# NATIONAL ASSEMBLY

**FOR WRITTEN REPLY**

**QUESTION NO. 7**

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**(INTERNAL QUESTION PAPER NO. 01)**

**Ms Z Majozi (IFP) to ask the Minister of Health:**

What steps has he taken or does he intend to take to address (a) public health facilities that are below standard and (b) service delivery which is negatively impacted by a lack of human resources, aging infrastructure and rampant corruption?

###### NW954E

**REPLY:**

1. The Office of Health Standards Compliance (OHSC) was established in accordance with the amended National Health Act of 2013, Chapter 10. One of the objectives of the OHSC is to protect and promote the health and safety of users of health services by monitoring and enforcing compliance by health establishments with norms and standards prescribed by the Minister in relation to the national health system. The Norms and Standards Regulations applicable to different categories of health establishments was Gazetted in February 2018.

In addition, National programmes such as the Ideal Clinic and Hospital programme was established to give guidance and monitor the progress of health facilities with the implementation of the Norms and Standards Regulations.

The NDOH is tasked with the management of public health facilities and infrastructure of the country, in conjunction with the provincial Infrastructure Units of the Provincial Health Departments. The Cluster focuses on co-ordinating and funding health infrastructure to enable provinces to plan, manage, modernise, rationalise and transform infrastructure, health technology and hospital management, and improve the quality of care in line with national policy objectives. This programme is funding infrastructure projects ranging from new and replaced facilities; upgrades and additions; refurbishment, rehabilitation and renovations, to maintenance and repairs. Of importance most of the healthcare infrastructure projects funded over the MTEF period by the Provincial Equitable Share, Health Facility Revitalisation Grant, and In-kind Grant focused on upgrades and additions; refurbishment, rehabilitation and renovations, to maintenance and repairs.

1. The human resources for health (HRH) crisis will undermine the achievement of high-quality universal health coverage. This crisis is characterised by: staff shortages, inequities and mal-distribution between urban and rural areas and between the public and private health sectors; unprofessional behaviour and poor staff motivation and performance. This crisis will undermine the achievement of high-quality universal health coverage, if not addressed. In the public sector, the lack of knowledge and skills of doctors and nurses were contributory factors in the potentially preventable maternal deaths.

We have realized a need to invest in, and transform human resources in support of a high-quality health system, focusing on the following:

***Development of a transformative HRH plan.***

1. The National Department of Health (NDoH) will use the opportunity provided by the development of the HRH plan forthe period 2019/20-2024/25 to partner with front-line health care providers for a high quality health system, and to make health equity and quality the foundation of the new HRH plan.
2. The NDoH will finalize the staffing norms and standards for District Hospitals, that are informed by the national quality Program of Action (POA).

**Corruption**

Fraud and corruption are major threats to equitable access to quality health care. Therefore all provincial departments of health are required (according to legislation) to have an approved fraud and corruption plan. Employees are encouraged to report all corruption to the Anti-corruption hotline.

END.