

**TAKING LEGISLATURE TO THE PEOPLE (TLP) OVERSIGHT VISIT REPORT  
OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL  
DEVELOPMENT CONDUCTED AT XANTHIA CLINIC ON 27 JUNE 2018 -  
DEPARTMENT OF HEALTH**

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**1. INTRODUCTION**

The Legislature conducted its Taking Legislature to the People (TLP) at Bushbuckridge Local Municipality from 25-29 June 2018.

The Portfolio Committee on Health and Social Development (the Committee) visited Xanthia Clinic during the TLP programme on 27 June 2018.

**2. PURPOSE OF THE TLP OVERSIGHT VISIT**

The purpose of the TLP visit was to assess the health facility, infrastructure and performance against the National Core Standards (NCS).

**3. METHOD OF WORK**

The Legislature notified the department and all stakeholders accordingly about the TLP oversight visits to be conducted and the purpose thereof. Invitations were then sent to the respective departments including the Department of Health, management of the clinic and the municipality, requesting them to be part of the programme.

- On 27 June 2018, the Portfolio Committee on Health and Social Development conducted its oversight visit to the project of the Department of Health.

- On 28 June 2018, the Social Transformation Cluster jointly with the Economic Cluster conducted a public hearing at Angincourt Sport Field.

#### **4. OBSERVATIONS**

**The Committee observed the following:**

- The clinic is clean and neatly kept;
- There was no proper fencing around the clinic.

#### **5. INTERACTION WITH THE MANAGEMENT OF THE CLINIC, THE DEPARTMENT OF HEALTH AND INVITED STAKEHOLDERS**

In the absence of the MEC and HOD, who had apologized to attend a meeting with the National Health Council, Ms. Dudu Mdluli, and Chief Director: Primary Health Care, was delegated to lead the department.

The committee inspected the clinic whilst interacting with the clinic management, led by Ms. LL Mthethwa – the Operational Manager and the delegation from the department. The following was noted:

- The filing room is small but neatly packed. The clinic still uses the old filing system, however the files are traceable. The only Data Capturer at the clinic makes use of the Health Patient Registration System (HPRS), for consultation;
- The clinic has an Operational Manager and five Professional Nurses. In addition to the vacancies in the dispensary, the clinic also needs Infection Prevention and Control Officer, Admin Clerk, Cleaners, Professional and Enrolled Nurses;

- The dispensary is very small but neatly packed. There is however no pharmacy nor pharmacy assistant, the nurses are dispensing the medicines themselves during patients consultation. Availability of medicine is reportedly at 100%. The Operational Manager reported that there is poor record management in the pharmacy as a result of the vacancies;
- There is no proper fencing around the clinic and it was reported by the department that there are not funds available to erect a proper/palisade fence, to be considered after 2025 as a result of other infrastructure development projects that have been prioritized;
- There is no water supply at the clinic;
- The plumbing system is faulty with leakages through the wall;
- Partitioning in the clinic was done using fabricated material and not brick.

There was a written presentation/profile prepared. The following was noted from the written presentation:

- The clinic operates for eight hours, seven days per week;
- The borehole in the clinic is not functional;
- Compliance with the National Core Standards

Priority Areas	Scoring %	Target %
Availability of medicines and supplies	88	95
Cleanliness	86	80
Improve patient safety and security	35	100
Infection prevention and control	88	90
Positive and caring attitudes	80	80
Waiting times	89	80

Elements	Scores %
Vital	69
Essential	73

Important	62
<b>Total</b>	<b>68</b>

- There is a functional clinic committee appointed in May 2015, but not inducted;
- There is no Doctor visiting the clinic;
- The clinic has a challenge of shortage of cleaning material and garden tools;
- The clinic also has a shortage of protective clothing – goggles and gowns;
- Benches in the out-patient department/waiting area are broken;
- The clinic did not record any accruals, irregular, unauthorized, fruitless and wasteful expenditure for 2017/18 financial year;
- And no recorded litigations for 2017/18 financial year;

#### **5.1 FINDINGS MADE BY THE COMMITTEE**

After the interaction with the department and clinic management, the Committee found that:

- a. The clinic is not compliant with the National Core Standards;
- b. There is a high vacancy rate, the clinic does not have a Pharmacist nor a Pharmacy Assistant, no Infection Prevention and Control officer, and has a shortage of Professional and Enrolled Nurses, Admin Clerk, Cleaners, Security Guards;
- c. There is no permanent water supply at the clinic, the borehole is not functional;

- d. The plumbing system is faulty with leakages through the wall;
- e. The clinic has a shortage of necessary material including medical material;
- f. The governance structure has not been inducted since it was appointed in May 2015;
- g. The benches in the out-patient department/waiting area are broken.

## 5.2 RECOMMENDATIONS MADE BY THE COMMITTEE

Based on the findings, the Committee recommended that the department must implement the following and **submit a detailed progress report by 31 August 2018:**

- a. Ensure efficient implementation of the quality improvement plan in compliance with the National Core Standards with continuous monitoring and evaluation to address the noted challenges;
- b. Plan accordingly for the filling of the vacant and funded positions as mentioned;
- c. Ensure that the local municipality continuously supplies water to the clinic and also attend to the issue of the borehole
- d. Ensure that the faulty plumbing is addressed with urgency;
- e. Ensure continuous availability of the necessary material, cleaning and medical material;

- f. Ensure that the governance structure is inducted and trained accordingly;
- g. Ensure the procurement of new benches for the clinic.

## 6. PUBLIC HEARING

The following issue was raised by the public:

- Tintswalo hospital is very old and dilapidated and in dire need of revitalization;
- The clinic in Justicia, Ward 25, is not in a good condition – the infrastructure is dilapidated, the dispensary does not have air conditioning and the toilets are not working;
- Rooiboklagte B does not have a clinic, the mobile clinic visits the area twice monthly, the community requested that it at least visit their area twice weekly for improved access to health care services;
- Angincourt Community Health Centre does not have an ambulance, in cases of emergency the public is forced to rent a so called private ambulance at the cost of R1500-00;
- The department must ensure that Doctors are not only available during weekdays for consultations but also on weekends for quality health care;
- Dumphrees does not have a clinic, the mobile clinic also visits the area twice monthly, and the community requested that it at least visit their area twice weekly for improved access to health care services. There was also a request for feedback on the submitted application for a clinic back in 2003.

### 6.1 Recommendation

Attend to all the issues raised by the public accordingly and also provide a detailed progress report by **31 August 2018**.

The Chairperson requests the House to adopt the report with its findings and recommendations and that a progress report on the implementation of House resolutions be provided on or before 31 August 2018.

## 7. CONCLUSION

The Chairperson would like to express her heartfelt gratitude to all the Honourable Members of the Portfolio Committee on Health and Social Development for their attendance and active participation during the TLP Programme. She further wishes to thank the Department, the municipality and the management of the health facilities for the services rendered and the Legislature staff for providing support to the Committee.



HON. DP MANANA

CHAIRPERSON: PORTFOLIO COMMITTEE ON  
HEALTH AND SOCIAL DEVELOPMENT

01/08/18  
DATE