# NATIONAL ASSEMBLY

**FOR WRITTEN REPLY**

**QUESTION NO. 2417**

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**(INTERNAL QUESTION PAPER NO. 24)**

**Ms N N Chirwa (EFF) to ask the Minister of Health:**

Noting that the National Health Insurance (NHI) does not have an arrangement that will focus on improving and/or developing infrastructure of health facilities in the Republic, (a) what plans and/or measures has he put in place to ensure that infrastructure of public facilities is improved and/or developed prior and/or during the NHI and (b) how will improving infrastructure of public facilities be planned, catered and paid for under the NHI?

###### NW2843E

**REPLY:**

The NHI Bill (and the Fund that it seeks to establish) will not replace the National Health Act of 2003 although it will amend several sections as listed in the first Schedule. The reforms do not replace the budget process nor the public works and other infrastructure mandates.

Therefore, the NHI does not have any specific arrangement that will focus on improving and/or developing infrastructure since that is catered for in other laws.

1. Public health sector infrastructure is subject to the Government Immoveable Asset Management Act (GIAMA) and construction of infrastructure in public health facilities is managed in terms of Treasury and Public Works prescripts. The national and provincial health departments will remain responsible for infrastructure of public health facilities. In keeping with the purchaser/provider split the NHI Fund will not be a provider of health services and therefore will not maintain and build infrastructure. That is a provider function. The NHI Fund will purchase services of a quality that it determines and in so doing will ensure that infrastructure is improved and/or developed.
2. Improving infrastructure of public health facilities will be planned by the National Department of Health with provincial departments. Maintenance of infrastructure must be paid for and managed by the providers (including the provinces as the provider in the public sector). Under the reformed health system major refurbishment, extensions and new infrastructure will be paid for through infrastructure allocations, such as is done through the present conditional grants, preferably from a centralised national health infrastructure fund.

END.