SUBMISSION ON

1. NATIONAL HEALTH INSURANCE BILL [B 11-2019]

Date	29 November 2019
Topic or Bill	NATIONAL HEALTH INSURANCE BILL [B 11-2019]
Name of Committee (if applicable)	Portfolio Committee on Health

2. State whom the Submission is from:

The submission is from the KHAYELITSHA HEALTH FORUM and KLIPFONTEIN HEALTH FORUM represented as indicated in the details below:

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Aim and Purpose of the Khayelitsha Health Forum:

Health Committees are statutory structures created by the National Health Act. The Health Committees (HCs) are community-led and drawn organisations which act as a bridge between the facility and the community, and act as a vehicle for community participation in their own health. They are critical structures which exist in the primary health care system to support and strengthen health systems and act as a vehicle for community participation. However, the role and functions of Health Committees suffer because they are left to provincial legislation.

3. State whether you wish to appear before the Committee

Yes, we would like the opportunity to address the Committee in person.

4. Concerns on the NHI Bill

4.1 Introduction

In principle there is support for the purpose of the NHI Bill that seeks to achieve universal access to quality health care services in the Republic in accordance with section 27 of the Constitution.

However, the success of the NHI Bill is dependent on a strong Public Healthcare System and the challenges experienced by the Public Healthcare System needs to be addressed and fixed as a matter of priority. Failing this, we will be setting up the NHI to fail.

4.2 NHI Public Participation process

There has been a lack of public participation with the communities most affected and impacted by the NHI. The public participation process has not reached the poor communities most in need of understanding the NHI and what it will mean for them. Clarity is required on how people with disabilities and special needs will be accommodated in the NHI Bill. To what extent has the stakeholder engagement process targeted the Disability Sector and other marginalised groups, for example children, women, and the aged?

Government indicates that it embarked on a public participation process on the NHI (Green Paper and White Paper phase) before the NHI Bill was tabled in Parliament. In terms of Parliament's oversight function, did Government provide Parliament with a stakeholder engagement report? If so, then the stakeholder engagement report must be made public to verify the extent and reach of the public participation process at the level of the Executive (Government). Submissions were also made during the Green Paper and White Paper stages of the draft Bill. Did Government account to Parliament about the extent to which those submissions were taken into account in the formulation of the NHI Bill that was tabled in Parliament? And did the Executive give feedback to those stakeholders who made submissions?

If communities are excluded from consultation and involvement in the NHI, then the NHI will not happen because the NHI is about the healthcare needs of the poor communities who should have a major say in this key piece of draft legislation that affects all South Africans, and especially the poor. There is a tendency for Government to assume that it understands what the needs are at grassroots level without doing thorough consultation, research and analysis in partnership with civil society.

The Khayelitsha and Klipfontein Health Committees also urge that the public participation process on the NHI Bill be protected from political interference and party political squabbles and point scoring. The NHI is not about political gain, it is about healthcare for all in which the voice of everyone matters and should be respected. Ordinary citizens need to be properly informed and educated about the NHI Bill and not be ignored due to Gatekeepers of the process who have ulterior motives for who they are inviting to participate in the process.

4.3 Co-operative governance

There needs to be greater co-operation, working together and pooling of resources between the different spheres of government in terms of the public participation process of the NHI Bill and educating the public in a non-partisan and unbiased way about the facts of the NHI Bill. This needs to be seen in action. Provinces, Districts and local Municipalities also need to work hand-in-hand with healthcare facilities to provide better services. Currently there is a culture of blame shifting and lack of responsibility - the one structure will blame the other for poor service delivery or the one structure will say it is the other structure's responsibility. In the end service delivery suffers and the recipients of the services are short-changed.

4.4 Closing date for submissions: 29 November 2019

We have difficulty understanding why the closing date for submissions is 29 November 2019 when the last Public Hearings in the Western Cape will only happen in February 2020. Should the closing date for submissions not be a date after the last Public Hearing to allow communities to influence the process of the NHI Bill?

4.5 NHI Pilot projects

There has been no feedback to stakeholders and interested parties about the successes and failures of the Pilot projects. This feedback needs to happen to allow communities the opportunity to use the lessons learnt in order to move to a better point of achieving universal access to healthcare for all. Clarity is needed with respect to how the NHI Bill will address the transition between private medical aid and a universal healthcare system for all. The gap between private and public healthcare needs to bridged and how this is done is important.

4.6 Role of the Health Committees

Health Committees are statutory structures created by the National Health Act. The Health Committees (HCs) are community-led and drawn organisations which act as a bridge between the facility and the community, and act as a vehicle for community participation in their own health. They are critical structures which exist in the primary healthcare system to support and strengthen health systems and act as a vehicle for community participation.

However, the role and functions of Health Committees suffer because they are left to provincial legislation. Health Committees as a statutory structure have not been factored into the NHI Bill. What role will the Health Committees play in the NHI? The ward-based outreach programmes are funded, and yet the Health Committees are not funded, but play an important role in communities at a very local level. Health Committees also have a role to play in ensuring that Health facilities and staff become accountable for the quality of service delivery. Nurses and doctors need to be trained on inclusive approaches to service delivery and to work in partnership with community structures and Health Committees.

Health Committees need to be empowered and acknowledged in a meaningful manner in the NHI Bill.

4.7 Role of the District Health Management Office

The role, functions and authority of the District Health Management Offices needs to be clearly spelt out as well as its role in relation to Contracting Units for Primary Health Care. There needs to be clarity around all the structures envisaged in the NHI and how they relate, support and complement each other. If this is not captured and clearly defined in legislation, we will find ourselves with conflict and competition between structures.

4.8 NHI Board (Composition)

The Minister of Health appoints the Board. Provision **must** be made in the Legislation for civil society representation in the NHI Board and all other structures envisaged in the NHI. This will help to build the required checks and balances to hold government accountable to the people. It will build the principles of transparency and accountability that our democracy needs. It will also help to tackle the corruption scandals that Government and other organs of state have been plagued with. Accountability mechanisms of the NHI must be clearly spelt out in the NHI to ensure that Government is accountable to the people and to deal with corruption and potential failure of the NHI.

4.9 Funding of NHI

Clarity is needed about the exact details and workings of how money is going to be pooled to fund the NHI. A proper analysis is needed of whether South Africa is in a financial position to fund the NHI and whether there is sufficient trust by the public that Government will be able to deliver an NHI that is inclusive of community participation in all its facets. There is a view that perhaps we need to be building our Public Healthcare System as a priority to ensure a successful transition to an NHI Fund.

Our current Public Healthcare System will benefit from the availability of doctors in local clinics and for home visits, especially for senior citizens, bedridden and frail care patients. Our Public Healthcare System will also benefit from the recognition of Mid-wives, Home Based Care providers and special

needs clinics. Basic healthcare standards need to be applicable to all levels of healthcare service providers.

4.10 Monitoring and Evaluation mechanisms

The NHI Bill needs to spell out very clearly what monitoring and evaluation mechanisms are going to be used to monitor the NHI Fund. The monitoring and evaluation mechanisms and processes must include representation of civil society for transparency and accountability. Transparency is also needed when it comes to tenders and employment opportunities. We need to ensure that Government officials do not get kick-backs and benefit from the NHI fund. Guarantees are required that the NHI Fund will not be subjected to State capture and looting. We need to build confidence in Government and this must be done by partnering with civil society in a manner where they can influence, have joint control and jointly own the purpose and outcomes of the NHI Fund.

4.11 Registering for the NHI Fund

An electronic system is required that will store information of patients that can be accessed throughout the country. It needs to be a national system that will enable patients to access services anywhere in the country.

5. Recommendations

It is recommended that Government and Parliament provide a report on the nature and extent of its public participation processes on the NHI Bill in the form of a stakeholder engagement report and a stakeholder analysis report. It is further recommended that these reports be made public. Should this analysis indicate that the public participation process was lacking, then the public participation process needs to be extended to allow thorough consultation with communities and especially marginalised groups in our society. It is recommended that Government and Parliament abides by a non-partisan and unbiased approach to public participation on the NHI Bill.

Further recommendations:

- That the evaluation report of the NHI pilot projects be shared with communities and stakeholders and that the monitoring and evaluation tools and processes used to evaluate the NHI pilot projects also be shared and made public.
- That submissions are acknowledged and that feedback is given to organisations and individuals about how specific content of submissions shaped the NHI Bill.
- That Government and Parliament work closely together with community based structures in the roll out of public participation processes from the conceptual stage and that communities are not reduced to mere recipients of information from a top-down approach.

6. Attachments

A list of signatories who participated in the drafting of this submission is attached to the submission.







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