

**SPEAKING NOTES FOR THE DEPUTY MINISTER OF HEALTH, DR.
SIBONGISENI DHLOMO, MP - HEALTH BUDGET VOTE**

Tuesday, 10 May 2021

Honourable Chairperson

The Chair of Portfolio Committee

Hon Minister of Health, Dr MJ Phaahla

Hon Ministers and Deputy Ministers present

Honourable Members of the National Assembly

MECs for Health present

Heads of Public Entities and Statutory Councils

Distinguished guests

Ladies and Gentlemen

It is an honour to make contribution to the Health Budget V

The escalating burden of non-communicable diseases including mental health has serious impact on the health and development of our communities. It is estimated that 80% of commonly experienced NCDs result from preventable risk behaviours and this increasing burden is presently resulting in high mortality, morbidity and disability at great cost to patients, their families, communities, the health systems and economy at large.

Hon Chair

During the Covid19 pandemic we observed that persons with known and unknown hypertension,

Our flagship programme called Central Chronic Medicine Dispensing and Distribution (CCMDD) which aims to provide an alternative mechanism to facilitate access to medicine for stable patients, has assisted in ensuring chronic medication access during the pandemic when the lockdown restrictions were implemented.

The CCMDD has a footprint in 8 provinces, 46 districts, and over 3 587 public health facilities. It has contracted over 2860 external pick-up points which patients may opt to collect their medication from, and these include retail innovations such as smart lockers and retrofitted containers.

Patients can collect their medicines from external Pick-up Points (PuPs) of their choice. It makes it easier and more convenient for patients to choose their most suitable Pick-up Points, which could be closer to their home or place of work, thereby cutting down transport costs. Some of the benefits of these Pick-up Points include longer operational hours, accessible for collection on weekends and public holidays, time saving because it takes less than ten minutes to collect medication packs.

We also made it possible for family members including children to be registered as proxies to be able to medication on behalf of their parents. The number of collection points is increase as retailers are registered to ensure that their clients are able to shop and access their life-saving treatment in one place.

Furthermore, the patient-centric approach CCMDD continues to evolve and adapt to patients needs and the overarching public health response in South Africa. For the clinicians, it has become easier to capture and write an electronic script. The electronic system has been deployed to 28 Districts, 2 309 facilities, and now illegible hand writing from the clinicians is a thing of the past.

The CCMDD, through the office of Director General has documented its innovations and submitted it to the Centre for Public Service Innovation. At the awards ceremony CCMDD was awarded the winner in three categories, which are winner for GEMS Award; Innovation Harnessing Technology and lastly, Innovator of the Year.

Let me say this Honourable Chairperson: It takes the dedicated and willing stakeholders from both Public and Private sectors, who together have joined forces to make CCMDD a success hence we have today we are glad to report that a total number of 5 013 074 million patients have enrolled on this programme since its inception in 2014/15. It has an average growth of 625 000 per year and we aim to enrol more patients.

Honourable members

As you may be aware that, South Africa faces a serious oncologist challenges, we have expanded these services in most provinces, especially in areas such as childhood cancers and palliative care.

The HPV programme is in place in all high schools for vaccination of girls of the aged 14 years. South Africa introduced the Human Papillomavirus (HPV) vaccination campaign nationwide in Feb/March 2014 to reduce the incidence of cervical cancer.

In the past five years (2017 – 2021), 1 581 441 first doses and 1 331 605 second doses have been administered. Due to the shift from Grade 4 to Grade 5 girl learners during 2020 only a small number of girls were eligible

Honourable Members

The Department will further invest in human resources for mental health and training of generalist health workers. The total number of 1200 in 2020/21 and 587 health care professionals in 2021/22 were capacitated on the screening, early detection and management of common mental health conditions in general health settings.

An additional 600 health professionals will be trained this year, and we will invest in mental health infrastructure to ensure adequate quality of service provision and care closer to the community. Inpatient psychiatric units are attached to district and regional hospitals and psychiatric hospitals are included in the departmental hospital revitalization plans.

We embrace intersectoral collaboration with our stakeholders which include government departments, NGOs, Professional Associations and other institutions such as the South African Human Rights Commission on mental health interventions because mental health is not just a health issue.

While we are undertaking all these initiatives, we also pay attention to vulnerable populations such as the Truth and Reconciliation Commission (TRC) victims and those affected by natural disasters.

The department is also implementing initiatives and preventative measures outlined in the Health Sector Drug Master Plan to protect our people, in particular children and youth from drug use initiation.

As a country, we are committed to the malaria eliminating agenda throughout the SADC region, and this is shown through our commitment and collaboration in various initiative within the region such as Malaria Elimination 8 initiative (E8) and the Lubombo Spatial Development Initiative 2 (LSDI 2) a malaria cross border initiative among South Africa, Eswatini and Mozambique.

Malaria elimination can only be achieved through a concerted cross-border effort, which aims to harmonise malaria polices, optimise intervention coverages, and synchronize operations.

In the coming financial year, the Department of Health and partners will focus on strengthening and implementation of interventions to clear malaria foci at a sub-district level. Some the targets and objectives for South Africa to realize its malaria elimination goal are as follows:

- Strengthen and sustain the surveillance systems so that 100% of malaria cases are reported into the malaria information system (MIS) within 24 hours;

- Protect all populations at risk to achieve at least 95% coverage with key vector suppression strategies and interventions and

- Ensure universal access to diagnosis and treatment in endemic and non-endemic areas according to national guidelines.

- Operationalize district cross border committees with Zimbabwe, Mozambique, Eswatini, and Botswana.

Provide effective management, leadership, and coordination for the optimal implementation of malaria elimination interventions at all levels.

With regards to birth registration initiative at health facilities, we are working closely with the Department of Home Affairs to help mothers register their children immediately before leaving a hospital or health facility and receiving a birth certificate.

The project to roll-out birth registration system in health facility commenced in 2005 as a result of the partnership between the two departments. The Department of Health provides the Department of Home Affairs with office space in our health facilities and access to its local area network for internet connectivity of most of the public health facilities for the registration of births.

By the end of 2013/14 financial year, the department of Home Affairs was provided 391 health facilities with maternity wards where births were registered, and birth certificates issued through online birth registration system and manual application. Out of the 391 connected health facilities, 322 are public health facilities and 69 are private

The plan is to roll-out the online birth registration system to selected 1445 high-volume public health facilities between 2019/20 and 2024/25. The 2022/23 target is to reach 127 facilities

The primary objective is to attain universal birth registration by providing infrastructure that is accessible to register every birth delivered in order to close the gap between the actual live births and registered births.

Birth registration as a national policy is also linked to the Rights of a Child as stipulated in Article 7 of the United Nations Convention on the Rights of the Child that says:

shall have the right from birth to a name, the right to acquire a nationality and, as far as possible, the right to know and be cared for by his or her

The total number of 1 002 577 deliveries have been recorded in the past financial year from the public health facilities. Private sector is additional percentage based on uninsured population and there no accurate figures from District Health Information System (DHIS).

Honourable Chair

The Nelson Mandela Fidel Castro Medical Collaboration Programme was established by presidents Nelson Mandela and Fidel Castro in 1996 as part of the various bilateral agreements between South Africa and Cuba.

The objective of the programme was to address the over-concentration of health personnel in urban areas and in the exclusionary private sector; insufficient personnel who were also not in possession of the necessary training and the under-provision of health care in rural and peri-urban areas, as well as informal settlements.

The recruitment drive provided the following opportunities within the country,
introduced a New Medical Model focusing

Public entities & Statutory Councils

National Health Laboratory Service

The National Health Laboratory Service (NHLS) remains the largest diagnostic pathology service in South Africa, with a network of approximately 233 pathology laboratories. It is responsible for all diagnostic services to the public sector catering for approximately 80% of the South African population. It runs the largest HIV and TB program in Africa and conducts tests for several priority diseases.

The NHLS has conducted 10,936,295 COVID-19 tests as at the 06 April 2022. Of the total amount of tests conducted, 7,665,227 were done on PCR and 3,271,068 were done using the SARS CoV-2 antigen rapid test. Total number of laboratory of 24 675 963 tests were conducted as of the 9th May 2022.

An amount of R8,8 billion is budgeted in the 2022/2023 financial year for laboratory services programme, to provide equitable service coverage, through implementation of Point of Care Testing, Digital Pathology, modernisation of testing equipment. The forensic chemistry laboratory function will shift from the Department of Health to the

The National Institute for Occupational and Environmental Health continues to provide occupational and environmental health support across all sectors

NHLS budgeted R166 million for the 2022/2023 financial to support these efforts.

South African Health Products Regulatory Authority

As the country continues to deal with the COVID-19 pandemic, South African Health Products Regulatory Authority (SAHPRA) also continues to be agile in response to the COVID-19 pandemic by focusing on the three pillars of safety, quality and efficacy by ensuring that it fast-tracks priority health products to protect and save lives.

With regards to regulatory decisions taken on COVID-19 vaccines, Pfizer (Cominarty) and Janssen were approved. SAHPRA is also providing access to ivermectin for the treatment of COVID-19 through the controlled compassionate use programme for approved unregistered ivermectin products.

The programme is currently under review based on the most recent scientific medical data available. As South Africans continue to receive COVID-19 immunisation, SAHPRA is closely monitoring the COVID-19 adverse events through the MedSafety App.

South African Medical Research Council

Since the onset of the pandemic, the South African Medical Research Council (SAMRC) has been supporting the National Department of Health and collaborating with various stakeholders towards a concerted Covid-19 response.

Between 17 February and 17 May 2021, the SAMRC, together with the National Department of Health, Desmond Tutu Health Foundation, CAPRISA and Johnson and Johnson, provided early access to the Ad26COV2.S, the Johnson & Johnson vaccine to health workers in the Sisonke study. In total, 496 424 health workers received a dose of this vaccine as part of a Phase 3B real world study to evaluate its effectiveness in South Africa among health care workers.

The single dose Johnson & Johnson Covid-19 vaccine demonstrated effectiveness against severe Covid-19 disease and death post-vaccination, and against both Beta and Delta variants of concern. In December 2021, Sisonke participants were offered a boost with the Ad26COV2.S vaccine to ensure protection ahead of the fourth wave.

Council for Medical Schemes (CMS)

CMS principal intervention was the inclusion of COVID-19 as Prescribe Minimum Benefit after the submission by the CMS to the Minister of Health. The CMS further intervened when it registered a complaint to the Competition Commissioner about the high prices of the COVID-19 test.

This intervention resulted in price a reduction of price from R850 to R500, including VAT, reflecting a 40% difference. The CMS continues to resolve complaints from members of schemes, ensure continued good governance

of medical schemes, approve or amend schemes rules and continue review and guidance to contribution increased annually.

Office of Health Standards Compliance

The Office of Health Standards Compliance (OHSC) conducts inspections of health establishments to measure their performance against prescribed norms and standards. The inspections conducted by OHSC are aimed at ensuring health establishments from major hospitals to clinics, the independent practices of doctors and other health professionals comply with the legislated health standards.

For the first time under regulated environment, the OHSC commenced the process of implementing its certification and enforcement framework in the public healthcare clinics and community health centres (CHCs) during 2021/22 financial year. From 2022, public and private hospitals form part

Statutory Health Professional Councils

**Medical Bureau for Occupational Diseases & Compensation
Commissioner for Occupational Diseases (CCOD)**

The CCOD finalised thirty-seven thousand claims with an approximate value of one billion rands over the last five years. About three hundred and twenty million rands was paid to eleven thousand five hundred claimants in the Eastern Cape Province during this period.

On my recent visit to Mozambique to raise awareness of the ex-

President Chissano who remarked that they knew about the problem of occupational lung diseases but did not know where and how to start.

Indeed, our work with the Minerals Council South Africa, the class action settlement funds, the trade unions, provincial and neighbouring country governments and the ex- associations are bearing fruit in redistributive justice, but we must do more in the prevention of occupational lung diseases as compensation is a last resort

Honourable Chair and Members

Honourable Chairperson, we are working towards building a resilient health system since this is a prerequisite for the NHI, and based on the lessons learnt from COVID-19 pandemic. We have also been preparing