# NATIONAL ASSEMBLY

**FOR WRITTEN REPLY**

**QUESTION NO. 97**

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

**Dr M M Gondwe (DA) to ask the Minister of Health:**

(1) What processes has his department followed in order to assess the impact of climate change on health needs and services;

(2) what progress has his department made in addressing the challenges facing forensic chemistry laboratories relating to backlogs, low staff morale and infrastructure;

(3) what progress has his department made in rolling out ideal clinics in each province?

###### NW109E

**REPLY:**

1. The Department has embarked on a project to develop a risk and vulnerability assessment framework to be used for assessing the impact of climate change on health needs and services. This project was started in May 2019 after appointment of a service provider, this follows a number of engagements since July 2018 between the National Department of Health and the Department of Environment, Forestry and Fisheries. Funding for the project was sourced from the Department of Environment, Forestry and Fisheries (DEFF) through The Federal Ministry of the Environment, Nature Conservation and Nuclear Safety (BMU). The project managers are the Department of Environment, Forestry and Fisheries and the Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) who contracted the University of South Africa to develop the risk and vulnerability assessment framework. The final product is expected to be delivered at the end of February 2020. The framework will assist the Department in conducting the assessment on health needs and services.

1. Backlogs:

Following a meeting of the National Forensic Pathology Services Committee (NFPSC) with the previous Minister of Health on 25 February 2016, it was decided not to destroy the approximately 12,000 backlogged cases (multiple samples per case) without Case Administration System (CAS) numbers. A decision has been made to group the backlogged cases in certain year categories and to analyse them.

Resulting from this meeting, the Criminal Justice System Reform Committee (CJSRC) was tasked to perform an audit of all outstanding toxicology cases. Following this decision, during a third full audit of all outstanding cases during 2016 and 2017, they have provided the Forensic Chemistry Laboratories (FCLs) with a list of cases with SAPS CAS numbers where prosecution, and thus analysis, is still required. The list has been signed off by the Chair of the CJSRC on 31 March 2017. This list contained 3,112 cases before verification at the FCLs. Of these 3,112 cases, the FCL’s could only verify 754 cases that were still outstanding as at 31 March 2017.

Another verification in April 2019 has reduced the number of outstanding cases on the list to 705, which is used as the baseline list to monitor performance. The FCLs only analyse cases from this list, newly received cases to prevent them from becoming backlogged (as all have CAS numbers), as well as all urgent requests from pathologists (including insurance matters). The balance of cases without CAS numbers will only be tested once CAS numbers have been linked to them.

Table 1 below indicates the performance of the FCLs against reduction of the CJSRC baseline backlog list of cases where prosecution is still required. [APP target: Eliminate the backlog of toxicology tests by 2019/20 (70% by 31 March 2020)]

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| **TABLE 1** |
| **2019/20 Financial Year** | **% Decrease in Toxicology backlog** | **APP Target (%)** |
| **Quarter 1** | 42.98 | 63 |
| **Quarter 2** | 43.26 | 65 |
| **Quarter 3** | 44.11 | 67 |
| **Quarter 4** |  | 70 |

The total number of blood alcohol samples older than 90 days for the four FCL’s that have not been analysed as at 31 March 2019, was 8,210.

The cumulative total backlogged samples completed for 2019/20, Quarter 1, 2 and 3 was 7,513 (91.51%) of the list of 8,210. The FCL’s have also tested newly incoming samples in order to prevent these samples from forming a backlog. Table 2 below reflects the FCL progress regarding the 2019/20 APP target [Eliminate the backlog of blood alcohol tests by 2019/20].

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| **TABLE 2** |
| **2019/20** |  | **APP TARGET** |
|  | **% DECREASE IN BA BACKLOG** | **% DECREASE IN BA BACKLOG** |
| **Quarter 1** | 75.42 | 25 |
| **Quarter 2** | 90.17 | 50 |
| **Quarter 3** | 91.51 | 75 |
| **Quarter 4** | - | 100 |

The Toxicology and blood alcohol analysis output has been negatively affected by procurement system problems during quarter three of this financial year, causing delays in equipment repairs and procurement of consumables and chemicals required for the analysis processes. The FCL’s also currently have 30 vacancies out of a total establishment of 174.

**Low staff morale:**

Low staff morale in the Pretoria Laboratory is as a result of the poor building conditions. Progress is made in terms of obtaining alternative work accommodation.

**Infrastructure:**

Only the Forensic Chemistry Laboratory (FCL) in Visagie Street, Pretoria, has challenges with regards to accommodation. The FCL in Durban is new (established in 2015), and housed in the Kwa-Zulu Natal Department of Health building. The FCL in Cape Town is accommodated in a private building that has been recently renovated. They also have sufficient space for staff and equipment. The FCL in Johannesburg has been extensively renovated, with the project completed around 2011/12.

Two previous tender processes initiated by the Department of Public Works (DPW) have failed. An offer for accommodation by the Department of Water Affairs and Forestry, as well as an offer by the South African Bureau of Standards, have not been successful.

The DPW advertised a tender in June 2013. This process has however not been successful, as no suitable building could be located. In late 2013 the National Department of Health informed the DPW about the Department of Water Affairs and Forestry (DWAF) building (Material Laboratory) in Carl Street in Pretoria West that has not been utilized since 2009. Initially the DWAF was willing to allow the NDOH to utilize this building for the FCL Pretoria activities, but withdrew the offer in June 2014. The DPW then informed the National Department of Health (NDoH) that they did not have any other buildings available that would meet the FCL requirements and that the initial space requirements needed to be decreased. A second tender was advertised in December 2014, and that was also not successful.

In January 2015 the Chief Director: Trauma, Violence, Emergency Medical Services and Forensic Pathology Services (as it was previously called) came in contact with the office of Mr Govender, Deputy Director-General and Head of Real Estate and Facilities Management at the Department of Public Works (DPW). The DPW subsequently undertook to prioritize this matter. Shortly thereafter space was identified at the South African Bureau of Standards (SABS) in Groenkloof, Pretoria. This facility was well situated, had ample parking space and had sufficient vacant floor space to be able to accommodate the FCL staff and equipment. In a meeting on 31 August 2016 where the Chief Financial Officer of the SABS was present, she informed all present that they were intending to commercialize the Groenkloof Campus, and that they might not be able to accommodate the FCL. This was followed by the DPW informing the NDoH team that they have been dealing with the wrong Department at the DPW from 2014 to 2016, and that the process had to be started from scratch.

In August 2017 a new needs and cost analysis were submitted to the DPW. Advertising of the needs for a new building has not proceeded, as the NDoH Infrastructure unit proposed to move the FCL into the CIVITAS building as an alternative. With current infrastructure challenges at CIVITAS, this is however no longer an option.

It has been established that there is laboratory, as well as office space available at the CSIR (Centre for Scientific and Industrial Research) campus on Meiring Naudé Road in Pretoria. The space will be suitable for the relocation of the Forensic Chemistry Laboratory, Pretoria – with the understanding that the space will have to be prepared accordingly. This will have cost implications.

1. The Ideal Clinic Realization and Maintenance (ICRM) programme is completing its fifth year of implementation in the 2019/20 financial year. The program is implemented in all the Primary Health Care facilities in the country. In the beginning of each year, the baseline status determination is conducted by Facility Managers in all facilities and confirmed by the District Perfect Permanent Team of the ICRM (PPTICRM).

Since 2015/2016 to 2018/2019 the Department of Health had turned 1,920 primary health care facilities ideal. The preliminary results for 2019/2020 3rd quarter is 76 facilities that have achieve status. The breakdown per province is indicate in the table below.

Health facilities inspection tools for both Ideal Clinic and Office of Health Standards Compliance were recently aligned to ensure that they request same evidence for compliance with Norms and Standards by the health facilities. Provincial workshops were also conducted on the aligned tools. The effective date of implementation for aligned tools is the 1st of April 2020.

**Table 1: Ideal Clinic Achievement by Province for 2015/16 to 2018/2019 and 2019/2020 (Quarter 3)**

**Financial Years**

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| **Province**  | **2015/2016**  | **2016/2017**  | **2017/2018**  | **2018/2019**  | **2019/2020 (Preliminary results)**  |
| **Eastern Cape**   | **14**  | **139**  | **157**  | **249**  | **15**  |
| **Free State**   | **22**  | **78**  | **114**  | **168**  | **0**  |
| **Gauteng**   | **89**  | **215**  | **291**  | **330**  | **6**  |
| **KwaZulu-Natal**   | **141**  | **288**  | **383**  | **461**  | **19**  |
| **Limpopo**   | **27**  | **51**  | **121**  | **165**  | **1**  |
| **Mpumalanga**   | **19**  | **66**  | **87**  | **133**  | **3**  |
| **Northern Cape**   | **3**  | **67**  | **89**  | **92**  | **0**  |
| **North West**   | **7**  | **92**  | **121**  | **141**  | **9**  |
| **Western Cape**   | **-**  | **41**  | **144**  | **181**  | **23**  |
| **TOTAL**   | **322**  | **1037**  | **1507**  | **1920**  | **76** |

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