# NATIONAL ASSEMBLY

**FOR WRITTEN REPLY**

**QUESTION NO. 2773**

**DATE OF PUBLICATION IN INTERNAL QUESTION PAPER: 20 NOVEMBER 2020**

**(INTERNAL QUESTION PAPER NO. 49)**

**Ms T L Marawu (ATM) to ask the Minister of Health:**

(1) In light of the recent announcement that the next steps of the National Health Insurance (NHI) are ready to be implemented as early as February 2021 and given the already overwhelmed healthcare system, how does he envisage the proposed Comprehensive Scheme by the NHI to serve South Africans first;

(2) with the increased taxes that will be paid by South Africans towards the specified plan, how will he ensure that South Africans will benefit first, as opposed to the current system that seemingly favours non-citizens over the lives of South Africans who are left unable to access healthcare that they are eligible to receive from the State?

###### NW3592E

**REPLY:**

1. The full implementation of NHI is dependent on the finalisation of the Bill. The envisaged timelines in finalising the Bill have been adversely impacted by the COVID-19 pandemic. The public hearings have also been delayed as result of the restrictions that had to be implemented as part of the National Disaster Management response to manage the pandemic nationwide. While it is acknowledged that the health system has faced several challenges over the years, and in response to the COVID-19 pandemic, it is still farfetched to indicate that the system is overwhelmed. It may suffer pressures in some instances, for instance due to the resurgence of the COVID-19 infections and the number of patients needing to be admitted and treated in some provinces and districts.

In recognition of the challenges facing the health system and as part of the initiatives to holistically address them, the Department of Health has developed and is implementing several interrelated interventions. The focus of these interventions includes:

1. **Strengthening community level health care delivery platform**

Primary health care(PHC) as a bed-rock of the system and that provides an accessible, cost-effective and sustainable platform for the speedy realisation of universal health coverage. Our efforts in this area focus on initiatives directed at strengthening community mobilisation in health promotion, improved screening, disease prevention, rehabilitation and early treatment of disease. An expansive network of Community Health Workers serving a catchment population will be linked to support the delivery of PHC services in our communities. This has been so especially during screening and contact-tracing that has been implemented to manage the spread of theCOVID-19 epidemic at the local level. A well-organised referral system to support the delivery of PHC services through referral to our clinics is being implemented. The Ideal Clinic and Integrated School Health Programmes have been implemented to strengthen the PHC platform.

1. **Improving the health systems health information systems**

Over the past few years, the NHI information systems capacity has been augmented, strengthened, and dramatically improved. The investments made in these improvements will all remain and enhance the capability of the department to manage the health system into the future.  We have also established a patient registry through the deployment of the Health Patient Registration System in our PHC facilities and public hospitals. The National Department of Health in response to the stipulation of Section 74 (1) and (2) of the National Health Act has established structures and process with key stakeholders for the coordination of health data and information. The Health Normative Standards for Interoperability have been completed after wide consultation. The Department has already done work on the Health Patient Registration System using a single patient identifier. The system has been rolled out in several facilities for piloting.

1. **Health infrastructure delivery**

One of the NDP Implementation goals is to build health infrastructure for effective service delivery. The Department has developed a 10-year national health infrastructure plan to improve health facility planning to ensure construction of appropriate health facilities on a sustainable basis. Healthcare infrastructure will focus on the provision of new hospitals, CHC’s, clinics and maintenance, upgrading of established facilities that needs to be expedited to improve citizen’s access to more advance healthcare facilities. The Department is also implementing a programme to address health infrastructure backlogs as part of the preparation for the accelerated roll-out of NHI. The COVID-19 pandemic experience has necessitated the need to improve our health technology and equipment such as oxygen reticulation, ICU equipment and increasing our bed capacity through field hospitals. This will also contribute to job creation and stimulating economic growth and transformation of the construction sector. We believe that this health infrastructure programme will improve public confidence in the public health care system.

1. **Human resources**

In terms of improving health system capacity, one of the core areas we are focusing on is to address the human resources gaps in the system with finality. We are pleased that between the period January to July 2020, Medical Interns and Community Service Personnel were allocated to existing Statutory Posts. It is further expected that an additional number of these personnel will be allocated in January 2021.This increase in the number of staff employed in critical posts in the health sector indicates a positive step that the national and provincial departments are taking to prioritise and meet the health needs of South Africans in line with the progressive realisation of the right to health as enshrined in the Constitution.

It is important to note that all these interventions are already being implemented to ensure consistency with the global vision that health care should be seen as a social investment and not be subject to market trading as a mere commodity.

1. Funding for NHI will not be from increased taxes, but rather from the strategic reprioritisation of healthcare financing resources that are already available in the health sector. These details are outlined in Chapter 10 of the NHI Bill which provides details outlining the chief sources of funding that will be utilised to finance the NHI implementation programme.

South African citizens will benefit from NHI as outlined in Chapter 2 section 4 which provides the details on how the population (including non-citizens) will be covered informed by the functions of the Health Benefits Advisory Committee.

Non-citizens also provided for in line with international obligations. Chapter 2 of the Bill emphasises the population coverage criteria and how South Africans will be prioritised, how their rights as users will be protected and provided for within the NHI set up, how costs associated to accessing and utilising services will be covered and which comprehensive healthcare services they will be entitled to.

Our plans to implement NHI reflect the kind of society we wish to live in: one based on the values of social solidarity, equity, justice and fairness. It is for this very reason that these values are enshrined in the White Paper on NHI as well as the NHI Bill that is currently before Parliament.

END.