

TAKING LEGISLATURE TO THE PEOPLE (TLP) OVERSIGHT VISIT REPORT OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT CONDUCTED AT OGIES CLINIC ON 13 MARCH 2018 - DEPARTMENT OF HEALTH

1. INTRODUCTION

The Legislature conducted its Taking Legislature to the People (TLP) programme at Emalahleni Local Municipality on 12-16 March 2018.

The Portfolio Committee on Health and Social Development (the Committee) visited the Ogies Clinic on 13 March 2018.

2. PURPOSE OF THE TLP OVERSIGHT VISIT

The purpose of the TLP oversight visit was to assess the progress made in the provision of quality health care in terms of compliance with the National Core Standards (NCS).

3. METHOD OF WORK

The Legislature notified all Departments 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 visit.

- On 13 March 2018, the Portfolio Committee on Health and Social Development conducted their oversight visit to Ogies Clinic.

- On 15 March 2018, the Social Transformation Cluster jointly with the Economic Cluster conducted a public hearing at Sy Mthimunye Stadium.

4. OBSERVATIONS

The Committee observed that:

- The Clinic was very clean and neatly kept;
- The pharmacy was adequately and neatly stocked and in the required temperature.

5. INTERACTION WITH THE MANAGEMENT OF THE CLINIC AND THE DEPARTMENT OF HEALTH

5.1 OGIES CLINIC

Dr. S. Mohangi – Head of Department welcomed the oversight visit by the committee, citing that their recommendations and guidance enables the department to continuously improve on the quality of health care provided to the people of Mpumalanga Province. She then asked that Ms. Thoko Motau, the Operational Manager to present the report on behalf of the department. The following was noted from her presentation:

- The clinic is an eight hour clinic, operating Monday to Friday;
- A Doctor visits the clinic once weekly, every Monday;
- The Clinic does not have an Administrative Clerk and a Pharmacy Assistant and has also a high vacancy rate (71%) in terms of Enrolled Nurses. However, there

is a Data Capturer from the Foundation of Professional Workers assisting with administrative work;

- The clinic has a challenge of water supply (emergency water), a Jojo tank was in the process of being installed on the date of the oversight visit;
- The clinic was proud to the fact that there were no cases of medical negligence reported nor expiry of medicine;
- The clinic does not have a separate storage for medical waste, a plan was however reported for construction of a waste storage in the 2018/19 financial year;
- There is no backup generator;
- The clinic has a functional clinic committee;
- The clinic was at 57% in terms of the ideal clinic status;
- The progress being made on the six priority areas is as follows:

Six Priority Areas	%
Cleanliness	94
Staff Attitude	89
Infection control and prevention	87
Waiting Time	84
Availability of Medicine	87
Patient & Staff safety	82

5.2 Comments by the Committee

The committee appreciated the reported quality of health care provided and urged the Clinic that it should continuously monitor the quality of health care services and

infrastructure development for improved quality of life for the public. Noting that most of the infrastructural challenges that were identified during the inspection visit by the Committee Researcher on 07 March 2018 were addressed or in process on the date of the TLP oversight visit (13 March 2018).

Vacancy Rate

Noting that the clinic has a reported high vacancy rate, the committee wanted to know what the department was doing to address the challenge of the absence of an Administrative Clerk, Pharmacy Assistant and Enrolled Nurses. The department reported that it has done situational analysis on staffing and the results show that sub category staff are the most needed in PHC facilities. The plans is to priorities the recruitment of subcategory staff during 2018/19 financial year. In terms of the absent of the Pharmacy Assistant, Professional Nurses are authorized to administer medication and currently dispensing from consulting rooms. The department further indicated that there are Data Captures allocated at the clinic, assisting with clerical work. The department reported that the appointment of a Clerk and Pharmacist assistant will be considered in the 2018/19 financial year.

Infrastructure Maintenance

Acknowledging the advice by the committee on infrastructure maintenance, the department reported that it will engage with Mpumalanga Regional Training Trust, for their students to render the infrastructure maintenance service as part of the experiential learning before completion of their learning modules – for competence and graduation.

Staff Attitude

To improve staff attitude, the department committed to effectively uphold the Batho Pele Principles and this to be done in all the health facilities. The department further reported that staff attitude has improved from 89% in 2016/17 to 92% in 2017/18 against a target of 90%, striving to achieve 100%. Staff were reportedly orientated on customer care including the code of conduct, disciplinary procedures, Patient rights Charter and Batho Pele Principles. The department also reported that consequence management will be implemented accordingly in-order to address staff attitude.

5.3 FINDINGS MADE BY THE COMMITTEE

After the interaction with the department and hospital management, the committee found that:

- a. The Clinic does not have an Administrative Clerk and a Pharmacy Assistant and has also a high vacancy rate (71%) in terms of Enrolled Nurses;
- b. The department reported that it was going to engage Mpumalanga Regional Training Trust (MRTT), for their students to render the infrastructure maintenance services as part of the experiential learning.

5.4 RECOMMENDATIONS MADE BY THE COMMITTEE

After the deliberations and the in loco inspection, the committee recommended that the department must implement the following and submit a detailed progress report by 31

May 2018:

- a. Outline in detail the Department's plan to addressing the issue of filling the identified vacancies, be it through the normal recruitment process or through placements in partnership with the Foundation of Professional Workers. If it's through the later, also include the memorandum of understanding and financial implications;
- b. Submit a detailed progress report on the placement of Mpumalanga Regional Training Trust (MRTT) students for infrastructure maintenance as part of their experiential training.

6. PUBLIC HEARING AT SY MTHIMUNYE STADIUM

The public raised the following during the public hearing:

- The community of Ward 29, Extension 3 in Empumelelweni with the growing population, requested for a clinic;
- The public of Emalahleni complained about the poor quality of services rendered by the Department of Health through Witbank General Hospital. The complaints were on the poor infrastructure, lack of cleanliness (including shortage of lincn),

availability of medicine and staff attitude to mention but a few. The public alleged that the poor health care contributes to the rate of in-patient deaths – citing negligence;

- The community of Kriel Clinic complained about the shortage of staff;
- The public also complained about the misuse of ambulances affecting their availability thereof at Spring Valley.

7. RECOMMENDATIONS MADE BY THE COMMITTEE

With regard to issues raised during the public hearing, the committee recommended that the department must outline its plan on how all the issues raised by the public will be attended to and also provide a progress report in this regard if any by **31 May 2018**.

The Department should provide a progress report on the implementation of House resolutions on or before Thursday, 31 May 2018.

8. 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 clinic management and the Legislature staff for providing support to the Committee.



HON. DP MANANA

18 04 2018

DATE

**CHAIRPERSON: PORTFOLIO COMMITTEE ON HEALTH
AND SOCIAL DEVELOPMENT**