suitable building sites resulted in a roll-over of approximately R105 million not being approved, as the PFMA does not allow roll-overs over two consecutive years. The 2009/10 amount also includes under-expenditure of R224.909 million for the Hospital Revitalisation grant, due mainly to challenges with the tender process. Of this amount, R63.953 million was approved for roll-over and is included in the 2011/12 allocation. The increase in the Adjusted Appropriation includes R11.307 million for the EPWP Incentive grant, as well as R10 million reprioritised from Programme 2 (sub-programme: Forensic Pathology Services) to this programme to offset anticipated over-expenditure against the Forensic Pathology Services grant for the building of mortuaries. The reduced 2010/11 Revised Estimate is due to the anticipated under-spending of the Hospital Revitalisation grant of R117.436 million, mainly because of challenges experienced with the tender process, planning and the late approval of the Edendale Hospital project by the National Department of Health. The significant increase in 2011/12 results mainly from notable increases in the Health Infrastructure and the Hospital Revitalisation grants.

*Compensation of employees* shows a strong upward trend from 2008/09 to 2013/14, mainly due to the carry-through costs of the various OSDs for medical personnel, the unbudgeted filling of vacant posts in 2007/08 and the various wage agreements from 2007 to 2010. The decrease in the 2010/11 Revised Estimate relates mainly to the slow filling of posts, created to improve service delivery in primary health care and to reduce pressure on the higher levels of service. Additional amounts provided for the national priorities in 2011/12, with carry-through costs over the remainder of the period, include funding for OSDs for medical personnel, registrars, funding for health team pilots and models, among others.

*Goods and services* shows an increase of some 59 per cent from R4.899 billion in 2007/08 to R8.380 billion in 2013/14. This increase is primarily related to the increase in demand for health services, the high rate of inflation on medical supplies and services, catering and fuel costs and the take-over of



provincial laboratories by the NHLS from 2007/08. Other contributing factors are the increasing demand for ART, the treatment of MDR/XDR TB in the province, the introduction of specific projects such as the reduction of infant and child mortality through immunisation in line with the 2014 MDGs, as well as a substantial increase in the Comprehensive HIV and AIDS grant. The decreasing trend from the 2010/11 Main to the Adjusted Appropriation and the Revised Estimate relates mainly to an over-allocation of funding for the 2010 World Cup. Also affecting this trend was the delay in distributing the budget to institutions due to restructuring of the service delivery programmes in line with national priorities, curbing fraud and the savings plan implemented by the department through the joint Health/Treasury task team. Included in the funding for 2011/12, together with carry-through costs, is funding for general capacity building, additional funding for national priorities including maternal and child health, among others. Furthermore, additional funding was allocated to provide ARV treatment to patients with a CD4 count of 350 for 2012/13 and 2013/14.

The decrease in *Transfers and subsidies to: Provinces and municipalities* in 2008/09 related mainly to the non-signing of service level agreements (SLA) by the municipalities and the devolution of environmental services to the municipalities. The increase in the 2010/11 Adjusted Appropriation relates to funding provided for the signing of the SLAs pertaining to 2008/09 and 2009/10. The minimal reduction from 2011/12 is due to the provincialisation of some of the municipal clinics. However, the take-over of the majority of the municipal clinics by the department is still in the process of negotiation and, until such time as agreement has been reached, funding will continue to be reflected under this category.

The increase in *Transfers and subsidies to: Departmental agencies and accounts* in 2008/09 relates primarily to an increase in the Medicine Trading Account, which is required to enable the provincial Medical Supply Centre to carry sufficient medical stock to meet demand. The Medicine Trading Account was further increased in 2009/10 to cater for additional stock for vaccines, related to the campaign to reduce child mortality. Inflation related increases only have been provided from 2010/11 to 2013/14.

The significant increase in *Transfers and subsidies to: Non-profit institutions* in 2008/09 is primarily due to the implementation and improved uptake of the National Integrated Plan (NIP) sites for orphaned and vulnerable children infected and affected by HIV and AIDS, funded by the department, in line with the national HIV and AIDS policy. The reduction in the 2010/11 Adjusted Appropriation and over the 2011/12 MTEF relates mainly to the decision by the department to close the NIP sites due to suspected fraud, and to manage these services centrally. The management of *Transfers and subsidies to: Non-profit institutions* is under review, as one of the activities of the joint Treasury/Health task team.

Over the seven-year period, *Payments for capital assets* shows an increase due to the ongoing focus on improving physical facilities. In addition, there has been a significant increase in the Hospital Revitalisation and Health Infrastructure grants, as well as for the development of forensic pathology services in the province, affecting mainly *Buildings and other fixed structures*. The significant increase in 2009/10 relates mainly to additional expenditure incurred for forensic pathology services, which was not covered by the conditional grant, as well as projects on site that could not be delayed or stopped without further cost to the department. The saving reflected in the 2010/11 Revised Estimate relates mainly to the under-expenditure against the Hospital Revitalisation grant, for which a roll-over will be requested.

#### 5.4 Summary of payments and estimates by district municipal area

Table 7.8 below summarises the departmental spending within district municipal area, excluding head office costs.

The distribution of funds within the municipal areas is aligned to the service delivery plan of the department, which is in line with the Provincial Spatial Economic Development Strategy (PSEDS) and the NHS 10-point plan, which includes the national health priorities.

**Table 7.8: Summary of payments and estimates by district municipal area**

R thousand	Audited Outcome	Revised Estimate	Medium-term Estimates		
	2009/10	2010/11	2011/12	2012/13	2013/14
eThekweni	7 550 975	8 421 791	9 540 201	10 259 548	10 989 615
Ugu	1 191 818	1 262 289	1 429 920	1 537 739	1 647 164
uMgungundlovu	3 313 612	2 608 248	2 954 622	3 177 406	3 403 509
Uthukela	807 798	897 022	1 016 146	1 092 766	1 170 526
Umzinyathi	874 779	932 332	1 056 146	1 135 781	1 216 603
Amajuba	913 056	983 951	1 114 619	1 198 664	1 283 960
Zululand	1 172 318	1 324 341	1 500 213	1 613 331	1 728 135
Umkhanyakude	1 019 381	1 202 534	1 362 230	1 464 944	1 569 189
uThungulu	1 607 598	1 866 024	2 113 831	2 273 218	2 434 979
Ilembe	870 186	942 234	1 067 362	1 147 843	1 229 523
Sisonke	736 866	869 875	985 394	1 059 695	1 135 102
<b>Total</b>	<b>20 058 387</b>	<b>21 310 641</b>	<b>24 140 684</b>	<b>25 960 935</b>	<b>27 808 305</b>

Currently, eThekweni has the highest anticipated spatial spending, totalling more than 37 per cent of the budget over the entire period. Owing to the influence of urbanisation, this district has a third of the population of KZN, many of whom are indigent and are living in informal settlements. It also provides high level health services, including central hospital services, to the rest of the province.

The spending in the uMgungundlovu area, which is the second highest share, includes costs relating to the main psychiatric services, as well as regional and tertiary services for the midlands region.

In order to meet the demand in the other districts, funds have been provided to continue to:

- Accelerate development in under-served areas including the Nkandla area in uThungulu and Msinga in Umzinyathi;
- Focus on the completion of existing projects, refurbishment and rehabilitation of existing community health centres and clinics, and where possible, expand more clinics to provide 24 hour availability;
- Strengthen mobile clinic services at district level;
- Provide an outreach service to enable doctors and medical personnel to visit clinics and hospitals in remote areas;
- Develop MDR/XDR TB facilities in uMgungundlovu, uThungulu, Ugu and Zululand; and
- Continue to develop regional hospital services in all districts, and tertiary services at Ngwelezana/ Lower Umfolozi Hospitals (uThungulu) and Grey's Hospital (uMgungundlovu).

## 5.5 Summary of conditional grant payments and estimates

Tables 7.9 and 7.10 below illustrate conditional grant payments and estimates for the period 2007/08 to 2013/14. Details of the purpose of the nine conditional grants can be found in Section 4.1.

The conditional grant transfers increase from R2.184 billion in 2007/08 to R5.337 billion in 2013/14. The varying trends in the individual grants relate mainly to funding for specific projects, as well as roll-overs.

**Table 7.9: Summary of conditional grant payments and estimates by name**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Health Professional Training and Development grant	201 992	212 092	222 425	235 771	235 771	235 771	249 917	261 860	276 262
Hospital Revitalisation grant	333 523	330 404	224 909	500 815	500 815	383 379	611 651	566 605	533 432
National Tertiary Services grant	789 578	911 898	984 488	1 102 585	1 102 585	1 102 585	1 201 831	1 303 824	1 408 053
Comprehensive HIV and AIDS grant	466 922	757 615	1 121 583	1 498 811	1 518 811	1 518 811	1 889 427	2 246 099	2 675 081
Health Infrastructure grant (was IGP)	259 758	294 832	359 717	401 055	400 238	400 238	358 471	393 367	415 002
Forensic Pathology Services grant	132 201	149 093	278 033	152 406	152 406	152 406	161 550	-	-
2010 World Cup Health Preparation Strategy grant	-	-	43	-	3 538	3 538	-	-	-
EPWP Grant for Social Sector	-	-	-	2 688	2 676	2 676	25 775	27 662	29 253
EPWP Incentive grant	-	-	-	-	11 307	11 307	-	-	-
<b>Total</b>	<b>2 183 974</b>	<b>2 655 934</b>	<b>3 191 198</b>	<b>3 894 131</b>	<b>3 928 147</b>	<b>3 810 711</b>	<b>4 498 622</b>	<b>4 799 417</b>	<b>5 337 083</b>

Table 7.10: Summary of conditional grant payments and estimates by economic classification

R thousand	Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates			
	Audited	Audited	Audited				2010/11	2011/12	2012/13	2013/14
	2007/08	2008/09	2009/10							
Current payments	1 488 797	1 876 694	2 275 886	2 978 153	3 000 862	3 000 862	3 508 364	3 930 143	4 429 907	
Compensation of employees	494 434	822 927	913 526	1 043 353	1 043 353	1 043 353	1 151 628	1 170 060	1 318 649	
Goods and services	994 363	1 053 767	1 362 360	1 934 800	1 957 509	1 957 509	2 356 736	2 760 083	3 111 258	
Other										
Transfers and subsidies to:	66	6 832	2 448	572	572	572	610	85	85	
Provinces and municipalities	10	11	82	77	77	77	85	85	85	
Departmental agencies and accounts										
Universities and technikons										
Foreign governments and international organisations										
Public corporations and private enterprises										
Non-profit institutions										
Households	56	6 821	2 366	495	495	495	525	-	-	
Payments for capital assets	695 111	772 408	912 864	915 406	926 713	809 277	989 648	869 189	907 091	
Buildings and other fixed structures	462 529	467 731	660 338	570 404	581 711	464 275	640 551	492 671	386 724	
Machinery and equipment	215 455	304 677	252 526	345 002	345 002	345 002	349 097	376 518	520 367	
Heritage assets										
Specialised military assets										
Biological assets										
Land and sub-soil assets										
Software and other intangible assets	17 127	-	-	-	-	-	-	-	-	
Payments for financial assets										
Total	2 183 974	2 655 934	3 191 198	3 894 131	3 928 147	3 810 711	4 498 622	4 799 417	5 337 083	

The significant growth in the two infrastructure conditional grants, namely the Hospital Revitalisation grant and the Health Infrastructure grant, relates primarily to the intensive drive to improve the physical health facilities within the province. The reduction in the Hospital Revitalisation grant in 2009/10 relates to an under-spending of R224.909 million due to challenges experienced with the tender processes, for which a roll-over to 2011/12 was requested, as was mentioned previously. However, of this amount, only R63.953 million was rolled over into 2011/12.

The variable trend in the Forensic Pathology Services grant, which was provided to fund the department for the take-over of the forensic pathology services from the South African Police Services, results from a roll-over not being approved (see below) and challenges experienced with the tender process. Despite an agreement in 2007/08 with the National Department of Health to fund the amended construction time frame, a request for a roll-over from 2007/08 to 2008/09 was not approved, resulting in over-expenditure against the grant in 2008/09 and 2009/10, as buildings under construction could not be halted without further cost to the department. The funds provided in the 2010/11 Main and Adjusted Appropriation for this grant provide for inflationary increases only. The ceasing of funding in 2012/13 and 2013/14 relates to the phasing out of the grant to be included in the department's equitable share. Note that, with the grant being phased into the equitable share from 2012/13, there will be a decrease in funding for the function of R34.033 million in 2012/13 and R26.146 million in 2013/14 (not shown in the Table), as no matching increase has been allocated to the province's equitable share.

The variance in the trend of the National Tertiary Services grant relates mainly to additional funding provided for the modernisation of tertiary services from 2007/08 onward.

The substantial growth in the Comprehensive HIV and AIDS grant indicates the critical importance placed on managing this pandemic. The major increase between 2008/09 and 2010/11 relates mainly to the provision of additional funding to enable an increasing number of patients to be placed on ARV therapy, as well as to provide for the male circumcision programme. Additional funding is provided in the 2011/12 MTEF to allow for the demand and increased growth of these HIV and AIDS programmes.

The trend in the Health Professional Training and Development grant over the seven-year period reflects inflationary increases only.

The increase in *Compensation of employees* from 2008/09 results primarily from the decision to incorporate the payment of registrars (medical specialists in training) into the Health Professional Training and Development grant, as well as the increase in the number of HIV and AIDS projects driven by the improved HIV and AIDS ARV policy, resulting in the need to employ more staff, plus the implementation of the OSDs for medical personnel.

The significant increase in *Goods and services* from 2009/10 onward is mainly due to the increase in the funding provided for ARV, the anticipated increase in the uptake of additional patients on the ARV programme, as well as the provision for the male circumcision programme.

The increasing trend in *Buildings and other fixed structures* over the seven-year period relates to the drive to improve the physical infrastructure, with significant increases provided in the Hospital Revitalisation and Health Infrastructure grants for this purpose. The inflated figure reflected in 2009/10 relates to the over-expenditure of approximately R143 million against the Forensic Pathology Services grant, as mentioned above. This also accounts for the apparent decrease in the 2010/11 Main Appropriation. The further decrease in the 2010/11 Revised Estimate is due to the expected under-spending on the Hospital Revitalisation grant of approximately R117 million, for which a roll-over to 2011/12 will be requested.

The fluctuating trend in *Machinery and equipment* relates to the variation in the business plans of the grants which relate to this category. The increased amount in 2008/09 results from an additional payment of R51 million in respect of the PPP with Inkosi Albert Luthuli Central Hospital (IALCH), which was not paid in 2007/08, being included in this expenditure. The reduction in this category in 2009/10 relates to the above-mentioned under-expenditure on the Hospital Revitalisation grant. The allocations in the outer years have been made in terms of the business plans of the relevant grants.

## 5.6 Summary of infrastructure payments and estimates

Table 7.11 below presents a summary of infrastructure payments and estimates by categories for Vote 7. Detailed information on infrastructure is given in the *Annexure – Vote 7: Health*. The infrastructure trend shows a substantial increase over the seven-year period, resulting from a focussed drive by the department to improve its physical facilities and medical equipment to an acceptable level.

Over the period under review, the department provided for the building of additional community health centres and community health clinics in line with its service delivery plan, as well as the upgrading or replacement of unsuitable clinics.

**Table 7.11: Summary of infrastructure payments and estimates**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>New and replacement assets</b>	<b>350 795</b>	<b>450 328</b>	<b>727 950</b>	<b>613 925</b>	<b>623 925</b>	<b>579 092</b>	<b>725 622</b>	<b>633 340</b>	<b>873 569</b>
<b>Existing infrastructure assets</b>	<b>742 012</b>	<b>647 394</b>	<b>646 851</b>	<b>952 989</b>	<b>963 479</b>	<b>871 474</b>	<b>955 585</b>	<b>1 072 435</b>	<b>969 553</b>
Upgrades and additions	113 551	261 172	249 592	499 751	499 751	450 219	531 782	649 881	582 569
Rehabilitation, renovations and refurbishments	272 290	53 722	135 798	121 041	131 531	131 531	178 292	176 005	91 050
Maintenance and repairs	356 171	332 500	261 461	332 197	332 197	289 724	245 511	246 549	295 934
<b>Infrastructure transfers</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Current									
Capital									
<b>Capital infrastructure</b>	<b>736 636</b>	<b>765 222</b>	<b>1 113 340</b>	<b>1 234 717</b>	<b>1 255 207</b>	<b>1 160 842</b>	<b>1 435 696</b>	<b>1 459 226</b>	<b>1 547 188</b>
<b>Current infrastructure</b>	<b>356 171</b>	<b>332 500</b>	<b>261 461</b>	<b>332 197</b>	<b>332 197</b>	<b>289 724</b>	<b>245 511</b>	<b>246 549</b>	<b>295 934</b>
<b>Total</b>	<b>1 092 807</b>	<b>1 097 722</b>	<b>1 374 801</b>	<b>1 566 914</b>	<b>1 587 404</b>	<b>1 450 566</b>	<b>1 681 207</b>	<b>1 705 775</b>	<b>1 843 122</b>

The 2007/08 expenditure against *New and replacement assets* includes an amount of R91.800 million, relating to the Hospital Revitalisation grant, rolled over from the previous year. The decreasing trend in *New and replacement assets* and the increasing trend in *Existing infrastructure assets* in 2010/11 to 2012/13 relates to a conscious decision made by management to focus on the maintenance, upgrading, rehabilitation and refurbishment of existing infrastructure. This decision was necessary because no funding is available for the commissioning of new facilities and the creation of posts.

*Maintenance and repairs* expenditure shows a fluctuating trend over the period. The decrease in 2008/09 results from enforced savings, in an effort to limit over-expenditure on the vote as a whole, while the decrease in the 2010/11 Revised Estimate is caused by the late provision of the budget to institutions as a result of intensive restructuring of the department's budget by the joint Treasury/Health task team. The category also decreases in 2011/12 due to reprioritisation to capital projects.

## 5.7 Summary of Public Private Partnerships

Table 7.12 below provides a summary of PPP projects in the department. In 2002/03, the department entered into a PPP with the Impilo Consortium (Pty) Ltd. The agreement covered the provision of equipment, information management and technology and facilities management for the IALCH. This agreement enables the department to focus on the clinical services at the hospital, and to promote the hospital as a central referral hospital, operating at the highest standards in terms of quality, efficiency, effectiveness and patient focused care.

**Table 7.12: Summary of departmental Public-Private Partnership projects**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Projects under implementation</b>	<b>443 673</b>	<b>593 328</b>	<b>543 190</b>	<b>696 852</b>	<b>696 582</b>	<b>595 952</b>	<b>625 750</b>	<b>657 037</b>	<b>689 889</b>
PPP unitary charge	443 673	593 328	543 190	696 852	696 582	595 952	625 750	657 037	689 889
Penalties (if applicable)									
Advisory fees									
Project monitoring costs									
Revenue generated (if applicable)									
Contingent liabilities (information)									
<b>Proposed projects</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Advisory fees									
Project team costs									
Site acquisition costs									
Other project costs									
<b>Total</b>	<b>443 673</b>	<b>593 328</b>	<b>543 190</b>	<b>696 852</b>	<b>696 582</b>	<b>595 952</b>	<b>625 750</b>	<b>657 037</b>	<b>689 889</b>

Payments made for services rendered are index-linked and are thus subject to movements in the headline CPI. Payments over the 2011/12 MTEF have been calculated based on current estimates. The increase in 2008/09 relates to a quarterly payment of R51 million which was not made in 2007/08 (as mentioned earlier). The decrease in the 2010/11 Revised Estimate is due to over-budgeting in anticipation of high medical inflation and the deterioration of the Rand/Dollar exchange rate, neither of which materialised.

## 5.8 Transfers to public entities listed in terms of Schedule 3 of the PFMA – Nil

## 5.9 Transfers to other entities

Table 7.13 provides a list of entities that receive funding from the department for the provision of general clinic services, HIV and AIDS services, district hospital services, general hospital services and tuberculosis services. The varying trend across the seven years relates mainly to the inclusion/exclusion of entities, as well as to the implementation of OSD for doctors in certain institutions which qualify.

The increase in 2008/09 relates mainly to the introduction of NIP sites in line with the national policy relating to HIV and AIDS, as well as the higher than anticipated 2008 wage agreement.

The increase in overall transfers in 2009/10 relates to the finalisation of the Global Fund in December 2008. This fund supported activities at the Dream Centre, Genesis Care Centre and Ethembeni via donor funding. With the cessation of donor funding in 2008/09, the department made provision to continue the financial support from the equitable share in 2009/10, to ensure the continuation of services provided by the entities. The funding for the Dream Centre ceased in 2009/10 due to the closure of the centre as a result of fraudulent activities.

The effect of the higher than anticipated 2009 and 2010 wage agreements and the OSD for doctors is shown under those institutions which qualify for the state salary increases and is also reflected in the 2010/11 Adjusted Appropriation and Revised Estimate. These figures are reflected in the 2011/12 MTEF period, together with an inflationary increase. The overall decrease over the 2011/12 MTEF is caused by the closure of the HIV and AIDS NIP sites and the incorporation of these services into the department's operations under the sub-programme: Community Based Services within Programme 2.

Table 7.13: Summary of departmental transfers to other entities

R thousand	Sub-programme	Audited Outcome			Main	Adjusted	Revised	Medium-term Estimates		
		2007/08	2008/09	2009/10	Appropriation	Appropriation	Estimate	2011/12	2012/13	2013/14
					2010/11					
Austerville Halfway House	2.2: Comm. Hlth Clinics	333	417	505	474	480	480	509	534	564
Azalea House	2.2: Comm. Hlth Clinics	363	384	409	438	444	444	470	494	521
Bekulwandle Bekimpelo	2.2: Comm. Hlth Clinics	4 950	5 586	6 190	6 687	6 775	6 775	7 182	7 541	7 956
Benedictine Clinic	2.2: Comm. Hlth Clinics	275	294	313	335	339	339	360	378	399
Cheshire Home Educare	2.2: Comm. Hlth Clinics	92	-	-	-	-	-	-	-	-
Claremont Day Care Centre	2.2: Comm. Hlth Clinics	277	392	341	324	328	328	348	365	385
Day Care Club 91	2.2: Comm. Hlth Clinics	54	46	49	-	-	-	-	-	-
Day Care Club 92	2.2: Comm. Hlth Clinics	54	-	-	52	53	53	56	59	62
Dream Centre	2.2: Comm. Hlth Clinics	-	1 139	1 735	-	-	-	-	-	-
Durban School for the Deaf	2.2: Comm. Hlth Clinics	146	156	166	179	181	181	192	202	213
Ekuhanyeni Clinic	2.2: Comm. Hlth Clinics	138	49	-	-	-	-	-	-	-
Ekuhanyeni Clinic (AIDS step down centre)	2.2: Comm. Hlth Clinics	-	-	-	4 564	4 624	4 624	4 902	5 147	5 430
Elandskop Clinic	2.2: Comm. Hlth Clinics	331	354	377	403	408	408	433	455	479
Enkumane Clinic	2.2: Comm. Hlth Clinics	198	212	226	243	246	246	261	274	289
Ethembeni Care Centre	2.2: Comm. Hlth Clinics	-	600	3 917	3 405	3 450	3 450	3 657	3 840	4 053
Genesis Care Centre	2.2: Comm. Hlth Clinics	-	197	2 520	5 363	5 434	5 434	5 760	6 048	6 380
Happy Hour Various	2.2: Comm. Hlth Clinics	1 268	1 980	3 125	2 254	2 284	2 284	2 421	2 542	2 682
HIV and AIDS (NIP sites & HBC stipends)	2.2: Comm. Hlth Clinics	36 742	58 009	60 239	73 954	44 930	44 930	-	-	-
Hlanganani Ngothando	2.2: Comm. Hlth Clinics	92	353	375	179	181	181	192	202	213
Ikwezi Cripple Care	2.2: Comm. Hlth Clinics	1 006	1 179	1 254	1 344	1 362	1 362	1 443	1 515	1 599
Ikwezi District Nursing Services	2.2: Comm. Hlth Clinics	127	136	145	155	157	157	166	175	184
Jewel House	2.2: Comm. Hlth Clinics	167	267	284	304	308	308	326	342	362
Joan Tennant House	2.2: Comm. Hlth Clinics	152	289	-	-	-	-	-	-	-
John Peattie House	2.2: Comm. Hlth Clinics	713	1 046	1 113	1 192	1 208	1 208	1 280	1 344	1 418
Jona Vaughn Centre	2.2: Comm. Hlth Clinics	1 721	1 869	2 032	2 130	2 158	2 158	2 288	2 402	2 534
Lynn House	2.2: Comm. Hlth Clinics	273	267	592	633	641	641	680	714	753
Madeline Manor	2.2: Comm. Hlth Clinics	635	673	716	767	777	777	824	865	913
Masada Workshop	2.2: Comm. Hlth Clinics	68	46	62	67	68	68	72	76	80
Masibambeni Day Care Centre	2.2: Comm. Hlth Clinics	111	118	126	134	136	136	144	151	159
Matikwe Oblate Clinic	2.2: Comm. Hlth Clinics	358	383	408	436	442	442	468	491	519
Mhlumayo Clinic	2.2: Comm. Hlth Clinics	424	454	483	518	525	525	556	584	616
Noyi Bazi Oblate Clinic	2.2: Comm. Hlth Clinics	361	386	411	440	446	446	473	497	523
Philanjalo Hospice (step down centre)	2.2: Comm. Hlth Clinics	1 337	1 352	2 213	2 844	2 882	2 882	3 054	3 207	3 384
Prenaid A L P	2.2: Comm. Hlth Clinics	75	80	85	91	92	92	98	103	108
Rainbow Haven	2.2: Comm. Hlth Clinics	294	311	331	355	360	360	381	400	422
Scadifa Centre	2.2: Comm. Hlth Clinics	693	801	852	913	925	925	981	1 030	1 086
Sibisiswe Home	2.2: Comm. Hlth Clinics	212	-	-	-	-	-	-	-	-
Sparkes Estate	2.2: Comm. Hlth Clinics	944	1 023	1 089	1 166	1 181	1 181	1 252	1 315	1 387
St Lukes Home	2.2: Comm. Hlth Clinics	399	423	450	482	488	488	518	544	573
Sunfield Home	2.2: Comm. Hlth Clinics	105	111	118	127	129	129	136	143	151
Umlazi Halfway House	2.2: Comm. Hlth Clinics	181	208	237	237	240	240	255	267	282
Pongola Hospital/Pongola Jozini	2.9: District Hospitals	2 558	2 961	3 282	3 545	3 592	3 592	3 807	3 997	4 218
Montebello Chronic Sick Home	4.3: Psych/Mental Hosp.	3 581	3 832	4 078	4 372	4 430	4 430	4 695	4 930	5 201
Earmarked for further negotiations	Various	-	-	-	867	878	878	931	978	1 031
Incorrect allocations of exp. by institutions	Various	21	-	-	-	-	-	-	-	-
McCords Hospital	Various	52 537	59 054	71 720	77 357	84 304	84 304	89 364	93 932	99 098
Mountain View Hospital	Various	5 931	7 838	8 120	8 774	8 890	8 890	9 423	9 894	10 438
Siloah Hospital	Various	10 333	11 548	12 957	14 002	14 698	14 698	15 580	16 359	17 259
St Mary's Hosp Marianhill	Various	68 381	76 911	85 201	91 508	95 143	95 143	100 849	105 891	111 715
<b>Total</b>		<b>199 011</b>	<b>243 734</b>	<b>278 846</b>	<b>313 614</b>	<b>296 617</b>	<b>296 617</b>	<b>266 787</b>	<b>280 227</b>	<b>295 639</b>

## 5.10 Transfers to municipalities

Table 7.14 below indicates transfers to municipalities, per category of municipality. The unallocated funding in this table relates to incorrect allocations made by the institutions. Table 7.15 below reflects the same transfers to municipalities by grant name.

Although these funds have been earmarked for transfer to municipalities, the transfer is dependent upon the provision of satisfactory services in line with SLAs with municipalities.

Further details of amounts per grant type and per municipality are given in *Annexure – Vote 7: Health*.

Table 7.14: Summary of departmental transfers to municipalities by category

R thousand	Audited Outcome			Main	Adjusted	Revised	Medium-term Estimates		
	2007/08	2008/09	2009/10	Appropriation	Appropriation	Estimate	2011/12	2012/13	2013/14
				2010/11					
Category A	36 483	36 406	42 612	44 540	44 540	44 540	47 212	49 573	52 300
Category B	26 175	14 063	38 446	46 380	90 716	90 511	46 961	49 311	52 020
Category C	4	-	-	-	-	-	-	-	-
Unallocated/unclassified	148	24	-	-	-	-	-	-	-
<b>Total</b>	<b>62 810</b>	<b>50 493</b>	<b>81 058</b>	<b>90 920</b>	<b>135 256</b>	<b>135 051</b>	<b>94 173</b>	<b>98 884</b>	<b>104 320</b>

Table 7.15: Summary of departmental transfers to municipalities by grant name

R thousand	Sub-programme	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
		2007/08	2008/09	2009/10				2011/12	2012/13	2013/14
Regional Service Council Levy	Various	4	-	-	-	-	-	-	-	-
Subsidy: Environmental Health	2.2: Comm. Hlth Clinics	194	-	-	-	-	-	-	-	-
Subsidy: Municipal Clinics	2.2: Comm. Hlth Clinics	62 612	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
<b>Total</b>		<b>62 810</b>	<b>50 493</b>	<b>81 058</b>	<b>90 920</b>	<b>135 256</b>	<b>135 051</b>	<b>94 173</b>	<b>98 884</b>	<b>104 320</b>

The gradual increase from 2008/09 to 2013/14 in Category A, which represents the eThekweni Metro, pertains mainly to inflation, and largely relates to transfers to municipal clinics. The varying trend in Category B can be ascribed to the anticipated provincialisation of the municipal clinics. As negotiations with the municipal authorities regarding their take-over are still in process, these funds will remain under *Transfers and subsidies to: Provinces and municipalities* until such time as an agreement has been reached. Category C represents the Regional Services Council Levy (RSCL) which was discontinued in July 2006. The only amount related to the RSCL is a final payment of R4 000 which was paid in 2007/08.

Table 7.15 above reflects the same transfers by grant name, the purposes of which are as follows:

- The RSCL, which was a statutory payroll levy, was discontinued from July 2006. The final arrear payments were recorded in 2007/08;
- Subsidy: Environmental Health was provided to municipalities to assist with personnel costs and those costs related to sample testing. This function has now been devolved to the individual municipalities for which they receive funding from National Treasury; and
- Subsidy: Municipal Clinics is utilised to subsidise primary health care for services provided by local authorities/municipal clinics. Until such time as the negotiations for the take-over of these clinics has been finalised, these funds will remain in this category. The increase in the 2010/11 Adjusted Appropriation relates to the funding which was provided for the costs of the SLAs which were not signed in 2008/09 and 2009/10, which should be completed in 2010/11, and back-dated transfer made in 2010/11.

## 5.11 Transfers and subsidies

Table 7.16 gives a summary of spending on *Transfers and subsidies* by programme and main category.

The various trends in each programme are discussed hereunder and below the table:

- In Programme 1, the fluctuating trend in *Transfers and subsidies to: Households* is mainly due to personnel retiring and leaving the service.
- The decrease in Programme 2 against *Transfers and subsidies to: Provinces and municipalities* in 2008/09 related mainly to the non-signing of SLAs by the municipalities. The increase in the 2010/11 Adjusted Appropriation relates to funding for the signing of the SLAs pertaining to 2008/09 and 2009/10. The minimal reduction from 2011/12 relates to the provincialisation of some of the municipal clinics. However, the take-over of the majority of the municipal clinics by the department is still in the process of negotiation and, until such time as agreement has been reached, funding will continue to be reflected under this category.
- In Programme 2, the significant increase in *Transfers and subsidies to: Non-profit institutions* in 2008/09 is primarily due to the implementation and improved uptake of the NIP sites funded by the department, in line with the national HIV and AIDS policy. The reduction in the 2010/11 Adjusted Appropriation and the 2011/12 MTEF relates mainly to the decision of the department to close the NIP sites and to manage these services centrally. The management of *Transfers and subsidies to: Non-profit institutions* is under review by the joint Treasury/Health task team, and the figures will be reviewed in the 2011/12 Adjustments Estimate.

Table 7.16: Summary of transfers and subsidies by programme and main category

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>1. Administration</b>	<b>1 701</b>	<b>2 161</b>	<b>2 273</b>	<b>1 275</b>	<b>1 275</b>	<b>1 497</b>	<b>2 510</b>	<b>2 635</b>	<b>2 767</b>
Households	1 701	2 161	2 273	1 275	1 275	1 497	2 510	2 635	2 767
Social benefits	1 694	2 134	2 241	1 275	1 275	1 497	2 510	2 635	2 767
Other transfer to households	7	27	32	-	-	-	-	-	-
<b>2. District Health Services</b>	<b>236 328</b>	<b>282 563</b>	<b>343 633</b>	<b>383 085</b>	<b>407 614</b>	<b>408 620</b>	<b>334 819</b>	<b>351 630</b>	<b>369 589</b>
Provinces and municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Municipal clinics	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Universities and technikons	-	40	-	-	-	-	-	-	-
University and technikons	-	40	-	-	-	-	-	-	-
Non-profit institutions	160 499	210 664	237 438	269 262	249 455	249 455	216 797	227 705	240 228
Non-profit institutions	160 499	210 664	237 438	269 262	249 455	249 455	216 797	227 705	240 228
Households	13 019	21 366	25 137	22 903	22 903	24 114	23 849	25 041	25 041
Social benefits	12 791	21 185	24 603	21 735	21 735	22 667	22 620	23 751	23 751
Other transfers to households	228	181	534	1 168	1 168	1 447	1 229	1 290	1 290
<b>3. Emergency Medical Services</b>	<b>442</b>	<b>8 660</b>	<b>1 028</b>	<b>594</b>	<b>847</b>	<b>1 145</b>	<b>1 100</b>	<b>1 155</b>	<b>1 213</b>
Households	442	8 660	1 028	594	847	1 145	1 100	1 155	1 213
Social benefits	308	762	938	142	203	241	99	159	168
Other transfers to households	134	7 898	90	452	644	904	1 001	996	1 045
<b>4. Provincial Hospital Services</b>	<b>50 986</b>	<b>54 499</b>	<b>58 383</b>	<b>56 874</b>	<b>69 537</b>	<b>69 463</b>	<b>83 885</b>	<b>88 096</b>	<b>88 096</b>
Non-profit institutions	33 703	27 103	30 051	31 975	33 672	33 672	35 692	37 493	39 555
Non-profit institutions	33 703	27 103	30 051	31 975	33 672	33 672	35 692	37 493	39 555
Households	17 283	27 396	28 332	24 899	35 865	35 791	48 193	50 603	48 541
Social benefits	10 653	15 908	14 555	16 522	23 671	22 981	31 807	20 160	20 160
Other transfers to households	6 630	11 488	13 777	8 377	12 194	12 810	16 386	30 443	28 381
<b>5. Central Hospital Services</b>	<b>624</b>	<b>8 186</b>	<b>2 653</b>	<b>3 555</b>	<b>3 555</b>	<b>4 816</b>	<b>3 645</b>	<b>3 827</b>	<b>3 827</b>
Households	624	8 186	2 653	3 555	3 555	4 816	3 645	3 827	3 827
Social benefits	624	639	612	2 407	2 407	3 106	2 468	2 591	2 591
Other transfers to households	-	7 547	2 041	1 148	1 148	1 710	1 177	1 236	1 236
<b>6. Health Sciences and Training</b>	<b>42 595</b>	<b>56 136</b>	<b>59 829</b>	<b>62 685</b>	<b>72 069</b>	<b>76 710</b>	<b>82 891</b>	<b>87 440</b>	<b>94 620</b>
Departmental agencies and accounts	4 470	5 827	6 784	7 876	7 637	7 637	8 166	8 963	9 005
HW SETA	4 470	5 827	6 784	7 876	7 637	7 637	8 166	8 963	9 005
Non-profit institutions	4 809	5 967	11 357	12 377	13 490	13 490	14 298	15 029	15 856
Non-profit institutions	4 809	5 967	11 357	12 377	13 490	13 490	14 298	15 029	15 856
Households	33 316	44 342	41 688	42 432	50 942	55 583	60 427	63 448	69 759
Social benefits	382	239	-	594	713	714	1 209	1 300	559
Other transfers to households	32 934	44 103	41 688	41 838	50 229	54 869	59 218	62 148	69 200
<b>7. Health Support Services</b>	<b>12 649</b>	<b>34 130</b>	<b>27 528</b>	<b>10 764</b>	<b>10 764</b>	<b>10 764</b>	<b>13 971</b>	<b>15 170</b>	<b>16 004</b>
Departmental agencies and accounts	12 649	34 130	27 528	10 764	10 764	10 764	13 971	15 170	16 004
Medicine Trading Account	12 649	34 130	27 528	10 764	10 764	10 764	13 971	15 170	16 004
<b>8. Health Facilities Management</b>	<b>-</b>	<b>326</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Households	-	326	-	-	-	-	-	-	-
Social benefits	-	326	-	-	-	-	-	-	-
<b>Total</b>	<b>345 325</b>	<b>446 661</b>	<b>495 327</b>	<b>518 832</b>	<b>565 661</b>	<b>573 015</b>	<b>522 821</b>	<b>549 953</b>	<b>576 116</b>

- With regard to Programme 3, the increase in 2008/09 in *Transfers and subsidies to: Households* pertains to a legal claim against the department by the First Aid League (an outsourced service provider) amounting to R7.883 million.
- In Programme 4, *Transfers and subsidies to: Non-profit institutions* shows a downward trend from 2007/08 to 2008/09 due to the provincialisation of two life-care institutions in June 2007 (Richmond Chest and Ekuhlangeni Psychiatric Hospitals). Since the provincialisation, expenditure pertaining to these institutions is reflected against *Current payments*. The figures for 2009/10 and the Adjusted Appropriation for 2010/11 include provision for the higher than anticipated 2009 and 2010 wage agreements, respectively, and the increases in OSD for doctors in those institutions which qualify.
- Turning to Programme 5, the increased amount against *Transfers and subsidies to: Households* in 2008/09 results from a medico-legal claim against the department.
- In Programme 6, the amounts against *Transfers and subsidies to: Departmental agencies and accounts* relate to the compulsory levy paid to the Health and Welfare Sector Education Training Authority (HWSETA) on an annual basis. The increase in *Transfers and subsidies to: Non-profit institutions* relates to the employment of additional medical interns allocated to McCords Hospital, due to the extension of the medical intern programme to two years. The increase in *Transfers and*



*subsidies to: Households* in the 2011/12 Adjusted Appropriation and Revised Estimate is ascribed to an additional amount provided for bursaries.

- In Programme 7, the increase in *Transfers and subsidies to: Departmental agencies and accounts* in 2008/09 due primarily to an increase in the Medicine Trading Account, which was required to enable the provincial Medical Supply Centre to carry sufficient medical stock to meet demand.

## 6. Programme description

The services rendered by this department are categorised under eight programmes, further details of which are discussed below. The department conforms to the uniform budget structure for the Health sector. The information for each programme is given in terms of sub-programmes and economic classification, with details of economic classification given in *Annexure – Vote 7: Health*.

### 6.1 Programme 1: Administration

Programme 1 comprises two sub-programmes, namely Office of the MEC and Management, with the objectives of providing overall strategic leadership, co-ordination and management of activities towards the achievement of optimal health status of all the communities in the province, as well as the administration of the department in line with good governance practice. The programme also includes the formulation of policies and strategies in line with national and provincial priorities.

Tables 7.17 and 7.18 summarise information for the period 2007/08 to 2013/14. It is the department's policy to keep the allocation of this programme to a maximum of two per cent of total budget, which has been achieved over the past four years and will be maintained over the 2011/12 MTEF.

**Table 7.17: Summary of payments and estimates - Programme 1: Administration**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Office of the MEC	11 898	13 782	12 441	16 792	15 454	13 336	16 491	17 425	17 674
Management	267 832	270 284	1 036 437	296 985	334 167	314 167	327 680	346 764	363 445
<b>Total</b>	<b>279 730</b>	<b>284 066</b>	<b>1 048 878</b>	<b>313 777</b>	<b>349 621</b>	<b>327 503</b>	<b>344 171</b>	<b>364 189</b>	<b>381 119</b>
Unauth. exp. (1 <sup>st</sup> charge) not available for spending	-	-	(758 000)	-	-	-	-	-	-
<b>Baseline available for spending after 1<sup>st</sup> charge</b>	<b>279 730</b>	<b>284 066</b>	<b>290 878</b>	<b>313 777</b>	<b>349 621</b>	<b>327 503</b>	<b>344 171</b>	<b>364 189</b>	<b>381 119</b>

**Table 7.18: Summary of payments and estimates by economic classification - Programme 1: Administration**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>274 965</b>	<b>279 415</b>	<b>285 963</b>	<b>311 737</b>	<b>339 502</b>	<b>317 062</b>	<b>336 961</b>	<b>356 854</b>	<b>375 252</b>
Compensation of employees	141 966	163 648	168 705	196 478	184 269	189 057	202 290	216 450	231 601
Goods and services	132 999	115 767	117 258	115 259	155 233	128 005	134 671	140 404	143 651
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>1 701</b>	<b>2 161</b>	<b>2 273</b>	<b>1 275</b>	<b>1 275</b>	<b>1 497</b>	<b>2 510</b>	<b>2 635</b>	<b>2 767</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	-	-	-	-	-	-	-	-	-
Households	1 701	2 161	2 273	1 275	1 275	1 497	2 510	2 635	2 767
<b>Payments for capital assets</b>	<b>3 023</b>	<b>2 490</b>	<b>2 642</b>	<b>765</b>	<b>8 844</b>	<b>8 944</b>	<b>4 700</b>	<b>4 700</b>	<b>3 100</b>
Buildings and other fixed structures	-	-	-	-	-	-	-	-	-
Machinery and equipment	3 011	2 490	2 642	765	8 844	8 944	4 700	4 700	3 100
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	12	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>41</b>	<b>-</b>	<b>758 000</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>279 730</b>	<b>284 066</b>	<b>1 048 878</b>	<b>313 777</b>	<b>349 621</b>	<b>327 503</b>	<b>344 171</b>	<b>364 189</b>	<b>381 119</b>
Unauth. exp. (1 <sup>st</sup> charge) not available for spending	-	-	(758 000)	-	-	-	-	-	-
<b>Baseline available for spending after 1<sup>st</sup> charge</b>	<b>279 730</b>	<b>284 066</b>	<b>290 878</b>	<b>313 777</b>	<b>349 621</b>	<b>327 503</b>	<b>344 171</b>	<b>364 189</b>	<b>381 119</b>

As was mentioned earlier, an instalment of R758 million was implemented against the budget in 2009/10, being the first charge of previous years' over-expenditure. This is reflected as a footnote in Tables 7.17 and 7.18 above. This was not continued in 2010/11 and final decision regarding the historic over-spending will be taken by SCOPA.

The significant increase from 2009/10 (excluding the first charge) to the 2010/11 Main Appropriation relates mainly to the need to improve management capacity at head office, as well as the carry-through costs of the 2009 wage agreement. The notable increase in the 2010/11 Adjusted Appropriation results mainly from the reprioritisation of funding for the interim use of consultants to address capacity constraints and to provide for forensic investigations. An additional amount of R6 million was reprioritised to replace essential computer equipment to reduce the risk of critical financial data being lost. The reduction in the 2010/11 Revised Estimate is mainly due to the cost of SITA computer services, consultants and lease payments against *Goods and services* being lower than anticipated.

The minimal increase in *Compensation of employees* in 2009/10 is due to the moratorium on the filling of non-critical posts. The reduction in the 2010/11 Adjusted Appropriation relates to the filling of posts being slower than expected. The increase over the 2011/12 MTEF allows for inflationary increases only.

In 2007/08, *Goods and services* includes once-off expenditure relating to the move to Trizon Towers, as well as an amount of R3.600 million for legal fees related to interventions aimed at countering the effects of the nurses' strike. The negative growth from 2008/09 to the 2010/11 Main Appropriation results from the slowing down of the restructuring process at head office, as well as enforced savings to curb the department's overall expenditure. Funding from other areas was reprioritised to this category in the 2010/11 Adjusted Appropriation to provide for interim personnel capacity and for forensic investigations.

The decreasing trend in *Machinery and equipment* from 2008/09 to the 2010/11 Main Appropriation relates to the reprioritisation of the budget. The increase in the 2010/11 Adjusted Appropriation relates to the provision for essential computer equipment and for the replacement of motor vehicles at head office.

The fluctuating trend in *Transfers and subsidies to: Households* is due to the exit costs of staff.

## Service delivery measures – Programme 1: Administration

Table 7.19 illustrates the main service delivery measures relating to Programme 1. Note that new measures have been introduced from 2010/11, and the performance indicators provided comply fully with the customised measures for the Health sector.

**Table 7.19: Service delivery measures – Programme 1: Administration**

Outputs	Performance indicators	Estimated performance	Medium-term targets		
		2010/11	2011/12	2012/13	2013/14
<b>Administration:</b>	<b>Human Resources</b>				
To conduct the strategic management and overall administration of the Department of Health	• Vacancy rate for professional nurses	32.1%	19%	18%	18%
	• Vacancy rate for doctors	54.8%	32%	31%	30%
	• Vacancy rate for medical specialists	73.3%	60%	59%	58%
	• Vacancy rate for pharmacists	76.6%	75%	74%	73%
	• Medical officers per 100 000	21.3	25.7	25.7	25.7
	• Medical officers per 100 000 people in rural districts	9.8	12	12	12
	• Professional nurses per 100 000 people	113.1	116.1	116.1	116.1
	• Professional nurses per 100 000 people in rural districts	95.6	98.2	98.2	98.2
	• Pharmacists per 100 000 people	3.7	3.9	3.9	3.9
	• Pharmacists per 100 000 people in rural districts	2.1	2.4	2.4	2.4

## 6.2 Programme 2: District Health Services

The purpose of Programme 2: District Health Services is to render primary health care services and district hospital services. This programme comprises nine sub-programmes, which are used to facilitate identification of the different functions. The main aims of these sub-programmes are:

- To provide service planning, administration of services, managing personnel and financial administration and the co-ordination and monitoring of district health services, including those rendered by district councils and non-government organisations (NGOs).
- To render primary health care services with a nurse-driven service at clinic level, including visiting points, mobile and local authority clinics.
- To render primary health care services in respect of maternal child and women's health, geriatrics, occupational therapy, physiotherapy, psychiatry, speech therapy, communicable diseases, oral and dental health, mental health, rehabilitation and disability and chronic health.
- To render primary health care services at non-health facilities in respect of home-based care, abuse victims, mental and chronic care, school health.
- To render primary health care services related to the comprehensive management of HIV and AIDS campaigns and special projects.
- To provide services directed at providing nutrition for the malnourished members of the population.
- To render forensic pathology services and medico-legal services in the province.
- To render hospital services at general practitioner level.

This programme accounts for approximately 48 per cent of the department's annual budget, growing to 49 per cent in 2013/14. This supports the policy of providing access to the less expensive, but most important level of health care. The programme provides for, *inter alia*, the commissioning of new clinics and community health centres, the development of district offices, and the comprehensive management of HIV and AIDS related diseases, especially TB.

Tables 7.20 and 7.21 summarise payments and estimates for Programme 2: District Health Services.

The significant increases in the trends in this programme over the seven-year period relate to the various higher than anticipated annual wage agreements, the filling of unbudgeted posts in 2007/08, the carry-through costs of the various OSDs for medical personnel in 2009/10 and in the 2010/11 Adjusted Appropriation. Also contributing was additional funding to assist with inflationary increases in medical supplies and services and to improve infant and child mortality rates, substantial increase in the funding for HIV and AIDS each year, as well as a provision for an improvement in the general health capacity in 2011/12. Further amounts allocated for national priorities over the 2011/12 MTEF provide for capacity building for personnel and *Goods and services*, funding for family health team pilots/models, improving hospital norms and standards as well as additional funding provided for the general policy adjustment.

**Table 7.20: Summary of payments and estimates - Programme 2: District Health Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
District Management	145 144	150 532	121 875	165 505	143 248	143 973	150 275	155 298	165 805
Community Health Clinics	1 294 981	1 578 640	1 836 913	2 145 578	2 231 091	2 131 643	2 697 528	2 836 274	3 036 214
Community Health Centres	435 897	503 302	553 575	628 739	668 504	640 844	849 799	895 790	959 703
Community Based Services	103 291	92 769	98 850	116 491	116 632	101 814	206 571	221 114	236 343
Other Community Services	411 552	429 132	495 474	595 047	591 325	568 287	598 325	638 227	666 484
HIV and AIDS	1 058 570	1 239 365	1 534 546	1 930 006	1 656 585	1 611 098	1 925 452	2 329 897	2 773 535
Nutrition	84 647	21 635	90 637	106 016	63 052	50 357	64 200	67 410	69 432
Forensic Pathology Services	107 176	96 664	97 091	124 289	114 289	122 769	133 433	141 510	149 293
District Hospitals	3 568 351	4 020 233	4 359 717	4 580 576	4 809 036	4 671 647	5 114 241	5 345 975	5 625 991
<b>Total</b>	<b>7 209 609</b>	<b>8 132 272</b>	<b>9 188 678</b>	<b>10 392 247</b>	<b>10 393 762</b>	<b>10 042 432</b>	<b>11 739 824</b>	<b>12 631 495</b>	<b>13 682 800</b>

**Table 7.21: Summary of payments and estimates by economic classification - Programme 2: District Health Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>6 857 271</b>	<b>7 793 057</b>	<b>8 816 863</b>	<b>9 963 076</b>	<b>9 943 106</b>	<b>9 579 972</b>	<b>11 213 448</b>	<b>12 088 307</b>	<b>13 251 243</b>
Compensation of employees	4 473 898	5 264 489	5 723 862	6 514 794	6 581 150	6 495 929	7 742 028	8 284 193	8 943 578
Goods and services	2 383 373	2 528 568	3 093 001	3 448 282	3 361 956	3 084 043	3 471 420	3 804 114	4 307 665
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>236 328</b>	<b>282 563</b>	<b>343 633</b>	<b>383 085</b>	<b>407 614</b>	<b>408 620</b>	<b>334 819</b>	<b>351 630</b>	<b>369 589</b>
Provinces and municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Universities and technikons	-	40	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	160 499	210 664	237 438	269 262	249 455	249 455	216 797	227 705	240 228
Households	13 019	21 366	25 137	22 903	22 903	24 114	23 849	25 041	25 041
<b>Payments for capital assets</b>	<b>116 010</b>	<b>56 570</b>	<b>28 182</b>	<b>46 086</b>	<b>42 586</b>	<b>52 017</b>	<b>191 557</b>	<b>191 558</b>	<b>61 968</b>
Buildings and other fixed structures	1 124	138	-	-	-	-	-	-	-
Machinery and equipment	114 886	56 432	28 182	46 086	42 586	52 017	191 557	191 558	61 968
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	-	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>82</b>	<b>-</b>	<b>-</b>	<b>456</b>	<b>1 823</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>7 209 609</b>	<b>8 132 272</b>	<b>9 188 678</b>	<b>10 392 247</b>	<b>10 393 762</b>	<b>10 042 432</b>	<b>11 739 824</b>	<b>12 631 495</b>	<b>13 682 800</b>

The decrease in the sub-programme: District Management in 2009/10 is a result of enforced savings and the non-filling of posts in an effort to remain within budget. The reduction in the 2010/11 Adjusted Appropriation relates to savings as a result of the moratorium on filling of non-critical posts. The increase in the 2010/11 Adjusted Appropriation and the Revised Estimate when compared to 2009/10 is due to the inclusion of funding for the higher than anticipated 2010 wage agreement, as well as funding for the OSDs for medical personnel. The 2011/12 MTEF includes the carry-through costs of the relevant wage agreements and inflationary costs only.

The notable increase in 2009/10 and the strong growth thereafter in the Community Health Clinics and Community Health Centres sub-programmes includes additional funding for the various wage agreements, the OSDs for medical personnel, funding for inflationary costs in medical related goods and services and reducing infant and child mortality. Also affecting growth in 2010/11 is additional funding for the OSDs. The reduction in the 2010/11 Revised Estimate results from the non-filling of non-critical posts. The 2011/12 MTEF increases are due to national priority funding for additional posts and goods and services, family health team pilots/models and for the general policy adjustment.

The decrease in the sub-programme: Community Based Services in 2008/09 results from the absorption of community health workers (previously paid by stipend) into the district hospitals as full-time employees. The significant increase over the 2011/12 MTEF relates to the department's decision to take over the management of the HIV and AIDS NIP sites from the NGOs, in an effort to minimise fraud.

The notable increase in 2009/10 in the sub-programme: Other Community Services is due to the introduction of community nursing services and the additional intake of community doctors resulting from the extension of the medical intern programme to two years, as well as the expenditure for the OSDs for medical personnel.

The steady increase in the HIV and AIDS sub-programme over the seven years relates mainly to the increasing provision of the Comprehensive HIV and AIDS grant to cater for the increasing trends in the uptake of patients on ARV therapy. An additional R20 million was provided in the 2010/11 Adjusted Appropriation towards the male circumcision programme. Despite this allocation, there was an overall decrease in this sub-programme in the 2010/11 Adjusted Appropriation resulting from the decision to move equitable share funding to the sub-programmes: Community Health Clinics and Community Health Centres to provide better access for HIV and AIDS patients at these facilities. Additional funds were allocated in 2012/13 and 2013/14, to assist with the increase of the ARV threshold to a CD count of 350.

The high expenditure in the sub-programme: Nutrition in 2007/08 resulted from an arrangement with the Department of Social Development in that year, whereby the latter department agreed to fund the Department of Health to provide food parcels to patients suffering from HIV and AIDS and TB. The

expenditure relating to nutrition was reduced in 2008/09, due to spending pressures. The 2009/10 amount includes funding for food packs for TB and HIV and AIDS patients, which was consolidated into this programme. The decreasing trend in the 2010/11 Adjusted Appropriation is due to cost-cutting, in view of the fact that nutrition is not considered to be a core function of the department. The trend over the 2011/12 MTEF period is for inflationary increases only.

The sub-programme: Forensic Pathology Services, which was transferred from the South African Police Services from 1 April 2006, is funded through the Forensic Pathology Services grant. The high 2007/08 amount includes a roll-over from 2006/07. Otherwise, figures across the seven years include the various wage agreements and inflationary increases only. The decrease of R10 million in the 2010/11 Adjusted Appropriation relates to savings due to cost-cutting being reprioritised to Programme 8: Health Facilities Management to offset spending pressures on the infrastructure portion of the grant.

The significant increase in 2008/09 in the sub-programme: District Hospitals is attributable to the OSDs for medical personnel, the high inflation rate, especially on medical services and supplies, catering services, as well as the take-over of the province's laboratories by the NHLS. The high figure in 2009/10 relates to the OSDs for medical personnel, the 2009 wage agreement, as well as the escalating costs of laboratory services and inflationary expenditure on medical services and supplies. The increase in the 2010/11 Adjusted Appropriation is due to the 2010 wage agreement, additional funding for the OSDs for medical personnel, as well as funding reprioritised from other areas to offset the spending pressures. The decrease in the 2010/11 Revised Estimate relates to the delay in allocating the budget at institution level due to restructuring of the service delivery programmes in line with national priorities, and the slower than expected filling of posts. Growth over the 2011/12 MTEF includes funding for national priorities to improve hospital norms and standards, as well as funding for the various OSDs, capacity building and the previously mentioned general policy adjustment.

The increase in *Compensation of employees* from 2008/09 onwards is mainly due to the OSDs for medical personnel, as well as the various wage agreements. The decrease in the 2010/11 Revised Estimate relates to the slower than anticipated filling of posts. In addition to the carry-through costs of previously implemented OSD packages and wage agreements, additional funding for national priorities over the 2011/12 MTEF caters for improving hospital norms and standards, capacity building and the general policy adjustment.

The fluctuating trend in *Goods and services* is mainly due to the variable inflation rate over the period, higher than anticipated medical inflation, the increase in the cost of NHLS, as well as the increase in the number of patients suffering from HIV and AIDS and TB. The reduction in the 2010/11 Adjusted Appropriation relates to the decision by the department to reduce the equitable share of the HIV and AIDS sub-programme to offset expenditure for HIV and AIDS patients in other programmes. The decrease in the 2010/11 Revised Estimate relates to the decrease in the inflation on medicines, especially ARVs, due to the strengthening of the rand and improved contract negotiation, as well as pegging the NHLS expenditure to the previous year's contract. Included in the 2010/11 Main Appropriation is a significant increase in the Comprehensive HIV and AIDS grant, as well as the carry-through costs for combating infant and child mortality. The 2010/11 Adjusted Appropriation includes an additional R20 million for the male circumcision programme for HIV and AIDS provided under the grant. In addition to carry-through costs from previous allocations, funding for national priorities in the 2011/12 MTEF provides for family health teams, the general policy adjustment, capacity building and, in 2012/13 and 2013/14, additional amounts of R81.289 million and R74.825 million, respectively, to increase the ARV threshold to a CD 4 count of 350.

The fluctuations in *Transfers and subsidies to: Provinces and municipalities* are mainly due to the uncertainty of the provincialisation process of the municipal clinics, as well as the non-signing of SLAs. The increase in 2009/10 results from the signature of some of the 2008/09 SLAs. The increase in the 2010/11 Adjusted Appropriation provides for payment of those SLAs that were not signed in 2008/09 and 2009/10. After the provincialisation of some of the clinics, the 2011/12 MTEF baseline includes inflationary increases only.

The high spending against *Machinery and equipment* in 2007/08 relates mainly to the purchasing of motor vehicles, particularly for forensic pathology and TB services within the district offices and clinics. The reduction in 2008/09 and 2009/10 results from enforced savings. The minimal increase in 2010/11 relates to the need to provide additional motor vehicles for the TB programme as well as essential equipment at the district hospitals, which had been steadily deteriorating. The significant increase in 2011/12 and 2012/13 caters for the replacement of the steadily deteriorating essential equipment at institutions, as well as for mobile clinics and other service delivery related vehicles.

## Service delivery measures – Programme 2: District Health Services

It should be noted that a significant number of patients suffering from TB are treated in community clinics and community health centres within Programme 2. TB patients who have been admitted and discharged from hospital are monitored at clinics and community health centres. For this reason, TB statistics have been included in this programme.

Table 7.22 illustrates the main service delivery measures of Programme 2: District Health Services. The performance indicators provided comply fully with the customised measures for the Health sector.

**Table 7.22: Service delivery measures – Programme 2: District Health Services**

Outputs		Performance indicators	Estimated performance	Medium-term targets		
			2010/11	2011/12	2012/13	2013/14
1. Clinics and Community Health Centres						
To provide facilities for patients to be treated at primary health care level	•	PHC total headcount	25 243 274	27 262 735	29 443 754	31 799 254
	•	PHC total headcount under 5 years	5 036 238	6 490 157	7 139 173	7 276 464
	•	Utilisation rate - PHC	2.4	3.0	3.2	3.3
	•	Utilisation rate under 5 years - PHC	4.5	5.0	5.2	5.3
	•	Cost per PHC visit	R99	R110	R115	R120
	•	% of community health centres (CHCs) with a resident doctor	84%	100%	100%	100%
	•	% of fixed clinics supported by a doctor at least once a week	39%	45%	47%	50%
	•	% of fixed PHC facility with a monthly supervisory visit	63%	80%	85%	90%
	•	Provincial PHC expenditure per uninsured person	R271.05	R303.52	R340	R380.81
	•	% of PHC facilities assessed for compliance against the 6 priorities of the core standards	100%	100%	100%	100%
2. District Hospitals						
Rendering of a hospital service at a district level	•	Average length of stay	5.8 Days	5 Days	4.8 Days	4.6 Days
	•	Bed utilisation rate	64.4%	70%	72%	73%
	•	Total separations	304 250	352 307	362 876	378 534
	•	Patient day equivalent	2 781 062	3 160 237	3 255 044	3 294 133
	•	Total out-patients department (OPD) headcount	2 612 088	3 198 675	3 230 562	3 290 624
	•	Caesarean section rate	27.9%	27%	26.5%	26%
	•	Cost per patient day equivalent	R1 593	R 1 500	R 1 500	R1 550
	•	% of complaints of users of district hospital services resolved within 25 days	57%	100%	100%	100%
	•	% of district hospitals with monthly mortality and morbidity meetings	93%	100%	100%	100%
	•	No. of district hospitals assessed for compliance against the 6 priorities of the core standards	50%	100%	100%	100%
3. HIV and AIDS, TB and STI control						
Rendering a primary health care service in respect of HIV and AIDS, TB and STI Control	•	TB two month smear conversion rate	67%	70%	72%	75%
	•	Pulmonary Tuberculosis (PTB) treatment interruption (defaulter) rate	6.7%	6.1%	5.5%	5%
	•	Male condom distribution rate (per eligible male per annum)	8	12	14	15
	•	Total no. of registered ART clients (on treatment)	380 641	460 198	571 647	681 847
	•	% of HIV-TB co-infected patients placed on ART	56%	100%	100%	100%
	•	HCT testing rate	74.3%	90%	90%	90%
	•	New smear positive PTB cure rate	70%	72%	73%	75%

**Table 7.22: Service delivery measures – Programme 2: District Health Services**

Outputs		Performance indicators	Estimated performance	Medium-term targets		
			2010/11	2011/12	2012/13	2013/14
4. Maternal, child and women health						
Rendering a comprehensive and integrated maternal, child and women health at primary health care level	• Immunisation coverage under 1 year old	76%	90%	90%	90%	
	• Vitamin A coverage 12 - 59 months	30%	55%	60%	70%	
	• Measles coverage under 1 year	84%	90%	90%	90%	
	• Pneumococcal vaccine (PCV) 3rd dose coverage	93%	90%	90%	90%	
	• Rota Virus (RV) 2nd dose coverage	79%	90%	90%	90%	
	• Cervical cancer screening coverage	41%	50%	60%	70%	
	• Antenatal visits before 20 weeks rate	36%	60%	70%	75%	
	• Baby tested PCR positive 6 weeks after birth as a proportion of babies tested at 6 weeks	11.5%	<6%	<5%	2-5%	
	• Couple year protection rate	23.3%	35%	45%	55%	
	• Facility Maternal mortality rate	172/100 000	162/100 000	152/100 000	142/100 000	
	• Delivery rate for women under 18 years	8.8%	8%	7.8%	7.5%	
	• Facility infant mortality (under 1) rate	11.8%	8.5%	8.3%	8.1%	
	• Facility Child mortality (under 5) rate	9.8%	6.8%	6.6%	6.4%	
5. Disease prevention and control						
Rendering preventive and promotive health services	• Malaria case fatality rate	2.9%	≤1%	≤1%	≤1%	
	• Cholera fatality rate	0%	0%	0%	0%	
	• Cataract surgery rate	655.17 / 1 million	138.28 / 1 million	144.88 / 1million	160.12 / 1 million	

### 6.3 Programme 3: Emergency Medical Services

The purpose of Programme 3: Emergency Medical Services is to render pre-hospital emergency medical services, including inter-hospital transfers and planned patient transport. The policy of implementing emergency medical services and focusing on the under-served areas, which is in line with the provincial priority of eradicating inequity, faces various expenditure pressures and challenges. Such challenges include the need to appoint additional staff to accommodate the expansion of the programme, the high rate of inflation on EMS vehicles, and the cost of fuel.

In addition, poverty and topography are major cost drivers for both the Emergency Transport and Planned Patient Transport sub-programmes.

Tables 7.23 and 7.24 below summarise payments and budgeted estimates pertaining to Programme 3.

The increase from 2008/09 is largely due to funding provided to appoint additional staff and to purchase additional vehicles to accommodate the expansion of the programme in preparation for the 2010 World Cup. The increasing trend from 2008/09 onward is in line with the planned expansion of emergency medical services to the under-served areas in KZN. A portion of the increase in 2008/09 relates to the preparation of call centres for the 2010 World Cup. The significant increase in 2009/10 is due to the higher than anticipated 2009 wage agreement, the OSD for emergency medical workers, and additional costs incurred through preparations for the 2010 World Cup. The Main Appropriation for 2010/11 includes an additional R60 million for the 2010 World Cup, which contributed towards the drive to meet the national norms for this service. The MTEF allocations include funding to continue this drive.

**Table 7.23: Summary of payments and estimates - Programme 3: Emergency Medical Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Emergency Transport	528 185	636 096	741 331	819 853	821 974	826 982	883 803	953 296	1 008 742
Planned Patient Transport	20 611	36 264	41 001	46 530	43 214	40 289	42 944	45 966	48 169
<b>Total</b>	<b>548 796</b>	<b>672 360</b>	<b>782 332</b>	<b>866 383</b>	<b>865 188</b>	<b>867 271</b>	<b>926 747</b>	<b>999 262</b>	<b>1 056 911</b>

Table 7.24: Summary of payments and estimates by economic classification - Programme 3: Emergency Medical Services

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>522 768</b>	<b>590 768</b>	<b>711 960</b>	<b>756 992</b>	<b>771 510</b>	<b>757 164</b>	<b>809 271</b>	<b>874 912</b>	<b>925 727</b>
Compensation of employees	341 040	381 733	486 534	537 268	552 073	522 649	559 234	598 380	640 267
Goods and services	181 728	209 035	225 426	219 724	219 437	234 515	250 037	276 532	285 460
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>442</b>	<b>8 660</b>	<b>1 028</b>	<b>594</b>	<b>847</b>	<b>1 145</b>	<b>1 100</b>	<b>1 155</b>	<b>1 213</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	-	-	-	-	-	-	-	-	-
Households	442	8 660	1 028	594	847	1 145	1 100	1 155	1 213
<b>Payments for capital assets</b>	<b>25 586</b>	<b>72 932</b>	<b>69 344</b>	<b>108 797</b>	<b>92 797</b>	<b>108 816</b>	<b>116 376</b>	<b>123 195</b>	<b>129 971</b>
Buildings and other fixed structures	576	-	-	-	-	18	-	-	-
Machinery and equipment	24 998	72 932	69 344	108 797	92 797	108 798	116 376	123 195	129 971
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	12	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>34</b>	<b>146</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>548 796</b>	<b>672 360</b>	<b>782 332</b>	<b>866 383</b>	<b>865 188</b>	<b>867 271</b>	<b>926 747</b>	<b>999 262</b>	<b>1 056 911</b>

The overall increase in the trend in the sub-programme: Planned Patient Transport results from the successful implementation of the inter-hospital transfer programme.

The increase in *Compensation of employees* in 2009/10 relates to the higher than anticipated 2009 wage agreement, the introduction of the OSDs for medical personnel, as well as reprioritisation of funding to bring the salaries of the emergency medical workers in line with those in the other provinces, in order to retain staff and to avoid strike action.

The main cost drivers under *Goods and services* are fuel and repairs to emergency vehicles, the latter being related to the rough terrain in the rural areas of the province. These costs will increase as the service expands, with a related increase in the size of the fleet. The increase in the 2010/11 Revised Estimate relates mainly to an increase in fuel costs and the cost of maintaining vehicles.

With regard to *Transfers and subsidies to: Households*, the increase in 2008/09 pertains to a legal claim against the department by the First Aid League, as mentioned earlier.

The increase in 2008/09 against *Machinery and equipment* relates to the late delivery of emergency vehicles ordered in 2007/08. In 2009/10, funding was moved from this category to *Compensation of employees* in order to align the salaries of the emergency medical workers with those in the other provinces. The sharp increase from 2010/11 provides for the purchasing of additional emergency vehicles, contributing towards the drive to meet the national norms for this service.

### Service delivery measures – Programme 3: Emergency Medical Services

Table 7.25 below illustrates the main service delivery measures pertaining to Programme 3. Note that new measures have been introduced from 2010/11, and the performance indicators provided comply fully with the customised measures for the Health sector.

Table 7.25: Service delivery measures – Programme 3: Emergency Medical Services

Outputs	Performance indicators	Estimated performance	Medium-term targets		
		2010/11	2011/12	2012/13	2013/14
Emergency Medical Services					
Rendering emergency medical services including ambulance services, special operations, communications and air ambulance services	• % of P1 calls with a response time of <15 minutes in an urban area	13%	15%	20%	25%
	• % of P1 calls with a response time of <40 minutes in a rural area	39%	45%	50%	55%
	• % of all calls with response time within 60 minutes	43%	50%	55%	60%
	• Rostered ambulances	220	320	360	400



## 6.4 Programme 4: Provincial Hospital Services

The purpose of this programme is the delivery of hospital services which are accessible, appropriate and effective and the provision of general specialist services including a specialised rehabilitation service, and a platform for training health professionals and research. Programme 4 comprises five sub-programmes, with the following main objectives:

- To render regional hospital services at a general specialist level and a platform for training of health workers and research;
- To render hospital services for tuberculosis, including multi-drug resistance;
- To render specialist psychiatric hospital services for people with mental illness and intellectual disability and providing a platform for training of health workers and research;
- To provide medium to long-term care to patients who require rehabilitation and/or a minimum degree of active medical care but cannot be sent home; and
- To render an affordable and comprehensive oral health service, based on primary health care.

Tables 7.26 and 7.27 summarise payments and estimates relating to Programme 4.

**Table 7.26: Summary of payments and estimates - Programme 4: Provincial Hospital Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
General (Regional) Hospitals	2 890 364	3 169 928	3 664 133	3 975 671	4 160 345	4 262 986	4 670 222	5 092 143	5 322 070
Tuberculosis Hospitals	481 772	653 625	787 273	885 059	880 283	894 395	976 783	1 009 067	1 071 897
Psychiatric/Mental Hospitals	409 527	451 429	509 621	564 416	578 418	577 885	592 947	632 004	667 472
Sub-acute, Step-down and Chronic Medical Hospitals	92 364	93 865	99 578	112 463	104 896	104 070	111 323	114 421	121 414
Dental Training Hospitals	9 787	9 967	10 685	11 575	12 650	13 907	14 907	15 855	16 848
<b>Total</b>	<b>3 883 814</b>	<b>4 378 814</b>	<b>5 071 290</b>	<b>5 549 184</b>	<b>5 736 592</b>	<b>5 853 243</b>	<b>6 366 182</b>	<b>6 863 490</b>	<b>7 199 701</b>

**Table 7.27: Summary of payments and estimates by economic classification - Programme 4: Provincial Hospital Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>3 793 371</b>	<b>4 299 875</b>	<b>4 995 008</b>	<b>5 465 809</b>	<b>5 640 286</b>	<b>5 752 467</b>	<b>6 195 587</b>	<b>6 688 685</b>	<b>7 076 895</b>
Compensation of employees	2 703 673	3 015 350	3 520 810	3 938 568	4 124 279	4 188 187	4 433 228	4 709 521	5 063 859
Goods and services	1 089 698	1 284 525	1 474 198	1 527 241	1 516 007	1 564 280	1 762 359	1 979 164	2 013 036
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>50 986</b>	<b>54 499</b>	<b>58 383</b>	<b>56 874</b>	<b>69 537</b>	<b>69 463</b>	<b>83 885</b>	<b>88 096</b>	<b>88 096</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	33 703	27 103	30 051	31 975	33 672	33 672	35 692	37 493	39 555
Households	17 283	27 396	28 332	24 899	35 865	35 791	48 193	50 603	48 541
<b>Payments for capital assets</b>	<b>39 457</b>	<b>24 440</b>	<b>17 884</b>	<b>26 501</b>	<b>26 501</b>	<b>30 134</b>	<b>86 710</b>	<b>86 709</b>	<b>34 710</b>
Buildings and other fixed structures	337	-	-	-	-	-	-	-	-
Machinery and equipment	39 120	24 440	17 884	26 501	26 501	30 134	86 710	86 709	34 710
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	-	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>-</b>	<b>15</b>	<b>-</b>	<b>268</b>	<b>1 179</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>3 883 814</b>	<b>4 378 814</b>	<b>5 071 290</b>	<b>5 549 184</b>	<b>5 736 592</b>	<b>5 853 243</b>	<b>6 366 182</b>	<b>6 863 490</b>	<b>7 199 701</b>

The sustained growth in this programme caters for the various wage agreements and includes the carry-through costs of new MDR/XDR TB facilities opened at Greytown, Murchison and Thulasizwe Hospitals, in line with national policy. The cost of the introduction of the various OSDs for medical personnel and the higher than anticipated wage agreements is evident in the significant annual increases. Another factor which has influenced the significant growth trend is the high rate of inflation, particularly in 2008/09 and 2009/10 on *Goods and services*, especially on medical supplies and services, including NHLS and catering. The large increase in the 2010/11 Adjusted Appropriation is mainly due to the 2010 wage agreement and the reprioritisation of funds from the HIV and AIDS equitable share to this programme to offset the cost of unfunded mandates resulting mainly from the OSDs for medical personnel.

The carry-through costs are reflected in the 2011/12 MTEF, including funding for national priorities such as improving hospital norms and standards, capacity building, the previously mentioned general policy adjustment and health technology. Also affecting the 2011/12 MTEF is further funding for various OSDs, as well as a significant amount for essential equipment at the general hospitals.

The increase in the sub-programme: General (Regional) Hospitals from 2008/09 relates mainly to various OSDs and wage agreements, the high inflation rate on foodstuffs and medical supplies and services, as well as the take-over of the laboratory services by NHLS in 2008/09. The significant increase in 2009/10 is also due to increased patient demand for services. The increase in the 2010/11 Adjusted Appropriation and Revised Estimates includes additional funding for the OSDs for medical personnel, as well as the higher than anticipated 2010 wage agreement. The significant increase over the 2011/12 MTEF relates to funding for national priorities for goods and services, registrars, improvement of public norms and standards, OSDs for medical personnel and health technology. There is substantial additional funding to replace essential machinery and equipment, especially in 2011/12 and 2012/13.

The Tuberculosis Hospitals sub-programme shows a steady growth over the seven-year period, with a significant increase in 2008/09 related to the provision of funding for the treatment of MDR/XDR TB. Additional funding, originally allocated in the 2008/09 MTEF, grows significantly in 2011/12, and is reflected in the figures going forward. Additional funding was also provided for goods and services, including linen and patient clothing, in the 2011/12 MTEF.

The increasing trend in the sub-programme: Psychiatric/Mental Hospitals relates mainly to the various wage agreements and OSDs. Additional funding was provided in 2010/11 for the OSDs for medical personnel. The carry-through costs for these increases are reflected in the 2011/12 MTEF.

The increase in the sub-programme: Sub-acute, Step-down and Chronic Medical Hospitals in 2010/11 relates to the movement of the Montebello Chronic Sick Home from Programme 2, as it is more appropriately placed here with regard to its service delivery. Included in the increasing trend are the higher than anticipated annual wage agreements, OSD expenditure and carry-through costs thereof. Additional funding was provided in 2011/12 to purchase patient clothing and bed linen.

The increase from 2007/08 against *Compensation of employees* relates mainly to the introduction of the various OSDs and wage agreements. The increase from 2011/12 includes a portion of the funding for the improvement of the general health capacity provided as a national priority in the 2009/10 MTEF, as well as the carry-through costs of the various OSDs and wage agreements. Funding has also been provided in the 2011/12 MTEF for national priorities for building capacity in personnel, for registrars, improving hospital norms and standards, as well as for the general policy adjustment.

The significant increase against *Goods and services* from 2007/08 to 2008/09 pertains mainly to the high inflation rate, especially on foodstuffs and medical supplies and services, as well as the cost of the NHLS. The notable increase from 2008/09 to 2009/10 is mainly due to significant increases in laboratory services fees and the cost of medicines and medical supplies, as well as the high rate of inflation. The increase in the 2010/11 Revised Estimate relates to the increase in municipal charges, such as electricity, and the cost of ensuring the continuation of services during the extended strike in 2010. Included in the trend for the 2011/12 MTEF is national priority funding for improving norms and standards at public hospitals, additional capacity for purchasing goods and services and funding for the general policy adjustment.

*Transfers and subsidies to: Non-profit institutions* shows a downward trend from 2007/08 to 2008/09 due to the previously mentioned provincialisation of two life-care institutions in June 2007 (Richmond Chest and Ekuhlengeni Psychiatric Hospitals). Since the provincialisation, these institutions are catered for under *Current payments*. The increase in 2009/10 relates to the introduction of the OSD for doctors in those institutions which qualify. The higher than anticipated wage agreements also impact on this category. Increases over the 2011/12 MTEF are for inflationary purposes only.

*Machinery and equipment* in 2007/08 included the once-off purchase of vehicles and ventilator equipment for the TB crisis in KZN. This accounts for the decrease in 2008/09, as well as a drive in that year to reduce overall expenditure. The decrease in 2009/10 relates mainly to cost-cutting. The increase from 2010/11 relates to the need to replace essential equipment, especially at regional provincial hospitals.

## Service delivery measures – Programme 4: Provincial Hospital Services

Table 7.28 below illustrates the main service delivery measures pertaining to Programme 4.

**Table 7.28: Service delivery measures – Programme 4: Provincial Hospital Services**

Table A20: Service delivery measures - Programme 4: Provincial Hospital Services					
Outputs	Performance indicators	Estimated performance	Medium-term targets		
		2010/11	2011/12	2012/13	2013/14
<b>General (Regional) Hospitals</b>					
Rendering of hospital services at a general specialist level and a platform for training of health workers and research	• Average length of stay	5.6 Days	5.2 Days	5 Days	4.9 Days
	• Bed utilisation rate	74%	74%	75%	75%
	• Total separations	312 932	350 567	361 084	364 173
	• Patient-day equivalent (PDE)	2 822 164	2 904 952	2 983 100	2 990 241
	• Total OPD headcount	2 691 646	2 817 960	2 875 498	2 912 112
	• Caesarean section rate	43%	42%	41%	40%
	• Cost per day patient equivalent (Rand)	R1 459	R 1 600	R1 700	R1 750
	• % of complaints of users of regional hospitals services resolved within 25 days	81%	100%	100%	100%
	• % of regional hospitals with monthly mortality and morbidity meetings	100%	100%	100%	100%
	• % of regional hospitals assessed for compliance against the 6 priorities of the core standards	100%	100%	100%	100%

## 6.5 Programme 5: Central Hospital Services

The main purpose of Programme 5: Central Hospital Services is to provide tertiary health services and to create a platform for the training of health workers. Tables 7.29 and 7.30 below summarise payments and budgeted estimates relating to this programme.

**Table 7.29: Summary of payments and estimates - Programme 5: Central Hospital Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Central Hospital Services	427 508	502 028	506 868	684 786	694 030	705 949	742 612	804 225	819 008
Provincial Tertiary Hospital Services	980 195	1 319 193	1 552 267	1 460 031	1 584 440	1 512 478	1 731 370	1 937 798	2 121 692
<b>Total</b>	<b>1 407 703</b>	<b>1 821 221</b>	<b>2 059 135</b>	<b>2 144 817</b>	<b>2 278 470</b>	<b>2 218 427</b>	<b>2 473 982</b>	<b>2 742 023</b>	<b>2 940 700</b>

**Table 7.30: Summary of payments and estimates by economic classification - Programme 5: Central Hospital Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>1 259 830</b>	<b>1 547 759</b>	<b>1 747 573</b>	<b>1 910 731</b>	<b>2 044 384</b>	<b>1 996 433</b>	<b>2 193 724</b>	<b>2 425 432</b>	<b>2 581 782</b>
Compensation of employees	572 218	717 374	802 490	883 195	1 031 848	1 025 034	1 115 927	1 206 375	1 320 318
Goods and services	687 612	830 385	945 083	1 027 536	1 012 536	971 399	1 077 797	1 219 057	1 261 464
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>624</b>	<b>8 186</b>	<b>2 653</b>	<b>3 555</b>	<b>3 555</b>	<b>4 816</b>	<b>3 645</b>	<b>3 827</b>	<b>3 827</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	-	-	-	-	-	-	-	-	-
Households	624	8 186	2 653	3 555	3 555	4 816	3 645	3 827	3 827
<b>Payments for capital assets</b>	<b>147 249</b>	<b>265 276</b>	<b>308 909</b>	<b>230 531</b>	<b>230 531</b>	<b>217 146</b>	<b>276 613</b>	<b>312 764</b>	<b>355 091</b>
Buildings and other fixed structures	-	-	-	-	-	-	-	-	-
Machinery and equipment	147 249	265 276	308 909	230 531	230 531	217 146	276 613	312 764	355 091
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	-	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>32</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>1 407 703</b>	<b>1 821 221</b>	<b>2 059 135</b>	<b>2 144 817</b>	<b>2 278 470</b>	<b>2 218 427</b>	<b>2 473 982</b>	<b>2 742 023</b>	<b>2 940 700</b>

The sustained positive growth across the programme as a whole from 2008/09 onward is due to the increasing demand for tertiary and central hospital services and the introduction of the initiative for the modernisation of tertiary services in 2007/08, as well as the various OSDs for medical personnel, the annual wage agreements and the related carry-through costs. The significant increases from 2007/08 to 2008/09 and from 2008/09 to 2009/10 relate mainly to the high inflation rate on medicines, medical supplies and medical service costs. The 2011/12 MTEF includes additional funding for capacity building from the 2009/10 MTEF (see Table 7.5) and additional funding provided over the 2011/12 MTEF for national priorities, including the various OSDs, capacity building in personnel and *Goods and services*, registrars, improvement of public hospital norms and standards, as well as funding for the previously mentioned general policy adjustment currently being implemented by the department.

The increasing trend in *Compensation of employees* includes the higher than anticipated annual wage agreements and the carry-through costs of the OSDs for medical personnel. The increase over the 2011/12 MTEF includes funding for the improvement of general health capacity, the carry-through costs of the wage agreements and the various categories of OSD, as well as the national priorities for the 2011/12 MTEF mentioned above.

The notable increase in *Goods and services* from 2007/08 to 2009/10 is due mainly to the high inflation rate on medical supplies, medicines and medical services and the rand/dollar exchange rate. The lower than anticipated figure in the 2010/11 Revised Estimate relates to the reduction in anticipated laboratory costs owing to an agreement between the NHLS and the department, which is still being finalised, and the lower than anticipated expenditure on medicine and medical supplies, due to lower contract prices. The 2011/12 MTEF includes funding from the 2009/10 MTEF for national priorities for building capacity, improving the standards and norms in public hospitals and funding for the general policy adjustment.

The increase in *Transfers and subsidies to: Households* in 2008/09 and the 2010/11 Revised Estimate relates to medico-legal claims against the department.

The notable increase in *Machinery and equipment* in 2009/10 is due to additional funding provided for the modernisation of tertiary services. The increase over the 2011/12 MTEF relates mainly to the modernisation and expansion of tertiary services.

## Service delivery measures – Programme 5: Central Hospital Services

Table 7.31 illustrates service delivery measures pertaining to Programme 5: Central Hospital Services.

**Table 7.31: Service delivery measures – Programme 5: Central Hospital Services**

Table 10-1: Service delivery measures - Programmes of Central Hospital Services						
Outputs	Performance indicators	Estimated performance	Medium-term targets			
		2010/11	2011/12	2012/13	2013/14	
1. National Central Hospitals						
Rendering of a highly specialised medical health and quaternary service on a national basis and a platform for the training of health workers and research	• Average length of stay	9.1 Days	7 Days	6 Days	5 Days	
	• Bed utilisation rate	66%	69%	72%	74%	
	• Total separations	20 248	22 488	24 215	26 015	
	• PDE	248 586	269 014	278 429	279 394	
	• Total OPD headcount	161 244	185 111	197 062	199 033	
	• Caesarean section rate	71%	70%	69%	69%	
	• Cost per day patient equivalent (Rand)	R 8 536	R 8 000	R 8 000	R 7 600	
	• % of complaints of users of national central hospitals services resolved within 25 days	100%	100%	100%	100%	
	• % of national central hospitals with monthly mortality and morbidity meetings	100%	100%	100%	100%	
	• % of national central hospitals assessed for compliance against the 6 priorities of the core standards	100%	100%	100%	100%	

**Table 7.31: Service delivery measures – Programme 5: Central Hospital Services**

Outputs	Performance indicators	Estimated performance	Medium-term targets			
		2010/11	2011/12	2012/13	2013/14	
2. Provincial Tertiary Hospital Services						
To provide tertiary health services and create a platform for the training of health workers	• Average length of stay	10.3 Days	9 Days	8 Days	7 Days	
	• Bed utilisation rate	72%	73%	74%	75%	
	• Total separations	11 742	12 266	12 967	13 217	
	• PDE	191 240	192 938	194 136	195 279	
	• Total OPD headcount	179 236	181 793	190 893	198 996	
	• Caesarean section rate	70%	70%	68%	68%	
	• Cost per day patient equivalent (Rand)	R 2 427	R 3 250	R 3 300	R 3 400	
	• % of complaints of users of tertiary hospitals services resolved within 25 days	100%	100%	100%	100%	
	• % of tertiary hospitals with monthly mortality and morbidity meetings	100%	100%	100%	100%	
	• % of tertiary hospitals assessed for compliance against the 6 priorities of the core standards	100%	100%	100%	100%	

## 6.6 Programme 6: Health Sciences and Training

The purpose of this programme is to render training and development opportunities for actual and potential employees of the department. The five sub-programmes have the following main aims:

- To provide for training of nurses at under-graduate and post-basic level;
- To provide training of rescue and ambulance personnel;
- To provide PHC related training for personnel;
- To provide skills development interventions for all occupational categories in the department; and
- To provide bursaries for health science training at undergraduate and post-graduate levels.

Tables 7.32 and 7.33 summarise information relating to Programme 6 for the period 2007/08 to 2013/14.

The increasing trend for this programme can largely be attributed to the training drive, increased bursary allocation and the provision for the intake of medical interns, dentists, pharmacists and other interns. The increases in 2008/09 and 2009/10 are caused by the carry-through costs of the various OSDs for medical personnel and wage agreements, the introduction of the compulsory two-year internship for medical doctors and the drive to increase the capacity of nursing personnel. The decrease in the 2010/11 Revised Estimate when compared with the Adjusted Appropriation, relates mainly to the introduction of stipends for student nurses, which are replacing the previously fully funded student nurse posts. The other contributing factor is the under-expenditure related to the EMS training college, which is not functioning presently as it is in the process of being relocated from Pietermaritzburg to Montebello Hospital.

**Table 7.32: Summary of payments and estimates - Programme 6: Health Sciences and Training**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Nursing Training Colleges	278 799	336 812	362 719	373 615	412 480	390 860	424 816	453 386	485 068
EMS Training Colleges	13 452	16 969	19 338	24 233	16 413	13 246	19 234	20 401	22 063
Bursaries	33 573	44 894	42 454	45 142	53 142	57 757	63 142	66 299	72 688
Primary Health Care Training	46 892	65 343	76 238	79 373	78 452	77 157	78 945	83 516	85 142
Training Other	151 617	212 583	292 437	286 128	332 740	325 073	347 305	375 093	399 120
<b>Total</b>	<b>524 333</b>	<b>676 601</b>	<b>793 186</b>	<b>808 491</b>	<b>893 227</b>	<b>864 093</b>	<b>933 442</b>	<b>998 695</b>	<b>1 064 081</b>

Table 7.33: Summary of payments and estimates by economic classification - Programme 6: Health Sciences and Training

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>478 763</b>	<b>618 930</b>	<b>727 959</b>	<b>744 055</b>	<b>819 403</b>	<b>786 828</b>	<b>844 376</b>	<b>905 081</b>	<b>967 688</b>
Compensation of employees	409 832	528 940	662 000	664 176	752 875	728 596	779 597	834 169	892 560
Goods and services	68 931	89 990	65 959	79 879	66 528	58 232	64 779	70 912	75 128
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>42 595</b>	<b>56 136</b>	<b>59 829</b>	<b>62 685</b>	<b>72 069</b>	<b>76 710</b>	<b>82 891</b>	<b>87 440</b>	<b>94 620</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	4 470	5 827	6 784	7 876	7 637	7 637	8 166	8 963	9 005
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	4 809	5 967	11 357	12 377	13 490	13 490	14 298	15 029	15 856
Households	33 316	44 342	41 688	42 432	50 942	55 583	60 427	63 448	69 759
<b>Payments for capital assets</b>	<b>2 975</b>	<b>1 519</b>	<b>5 398</b>	<b>1 751</b>	<b>1 751</b>	<b>536</b>	<b>6 175</b>	<b>6 174</b>	<b>1 773</b>
Buildings and other fixed structures	-	116	-	-	-	-	-	-	-
Machinery and equipment	2 931	1 403	5 398	1 751	1 751	536	6 175	6 174	1 773
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	44	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>16</b>	<b>-</b>	<b>-</b>	<b>4</b>	<b>19</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>524 333</b>	<b>676 601</b>	<b>793 186</b>	<b>808 491</b>	<b>893 227</b>	<b>864 093</b>	<b>933 442</b>	<b>998 695</b>	<b>1 064 081</b>

In the sub-programmes: Nursing Training Colleges and Primary Health Care Training, the increase in 2008/09 relates mainly to the carry-through costs of the OSDs for medical personnel and the 2008 wage agreement. There was also a significant increase under *Goods and services* for computer services for these two sub-programmes in 2008/09 and 2009/10 due to improvements to the colleges' network access. Additional funding has been provided from 2011/12 to support improvement at the nursing colleges.

The increase in 2009/10 in the sub-programme: EMS Training Colleges relates to training for the 2010 World Cup. The decrease in the 2010/11 Revised Estimate relates to the decision to relocate the college, as mentioned above, resulting in reduced expenditure for training. The increased trend from 2011/12 and 2013/14 is intended to provide funding for establishing the college and to provide improved training for emergency personnel as part of the drive to meet the national norms for emergency medical services.

The reduced amount reflected in the sub-programme: Bursaries in 2009/10 results from enforced savings in an effort to reduce the department's overall expenditure. A decision was taken to provide additional funding to this sub-programme in the 2010/11 Adjusted Appropriation, and this trend has been continued over the 2011/12 MTEF.

In the sub-programme: Training Other, the high increase in 2008/09 is due to the extension of the medical internship period to two years. This increase is reflected in 2009/10 which also includes the introduction of the OSD for doctors. Included in the 2010/11 Adjusted Appropriation is additional funding to cater for under-funded mandates such as the various OSDs and wage agreements provided in the 2010/11 Main Appropriation, as well as funding for the 2010 wage agreement. The increased trend is reflected in the allocations over the 2011/12 MTEF period.

The increase against *Compensation of employees* in 2008/09 pertains to the carry-through costs for the OSDs for medical personnel, as well as the expansion of the medical intern programme to two years and wage agreements. The trend from 2010/11 includes the annual wage agreements and the various OSDs.

The notable increase in *Machinery and equipment* in 2009/10 relates to the purchasing of medical equipment for the 2010 World Cup, for training of emergency medical workers. The decrease in this category in 2010/11 results from cost-cutting to remain within budget. The increase in 2011/12 relates to reprioritisation for the relocation of the EMS College.

### Service delivery measures – Programme 6: Health Sciences and Training

Table 7.34 below illustrates service delivery pertaining to Programme 6: Health Sciences and Training. Note that with regard to the Performance indicator *Intake of nurse students*, the department can only project to a certain point, as the college will need to get accreditation for training provided. This target is

therefore based on the last intake of nurses if the college does not receive accreditation as an institute of higher learning before 2012.

**Table 7.34: Service delivery measures – Programme 6: Health Sciences and Training**

Outputs		Performance indicators	Estimated performance	Medium-term targets			
			2010/11	2011/12	2012/13	2013/14	
1. Nursing Training Colleges							
Training of nurses at under-graduate, and post-basic level. Target group includes actual and potential employees	• Intake of nurse students	2 500	2 404	383	-		
	• Basic nurse students graduating	1 500	1 400	1 200	1 000		
2. Bursaries							
Provision of bursaries for health science training programmes at undergraduate and postgraduate levels. Target group includes actual and potential employees	• Students with bursaries from the province	842	842	860	770		

## 6.7 Programme 7: Health Care Support Services

The main aim of this programme is to house the provincial Medical Supply Centre, which manages the supply of pharmaceuticals and medical sundries to hospitals, community health centres, clinics and local authorities, via the Medicine Trading Account.

Tables 7.35 and 7.36 below summarise the payments and estimates relating to this programme for the period 2007/08 to 2013/14. The increase in 2008/09 results from an increased stock level to provide for the increased demand for ARV medication and to provide for the increased turn-over of medicines. Funding was provided in 2009/10 to maintain the current level of stock, as well as for the provision of vaccines required for the reduction of child morbidity and mortality. The amounts in 2010/11 were reduced due to limited storage space available, and growth over the 2011/12 MTEF is in line with inflation.

**Table 7.35: Summary of payments and estimates - Programme 7: Health Care Support Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11	2010/11	2010/11	2011/12	2012/13	2013/14
Medicine Trading Account	12 649	34 209	27 528	10 764	10 764	10 764	13 971	15 170	16 004
<b>Total</b>	<b>12 649</b>	<b>34 209</b>	<b>27 528</b>	<b>10 764</b>	<b>10 764</b>	<b>10 764</b>	<b>13 971</b>	<b>15 170</b>	<b>16 004</b>

**Table 7.36: Summary of payments and estimates by economic classification - Programme 7: Health Care Support Services**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11	2010/11	2010/11	2011/12	2012/13	2013/14
<b>Current payments</b>	-	79	-	-	-	-	-	-	-
Compensation of employees	-	-	-	-	-	-	-	-	-
Goods and services	-	79	-	-	-	-	-	-	-
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>12 649</b>	<b>34 130</b>	<b>27 528</b>	<b>10 764</b>	<b>10 764</b>	<b>10 764</b>	<b>13 971</b>	<b>15 170</b>	<b>16 004</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	12 649	34 130	27 528	10 764	10 764	10 764	13 971	15 170	16 004
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	-	-	-	-	-	-	-	-	-
Households	-	-	-	-	-	-	-	-	-
<b>Payments for capital assets</b>	-	-	-	-	-	-	-	-	-
Buildings and other fixed structures	-	-	-	-	-	-	-	-	-
Machinery and equipment	-	-	-	-	-	-	-	-	-
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	-	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	-	-	-	-	-	-	-	-	-
<b>Total</b>	<b>12 649</b>	<b>34 209</b>	<b>27 528</b>	<b>10 764</b>	<b>10 764</b>	<b>10 764</b>	<b>13 971</b>	<b>15 170</b>	<b>16 004</b>

## 6.8 Programme 8: Health Facilities Management

Programme 8: Health Facilities Management consists of six sub-programmes, the main aim of which is the facilities management of community health clinics, community health centres, district hospitals, emergency medical services facilities, provincial hospitals, central and tertiary hospitals, as well as all other buildings and structures.

The main activities of the programme are to provide new health facilities, and rehabilitate, upgrade and maintain existing facilities. This includes the provision of additional primary health care facilities, to ensure improved access to health services in the under-served areas of the province, as well as the provision of major medical equipment.

Tables 7.37 and 7.38 below summarise payments and estimates relating to Programme 8.

**Table 7.37: Summary of payments and estimates - Programme 8: Health Facilities Management**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Community Health Facilities	240 029	280 625	552 924	432 400	444 154	381 263	459 555	492 267	502 130
District Hospital Services	521 236	615 946	482 159	516 573	526 126	516 286	562 308	518 947	632 977
Emergency Medical Services	8 817	4 734	1 201	4 805	4 805	2 391	5 093	5 399	5 696
Provincial Hospital Services	158 455	111 763	187 320	419 876	419 876	343 414	449 393	475 700	478 690
Central Hospital Services	12 001	15 401	35 161	26 841	26 841	22 391	28 177	29 966	31 614
Other Facilities	152 269	75 089	119 484	171 523	170 760	188 666	182 010	188 521	197 001
<b>Total</b>	<b>1 092 807</b>	<b>1 103 558</b>	<b>1 378 249</b>	<b>1 572 018</b>	<b>1 592 562</b>	<b>1 454 411</b>	<b>1 686 536</b>	<b>1 710 800</b>	<b>1 848 108</b>

**Table 7.38: Summary of payments and estimates by economic classification - Programme 8: Health Facilities Management**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>356 171</b>	<b>338 010</b>	<b>264 909</b>	<b>337 301</b>	<b>337 355</b>	<b>293 569</b>	<b>250 840</b>	<b>251 574</b>	<b>300 920</b>
Compensation of employees	1 140	5 510	3 448	5 104	5 158	3 845	5 329	5 025	4 986
Goods and services	355 031	332 500	261 461	332 197	332 197	289 724	245 511	246 549	295 934
Interest and rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to:</b>	<b>-</b>	<b>326</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Non-profit institutions	-	-	-	-	-	-	-	-	-
Households	-	326	-	-	-	-	-	-	-
<b>Payments for capital assets</b>	<b>736 636</b>	<b>765 222</b>	<b>1 113 340</b>	<b>1 234 717</b>	<b>1 255 207</b>	<b>1 160 842</b>	<b>1 435 696</b>	<b>1 459 226</b>	<b>1 547 188</b>
Buildings and other fixed structures	621 725	635 339	1 005 258	1 097 525	1 117 217	916 506	1 357 938	1 295 069	1 436 729
Machinery and equipment	97 783	129 883	108 082	137 192	137 192	243 538	77 758	164 157	110 459
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	17 128	-	-	-	798	798	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>1 092 807</b>	<b>1 103 558</b>	<b>1 378 249</b>	<b>1 572 018</b>	<b>1 592 562</b>	<b>1 454 411</b>	<b>1 686 536</b>	<b>1 710 800</b>	<b>1 848 108</b>

The increasing trend is largely the result of a drive to improve and maintain the infrastructure of the department. The significant increase over the seven-year period comprises increasing amounts of both conditional grant funding, especially the Hospital Revitalisation grant and the Health Infrastructure grant (previously IGP), as well as the department's equitable share. The reduced amount provided for the Hospital Revitalisation grant in 2008/09 is reflected in the reduced spending under the sub-programme: District Hospital Services in that year. This is also noted in the negative trend against *Buildings and other fixed structures* in 2008/09. The significant increase in 2009/10 relates to over-expenditure on the Forensic Pathology Services grant of approximately R143 million for which a roll-over of funding from 2008/09 was not approved (as mentioned previously), as well as to those projects which were on site and could not be delayed or stopped without further cost to the department. Also included in 2009/10 is the under-expenditure of approximately R224.909 million against the Hospital Revitalisation grant for which a roll-over to 2011/12 was requested, as the department was not in a position to spend it in 2010/11. Note that only R63.953 million has been approved for roll-over and is included in the budget for 2011/12.



The increase in the 2010/11 Main Appropriation relates mainly to significant increases in the Health Infrastructure grant and the Hospital Revitalisation grant. The 2010/11 Adjusted Appropriation includes a reprioritisation of R10 million to the Forensic Pathology Services grant from Programme 2: District Health Services, to this programme, to offset over-expenditure against the grant. The 2010/11 Adjusted Appropriation also includes an amount of R11.307 million from the EPWP Incentive grant. The decrease in the 2010/11 Revised Estimate results mainly from anticipated under-spending of R117.436 million on the Hospital Revitalisation grant, for which a roll-over will be requested. The allocation for 2011/12 includes an additional R63.953 million, being the roll-over of the Hospital Revitalisation grant from 2009/10. The increase in this programme over the 2011/12 MTEF period relates mainly to the significant increases in the Health Infrastructure and Hospital Revitalisation grants.

## 7. Other programme information

### 7.1 Personnel numbers and costs

Tables 7.39 and 7.40 below reflect the personnel information for the Department of Health.

**Table 7.39: Personnel numbers and costs per programme**

	As at 31 March 2008	As at 31 March 2009	As at 31 March 2010	As at 31 March 2011	As at 31 March 2012	As at 31 March 2013	As at 31 March 2014
<b>Personnel numbers</b>							
1. Administration	713	688	674	691	691	691	691
2. District Health Services	36 648	35 719	35 023	38 772	38 772	38 772	38 772
3. Emergency Medical Services	3 044	3 059	2 909	2 924	2 924	2 924	2 924
4. Provincial Hospital Services	18 817	18 730	18 070	18 058	18 058	18 058	18 058
5. Central Hospital Services	3 650	3 665	3 629	3 743	3 743	3 743	3 743
6. Health Sciences and Training	4 191	4 199	4 532	4 692	4 692	4 692	4 692
7. Health Care Support Services	-	-	-	-	-	-	-
8. Health Facilities Management	6	9	12	9	9	9	9
<b>Total</b>	<b>67 069</b>	<b>66 069</b>	<b>64 849</b>	<b>68 889</b>	<b>68 889</b>	<b>68 889</b>	<b>68 889</b>
Total personnel cost (R thousand)	8 643 767	10 077 044	11 367 849	13 153 297	14 837 633	15 854 113	17 097 169
Unit cost (R thousand)	129	153	175	191	215	230	248

**Table 7.40: Details of departmental personnel numbers and costs**

	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Total for department</b>									
Personnel numbers (head count)	67 069	66 069	64 849	66 113	66 171	68 889	68 889	68 889	68 889
Personnel cost (R thousand)	8 643 767	10 077 044	11 367 849	12 739 583	13 231 652	13 153 297	14 837 633	15 854 113	17 097 169
<b>Human resources component</b>									
Personnel numbers (head count)	1 250	1 259	1 126	1 074	1 061	1 074	1 074	1 074	1 074
Personnel cost (R thousand)	116 958	179 354	204 439	205 109	199 601	205 109	218 646	231 765	247 989
Head count as % of total for department	1.86	1.91	1.74	1.62	1.60	1.56	1.56	1.56	1.56
Personnel cost as % of total for department	1.35	1.78	1.80	1.61	1.51	1.56	1.47	1.46	1.45
<b>Finance component</b>									
Personnel numbers (head count)	2 983	2 962	3 042	3 547	2 985	3 547	3 547	3 547	3 547
Personnel cost (R thousand)	220 119	365 388	441 262	421 121	442 681	421 121	448 914	475 849	509 158
Head count as % of total for department	4.45	4.48	4.69	5.37	4.51	5.15	5.15	5.15	5.15
Personnel cost as % of total for department	2.55	3.63	3.88	3.31	3.35	3.20	3.03	3.00	2.98
<b>Full time workers</b>									
Personnel numbers (head count)	63 112	61 646	60 321	61 582	61 052	64 170	64 170	64 170	64 170
Personnel cost (R thousand)	8 220 362	9 576 327	10 745 215	12 161 688	12 557 112	12 556 635	14 212 562	15 201 114	16 398 460
Head count as % of total for department	94.10	93.31	93.02	93.15	92.26	93.15	93.15	93.15	93.15
Personnel cost as % of total for department	95.10	95.03	94.52	95.46	94.90	95.46	95.79	95.88	95.91
<b>Part-time workers</b>									
Personnel numbers (head count)	864	792	774	798	768	827	827	827	827
Personnel cost (R thousand)	127 835	126 410	97 523	141 256	135 763	145 843	159 614	159 614	170 787
Head count as % of total for department	1.29	1.20	1.19	1.21	1.16	1.20	1.20	1.20	1.20
Personnel cost as % of total for department	190.60	191.33	150.38	213.66	205.17	211.71	231.70	231.70	247.92
<b>Contract workers</b>									
Personnel numbers (head count)	3 093	3 631	3 754	3 733	4 351	3 892	3 892	3 892	3 892
Personnel cost (R thousand)	295 570	374 307	525 111	436 639	538 777	450 819	465 457	493 385	527 922
Head count as % of total for department	4.61	5.50	5.79	5.65	6.58	5.65	5.65	5.65	5.65
Personnel cost as % of total for department	3.42	3.71	4.62	3.43	4.07	3.43	3.14	3.11	3.09

The following personnel are not reflected in the information provided as they are not paid from the department's voted funds:

- Employees whose salaries are paid from donor funds;
- Personnel working at the Provincial Pharmacy Supply Depot, who are paid from the Medicine Trading Account; and
- Staff occupying sub-vented (shared costs) posts and whose salaries are claimed from the University of KwaZulu-Natal.

It is evident from the tables that, in 2007/08, the department provided funding for additional posts in order to improve its capacity. The minimal increase in the figures from 2009/10 to 2010/11 relate mainly to contractual obligations to bursary holders. The department is, however, committed to the Cabinet-approved Provincial Recovery Plan of only filling critical posts. Attrition is being allowed to take its course and, once funding becomes available, the department will commence filling additional posts.

## 7.2 Training

The department is required by the Skills Development Act to budget at least 1 per cent of its salary expenses on staff training, to cater for human resource development. Tables 7.41 and 7.42 reflect departmental expenditure on training, which is centralised under Programme 6: Health Sciences and Training. The costs reflected in the table include the costs of staff and other running costs within Programme 6, hence the total cost is more than that reflected against *Training and development* in Annexure 7B. The training provided is for medical interns, nurses, emergency medical rescue and ambulance personnel and skills development for all occupational categories in the department. The department has several training programmes aimed at developing and retaining talent. These include training at Nursing Colleges, the Cuban doctors' training programme as well as registrar training programmes in respect of specialist medical training.

**Table 7.41: Payments on training**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Programme 6: Health Sciences and Training									
Nursing Training Colleges	278 799	336 812	362 719	373 615	412 480	390 860	424 816	453 386	485 068
EMS Training Colleges	13 452	16 969	19 338	24 233	16 413	13 246	19 234	20 401	26 463
Bursaries	33 573	44 894	42 454	45 142	53 142	57 757	63 142	66 299	68 288
Primary Health Care Training	46 892	65 343	76 238	79 373	78 452	77 157	78 945	83 516	85 142
Training Other	151 617	212 583	292 437	286 128	332 740	325 073	347 305	375 093	399 120
<b>Total</b>	<b>524 333</b>	<b>676 601</b>	<b>793 186</b>	<b>808 491</b>	<b>893 227</b>	<b>864 093</b>	<b>933 442</b>	<b>998 695</b>	<b>1 064 081</b>

Note that, in Table 7.42 below, the department has not been able to supply data for the number of training opportunities. This is receiving attention, with a view to making the data available going forward.

**Table 7.42: Information on training**

	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
Number of staff	67 069	66 069	64 849	66 113	66 171	68 889	68 889	68 889	68 889
Number of personnel trained	24 791	24 768	7 429	19 633	19 633	-	19 615	19 639	20 505
of which									
Male	7 931	8 421	2 027	5 890	5 890	-	5 872	5 896	5 932
Female	16 860	16 347	5 402	13 743	13 743	-	13 743	13 743	14 573
Number of training opportunities	-	-	-	-	-	-	-	-	-
of which									
Tertiary									
Workshops									
Seminars									
Other									
Number of bursaries offered	755	755	877	820	820	-	770	770	770
External	755	755	877	820	820	-	770	770	770
Internal									
Number of interns appointed	930	998	782	1 100	1 100	-	-	-	-
Number of learnerships appointed	-	-	-	250	250	-	250	250	250
Number of days spent on training									

## ANNEXURE – VOTE 7: HEALTH

Table 7.A: Details of departmental receipts

R thousand	Audited Outcome			Main	Adjusted	Revised	Medium-term Estimates		
	2007/08	2008/09	2009/10	Appropriation	Appropriation	Estimate	2011/12	2012/13	2013/14
					2010/11				
<b>Tax receipts</b>	-	-	-	-	-	-	-	-	-
Casino taxes									
Horse racing taxes									
Liquor licences									
Motor vehicle licences									
<b>Sale of goods and services other than capital assets</b>	<b>142 248</b>	<b>158 432</b>	<b>198 762</b>	<b>201 282</b>	<b>201 282</b>	<b>146 135</b>	<b>213 359</b>	<b>224 027</b>	<b>236 349</b>
Sale of goods and services produced by dept. (excl. capital assets)	141 556	157 526	198 534	191 282	191 282	145 860	202 759	212 897	224 607
Sales by market establishments	8 715	9 917	10 850	11 253	11 253	10 309	11 928	12 524	13 213
Administrative fees	5 089	5 865	4 105	4 460	4 460	911	4 728	4 964	5 237
Other sales	127 752	141 744	183 579	175 569	175 569	134 640	186 103	195 409	206 157
Of which									
Health patient fees	91 149	93 931	133 750	124 689	124 689	84 433	132 170	138 779	146 412
Other	36 603	47 813	49 829	50 880	50 880	50 207	53 933	56 630	59 745
Sale of scrap, waste, arms and other used current goods (excluding capital assets)	692	906	228	10 000	10 000	275	10 600	11 130	11 742
<b>Transfers received from:</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Other governmental units									
Universities and technikons									
Foreign governments									
International organisations									
Public corporations and private enterprises									
Households and non-profit institutions									
<b>Fines, penalties and forfeits</b>	<b>-</b>	<b>-</b>	<b>11</b>	<b>-</b>	<b>-</b>	<b>8</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Interest, dividends and rent on land</b>	<b>13</b>	<b>3</b>	<b>74</b>	<b>24</b>	<b>24</b>	<b>484</b>	<b>25</b>	<b>27</b>	<b>28</b>
Interest	13	3	74	24	24	484	25	27	28
Dividends									
Rent on land									
<b>Sale of capital assets</b>	<b>29</b>	<b>-</b>	<b>14 678</b>	<b>19</b>	<b>19</b>	<b>-</b>	<b>20</b>	<b>21</b>	<b>22</b>
Land and subsoil assets									
Other capital assets	29	-	14 678	19	19	-	20	21	22
<b>Transactions in financial assets and liabilities</b>	<b>6 254</b>	<b>9 614</b>	<b>19 352</b>	<b>13 579</b>	<b>13 579</b>	<b>15 862</b>	<b>14 394</b>	<b>15 114</b>	<b>15 945</b>
<b>Total</b>	<b>148 544</b>	<b>168 049</b>	<b>232 877</b>	<b>214 904</b>	<b>214 904</b>	<b>162 489</b>	<b>227 798</b>	<b>239 189</b>	<b>252 344</b>

Table 7.B: Details of payments and estimates by economic classification

R thousand	Audited Outcome			Main	Adjusted	Revised	Medium-term Estimates		
	2007/08	2008/09	2009/10	Appropriation	Appropriation	Estimate	2011/12	2012/13	2013/14
<b>Current payments</b>	<b>13 543 139</b>	<b>15 467 893</b>	<b>17 550 235</b>	<b>19 489 701</b>	<b>19 895 546</b>	<b>19 483 495</b>	<b>21 844 207</b>	<b>23 590 845</b>	<b>25 479 507</b>
Compensation of employees	8 643 767	10 077 044	11 367 849	12 739 583	13 231 652	13 153 297	14 837 633	15 854 113	17 097 169
Salaries and wages	7 553 056	8 779 750	9 720 487	11 083 082	11 511 280	11 443 371	12 908 455	13 792 823	14 874 239
Social contributions	1 090 711	1 297 294	1 647 362	1 656 501	1 720 372	1 709 926	1 929 178	2 061 290	2 222 930
Goods and services	4 899 372	5 390 849	6 182 386	6 750 118	6 663 894	6 330 198	7 006 574	7 736 732	8 382 338
of which									
Administrative fees	5 856	204	54	116	157	68	93	102	104
Advertising	69 730	27 947	14 406	22 341	12 662	8 683	11 338	11 555	11 857
Assets <R5000	63 669	45 516	25 582	42 560	25 046	26 952	29 724	33 886	33 599
Audit cost: External	4 946	11 456	23 872	19 639	36 814	34 725	31 734	33 540	34 911
Bursaries (employees)	134	306	331	23	1 000	827	2 200	2 902	2 989
Catering: Departmental activities	29 904	17 236	5 461	10 316	1 660	1 480	2 139	2 336	2 652
Communication	107 654	103 323	94 599	104 228	86 587	82 773	91 543	96 288	102 827
Computer services	61 299	117 157	117 344	102 880	109 131	90 666	104 866	114 922	124 365
Cons/prof: Business & advisory services	12 884	5 806	25 640	5 309	20 451	12 587	12 317	12 698	12 053
Cons/prof: Infrastructure & planning	68 749	37 112	8 778	17 891	18 278	12 227	-	-	-
Cons/prof: Laboratory services	256 990	494 121	665 181	669 458	601 224	409 488	542 213	621 415	744 727
Cons/prof: Legal cost	5 186	6 578	4 110	2 727	3 452	2 728	2 924	3 147	3 376
Contractors	350 701	202 165	201 553	240 526	225 163	250 765	253 229	270 985	289 333
Agency & support/outsourced services	603 785	665 435	708 344	718 290	768 250	684 265	731 171	805 567	822 797
Entertainment	1 532	631	3	9	9	3	3	3	4
Fleet services (incl. GMT)	653	1 045	2 952	2 089	2 089	2 294	2 214	2 324	2 452
Housing	-	-	-	-	-	-	-	-	-
Inventory: Food and food supplies	206 014	184 995	199 964	220 647	185 645	145 204	159 740	177 721	199 557
Inventory: Fuel, oil and gas	175 040	234 215	231 391	233 856	249 450	243 058	269 400	302 004	352 560
Inventory: Learner and teacher supp material	-	-	-	-	-	-	-	-	-
Inventory: Raw materials	91 818	86 277	56 532	54 191	79 860	62 554	53 214	54 276	76 215
Inventory: Medical supplies	682 779	809 266	968 391	754 485	972 156	994 323	1 105 199	1 290 887	1 376 924
Inventory: Medicine	1 174 739	1 273 491	1 742 047	2 300 985	2 075 641	2 047 645	2 146 714	2 261 409	2 334 154
Medsas inventory interface	-	332	-	-	-	-	-	-	-
Inventory: Military stores	-	-	-	-	-	-	-	-	-
Inventory: Other consumables	179 680	132 873	174 038	188 003	175 970	186 417	258 150	237 142	272 345
Inventory: Stationery and printing	57 794	53 098	48 433	65 269	48 182	46 895	50 981	56 755	61 227
Lease payments (incl. operating, excl. fin)	110 043	130 512	129 734	174 569	159 352	151 023	162 494	172 644	185 102
Property payments	350 766	541 107	597 078	646 456	657 269	690 736	837 911	1 018 013	1 167 118
Transport provided: Departmental activity	20 975	21 260	30 572	28 745	33 913	30 434	31 936	33 663	34 802
Travel and subsistence	81 473	66 148	37 430	47 329	41 382	38 597	43 789	46 939	55 820
Training and development	49 849	36 350	31 824	37 745	22 296	22 224	17 650	18 711	20 761
Operating expenditure	41 971	70 806	28 946	31 028	49 905	49 698	50 583	53 497	56 262
Venues and facilities	32 759	14 081	7 796	8 408	900	859	1 105	1 401	1 445
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest	-	-	-	-	-	-	-	-	-
Rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to</b>	<b>345 325</b>	<b>446 661</b>	<b>495 327</b>	<b>518 832</b>	<b>565 661</b>	<b>573 015</b>	<b>522 821</b>	<b>549 953</b>	<b>576 116</b>
Provinces and municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds	-	-	-	-	-	-	-	-	-
Provincial agencies and funds	-	-	-	-	-	-	-	-	-
Municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Municipal agencies and funds	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	17 119	39 957	34 312	18 640	18 401	18 401	22 137	24 133	25 009
Social security funds	-	-	-	-	-	-	-	-	-
Entities receiving funds	17 119	39 957	34 312	18 640	18 401	18 401	22 137	24 133	25 009
Universities and technikons	-	40	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production	-	-	-	-	-	-	-	-	-
Other transfers	-	-	-	-	-	-	-	-	-
Private enterprises	-	-	-	-	-	-	-	-	-
Subsidies on production	-	-	-	-	-	-	-	-	-
Other transfers	-	-	-	-	-	-	-	-	-
Non-profit institutions	199 011	243 734	278 846	313 614	296 617	296 617	266 787	280 227	295 639
Households	66 385	112 437	101 111	95 658	115 387	122 946	139 724	146 709	151 148
Social benefits	26 452	41 193	42 950	42 675	50 004	51 206	60 713	50 596	49 996
Other transfers to households	39 933	71 244	58 161	52 983	65 383	71 740	79 011	96 113	101 152
<b>Payments for capital assets</b>	<b>1 070 936</b>	<b>1 188 449</b>	<b>1 545 699</b>	<b>1 649 148</b>	<b>1 658 217</b>	<b>1 578 435</b>	<b>2 117 827</b>	<b>2 184 326</b>	<b>2 133 801</b>
Buildings and other fixed structures	623 762	635 593	1 005 258	1 097 525	1 117 217	916 524	1 357 938	1 295 069	1 436 729
Buildings	623 762	635 593	1 005 258	1 097 525	1 117 217	916 524	1 357 938	1 295 069	1 436 729
Other fixed structures	-	-	-	-	-	-	-	-	-
Machinery and equipment	429 978	552 856	540 441	551 623	540 202	661 113	759 889	889 257	697 072
Transport equipment	107 464	101 088	69 271	109 516	97 344	112 796	191 526	192 702	130 019
Other machinery and equipment	322 514	451 768	471 170	442 107	442 858	548 317	568 363	696 555	567 053
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	17 196	-	-	-	798	798	-	-	-
<b>Payments for financial assets</b>	<b>41</b>	<b>98</b>	<b>758 015</b>	<b>-</b>	<b>762</b>	<b>3 199</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>14 959 441</b>	<b>17 103 101</b>	<b>20 349 276</b>	<b>21 657 681</b>	<b>22 120 186</b>	<b>21 638 144</b>	<b>24 484 855</b>	<b>26 325 124</b>	<b>28 189 424</b>
Unauth. exp. (1 <sup>st</sup> charge) not available for spending	-	-	(758 000)	-	-	-	-	-	-
<b>Baseline available for spending after 1<sup>st</sup> charge</b>	<b>14 959 441</b>	<b>17 103 101</b>	<b>19 591 276</b>	<b>21 657 681</b>	<b>22 120 186</b>	<b>21 638 144</b>	<b>24 484 855</b>	<b>26 325 124</b>	<b>28 189 424</b>

Table 7.C: Details of payments and estimates by economic classification - Programme 1: Administration

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11	2010/11	2010/11	2011/12	2012/13	2013/14
<b>Current payments</b>	<b>274 965</b>	<b>279 415</b>	<b>285 963</b>	<b>311 737</b>	<b>339 502</b>	<b>317 062</b>	<b>336 961</b>	<b>356 854</b>	<b>375 252</b>
Compensation of employees	141 966	163 648	168 705	196 478	184 269	189 057	202 290	216 450	231 601
Salaries and wages	123 834	142 136	146 547	170 374	160 314	164 480	175 913	188 312	201 493
Social contributions	18 132	21 512	22 158	26 104	23 955	24 577	26 377	28 138	30 108
Goods and services	132 999	115 767	117 258	115 259	155 233	128 005	134 671	140 404	143 651
of which									
Administrative fees	-	18	18	-	50	24	26	27	28
Advertising	6 892	1 947	940	1 779	700	342	402	422	435
Assets <R5000	940	326	521	281	2 395	1 066	1 366	1 435	1 478
Audit cost: External	-	4 198	12 935	5 920	19 314	17 475	12 498	13 092	13 485
Bursaries (employees)	12	-	-	-	-	-	-	-	-
Catering: Departmental activities	1 577	792	141	409	100	67	176	185	190
Communication	9 594	6 546	6 095	5 941	9 941	5 911	7 460	7 843	8 084
Computer services	13 036	17 812	24 532	19 098	25 574	21 545	22 821	23 952	24 665
Cons/prof: Business & advisory services	11 810	4 071	9 876	5 304	19 164	11 013	11 091	10 645	9 995
Cons/prof: Infrastructure & planning	-	-	-	-	-	-	-	-	-
Cons/prof: Laboratory services	-	-	-	-	-	-	-	-	-
Cons/prof: Legal cost	3 836	3 256	687	268	100	65	75	79	81
Contractors	14 706	783	25	697	30	17	6	6	6
Agency & support/outsourced services	17 867	18 008	12 461	15 777	1 200	2 486	1 406	1 476	1 520
Entertainment	23	5	3	9	9	3	3	3	4
Fleet services (incl. GMT)	12	4	38	30	35	39	53	56	59
Housing	-	-	-	-	-	-	-	-	-
Inventory: Food and food supplies	247	54	38	63	100	56	43	57	59
Inventory: Fuel, oil and gas	3 027	1 542	1 690	1 992	2 300	1 698	2 295	2 315	2 377
Inventory: Learner and teacher supp material	-	-	-	-	-	-	-	-	-
Inventory: Raw materials	287	(90)	51	10	10	27	25	27	28
Inventory: Medical supplies	635	75	1	493	393	599	378	512	534
Inventory: Medicine	-	104	-	-	-	1	-	-	-
Medsas inventory interface	-	-	-	-	-	-	-	-	-
Inventory: Military stores	-	-	-	-	-	-	-	-	-
Inventory: Other consumables	400	525	321	536	1 000	564	580	600	616
Inventory: Stationery and printing	4 670	3 689	3 694	5 061	3 482	3 483	3 897	3 977	4 190
Lease payments (incl. operating, excl. fin)	10 212	14 722	10 670	17 073	18 500	14 891	13 619	14 415	14 753
Property payments	12 876	18 711	20 230	21 432	24 706	22 022	26 693	28 025	28 868
Transport provided: Departmental activity	-	-	-	-	-	-	-	-	-
Travel and subsistence	13 589	15 378	9 521	11 892	12 630	12 570	14 311	14 826	15 277
Training and development	1 357	601	772	550	600	87	1 019	1 070	1 102
Operating expenditure	-	460	1 886	481	12 500	11 607	13 984	14 683	15 124
Venues and facilities	5 394	2 230	112	163	400	347	444	676	693
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest	-	-	-	-	-	-	-	-	-
Rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to</b>	<b>1 701</b>	<b>2 161</b>	<b>2 273</b>	<b>1 275</b>	<b>1 275</b>	<b>1 497</b>	<b>2 510</b>	<b>2 635</b>	<b>2 767</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds	-	-	-	-	-	-	-	-	-
Provincial agencies and funds	-	-	-	-	-	-	-	-	-
Municipalities	-	-	-	-	-	-	-	-	-
Municipalities	-	-	-	-	-	-	-	-	-
Municipal agencies and funds	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Social security funds	-	-	-	-	-	-	-	-	-
Entities receiving funds	-	-	-	-	-	-	-	-	-
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production	-	-	-	-	-	-	-	-	-
Other transfers	-	-	-	-	-	-	-	-	-
Private enterprises	-	-	-	-	-	-	-	-	-
Subsidies on production	-	-	-	-	-	-	-	-	-
Other transfers	-	-	-	-	-	-	-	-	-
Non-profit institutions	-	-	-	-	-	-	-	-	-
Households	1 701	2 161	2 273	1 275	1 275	1 497	2 510	2 635	2 767
Social benefits	1 694	2 134	2 242	1 275	1 275	1 497	2 510	2 635	2 767
Other transfers to households	7	27	31	-	-	-	-	-	-
<b>Payments for capital assets</b>	<b>3 023</b>	<b>2 490</b>	<b>2 642</b>	<b>765</b>	<b>8 844</b>	<b>8 944</b>	<b>4 700</b>	<b>4 700</b>	<b>3 100</b>
Buildings and other fixed structures	-	-	-	-	-	-	-	-	-
Buildings	-	-	-	-	-	-	-	-	-
Other fixed structures	-	-	-	-	-	-	-	-	-
Machinery and equipment	3 011	2 490	2 642	765	8 844	8 944	4 700	4 700	3 100
Transport equipment	1 275	1 605	478	295	3 383	3 430	1 200	1 260	1 323
Other machinery and equipment	1 736	885	2 164	470	5 461	5 514	3 500	3 440	1 777
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	12	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>41</b>	<b>-</b>	<b>758 000</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>279 730</b>	<b>284 066</b>	<b>1 048 878</b>	<b>313 777</b>	<b>349 621</b>	<b>327 503</b>	<b>344 171</b>	<b>364 189</b>	<b>381 119</b>
Unauth. exp. (1 <sup>st</sup> charge) not available for spending	-	-	(758 000)	-	-	-	-	-	-
<b>Baseline available for spending after 1<sup>st</sup> charge</b>	<b>279 730</b>	<b>284 066</b>	<b>290 878</b>	<b>313 777</b>	<b>349 621</b>	<b>327 503</b>	<b>344 171</b>	<b>364 189</b>	<b>381 119</b>

Table 7.D: Details of payments and estimates by economic classification - Programme 2: District Health Services

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11	2010/11	2010/11	2011/12	2012/13	2013/14
<b>Current payments</b>	<b>6 857 271</b>	<b>7 793 057</b>	<b>8 816 863</b>	<b>9 963 076</b>	<b>9 943 106</b>	<b>9 579 972</b>	<b>11 213 448</b>	<b>12 088 307</b>	<b>13 251 243</b>
Compensation of employees	4 473 898	5 264 489	5 723 862	6 514 794	6 581 150	6 495 929	7 742 028	8 284 193	8 943 578
Salaries and wages	3 900 320	4 567 894	4 791 636	5 667 870	5 725 600	5 651 458	6 735 564	7 207 247	7 780 913
Social contributions	573 578	696 595	932 226	846 924	855 550	844 471	1 006 464	1 076 946	1 162 665
Goods and services	2 383 373	2 528 568	3 093 001	3 448 282	3 361 956	3 084 043	3 471 420	3 804 114	4 307 665
of which									
Administrative fees	3 156	158	25	91	91	33	56	63	63
Advertising	48 017	18 080	12 700	19 479	9 000	6 097	7 539	7 549	7 700
Assets <R5000	37 630	23 487	11 708	23 678	9 000	12 263	12 500	14 500	16 500
Audit cost: External	2 412	3 505	5 188	7 562	8 500	9 065	9 982	11 004	11 904
Bursaries (employees)									
Catering: Departmental activities	24 568	14 455	4 418	8 536	1 000	762	1 260	1 410	1 698
Communication	55 595	57 244	52 113	56 787	45 000	44 101	48 309	49 751	52 251
Computer services	22 345	42 587	41 717	39 697	39 000	34 150	43 003	48 104	51 708
Cons/prof: Business & advisory services	626	115	423	5	550	837	1 200	2 025	2 058
Cons/prof: Infrastructure & planning	-	215	24	-	-	50	-	-	-
Cons/prof: Laboratory services	143 348	228 049	351 748	395 826	318 132	242 344	301 962	352 840	467 783
Cons/prof: Legal cost	434	1 074	1 160	745	502	380	474	520	580
Contractors	83 269	38 280	38 485	48 066	41 000	42 796	46 619	51 030	54 111
Agency & support/outsourced services	178 998	185 319	195 843	192 447	181 000	136 512	156 988	180 536	187 616
Entertainment	1 046	464	-	-	-	-	-	-	-
Fleet services (incl. GMT)	374	390	1 425	523	833	839	860	898	953
Housing									
Inventory: Food and food supplies	171 547	159 534	173 869	189 393	160 544	118 888	130 776	145 853	164 508
Inventory: Fuel, oil and gas	56 903	104 648	105 991	111 827	111 000	107 163	119 879	129 666	162 633
Inventory: Learner and teacher supp material									
Inventory: Raw materials	-	7 336	5 181	-	4 500	6 144	6 929	7 751	8 187
Inventory: Medical supplies	272 586	318 360	357 957	183 547	395 988	355 289	411 973	447 070	598 393
Inventory: Medicine	806 690	854 840	1 238 324	1 629 001	1 536 616	1 463 577	1 533 457	1 612 490	1 646 263
Medsas inventory interface	-	324	-	-	-	-	-	-	-
Inventory: Military stores									
Inventory: Other consumables	97 908	70 417	90 801	104 899	92 000	94 747	137 696	127 339	156 642
Inventory: Stationery and printing	33 785	28 686	27 795	33 776	27 000	24 336	26 770	31 449	34 593
Lease payments (incl. operating, excl. fin)	33 327	37 220	30 795	38 925	31 000	37 634	41 661	46 603	51 263
Property payments	199 119	256 724	317 022	322 129	320 000	323 079	403 848	504 810	591 102
Transport provided: Departmental activity	3 361	2 184	960	1 805	1 200	738	865	967	1 069
Travel and subsistence	44 122	26 706	12 833	20 466	15 000	12 678	15 713	17 576	24 932
Training and development	16 733	9 736	3 647	7 184	3 000	2 929	3 816	4 268	4 333
Operating expenditure	21 308	27 864	3 697	4 281	10 000	6 347	6 981	7 702	8 472
Venues and facilities	24 166	10 567	7 152	7 607	500	265	304	340	350
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest									
Rent on land									
<b>Transfers and subsidies to</b>	<b>236 328</b>	<b>282 563</b>	<b>343 633</b>	<b>383 085</b>	<b>407 614</b>	<b>408 620</b>	<b>334 819</b>	<b>351 630</b>	<b>369 589</b>
Provinces and municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds									
Provincial agencies and funds									
Municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Municipalities	62 810	50 493	81 058	90 920	135 256	135 051	94 173	98 884	104 320
Municipal agencies and funds									
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Social security funds									
Entities receiving funds									
Universities and technikons	-	40	-	-	-	-	-	-	-
Foreign governments and international organisations									
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Private enterprises	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Non-profit institutions	160 499	210 664	237 438	269 262	249 455	249 455	216 797	227 705	240 228
Households	13 019	21 366	25 137	22 903	22 903	24 114	23 849	25 041	25 041
Social benefits	12 791	21 185	24 603	21 735	21 735	22 667	22 620	23 751	23 751
Other transfers to households	228	181	534	1 168	1 168	1 447	1 229	1 290	1 290
<b>Payments for capital assets</b>	<b>116 010</b>	<b>56 570</b>	<b>28 182</b>	<b>46 086</b>	<b>42 586</b>	<b>52 017</b>	<b>191 557</b>	<b>191 558</b>	<b>61 968</b>
Buildings and other fixed structures	1 124	138	-	-	-	-	-	-	-
Buildings	1 124	138	-	-	-	-	-	-	-
Other fixed structures									
Machinery and equipment	114 886	56 432	28 182	46 086	42 586	52 017	191 557	191 558	61 968
Transport equipment	77 455	31 272	4 634	15 582	14 053	14 053	82 999	82 999	15 467
Other machinery and equipment	37 431	25 160	23 548	30 504	28 533	37 964	108 558	108 559	46 501
Heritage assets									
Specialised military assets									
Biological assets									
Land and sub-soil assets									
Software and other intangible assets									
<b>Payments for financial assets</b>	<b>-</b>	<b>82</b>	<b>-</b>	<b>-</b>	<b>456</b>	<b>1 823</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>7 209 609</b>	<b>8 132 272</b>	<b>9 188 678</b>	<b>10 392 247</b>	<b>10 393 762</b>	<b>10 042 432</b>	<b>11 739 824</b>	<b>12 631 495</b>	<b>13 682 800</b>

Table 7.E: Details of payments and estimates by economic classification - Programme 3: Emergency Medical Services

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>522 768</b>	<b>590 768</b>	<b>711 960</b>	<b>756 992</b>	<b>771 510</b>	<b>757 164</b>	<b>809 271</b>	<b>874 912</b>	<b>925 727</b>
Compensation of employees	341 040	381 733	486 534	537 268	552 073	522 649	559 234	598 380	640 267
Salaries and wages	295 416	327 636	416 576	467 886	480 304	454 705	486 534	520 591	557 033
Social contributions	45 624	54 097	69 958	69 382	71 769	67 944	72 700	77 789	83 234
Goods and services	181 728	209 035	225 426	219 724	219 437	234 515	250 037	276 532	285 460
of which									
Administrative fees	5	3	-	10	-	-	-	-	-
Advertising	509	66	15	159	1 000	811	1 456	1 529	1 574
Assets <R5000	1 489	743	375	968	500	398	471	1 494	509
Audit cost: External									
Bursaries (employees)									
Catering: Departmental activities	437	167	10	55	55	127	82	89	93
Communication	16 344	14 865	12 940	14 608	10 500	9 235	10 158	11 117	12 228
Computer services	1 561	11 112	15 040	11 469	12 500	10 519	11 570	12 727	13 999
Cons/prof: Business & advisory services	-	-	2	-	-	-	-	-	-
Cons/prof: Infrastructure & planning									
Cons/prof: Laboratory services									
Cons/prof: Legal cost	49	62	32	15	50	135	141	148	162
Contractors	12 248	58 242	66 420	72 958	64 486	77 379	81 427	85 498	86 772
Agency & support/outsourced services	3 143	1 361	1 333	1 677	500	403	453	475	490
Entertainment									
Fleet services (incl. GMT)	130	511	1 232	937	937	1 134	914	964	1 013
Housing									
Inventory: Food and food supplies	165	25	8	11	-	-	-	-	-
Inventory: Fuel, oil and gas	86 302	61 885	54 250	49 940	58 000	57 765	63 541	78 201	80 763
Inventory: Learner and teacher supp material									
Inventory: Raw materials	-	451	3	-	50	92	93	95	98
Inventory: Medical supplies	9 447	9 246	9 362	8 310	9 000	8 372	9 346	9 804	10 092
Inventory: Medicine	323	399	617	825	1 000	264	264	277	285
Medsas inventory interface									
Inventory: Military stores									
Inventory: Other consumables	11 154	7 257	8 709	5 171	3 470	7 393	8 132	8 701	9 310
Inventory: Stationery and printing	1 633	1 462	1 395	2 112	2 000	1 414	1 723	1 809	1 863
Lease payments (incl. operating, excl. fin)	6 905	10 685	9 044	11 587	9 100	15 216	16 281	17 420	18 639
Property payments	6 326	7 778	10 516	9 252	12 163	10 583	11 753	12 341	12 711
Transport provided: Departmental activity	16 762	18 239	29 068	25 684	30 000	27 158	28 305	29 720	30 612
Travel and subsistence	4 234	3 170	4 999	3 832	4 000	3 590	3 781	3 970	4 089
Training and development	101	59	-	67	1	9	14	14	15
Operating expenditure	2 345	1 233	56	68	125	2 518	132	139	143
Venues and facilities	116	14	-	9	-	-	-	-	-
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest									
Rent on land									
<b>Transfers and subsidies to</b>	<b>442</b>	<b>8 660</b>	<b>1 028</b>	<b>594</b>	<b>847</b>	<b>1 145</b>	<b>1 100</b>	<b>1 155</b>	<b>1 213</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds									
Provincial agencies and funds									
Municipalities	-	-	-	-	-	-	-	-	-
Municipalities									
Municipal agencies and funds									
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Social security funds									
Entities receiving funds									
Universities and technikons									
Foreign governments and international organisations									
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Private enterprises	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Non-profit institutions									
Households	442	8 660	1 028	594	847	1 145	1 100	1 155	1 213
Social benefits	308	762	938	142	203	241	99	159	168
Other transfers to households	134	7 898	90	452	644	904	1 001	996	1 045
<b>Payments for capital assets</b>	<b>25 586</b>	<b>72 932</b>	<b>69 344</b>	<b>108 797</b>	<b>92 797</b>	<b>108 816</b>	<b>116 376</b>	<b>123 195</b>	<b>129 971</b>
Buildings and other fixed structures	576	-	-	-	-	18	-	-	-
Buildings	576	-	-	-	-	18	-	-	-
Other fixed structures									
Machinery and equipment	24 998	72 932	69 344	108 797	92 797	108 798	116 376	123 195	129 971
Transport equipment	20 354	58 797	62 831	92 608	78 877	94 877	99 239	105 201	110 987
Other machinery and equipment	4 644	14 135	6 513	16 189	13 920	13 921	17 137	17 994	18 984
Heritage assets									
Specialised military assets									
Biological assets									
Land and sub-soil assets									
Software and other intangible assets	12	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>34</b>	<b>146</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>548 796</b>	<b>672 360</b>	<b>782 332</b>	<b>866 383</b>	<b>865 188</b>	<b>867 271</b>	<b>926 747</b>	<b>999 262</b>	<b>1 056 911</b>

Table 7.F: Details of payments and estimates by economic classification - Programme 4: Provincial Hospital Services

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10		2010/11		2011/12	2012/13	2013/14
<b>Current payments</b>	<b>3 793 371</b>	<b>4 299 875</b>	<b>4 995 008</b>	<b>5 465 809</b>	<b>5 640 286</b>	<b>5 752 467</b>	<b>6 195 587</b>	<b>6 688 685</b>	<b>7 076 895</b>
Compensation of employees	2 703 673	3 015 350	3 520 810	3 938 568	4 124 279	4 188 187	4 433 228	4 709 521	5 063 859
Salaries and wages	2 365 977	2 624 976	3 065 294	3 426 554	3 588 123	3 643 723	3 856 908	4 097 284	4 405 557
Social contributions	337 696	390 374	455 516	512 014	536 156	544 464	576 320	612 237	658 302
Goods and services	1 089 698	1 284 525	1 474 198	1 527 241	1 516 007	1 564 280	1 762 359	1 979 164	2 013 036
of which									
Administrative fees	1 681	14	8	11	11	9	10	11	12
Advertising	9 959	2 343	526	477	477	573	665	715	758
Assets <R5000	16 660	12 875	9 372	13 122	9 000	10 390	11 429	12 316	10 483
Audit cost: External	2 534	3 753	5 621	6 157	9 000	8 181	9 254	9 444	9 522
Bursaries (employees)									
Catering: Departmental activities	2 343	485	1	251	400	216	223	240	247
Communication	18 634	18 837	18 252	19 512	16 000	18 767	18 824	20 227	20 553
Computer services	8 680	18 168	18 560	17 922	13 758	13 798	13 872	15 405	15 598
Cons/prof: Business & advisory services	448	-	-	-	15	15	26	28	-
Cons/prof: Infrastructure & planning	-	2	-	-	-	-	-	-	-
Cons/prof: Laboratory services	93 807	216 306	263 354	230 201	247 092	146 796	197 051	216 735	214 736
Cons/prof: Legal cost	622	1 793	1 306	1 303	2 000	2 148	2 234	2 400	2 553
Contractors	95 733	53 394	51 606	59 137	61 000	70 456	77 501	85 251	93 761
Agency & support/outsourced services	83 700	100 801	106 981	99 243	118 000	134 020	136 429	138 596	138 739
Entertainment	458	64	-	-	-	-	-	-	-
Fleet services (incl. GMT)	129	131	235	580	254	252	363	381	401
Housing									
Inventory: Food and food supplies	25 979	23 647	24 409	29 225	23 000	24 405	26 845	29 529	32 481
Inventory: Fuel, oil and gas	22 111	41 854	45 871	43 256	51 000	53 695	59 064	64 970	71 467
Inventory: Learner and teacher supp material									
Inventory: Raw materials	-	3 053	1 382	1 900	3 000	1 630	1 635	1 740	2 031
Inventory: Medical supplies	235 765	267 939	328 573	271 561	308 000	358 952	392 900	494 590	426 049
Inventory: Medicine	249 760	274 219	340 897	454 334	364 000	394 935	414 682	435 416	468 968
Medsas inventory interface	-	8	-	-	-	-	-	-	-
Inventory: Military stores									
Inventory: Other consumables	52 786	43 282	57 457	55 993	62 000	65 309	87 839	75 430	79 201
Inventory: Stationery and printing	12 919	14 786	12 076	18 425	11 000	13 424	14 095	14 799	15 538
Lease payments (incl. operating, excl. fin)	16 264	15 886	13 095	19 503	14 000	19 652	21 027	22 498	24 072
Property payments	106 708	126 861	140 001	151 771	170 000	192 657	240 821	301 026	346 282
Transport provided: Departmental activity	353	496	161	674	2 500	2 354	2 556	2 746	2 876
Travel and subsistence	7 047	5 034	3 715	5 307	3 000	3 509	3 526	3 789	4 272
Training and development	9 353	4 109	9 332	7 764	5 500	5 386	5 600	5 800	6 100
Operating expenditure	14 729	34 201	21 405	19 523	22 000	22 751	23 888	25 082	26 336
Venues and facilities	536	184	2	89	-	-	-	-	-
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest									
Rent on land									
<b>Transfers and subsidies to</b>	<b>50 986</b>	<b>54 499</b>	<b>58 383</b>	<b>56 874</b>	<b>69 537</b>	<b>69 463</b>	<b>83 885</b>	<b>88 096</b>	<b>88 096</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds									
Provincial agencies and funds									
Municipalities	-	-	-	-	-	-	-	-	-
Municipalities									
Municipal agencies and funds									
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Social security funds									
Entities receiving funds									
Universities and technikons									
Foreign governments and international organisations									
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers	-	-	-	-	-	-	-	-	-
Private enterprises									
Subsidies on production									
Other transfers									
Non-profit institutions	33 703	27 103	30 051	31 975	33 672	33 672	35 692	37 493	39 555
Households	17 283	27 396	28 332	24 899	35 865	35 791	48 193	50 603	48 541
Social benefits	10 653	15 908	14 555	16 522	23 671	22 981	31 807	20 160	20 160
Other transfers to households	6 630	11 488	13 777	8 377	12 194	12 810	16 386	30 443	28 381
<b>Payments for capital assets</b>	<b>39 457</b>	<b>24 440</b>	<b>17 884</b>	<b>26 501</b>	<b>26 501</b>	<b>30 134</b>	<b>86 710</b>	<b>86 709</b>	<b>34 710</b>
Buildings and other fixed structures	337	-	-	-	-	-	-	-	-
Buildings	337	-	-	-	-	-	-	-	-
Other fixed structures									
Machinery and equipment	39 120	24 440	17 884	26 501	26 501	30 134	86 710	86 709	34 710
Transport equipment	7 178	8 141	1 165	-	-	-	4 200	2 100	1 100
Other machinery and equipment	31 942	16 299	16 719	26 501	26 501	30 134	82 510	84 609	33 610
Heritage assets									
Specialised military assets									
Biological assets									
Land and sub-soil assets									
Software and other intangible assets									
<b>Payments for financial assets</b>	<b>-</b>	<b>-</b>	<b>15</b>	<b>-</b>	<b>268</b>	<b>1 179</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>3 883 814</b>	<b>4 378 814</b>	<b>5 071 290</b>	<b>5 549 184</b>	<b>5 736 592</b>	<b>5 853 243</b>	<b>6 366 182</b>	<b>6 863 490</b>	<b>7 199 701</b>



Table 7.G: Details of payments and estimates by economic classification - Programme 5: Central Hospital Services

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10		2010/11		2011/12	2012/13	2013/14
<b>Current payments</b>	<b>1 259 830</b>	<b>1 547 759</b>	<b>1 747 573</b>	<b>1 910 731</b>	<b>2 044 384</b>	<b>1 996 433</b>	<b>2 193 724</b>	<b>2 425 432</b>	<b>2 581 782</b>
Compensation of employees	572 218	717 374	802 490	883 195	1 031 848	1 025 034	1 115 927	1 206 375	1 320 318
Salaries and wages	505 113	635 421	694 413	768 379	897 708	891 780	970 856	1 049 546	1 148 674
Social contributions	67 105	81 953	108 077	114 816	134 140	133 254	145 071	156 829	171 644
Goods and services	687 612	830 385	945 083	1 027 536	1 012 536	971 399	1 077 797	1 219 057	1 261 464
of which									
Administrative fees	1 014	10	2	4	4	1	1	1	1
Advertising	3 533	735	14	68	1 000	667	854	897	923
Assets <R5000	2 398	3 413	350	255	301	292	376	395	407
Audit cost: External	-	-	-	-	-	4	-	-	-
Bursaries (employees)	-	-	-	-	-	-	-	-	-
Catering: Departmental activities	-	801	798	931	-	180	190	195	200
Communication	4 065	3 298	3 398	4 208	3 500	3 419	3 760	4 136	4 549
Computer services	1 045	299	262	104	299	245	300	350	375
Cons/prof: Business & advisory services	-	-	-	-	-	-	-	-	-
Cons/prof: Infrastructure & planning	-	-	-	-	-	-	-	-	-
Cons/prof: Laboratory services	19 835	49 766	50 079	43 431	36 000	20 348	43 200	51 840	62 208
Cons/prof: Legal cost	227	371	918	385	800	-	-	-	-
Contractors	8 179	5 903	9 406	10 672	12 000	12 530	13 783	15 161	16 677
Agency & support/outsourced services	308 510	346 962	374 811	380 577	434 050	384 887	423 375	470 712	480 283
Entertainment	-	-	-	-	-	-	-	-	-
Fleet services (incl. GMT)	3	1	8	12	12	12	12	12	13
Housing	-	-	-	-	-	-	-	-	-
Inventory: Food and food supplies	7 552	1 663	1 637	1 910	2 000	1 853	2 038	2 242	2 466
Inventory: Fuel, oil and gas	4 101	18 836	18 729	19 037	18 650	18 422	20 264	22 290	24 519
Inventory: Learner and teacher supp material	-	-	-	-	-	-	-	-	-
Inventory: Raw materials	-	711	1 787	1 000	2 000	691	700	750	760
Inventory: Medical supplies	164 027	213 386	272 404	290 474	258 725	271 091	290 570	338 877	341 821
Inventory: Medicine	118 158	143 917	162 274	216 825	174 025	188 868	198 311	213 226	218 638
Medsas inventory interface	-	-	-	-	-	-	-	-	-
Inventory: Military stores	-	-	-	-	-	-	-	-	-
Inventory: Other consumables	15 485	7 653	14 221	14 872	15 500	16 948	17 795	18 684	19 759
Inventory: Stationery and printing	3 358	2 801	2 164	3 936	2 500	2 685	2 819	2 960	3 108
Lease payments (incl. operating, excl. fin)	1 982	571	512	1 010	1 000	471	509	534	550
Property payments	20 135	23 109	29 703	30 881	48 400	45 951	56 988	73 741	82 043
Transport provided: Departmental activity	85	38	48	35	50	33	35	40	45
Travel and subsistence	1 001	1 391	589	1 020	720	740	798	838	863
Training and development	244	27	-	57	-	14	20	23	45
Operating expenditure	2 643	4 689	969	5 691	1 000	1 047	1 099	1 153	1 211
Venues and facilities	32	34	-	141	-	-	-	-	-
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest	-	-	-	-	-	-	-	-	-
Rent on land	-	-	-	-	-	-	-	-	-
<b>Transfers and subsidies to</b>	<b>624</b>	<b>8 186</b>	<b>2 653</b>	<b>3 555</b>	<b>3 555</b>	<b>4 816</b>	<b>3 645</b>	<b>3 827</b>	<b>3 827</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds	-	-	-	-	-	-	-	-	-
Provincial agencies and funds	-	-	-	-	-	-	-	-	-
Municipalities	-	-	-	-	-	-	-	-	-
Municipalities	-	-	-	-	-	-	-	-	-
Municipal agencies and funds	-	-	-	-	-	-	-	-	-
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Social security funds	-	-	-	-	-	-	-	-	-
Entities receiving funds	-	-	-	-	-	-	-	-	-
Universities and technikons	-	-	-	-	-	-	-	-	-
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production	-	-	-	-	-	-	-	-	-
Other transfers	-	-	-	-	-	-	-	-	-
Private enterprises	-	-	-	-	-	-	-	-	-
Subsidies on production	-	-	-	-	-	-	-	-	-
Other transfers	-	-	-	-	-	-	-	-	-
Non-profit institutions	-	-	-	-	-	-	-	-	-
Households	624	8 186	2 653	3 555	3 555	4 816	3 645	3 827	3 827
Social benefits	624	639	612	2 407	2 407	3 106	2 468	2 591	2 591
Other transfers to households	-	7 547	2 041	1 148	1 148	1 710	1 177	1 236	1 236
<b>Payments for capital assets</b>	<b>147 249</b>	<b>265 276</b>	<b>308 909</b>	<b>230 531</b>	<b>230 531</b>	<b>217 146</b>	<b>276 613</b>	<b>312 764</b>	<b>355 091</b>
Buildings and other fixed structures	-	-	-	-	-	-	-	-	-
Buildings	-	-	-	-	-	-	-	-	-
Other fixed structures	-	-	-	-	-	-	-	-	-
Machinery and equipment	147 249	265 276	308 909	230 531	230 531	217 146	276 613	312 764	355 091
Transport equipment	-	312	-	-	-	-	2 800	-	-
Other machinery and equipment	147 249	264 964	308 909	230 531	230 531	217 146	273 813	312 764	355 091
Heritage assets	-	-	-	-	-	-	-	-	-
Specialised military assets	-	-	-	-	-	-	-	-	-
Biological assets	-	-	-	-	-	-	-	-	-
Land and sub-soil assets	-	-	-	-	-	-	-	-	-
Software and other intangible assets	-	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>32</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>1 407 703</b>	<b>1 821 221</b>	<b>2 059 135</b>	<b>2 144 817</b>	<b>2 278 470</b>	<b>2 218 427</b>	<b>2 473 982</b>	<b>2 742 023</b>	<b>2 940 700</b>

Table 7.H: Details of payments and estimates by economic classification - Programme 6: Health Sciences and Training

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>478 763</b>	<b>618 930</b>	<b>727 959</b>	<b>744 055</b>	<b>819 403</b>	<b>786 828</b>	<b>844 376</b>	<b>905 081</b>	<b>967 688</b>
Compensation of employees	409 832	528 940	662 000	664 176	752 875	728 596	779 597	834 169	892 560
Salaries and wages	361 449	476 541	602 928	577 813	655 001	633 879	678 249	725 728	776 528
Social contributions	48 383	52 399	59 072	86 363	97 874	94 717	101 348	108 441	116 032
Goods and services	68 931	89 990	65 959	79 879	66 528	58 232	64 779	70 912	75 128
of which									
Administrative fees	-	1	1	-	1	1	-	-	-
Advertising	630	4 679	94	64	170	84	90	95	100
Assets <R5000	1 361	1 238	215	437	350	130	206	217	222
Audit cost: External									
Bursaries (employees)	122	306	331	23	1 000	827	2 200	2 902	2 989
Catering: Departmental activities	958	455	70	98	100	105	166	174	179
Communication	2 243	1 730	1 573	2 017	1 496	1 249	1 373	1 511	1 662
Computer services	1 007	14 505	14 361	13 359	16 500	9 197	10 117	11 128	12 241
Cons/prof: Business & advisory services	-	1 620	-	-	-	-	-	-	-
Cons/prof: Infrastructure & planning									
Cons/prof: Laboratory services									
Cons/prof: Legal cost	18	22	7	11	-	-	-	-	-
Contractors	3 588	336	390	1 089	120	46	50	55	60
Agency & support/outsourced services	9 925	7 538	15 555	9 428	13 500	11 382	12 520	13 772	14 149
Entertainment	5	98	-	-	-	-	-	-	-
Fleet services (incl. GMT)	5	8	14	7	18	18	12	13	13
Housing									
Inventory: Food and food supplies	217	67	1	11	1	2	3	4	5
Inventory: Fuel, oil and gas	1 522	1 027	1 068	1 975	1 500	1 360	1 496	1 645	1 810
Inventory: Learner and teacher supp material									
Inventory: Raw materials	-	1 128	38	-	300	134	150	155	160
Inventory: Medical supplies	131	101	21	100	50	20	32	34	35
Inventory: Medicine	(4)	12	-	-	-	-	-	-	-
Medsas inventory interface									
Inventory: Military stores									
Inventory: Other consumables	1 050	1 469	2 332	2 590	1 500	1 404	1 544	1 698	1 869
Inventory: Stationery and printing	1 288	1 620	1 244	1 918	2 000	1 485	1 633	1 714	1 885
Lease payments (incl. operating, excl. fin)	4 696	9 664	6 570	14 310	10 752	11 048	11 600	12 180	12 789
Property payments	2 962	3 557	3 933	4 760	4 000	3 733	4 666	5 832	6 290
Transport provided: Departmental activity	414	303	335	547	163	151	175	190	200
Travel and subsistence	11 303	13 682	4 880	4 256	5 032	4 809	5 049	5 302	5 567
Training and development	22 029	21 799	11 879	21 998	4 195	6 716	7 052	7 404	7 774
Operating expenditure	946	2 060	829	801	3 780	4 084	4 288	4 502	4 727
Venues and facilities	2 515	965	218	80	-	247	357	385	402
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest									
Rent on land									
<b>Transfers and subsidies to</b>	<b>42 595</b>	<b>56 136</b>	<b>59 829</b>	<b>62 685</b>	<b>72 069</b>	<b>76 710</b>	<b>82 891</b>	<b>87 440</b>	<b>94 620</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds									
Provincial agencies and funds									
Municipalities	-	-	-	-	-	-	-	-	-
Municipalities									
Municipal agencies and funds									
Departmental agencies and accounts	4 470	5 827	6 784	7 876	7 637	7 637	8 166	8 963	9 005
Social security funds									
Entities receiving funds	4 470	5 827	6 784	7 876	7 637	7 637	8 166	8 963	9 005
Universities and technikons									
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers	-	-	-	-	-	-	-	-	-
Private enterprises	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Non-profit institutions	4 809	5 967	11 357	12 377	13 490	13 490	14 298	15 029	15 856
Households	33 316	44 342	41 688	42 432	50 942	55 583	60 427	63 448	69 759
Social benefits	382	239	-	594	713	714	1 209	1 300	559
Other transfers to households	32 934	44 103	41 688	41 838	50 229	54 869	59 218	62 148	69 200
<b>Payments for capital assets</b>	<b>2 975</b>	<b>1 519</b>	<b>5 398</b>	<b>1 751</b>	<b>1 751</b>	<b>536</b>	<b>6 175</b>	<b>6 174</b>	<b>1 773</b>
Buildings and other fixed structures	-	116	-	-	-	-	-	-	-
Buildings	-	116	-	-	-	-	-	-	-
Other fixed structures									
Machinery and equipment	2 931	1 403	5 398	1 751	1 751	536	6 175	6 174	1 773
Transport equipment	1 043	961	-	1 031	1 031	436	1 088	1 142	1 142
Other machinery and equipment	1 888	442	5 398	720	720	100	5 087	5 032	631
Heritage assets									
Specialised military assets									
Biological assets									
Land and sub-soil assets									
Software and other intangible assets	44	-	-	-	-	-	-	-	-
<b>Payments for financial assets</b>	<b>-</b>	<b>16</b>	<b>-</b>	<b>-</b>	<b>4</b>	<b>19</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>524 333</b>	<b>676 601</b>	<b>793 186</b>	<b>808 491</b>	<b>893 227</b>	<b>864 093</b>	<b>933 442</b>	<b>998 695</b>	<b>1 064 081</b>

Table 7.1: Details of payments and estimates by economic classification - Programme 7: Health Care Support Services

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation 2010/11	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10				2011/12	2012/13	2013/14
<b>Current payments</b>	-	79	-	-	-	-	-	-	-
Compensation of employees	-	-	-	-	-	-	-	-	-
Salaries and wages									
Social contributions									
Goods and services	-	79	-	-	-	-	-	-	-
of which									
Administrative fees									
Advertising									
Assets <R5000									
Audit cost: External									
Bursaries (employees)									
Catering: Departmental activities									
Communication									
Computer services	-	79	-	-	-	-	-	-	-
Cons/prof: Business & advisory services									
Cons/prof: Infrastructure & planning									
Cons/prof: Laboratory services									
Cons/prof: Legal cost									
Contractors									
Agency & support/outsourced services									
Entertainment									
Fleet services (incl. GMT)									
Housing									
Inventory: Food and food supplies									
Inventory: Fuel, oil and gas									
Inventory: Learner and teacher supp material									
Inventory: Raw materials									
Inventory: Medical supplies									
Inventory: Medicine									
Medsas inventory interface									
Inventory: Military stores									
Inventory: Other consumables									
Inventory: Stationery and printing									
Lease payments (incl. operating, excl. fin)									
Property payments									
Transport provided: Departmental activity									
Travel and subsistence									
Training and development									
Operating expenditure									
Venues and facilities									
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest									
Rent on land									
<b>Transfers and subsidies to</b>	<b>12 649</b>	<b>34 130</b>	<b>27 528</b>	<b>10 764</b>	<b>10 764</b>	<b>10 764</b>	<b>13 971</b>	<b>15 170</b>	<b>16 004</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds									
Provincial agencies and funds									
Municipalities	-	-	-	-	-	-	-	-	-
Municipalities									
Municipal agencies and funds									
Departmental agencies and accounts	12 649	34 130	27 528	10 764	10 764	10 764	13 971	15 170	16 004
Social security funds									
Entities receiving funds	12 649	34 130	27 528	10 764	10 764	10 764	13 971	15 170	16 004
Universities and technikons									
Foreign governments and international organisations									
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Private enterprises	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Non-profit institutions									
Households	-	-	-	-	-	-	-	-	-
Social benefits									
Other transfers to households									
<b>Payments for capital assets</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Buildings and other fixed structures	-	-	-	-	-	-	-	-	-
Buildings									
Other fixed structures									
Machinery and equipment	-	-	-	-	-	-	-	-	-
Transport equipment									
Other machinery and equipment									
Heritage assets									
Specialised military assets									
Biological assets									
Land and sub-soil assets									
Software and other intangible assets									
<b>Payments for financial assets</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>12 649</b>	<b>34 209</b>	<b>27 528</b>	<b>10 764</b>	<b>10 764</b>	<b>10 764</b>	<b>13 971</b>	<b>15 170</b>	<b>16 004</b>

Table 7.J: Details of payments and estimates by economic classification - Programme 8: Health Facilities Management

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>Current payments</b>	<b>356 171</b>	<b>338 010</b>	<b>264 909</b>	<b>337 301</b>	<b>337 355</b>	<b>293 569</b>	<b>250 840</b>	<b>251 574</b>	<b>300 920</b>
Compensation of employees	1 140	5 510	3 448	5 104	5 158	3 845	5 329	5 025	4 986
Salaries and wages	947	5 146	3 093	4 206	4 230	3 346	4 431	4 115	4 041
Social contributions	193	364	355	898	928	499	898	910	945
Goods and services	355 031	332 500	261 461	332 197	332 197	289 724	245 511	246 549	295 934
of which									
Administrative fees									
Advertising	190	97	117	315	315	109	332	348	367
Assets <R5000	3 191	3 434	3 041	3 819	3 500	2 413	3 376	3 529	4 000
Audit cost: External	-	-	128	-	-	-	-	-	-
Bursaries (employees)									
Catering: Departmental activities	21	81	23	36	5	23	42	43	45
Communication	1 179	803	228	1 155	150	91	1 659	1 703	3 500
Computer services	13 625	12 595	2 872	1 231	1 500	1 212	3 183	3 256	5 779
Cons/prof: Business & advisory services	-	-	15 339	-	722	722	-	-	-
Cons/prof: Infrastructure & planning	68 749	36 895	8 754	17 891	18 278	12 177	-	-	-
Cons/prof: Laboratory services									
Cons/prof: Legal cost									
Contractors	132 978	45 227	35 221	47 907	46 527	47 541	33 843	33 984	37 946
Agency & support/outsourced services	1 642	5 446	1 360	19 141	20 000	14 575	-	-	-
Entertainment									
Fleet services (incl. GMT)									
Housing									
Inventory: Food and food supplies	307	5	2	34	-	-	35	36	38
Inventory: Fuel, oil and gas	1 074	4 423	3 792	5 829	7 000	2 955	2 861	2 917	8 991
Inventory: Learner and teacher supp material									
Inventory: Raw materials	91 531	73 688	48 090	51 281	70 000	53 836	43 682	43 758	64 951
Inventory: Medical supplies	188	159	73	-	-	-	-	-	-
Inventory: Medicine	(188)	-	(65)	-	-	-	-	-	-
Medsas inventory interface									
Inventory: Military stores									
Inventory: Other consumables	897	2 270	197	3 942	500	52	4 564	4 690	4 948
Inventory: Stationery and printing	141	54	65	41	200	68	44	47	50
Lease payments (incl. operating, excl. fin)	36 657	41 764	59 048	72 161	75 000	52 111	57 797	58 994	63 036
Property payments	2 640	104 367	75 673	106 231	78 000	92 711	93 142	92 238	99 822
Transport provided: Departmental activity									
Travel and subsistence	177	787	893	556	1 000	701	611	638	820
Training and development	32	19	6 194	125	9 000	7 083	129	132	1 392
Operating expenditure	-	299	104	183	500	1 344	211	236	249
Venues and facilities	-	87	312	319	-	-	-	-	-
Interest and rent on land	-	-	-	-	-	-	-	-	-
Interest									
Rent on land									
<b>Transfers and subsidies to</b>	<b>-</b>	<b>326</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Provinces and municipalities	-	-	-	-	-	-	-	-	-
Provinces	-	-	-	-	-	-	-	-	-
Provincial Revenue Funds									
Provincial agencies and funds									
Municipalities	-	-	-	-	-	-	-	-	-
Municipalities									
Municipal agencies and funds									
Departmental agencies and accounts	-	-	-	-	-	-	-	-	-
Social security funds									
Entities receiving funds									
Universities and technikons									
Foreign governments and international organisations	-	-	-	-	-	-	-	-	-
Public corporations and private enterprises	-	-	-	-	-	-	-	-	-
Public corporations	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Private enterprises	-	-	-	-	-	-	-	-	-
Subsidies on production									
Other transfers									
Non-profit institutions									
Households	-	326	-	-	-	-	-	-	-
Social benefits	-	326	-	-	-	-	-	-	-
Other transfers to households									
<b>Payments for capital assets</b>	<b>736 636</b>	<b>765 222</b>	<b>1 113 340</b>	<b>1 234 717</b>	<b>1 255 207</b>	<b>1 160 842</b>	<b>1 435 696</b>	<b>1 459 226</b>	<b>1 547 188</b>
Buildings and other fixed structures	621 725	635 339	1 005 258	1 097 525	1 117 217	916 506	1 357 938	1 295 069	1 436 729
Buildings	621 725	635 339	1 005 258	1 097 525	1 117 217	916 506	1 357 938	1 295 069	1 436 729
Other fixed structures									
Machinery and equipment	97 783	129 883	108 082	137 192	137 192	243 538	77 758	164 157	110 459
Transport equipment	159	-	163	-	-	-	-	-	-
Other machinery and equipment	97 624	129 883	107 919	137 192	137 192	243 538	77 758	164 157	110 459
Heritage assets									
Specialised military assets									
Biological assets									
Land and sub-soil assets									
Software and other intangible assets	17 128	-	-	-	798	798	-	-	-
<b>Payments for financial assets</b>									
<b>Total</b>	<b>1 092 807</b>	<b>1 103 558</b>	<b>1 378 249</b>	<b>1 572 018</b>	<b>1 592 562</b>	<b>1 454 411</b>	<b>1 686 536</b>	<b>1 710 800</b>	<b>1 848 108</b>

Table 7.K: Details of payments of infrastructure by category

No.	Project name	Region	Municipality	Type of infrastructure		Project duration		Budget programme name	EPWP budget for current financial year	Total project cost	Payments to date from previous years	Total available		MTEF forward Estimates	
				Regional/District/Ce ntral Hospital; Clinic; Community Health Centre; Pharmaceutical	Units (i.e. number of beds or facilities)	Date: Start	Date: Finish					2011/12	2012/13	2013/14	
R thousand															
New and replacement assets															
1.	Design and construct new district hospital- Level 1	eThekwini	eThekwini	Hospital - District	450	01 Apr 2015	01 Apr 2018	Programme 8	-	1 152 937	410	-	-	-	-
2.	Design and construct new district hospital- Level 1	eThekwini	eThekwini	Hospital - Regional	1	01 Jun 2012	01 Nov 2014	Programme 8	-	1 031 639	18 603	20 000	-	-	320 242
3.	Re-build greater Edendale Complex	uMgungundlovu	Msunduzi	Regional Hospital	930	01 Mar 2013	01 Mar 2017	Programme 8	-	2 755 085	-	30 000	30 000	-	30 000
4.	Alterations & additions to existing hospital	uThungulu	Umlhathuze	Hospital - Regional	183	01 Sep 2010	01 Apr 2014	Programme 8	-	303 605	22 341	115 306	120 873	-	30 361
5.	New staff residence and upgrading of existing staff residence	uThungulu	Umlhathuze	Hospital - Regional	183	01 Jan 2014	01 Jul 2017	Programme 8	-	225 000	-	-	-	-	27 000
6.	Ph 2A & 2B: Outpatients, pharmacy, theatres, etc	uMkhanyakude	Hlabisa	District Hospital	308	01 Sep 2016	01 Sep 2018	Programme 8	-	528 123	43 725	-	-	-	-
7.	New regional & tertiary hospital	eThekwini	eThekwini	Regional- Hospital	850	01 Oct 2010	01 Mar 2011	Programme 8	-	1 416 000	-	-	-	-	-
8.	Construction of new Level 1 hospital	eThekwini	eThekwini	District Hospital	900	01 Mar 2006	01 Mar 2008	Programme 8	-	445 565	400 856	22 131	-	-	-
9.	Psychiatric hospital	Amajuba	Newcastle	Hospital - Specialised	1615	01 Jan 2015	01 Jan 2017	Programme 8	-	925 000	1 658	8 000	9 487	-	35 000
10.	New district, regional & TB hospitals	Amajuba	Newcastle	Hospital - Regional	1615	01 Jan 2017	01 Jun 2020	Programme 8	-	1 251 558	-	-	-	-	-
Other Various		Various	Various	Various	Several	01 Apr 2011	31 Mar 2014	Programme 8	-	6 634 456	-	530 185	472 980	-	430 966
Total New and replacement assets									-	16 668 968	487 593	725 622	633 340	873 569	
Upgrades and additions															
1.	Convert clinic to community health centre	Ugu	Hibiscus Coast	Clinic	1	01 Sep 2008	01 Apr 2010	Programme 8	-	51 737	31 879	2 000	-	-	-
2.	New OPD, casualty/trauma unit, X-ray and related facilities	Uthukela	Okhahlamba	Hospital - District	173	01 Jan 2011	01 Jan 2014	Programme 8	-	96 650	6 970	30 000	30 000	-	22 980
3.	New OPD/casualty/CSSD/dispensary/X-ray & theatre block	Zululand	uPhongolo	Hospital - District	150	01 Feb 2009	01 Feb 2011	Programme 8	-	73 263	37 264	3 600	-	-	-
4.	General & T.B. wards	Ugu	Hibiscus Coast	Hospital - District	300	01 Jul 2012	01 Jul 2015	Programme 8	-	85 000	5 348	-	12 000	-	36 000
5.	Construction of OPD with X-ray, admin block pharmacy, etc	iLembe	Maphumulo	Hospital - District	158	01 Oct 2010	01 Oct 2014	Programme 8	-	40 000	-	1 000	6 000	-	20 000
6.	New multi-departmental core block	Ugu	Hibiscus Coast	Hospital - Regional	334	01 Apr 2007	01 Apr 2010	Programme 8	-	153 097	97 195	5 000	-	-	-
7.	Ph 3B: Admin, kitchen, audio, ARV, staff accommodation	Sisonke	Umkhanyakude	District Hospital	208	01 Sep 2010	01 Mar 2015	Programme 8	-	110 000	555	45 000	55 945	-	5 500
8.	Upgrade MV & LV electrical reticulation incl. generators, etc	uThungulu	Umlhathuze	Hospital - District	506	01 Jan 2011	01 Nov 2012	Programme 8	-	76 854	3 421	41 930	19 605	-	3 800
9.	New theatre complex, CSSD, and staff/doctors' facility	uThungulu	Umlhathuze	Hospital - District	506	01 Oct 2012	01 Oct 2015	Programme 8	-	173 752	3 435	17 615	10 000	-	63 000
10.	Phase 3A: New pharmacy, stores, maint., lab. and laundry	Sisonke	Umkhanyakude	District Hospital	208	01 Dec 2008	01 Sep 2012	Programme 8	-	51 330	12 777	22 000	12 484	-	1 800
Other Various		Various	Various	Various	Several	01 Apr 2011	31 Mar 2014	Programme 8	-	2 919 804	-	363 637	503 847	-	429 489
Total Upgrades and additions									-	3 831 487	198 844	531 782	649 881	582 569	
Rehabilitation, renovations and refurbishments															
1.	General R & R to clinic, residences, yard, fittings & buildings	Ugu	Ezinqolweni	Clinic	1	01 Oct 2007	01 Jan 2009	Programme 8	-	15 382	14 763	-	-	-	-
2.	Clinic maintenance & upgrading prog : 2006-2007 Phase 1	uThungulu	Ntambanana	Clinic	1	01 Nov 2010	01 May 2012	Programme 8	-	20 000	1 225	12 000	4 675	-	1 000
3.	Clin maint & upgrade programme 2006/2007	uThungulu	Mbonambi	Clinic	1	01 Jun 2011	01 Nov 2012	Programme 8	-	15 673	861	6 000	8 062	-	750
4.	Alteratons to theatre, X-ray, CSSD etc	uMgungundlovu	uMshwathi	Hospital - District	181	01 Nov 2008	01 Apr 2010	Programme 8	-	19 858	5 553	6 693	800	-	-
5.	Relocate accommodation	Sisonke	Ubuhlebezwe	Hospital - District	238	01 Jan 2008	01 Sep 2009	Programme 8	-	34 807	32 150	-	-	-	-
6.	Repairs to kitchen roof & ceiling, psychiatric wards,nurse	uThungulu	Nkandla	Hospital - District	125	01 Apr 2012	01 Apr 2013	Programme 8	-	20 500	-	1 000	18 280	-	1 000
7.	Casualty, (complet terminated contract)	Ugu	Umdoni	Hospital - District	288	01 Nov 2010	01 Jul 2013	Programme 8	-	115 300	-	37 000	37 000	-	35 700
8.	Re-organise pharmacy	uMgungundlovu	Msunduzi	Hospital - District	385	01 Jun 2012	01 Oct 2013	Programme 8	-	15 000	1 401	-	5 000	-	7 664
9.	Replacement or renovations to roof - admin block, North Park,	uMgungundlovu	Msunduzi	Hospital - Spec	361	01 Jun 2012	01 Jun 2013	Programme 8	-	40 400	-	10 000	28 100	-	2 000
10.	Extensive renovations and additions to existing building	Head Office	Head Office	Nursing College	1	01 Sep 2011	01 Sep 2013	Programme 8	-	40 000	-	3 600	20 000	-	14 000
Other Various		Various	Various	Various	Several	01 Apr 2011	31 Mar 2014	Programme 8	-	486 534	-	101 999	54 088	-	28 936
Total Rehabilitation, renovations and refurbishments									-	823 454	55 953	178 292	176 005	91 050	
Maintenance and repairs															
1.	Lift maintenance	uMgungundlovu	Msunduzi	Office	1	01 Apr 2010	31 Mar 2014	Programme 8	-	5 720	-	840	880	-	920
2.	Manage 168 lease agreements for KZN - Health	uMgungundlovu	Msunduzi	Residential	168	01 Apr 2010	31 Mar 2014	Programme 8	-	350 000	48 944	50 000	50 000	-	50 000
3.	Facilities routine maintenance	uMgungundlovu	Msunduzi	Maintenance	1	01 Apr 2010	31 Mar 2014	Programme 8	-	1 090 501	-	194 671	195 669	-	245 014
Total Maintenance and repairs									-	1 446 221	48 944	245 511	246 549	295 934	
Infrastructure transfers - current									-	-	-	-	-	-	-
Infrastructure transfers - capital									-	-	-	-	-	-	-
Total Infrastructure									-	22 770 130	791 334	1 681 207	1 705 775	1 843 122	

Table 7.L: Summary of transfers to municipalities (RSCL, Municipal Clinics, Environmental Health)

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10				2011/12	2012/13	2013/14
<b>A KZN2000 eThekweni</b>	<b>36 483</b>	<b>36 406</b>	<b>42 612</b>	<b>44 540</b>	<b>44 540</b>	<b>44 540</b>	<b>47 212</b>	<b>49 573</b>	<b>52 300</b>
<b>Total: Ugu Municipalities</b>	<b>2 670</b>	<b>1 493</b>	<b>4 207</b>	<b>6 252</b>	<b>13 485</b>	<b>12 966</b>	<b>6 627</b>	<b>6 959</b>	<b>7 341</b>
B KZN211 Vulamehlo	-	-	-	-	-	-	-	-	-
B KZN212 Umdoni	879	651	1 248	2 049	4 551	4 032	2 172	2 281	2 406
B KZN213 Umzumbe	-	-	-	-	-	-	-	-	-
B KZN214 uMuziwabantu	462	153	771	867	1 682	1 682	919	965	1 018
B KZN215 Ezinqoleni	-	-	-	-	-	-	-	-	-
B KZN216 Hibiscus Coast	1 329	689	2 188	3 336	7 252	7 252	3 536	3 713	3 917
C DC21 Ugu District Municipality	-	-	-	-	-	-	-	-	-
<b>Total: uMgungundlovu Municipalities</b>	<b>1 180</b>	<b>-</b>	<b>-</b>	<b>11 756</b>	<b>40 435</b>	<b>40 230</b>	<b>12 461</b>	<b>13 085</b>	<b>13 804</b>
B KZN221 uMshwathi	-	-	-	443	1 597	1 597	470	493	520
B KZN222 uMngeni	652	-	-	1 270	4 122	4 122	1 346	1 414	1 491
B KZN223 Mpofana	525	-	-	923	2 907	2 702	978	1 027	1 084
B KZN224 Impendle	-	-	-	-	-	-	-	-	-
B KZN225 Msunduzi	3	-	-	9 120	31 809	31 809	9 667	10 151	10 709
B KZN226 Mkhambathini	-	-	-	-	-	-	-	-	-
B KZN227 Richmond	-	-	-	-	-	-	-	-	-
C DC22 uMgungundlovu District Municipality	-	-	-	-	-	-	-	-	-
<b>Total: Uthukela Municipalities</b>	<b>7 489</b>	<b>-</b>	<b>10 876</b>	<b>8 604</b>	<b>14 401</b>	<b>14 401</b>	<b>9 120</b>	<b>9 576</b>	<b>10 103</b>
B KZN232 Emnambithi/Ladysmith	5 475	-	5 999	5 156	10 756	10 756	5 465	5 739	6 054
B KZN233 Indaka	-	-	-	-	-	-	-	-	-
B KZN234 Umtshezi	1 239	-	2 848	2 134	2 161	2 161	2 262	2 375	2 506
B KZN235 Okhahlamba	775	-	2 029	1 314	1 484	1 484	1 393	1 462	1 543
B KZN236 Imbabazane	-	-	-	-	-	-	-	-	-
C DC23 Uthukela District Municipality	-	-	-	-	-	-	-	-	-
<b>Total: Umzinyathi Municipalities</b>	<b>2 332</b>	<b>3 953</b>	<b>7 136</b>	<b>3 650</b>	<b>1 573</b>	<b>2 092</b>	<b>1 667</b>	<b>1 751</b>	<b>1 847</b>
B KZN241 Endumeni	1 669	2 820	3 382	2 077	-	519	-	-	-
B KZN242 Nqutu	-	-	-	-	-	-	-	-	-
B KZN244 Msinga	-	-	-	-	-	-	-	-	-
B KZN245 Umvoti	663	1 133	3 754	1 573	1 573	1 573	1 667	1 751	1 847
C DC24 Umzinyathi District Municipality	-	-	-	-	-	-	-	-	-
<b>Total: Amajuba Municipalities</b>	<b>1 142</b>	<b>-</b>	<b>1 385</b>	<b>1 827</b>	<b>3 345</b>	<b>3 345</b>	<b>1 937</b>	<b>2 034</b>	<b>2 145</b>
B KZN252 Newcastle	810	-	1 385	1 193	1 816	1 816	1 265	1 328	1 401
B KZN253 eMadlangeni	-	-	-	-	-	-	-	-	-
B KZN254 Dannhauser	332	-	-	634	1 529	1 529	672	706	744
C DC25 Amajuba District Municipality	-	-	-	-	-	-	-	-	-
<b>Total: Zululand Municipalities</b>	<b>671</b>	<b>-</b>	<b>-</b>	<b>1 063</b>	<b>3 006</b>	<b>3 006</b>	<b>1 127</b>	<b>1 183</b>	<b>1 248</b>
B KZN261 eDumbe	203	-	-	452	1 278	1 278	479	503	531
B KZN262 uPhongolo	-	-	-	-	-	-	-	-	-
B KZN263 Abaqulusi	468	-	-	611	1 728	1 728	648	680	717
B KZN265 Nongoma	-	-	-	-	-	-	-	-	-
B KZN266 Ulundi	-	-	-	-	-	-	-	-	-
C DC26 Zululand District Municipality	-	-	-	-	-	-	-	-	-
<b>Total: Umkhanyakude Municipalities</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
B KZN271 Umhlabyalingana	-	-	-	-	-	-	-	-	-
B KZN272 Jozini	-	-	-	-	-	-	-	-	-
B KZN273 The Big 5 False Bay	-	-	-	-	-	-	-	-	-
B KZN274 Hlabisa	-	-	-	-	-	-	-	-	-
B KZN275 Mtubatuba	-	-	-	-	-	-	-	-	-
C DC27 Umkhanyakude District Municipality	-	-	-	-	-	-	-	-	-
<b>Total: uThungulu Municipalities</b>	<b>6 319</b>	<b>4 726</b>	<b>9 137</b>	<b>7 835</b>	<b>8 309</b>	<b>8 309</b>	<b>8 305</b>	<b>8 721</b>	<b>9 200</b>
B KZN281 Umfolozi	-	-	-	-	-	-	-	-	-
B KZN282 uMhlathuze	4 159	4 086	4 348	4 609	4 609	4 609	4 886	5 130	5 412
B KZN283 Ntambanana	-	-	-	-	-	-	-	-	-
B KZN284 uMlalazi	1 496	-	4 016	2 289	2 461	2 461	2 426	2 548	2 688
B KZN285 Mthonjaneni	660	640	773	937	1 239	1 239	993	1 043	1 100
B KZN286 Nkandla	-	-	-	-	-	-	-	-	-
C DC28 uThungulu District Municipality	4	-	-	-	-	-	-	-	-
<b>Total: Ilembe Municipalities</b>	<b>4 060</b>	<b>3 891</b>	<b>5 705</b>	<b>5 393</b>	<b>6 162</b>	<b>6 162</b>	<b>5 717</b>	<b>6 002</b>	<b>6 332</b>
B KZN291 Mandeni	943	707	471	1 064	1 833	1 833	1 128	1 184	1 249
B KZN292 KwaDukuza	3 117	3 184	5 234	4 329	4 329	4 329	4 589	4 818	5 083
B KZN293 Ndwedwe	-	-	-	-	-	-	-	-	-
B KZN294 Maphumulo	-	-	-	-	-	-	-	-	-
C DC29 Ilembe District Municipality	-	-	-	-	-	-	-	-	-
<b>Total: Sisonke Municipalities</b>	<b>316</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
B KZN431 Ingwe	-	-	-	-	-	-	-	-	-
B KZN432 Kwa Sani	-	-	-	-	-	-	-	-	-
B KZN433 Matatiele	316	-	-	-	-	-	-	-	-
B KZN434 Greater Kokstad	-	-	-	-	-	-	-	-	-
B KZN435 Ubulhebezwe	-	-	-	-	-	-	-	-	-
B KZN436 Umzimkulu	-	-	-	-	-	-	-	-	-
C DC43 Sisonke District Municipality	-	-	-	-	-	-	-	-	-
<b>Unallocated</b>	<b>148</b>	<b>24</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>62 810</b>	<b>50 493</b>	<b>81 058</b>	<b>90 920</b>	<b>135 256</b>	<b>135 051</b>	<b>94 173</b>	<b>98 884</b>	<b>104 320</b>

Table 7.M: Transfers to municipalities - Municipal Clinics

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>A KZN2000 eThekweni</b>	<b>36 483</b>	<b>36 406</b>	<b>42 612</b>	<b>44 540</b>	<b>44 540</b>	<b>44 540</b>	<b>47 212</b>	<b>49 573</b>	<b>52 300</b>
<b>Total: Ugu Municipalities</b>	<b>2 670</b>	<b>1 493</b>	<b>4 207</b>	<b>6 252</b>	<b>13 485</b>	<b>12 966</b>	<b>6 627</b>	<b>6 959</b>	<b>7 341</b>
B KZN211 Vulamehlo									
B KZN212 Umdoni	879	651	1 248	2 049	4 551	4 032	2 172	2 281	2 406
B KZN213 Umzumbe									
B KZN214 uMuziwabantu	462	153	771	867	1 682	1 682	919	965	1 018
B KZN215 Ezinqoleni									
B KZN216 Hibiscus Coast	1 329	689	2 188	3 336	7 252	7 252	3 536	3 713	3 917
C DC21 Ugu District Municipality									
<b>Total: uMgungundlovu Municipalities</b>	<b>1 180</b>	<b>-</b>	<b>-</b>	<b>11 756</b>	<b>40 435</b>	<b>40 230</b>	<b>12 461</b>	<b>13 085</b>	<b>13 804</b>
B KZN221 uMshwathi	-	-	-	443	1 597	1 597	470	493	520
B KZN222 uMngeni	652	-	-	1 270	4 122	4 122	1 346	1 414	1 491
B KZN223 Mpofana	525	-	-	923	2 907	2 702	978	1 027	1 084
B KZN224 Impendle									
B KZN225 Msunduzi	3	-	-	9 120	31 809	31 809	9 667	10 151	10 709
B KZN226 Mkhambathini									
B KZN227 Richmond									
C DC22 uMgungundlovu District Municipality									
<b>Total: Uthukela Municipalities</b>	<b>7 489</b>	<b>-</b>	<b>10 876</b>	<b>8 604</b>	<b>14 401</b>	<b>14 401</b>	<b>9 120</b>	<b>9 576</b>	<b>10 103</b>
B KZN232 Emnambithi/Ladysmith	5 475	-	5 999	5 156	10 756	10 756	5 465	5 739	6 054
B KZN233 Indaka									
B KZN234 Umtshezi	1 239	-	2 848	2 134	2 161	2 161	2 262	2 375	2 506
B KZN235 Okhahlamba	775	-	2 029	1 314	1 484	1 484	1 393	1 462	1 543
B KZN236 Imbabazane									
C DC23 Uthukela District Municipality									
<b>Total: Umzinyathi Municipalities</b>	<b>2 332</b>	<b>3 953</b>	<b>7 136</b>	<b>3 650</b>	<b>1 573</b>	<b>2 092</b>	<b>1 667</b>	<b>1 751</b>	<b>1 847</b>
B KZN241 Endumeni	1 669	2 820	3 382	2 077	-	519	-	-	-
B KZN242 Nqutu									
B KZN244 Msinga									
B KZN245 Umvoti	663	1 133	3 754	1 573	1 573	1 573	1 667	1 751	1 847
C DC24 Umzinyathi District Municipality									
<b>Total: Amajuba Municipalities</b>	<b>1 142</b>	<b>-</b>	<b>1 385</b>	<b>1 827</b>	<b>3 345</b>	<b>3 345</b>	<b>1 937</b>	<b>2 034</b>	<b>2 145</b>
B KZN252 Newcastle	810	-	1 385	1 193	1 816	1 816	1 265	1 328	1 401
B KZN253 eMadlangeni									
B KZN254 Dannhauser	332	-	-	634	1 529	1 529	672	706	744
C DC25 Amajuba District Municipality									
<b>Total: Zululand Municipalities</b>	<b>671</b>	<b>-</b>	<b>-</b>	<b>1 063</b>	<b>3 006</b>	<b>3 006</b>	<b>1 127</b>	<b>1 183</b>	<b>1 248</b>
B KZN261 eDumbe	203	-	-	452	1 278	1 278	479	503	531
B KZN262 uPhongolo									
B KZN263 Abaqulusi	468	-	-	611	1 728	1 728	648	680	717
B KZN265 Nongoma									
B KZN266 Ulundi									
C DC26 Zululand District Municipality									
<b>Total: Umkhanyakude Municipalities</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
B KZN271 Umhlabyalingana									
B KZN272 Jozini									
B KZN273 The Big 5 False Bay									
B KZN274 Hlabisa									
B KZN275 Mtubatuba									
C DC27 Umkhanyakude District Municipality									
<b>Total: uThungulu Municipalities</b>	<b>6 242</b>	<b>4 726</b>	<b>9 137</b>	<b>7 835</b>	<b>8 309</b>	<b>8 309</b>	<b>8 305</b>	<b>8 721</b>	<b>9 200</b>
B KZN281 Umfolozi									
B KZN282 uMhlathuze	4 086	4 086	4 348	4 609	4 609	4 609	4 886	5 130	5 412
B KZN283 Ntambanana									
B KZN284 uMlalazi	1 496	-	4 016	2 289	2 461	2 461	2 426	2 548	2 688
B KZN285 Mthonjaneni	660	640	773	937	1 239	1 239	993	1 043	1 100
B KZN286 Nkandla									
C DC28 uThungulu District Municipality									
<b>Total: Ilembe Municipalities</b>	<b>3 939</b>	<b>3 891</b>	<b>5 705</b>	<b>5 393</b>	<b>6 162</b>	<b>6 162</b>	<b>5 717</b>	<b>6 002</b>	<b>6 332</b>
B KZN291 Mandeni	943	707	471	1 064	1 833	1 833	1 128	1 184	1 249
B KZN292 KwaDukuza	2 996	3 184	5 234	4 329	4 329	4 329	4 589	4 818	5 083
B KZN293 Ndwedwe									
B KZN294 Maphumulo									
C DC29 Ilembe District Municipality									
<b>Total: Sisonke Municipalities</b>	<b>316</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
B KZN431 Ingwe									
B KZN432 Kwa Sani									
B KZN433 Greater Kokstad	316	-	-	-	-	-	-	-	-
B KZN434 Ubuhlebezwe									
B KZN435 Umzimkulu									
C DC43 Sisonke District Municipality									
<b>Unallocated</b>	<b>148</b>	<b>24</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total</b>	<b>62 612</b>	<b>50 493</b>	<b>81 058</b>	<b>90 920</b>	<b>135 256</b>	<b>135 051</b>	<b>94 173</b>	<b>98 884</b>	<b>104 320</b>

**Table 7.N: Transfers to municipalities - Environmental Health**

R thousand	Audited Outcome			Main Appropriation	Adjusted Appropriation	Revised Estimate	Medium-term Estimates		
	2007/08	2008/09	2009/10	2010/11			2011/12	2012/13	2013/14
<b>A KZN2000 eThekweni</b>									
<b>Total: Ugu Municipalities</b>	-	-	-	-	-	-	-	-	-
B KZN211 Vulamehlo									
B KZN212 Umdoni									
B KZN213 Umzumbe									
B KZN214 uMuziwabantu									
B KZN215 Ezinqoleni									
B KZN216 Hibiscus Coast									
C DC21 Ugu District Municipality									
<b>Total: uMgungundlovu Municipalities</b>	-	-	-	-	-	-	-	-	-
B KZN221 uMshwathi									
B KZN222 uMngeni									
B KZN223 Mpofana									
B KZN224 Impendle									
B KZN225 Msunduzi									
B KZN226 Mkhambathini									
B KZN227 Richmond									
C DC22 uMgungundlovu District Municipality									
<b>Total: Uthukela Municipalities</b>	-	-	-	-	-	-	-	-	-
B KZN232 Emnamithi/Ladysmith									
B KZN233 Indaka									
B KZN234 Umtshezi									
B KZN235 Okhahlamba									
B KZN236 Imbabazane									
C DC23 Uthukela District Municipality									
<b>Total: Umzinyathi Municipalities</b>	-	-	-	-	-	-	-	-	-
B KZN241 Endumeni									
B KZN242 Nqutu									
B KZN244 Msinga									
B KZN245 Umvoti									
C DC24 Umzinyathi District Municipality									
<b>Total: Amajuba Municipalities</b>	-	-	-	-	-	-	-	-	-
B KZN252 Newcastle									
B KZN253 eMadlangeni									
B KZN254 Dannhauser									
C DC25 Amajuba District Municipality									
<b>Total: Zululand Municipalities</b>	-	-	-	-	-	-	-	-	-
B KZN261 eDumbe									
B KZN262 uPhongolo									
B KZN263 Abaqulusi									
B KZN265 Nongoma									
B KZN266 Ulundi									
C DC26 Zululand District Municipality									
<b>Total: Umkhanyakude Municipalities</b>	-	-	-	-	-	-	-	-	-
B KZN271 Umhlabyalingana									
B KZN272 Jozini									
B KZN273 The Big 5 False Bay									
B KZN274 Hlabisa									
B KZN275 Mtubatuba									
C DC27 Umkhanyakude District Municipality									
<b>Total: uThungulu Municipalities</b>	73	-	-	-	-	-	-	-	-
B KZN281 Umfolozi									
B KZN282 uMhlathuze	73	-	-	-	-	-	-	-	-
B KZN283 Ntambanana									
B KZN284 uMlalazi									
B KZN285 Mthonjaneni									
B KZN286 Nkandla									
C DC28 uThungulu District Municipality									
<b>Total: Ilembe Municipalities</b>	121	-	-	-	-	-	-	-	-
B KZN291 Mandeni									
B KZN292 KwaDukuza	121	-	-	-	-	-	-	-	-
B KZN293 Ndwedwe									
B KZN294 Maphumulo									
C DC29 Ilembe District Municipality									
<b>Total: Sisonke Municipalities</b>	-	-	-	-	-	-	-	-	-
B KZN431 Ingwe									
B KZN432 Kwa Sani									
B KZN433 Greater Kokstad									
B KZN434 Ubuhlebezwe									
B KZN435 Umzimkulu									
C DC43 Sisonke District Municipality									
<b>Unallocated</b>									
<b>Total</b>	<b>194</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>