

TLP OVERSIGHT VISIT REPORT OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT CONDUCTED AT WITBANK HOSPITAL ON 05 MARCH 2015 - DEPARTMENT OF HEALTH

1. INTRODUCTION

The Portfolio Committee on Health and Social Development (the Committee) has a mandate in terms of Rule 119 of the Rules and Orders of the Mpumalanga Provincial Legislature to conduct oversight over the Department of Health (the Department) by holding it accountable through various measures which the Portfolio Committee may undertake during the course of a financial year.

One of the instruments that enable the Portfolio Committee to execute its mandate is to conduct public hearings and oversight visits to health facilities in the Province.

2. PURPOSE OF THE OVERSIGHT VISIT

The purpose was to:

- ❖ To assess progress on the quality of health services rendered against the six priority areas:
 - a) values and caring attitude of staff
 - b) Waiting times
 - c) Cleanliness
 - d) keeping patient safe
 - e) Infection prevention and control
 - f) Availability of medicine and supplies
- ❖ To assess progress on the infrastructure projects within the hospital

3. METHOD OF WORK

After the Pre-TLP programme which was conducted in eMalahleni Local Municipality on 26-30 January 2015, comprehensive Committee reports were compiled. The reports also influenced the actual TLP programme that was conducted on 02-06 March 2015.

After the approval of the Legislature programme, the Committee informed the Department about the oversight visits to be conducted and the purpose thereof. Invitations were sent to the Department, management of Witbank Hospital and the Municipality requesting them to be part of the visit. The Department of Public Works, Roads and Transport was also invited to report on the infrastructure development projects.

On 05 March 2015, the Committee conducted an oversight visit at Witbank Hospital.

4. OBSERVATIONS

- Cleanliness at the hospital had improved significantly as opposed to the two previous visits;
- Almost all set infrastructure projects were not visible;

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

The Committee appreciated the improvement made on compliance with the National Core Standards with reference to findings during the two previous visits of 08 July 2014 and 30 January 2015.

MEC Overview

The MEC GP Mashego appreciated the Committee visit and further welcomed the recommendations to follow hereafter the visit in fostering service delivery.

He outlined that the challenges faced in the health sector are detrimental to the society as a whole and working together is very important.

The MEC reported that since the first visit of 08 July 2014, the CEO has been hands-on in all operations within the hospital and has visited Ermelo Hospital to benchmark on best practises. The MEC cited that the hospital has improved since then.

Compliance with the National Core Standards on the six priority areas is being continuously monitored and there is improvement.

The Department still has challenges with the implementing agent on the infrastructure development projects in hospitals; however, monitoring is being done. The Department was busy processing payments as the financial year was ending. The Department planned to meet with all contractors, consultants and the Department of Public Works, Roads and Transport the following week on the processing of payments to avoid challenges into the next financial year.

The MEC acknowledged that as a Department, they needed to have good relations with the media and reported that Department was going to address this issue as it has a bearing on the public it services.

The Committee welcomed the MEC's overview.

The hospital CEO, Mr Albert Ramukumba reported on behalf of the Department.

The Department reported on the priority areas as per the table below:

Priority Areas	2013/14	2014/15
Cleanliness	50%	62% Measures put for continuous improvement: Reallocation of cleaners, monthly meetings and monitoring.
Staff attitude	63%	70% This area remains a challenge and it's closely and continuously monitored with the intervention of the CEO where necessary.
Infection prevention and control	43%	87% Aspiring for 100% in the next financial year
Waiting time	67%	76% Help desks were established in this regard and they are monitored.
Availability of medicine	77%	87% All near expiry drugs are exchanged with other facilities to reduce costs.
Patient and staff safety	46%	76% With the reduced number of personnel and non-functioning CCTV cameras, other gates were closed and the personnel were placed elsewhere within the hospital for security.

The Committee appreciated and commended the Department for improvement made in all the priority areas.

Staff Attitude

The Department reported that staff attitude remained a challenge. More so during night duty, however, there is continuous monitoring and the hospital CEO is accessible and may even visit the hospital at night when necessary (if cases are reported). The Committee encouraged the Department to strengthen its relations

with the workers' union(s) for personnel morale. The Committee also noted that the officials did not have their name tags on, making it hard to identify them – also by patients (hospital personnel); the Committee also indicated that the name tags will also assist in terms of addressing staff attitude.

HR Resignations

It was reported by the Department during the previous visit of 30 January 2015 that three (03) professional nurses were to be appointed during the first quarter of the next financial year, the three professional nurses were appointed and were to resume work on 01 April 2015. The Department is also working with the University of Pretoria to train specialists whom will later serve back the Department (local community).

30 day payment (for service providers)

The Committee wanted to understand as to where the problem was in terms of the Department's failure to process service provider payment within the prescribed 30 days period. The Department reported that there was a problem with the submission of invoices by services providers, not being sure as to whom they should be submitted to: the implementing agent (DPWRT) or the Department of Health. This challenge contributes to the delay in submission and subsequently the payment. However, this challenge is being addressed.

It was noted by the Committee that service providers would do their work as per schedule but in terms of them receiving their payment as per their claim/invoices; payments always delayed or there were always challenges with payments. The Committee emphasized the need for close monitoring by both the Department of Health and the implementing agent (DPWRT). The Department reported that there is a system in place to manage payments to avoid accruals and also for financial management.

Benchmarking Exercises

The Committee noted with appreciation that Witbank General Hospital conducted a benchmarking exercise with Ermelo Hospital on best practices and also benchmarked with Mapulaneng Hospital on the maintenance plan.

Public Relations

The Committee also noted during the MEC's Overview that the Department did not have good public relations, with negative newspaper publications on the health sector. The Committee cited that this negative publications were influencing public opinion on the provincial health sector encouraged the Department to develop a public relations strategy.

FINDINGS MADE BY THE COMMITTEE

After the interaction with the Department and hospital management, the Committee found that:

- a) The administration building, X-ray and Laboratory were not connected to the standby generator;
- b) Witbank Hospital relies on Middleburg and Bethal Hospitals for assistance in terms of laundry services;
- c) There is no adequate security at the hospital;
- d) The nurses residence is in a bad state;
- e) There are still challenges with staff attitude;
- f) There was confusion as to whom the service provider invoices were to be submitted to (in relation to the infrastructure projects)

➤ RECOMMENDATIONS MADE BY THE COMMITTEE

- a) The Department must fast-track the connection of the administration building, X-ray and Laboratory to the standby generator by 28 August 2015;

- b) The Department must plan and budget for a launderette in Witbank Hospital;
- c) The Department must fast-track the implementation of the turn-around strategic plan on security and its monitoring thereafter;
- d) The Department must plan for and construct new nurses residence within 2016/17 financial year;
- e) The Department must develop a strategy to strengthen staff morale in addressing staff attitude through capacity building sessions and also work with Labour Forums;
- f) The Department must outline clear guidelines on the service provider's payment processes and all other tendering guidelines for service delivery and efficiency.

6. INTERACTION WITH THE MANAGEMENT OF THE HOSPITAL AND DEPARTMENT OF PUBLIC WORKS, ROAD AND TRANSPORT

INFRASTRUCTURE DEVELOPMENT PROJECTS

The implementing agent reported to having three infrastructure development projects underway at the hospital: **building maintenance, security fencing and maintenance of life support equipment and facilities**. The projects were at 62%, 5% and 50% completion respectively with no recorded expenditure. The project's completion dates were expected to be 14 February 2015, 13 March 2015 and 13 March 2015 respectively.

The Committee noted with regret the progress made on the infrastructure development projects. The Committee wanted to understand the reasons that led to Department's failure to adhere to set schedule and targets. The following concerns were raised by the Committee for clarity:

- Measures put in place to fast-tracking progress;

- Revised completion dates as those set were not to be achieved;
- Possibility of variation orders and/or roll overs

The Committee further cited that the pace of the projects and the expenditure pattern was going to result in variation orders. The Committee emphasized the need to strengthen monitoring and also enforce disciplinary measures against officials' misconducts. The Committee also advised on the management of performance agreements and monitor implementation.

The Department was requested to submit written responses and progress report on the projects by 13 March 2015, to date no submission was made.

The Department reported that the servicing of the transformer was going to be completed on 07 March 2015, the Committee then instructed Mr. Siphon Msibi, a Researcher at the Legislature to remain on site till 07 March 2015 to confirm the servicing of the transformer being completed on the set date and also to assess the progress reported on the other development projects and then report to the Committee on the findings.

Subsequent to that instruction, Mr. Msibi remained on site and conducted interviews and site inspection. **The following were his findings:**

- a. On the 07/03/2015 the transformer was neither being serviced nor near completion as it was purported in the oral and written report on 05/03/2015;
- b. Upgrading and renovation of the hospital Kitchen equipment was in progress as reported, upon the site inspection; one of the ovens had been replaced it was functional. However, the kitchen itself is dilapidated.
- c. With regard to the maintenance of Life Support Equipment and Facilities, hi-tech machines and materials were delivered and being installed in the

Theatre and ICU. The life support equipment and facilities is to be connected to the children's ICU.

- d. Although the further investigation was with regard to the alleged completion date for the servicing of the transformer, workers in the makeshift laundry section stated that the section wherein the laundry is currently located was meant to be a garage. The make-shift laundry section does not have proper ventilators; this may lead to TB infections by the personnel.
- e. The make-shift laundry section is not sanitized and the personnel working there are not provided with masks to serve as a health-protective measure.
- f. There are sanitation pipes in the make-shift laundry section that are damaged and leaking and they are stationed just next to a fridge.


The following are the recommendations:

- a. The Department of Health must ensure that the Department of Public Works, Roads and Transport expedite the servicing of the transformer and the refurbishment of the hospital within the 2015/16 financial year;
- b. The Department of Health must address all the health hazards present in the make-shift laundry section and must consider building a new laundry section within the 2015/16 financial year.

The Department should provide a progress report on the implementation of House resolutions before **31 August 2015**.

7. CONCLUSION

The Acting 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 oversight visit. She further wishes to thank the Department, the hospital management, the CHC management and Councilors for attending the meeting and the Legislature staff for providing support to the Committee.



HON. P NGOBENI

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

13/08/15

DATE