Vote 6

Department of Health

	2009/10	2010/11	2011/12							
	To be appropriated									
MTEF allocations	R9 892 798 000	R10 925 269 000	R11 764 458 000							
Responsible MEC	Provincial Minister of H	Health								
Administering Department	Department of Health									
Accounting Officer	Head of Department, I	Head of Department, Department of Health								

1. Overview

Core functions and responsibilities

The core functions and responsibilities of the Department of Health include:

The delivery of a comprehensive package of health services to the people of the Western Cape, which, includes preventive, promotive, emergency and curative services, rehabilitation and chronic care.

The implementation of effective interventions to reduce morbidity and mortality particularly in the high priority areas of HIV and Aids, tuberculosis (TB), trauma and chronic diseases.

The delivery of tertiary health care services to the people of the Western Cape and neighbouring provinces, which is largely funded from the National Tertiary Services Grant.

The provision of training facilities for health care workers and professionals in conjunction with the higher education institutions.

The licensing and regulation of private hospitals within the province.

The provision of a Forensic Pathology Service.

The development and maintenance of appropriate enabling support services and infrastructure.

Vision

"Equal access to quality health care".

Mission

To improve the health of all people in the Western Cape and beyond, by ensuring the provision of an equitable health care system, in partnership with all stakeholders, within the context of optimal socio-economic development.

Main services

The Western Cape Department of Health is primarily responsible for providing health services to the 3.8 million uninsured population of the province, i.e. approximately 73 per cent of the total population of 5.3 million. In addition to this there is an obligation to provide tertiary services to people beyond the provincial boundaries, in line with funding received through the National Tertiary Services Grant.

The implementation of the Comprehensive Service Plan will improve patient care by managing the right patient, at the right level of care, at the right cost, right.

The range of services provided by the Department includes the following:

Delivery of comprehensive, cost-effective primary health care services including the prevention of disease and promotion of a safe and healthy environment.

The delivery of district, provincial and central hospital services.

The delivery of health programmes to deal with specific health issues such as nutrition, HIV and Aids, Tuberculosis, reproductive health, environmental and port health, etc.

Delivery of emergency medical and patient transport services.

Rendering of specialised orthotic and prosthetic services.

Rendering of forensic pathology and medico-legal services.

Delivery of support services to ensure efficient health services.

The overall management and administration of the delivery of public health care within the province.

The development of organisational structures that enable effective quality service delivery.

Effective communication.

The regulation of private health care.

Demands and changes in services and expected changes in the services and resources

The 16.7 per cent increase in the population of the Western Cape from 4 524 335 in 2001 to 5 278 585 in 2007 reported in the Community Survey 2007, has had a significant impact on the demand for services.

The implementation of the Comprehensive Service Plan will reshape the service to improve the quality of patient care and treat patients at the most appropriate level of care thereby optimising the use of limited resources. The thrust of the initial implementation is in the Metro where improving the service will impact on the majority of the people in the Western Cape.

Acts, rules and regulations

National Legislation

Academic Health Centres Act, 86 of 1993 Aged Persons Act, 81 of 1967 Allied Health Professions Act, 63 if 1982 Atmospheric Pollution Prevention Act, 45 of 1965 Births and Deaths Registration Act, 51 of 1992 Broad Based Black Economic Empowerment Act, 53 of 2003 Child Care Act, 74 of 1983 Children's Act, 30 of 2005 Chiropractors, Homeopaths and Allied Health Service Professions Act, 63 of 1982 Choice on Termination of Pregnancy Act, 92 of 1996 Compensation for Occupational Injuries and Diseases Act, 130 of 1993 Constitution of the Republic of South Africa, 1996 Constitution of the Western Cape, 1of 1998 Correctional Services Act, 8 of 1959 Criminal Procedure Act. 51 of 1977 Dental Technicians Act, 19 of 1979 Division of Revenue Act (Annually) Domestic Violence Act, 116 of 1998

Drugs and Drug Trafficking Act, 140 of 1992 Employment Equity Act, 55 of 1998 Environment Conservation Act, 73 of 1998 Foodstuffs, Cosmetics and Disinfectants Act, 54 of 1972 Government Immovable Asset Management Act, 19 of 2007 Hazardous Substances Act, 15 of 1973 Health Act, 63 of 1977 Health Donations Fund Act, 11 of 1978 Health Professions Act, 56 of 1974 Higher Education Act, 101 of 1997 Human Tissue Act, 65 of 1983 Inquests Act, 58 of 1959 Intergovernmental Relations Framework, Act 13 of 2005 Institution of legal proceedings against certain Organs of State Act, 40 of 2002 International Health Regulations Act, 28 of 1974 Labour Relations Act, 66 of 1995 Local Government: Municipal Demarcation Act, 27 of 1998 Local Government: Municipal Systems Act, 32 of 2000 Medical Schemes Act, 131 of 1997 Medicines and Related Substances Control Amendment Act, 90 of 1997 Mental Health Care Act, 17 of 2002 Municipal Finance Management Act, 56 of 2003 National Health Act, 61 of 2003 National Health Laboratories Service Act, 37 of 2000 National Policy for Health Act, 116 of 1990 Non Profit Organisations Act, 71 of 1977 Nuclear Energy Act, 46 of 1999 Nursing Act, 33 of 2005 Occupational Health and Safety Act, 85 of 1993 Pharmacy Act, 53 of 1974 Preferential Procurement Policy Framework Act, 5 of 2000 Promotion of Access to Information Act, 2 of 2000 Promotion of Administrative Justice Act, 3 of 2000 Promotion of Equality and Prevention of Unfair Discrimination Act, 4 of 2000 Protected Disclosures Act, 26 of 2000 Prevention and Treatment of Drug Dependency Act, 20 of 1992 Public Finance Management Act, 1of 1999 Public Service Act, 1994 Road Accident Fund Act, 56 of 1996 Sexual Offences Act. 23 of 1957 State Information Technology Agency Act, 88 of 1998

Skills Development Act, 97 of 1998 Skills Development Levies Act, 9 of 1999 South African Medical Research Council Act, 58 of 1991 South African Police Services Act, 68 of 1978 Sterilisation Act, 44 of 1998 Tobacco Products Control Act, 83 of 1993 Traditional Health Practitioners Act, 34 of 2004 University of Cape Town (Private) Act, 8 of 1999

Provincial Legislation

Communicable Diseases and Notification of Notifiable Medical Condition Regulations. Published in Proclamation R158 of 1987.

Exhumation Ordinance, 12 of 1980. Health Act, Act 63 of 1977. Assigned to the province by virtue of Proclamation R152 of 1994.

Provincial treasury instructions.

Regulations Governing Private Health Establishments. Published in PN 187 of 2001.

Regulations governing the Uniform Patient Fee Schedule, 2007.

Training of Nurses and Midwives Ordinance 4 of 1984. Assigned to the Province under Proclamation 115 of 1994.

Western Cape Health Facility Boards Act 7 of 2001 and its regulations.

Western Cape Land Administration Act, 6 of 1998.

Western Cape Health Care Waste Management Act, 7 of 2007.

Western Cape Direct Charges Act, 6 of 2000.

Western Cape Health Services Fees Act, 5 of 2008

Budget decisions

Brief information on external activities and events relevant to budget decisions

With a relatively large budget for Goods and Services and a significant dependence on imports, this Department is substantially affected by inflation and exchange rate fluctuations. The impact of the recent movements in these rates are already being felt, and will increase as contractors request price increases for these reasons.

The relentlessly increasing patient load, which is estimated at 3 per cent per annum on a weighted average basis places budgets under pressure.

The cost of information technology (IT) is expected to increase as the Department becomes increasingly dependent on IT. Over the last months the Department experienced problems with slow response times and contracted a firm to analyse the problems and issue a report with recommendations.

The growth in patients requiring anti-retroviral treatment (ART) continued. National Treasury did not allocate additional funds in 2008/9 for this purpose.

Budgetary process and construction of the budget allocations for 2009/10 and beyond

The 2008/09 budgets of the various entities served as basis for the calculation of the MTEF budgets. The following adjustments were considered:

Changes in the service loads

Shifting of services and the implementation of the CSP

Changes in the cost of Improvements in Service Conditions;

Specific conditional and earmarked allocations in line with national and provincial priorities.

2. Review 2008/09

The key issues addressed during 2008/09 were as follows:

Implementation of the Comprehensive Service Plan to improve the quality of health care delivery, which includes:

Implementation of health districts and the creation of district management structures both in the Cape Metro and the rural health districts.

District managers were appointed in all of the districts, i.e. Metro, Cape Winelands, Overberg, Eden, Central Karoo and Westcoast. Four directors have been appointed to manage the four sub-structure offices for the eight subdistricts in the Metro under the supervision of a chief director. The four Metro management structures manage the following sub districts:

Sub-structure 1: Northern/Tygerberg

Sub-structure 2: Southern/Western

Sub-structure 3: Klipfontein/Mitchell's Plain

Sub-structure 4: Khayelitsha/Eastern

Strengthening district health service delivery through outreach and support to district hospitals, community health centres and clinics.

The Department set a target for 18 of 25 (51 per cent) of its district hospitals to provide administrative support and clinical outreach to the Primary Health Care (PHC) platform during 2007/08. By the end of the 2007/08 financial year the Department exceeded the target by providing administrative support and outreach to 31 of the 35 (87 per cent) district hospitals.

Restructuring the service platform with the designation and management of hospital beds according to a defined level and package of care in central, regional and district hospitals.

The following progress was made during 2008/09:

The service packages for levels 1, 2, and 3 have been defined in line with the national guidelines and following wide consultation.

The development of standard case definitions and a folder audit at different facilities across the various general specialities, will allow for the quantification of current level 1, 2 and 3 activities across the acute hospital service platform.

Each central hospital has designated inpatient and outpatient services according to the CSP, which are being implemented and will be further consolidated during 2009/10.

Level 2 and 3 services in the central hospitals are resourced from Programmes 4.1 and 5 respectively and performance information has been similarly separated between the two programmes. The setting of targets has been a challenge and the process will be refined during 2009/10.

The number of district hospital beds has increased from 1 570 beds in 2006/07 to 2 292 beds in 2007/08 towards a CSP of 2 458 beds.

Achieving the Comprehensive Service Plan targets for level 3 beds in the central hospitals.

The CSP target of 1 460 operational level 3 beds was achieved during 2008/09, however, the distribution of the beds across the central hospitals, their level of functioning and the specifics of discipline and sub-discipline are still in transition. A systematic process will commence in 2009/10 to bolster high care and intensive care services.

Strengthening the general specialist capacity and clinical management within the reconfigured level 2 (general specialist) services.

The level 2 services in the central hospitals will be managed by a level 2 head for each discipline in Metro West, and in Metro East. These level 2 heads will report to the respective level 2 Chief Operating Officers, and ultimately to the CEO of the central hospital. As the level 2 heads are Joint Staff, the Universities of Cape Town and of Stellenbosch have been consulted in this process. The posts have been job evaluated and will be filled as soon as possible.

The staff establishments of all hospitals in the Metro are currently being reviewed and adjusted to ensure that the appropriate human resources are allocated to deliver the envisaged packages of hospital services. This is done by means of organisational development investigations which have commenced and will be completed in 2009/10.

Restructuring emergency medical services to achieve improved response times and begin to achieve response times closer to the national norms.

The key issue for EMS is the improvement of response times towards the national target of 15 minutes in urban areas and within 40 minutes in rural areas. During 2007/08 EMS achieved 50 per cent response to calls in urban areas within 15 minutes and 70 per cent response to calls in urban areas within 40 minutes. Sixty-four percent of all calls were responded to within 60 minutes.

In the Metro, EMS experiences a direct inefficiency as a result of patients not being found at the scene in 30 per cent of responses. This is the result of poor response times due to a combination of insufficient ambulances, personnel and the co-ordination of the dispatch process.

The 34 per cent vacancy rate is related to available funds recognising that the recruitment and training of staff is a challenge. Emergency Medical Services has recruited approximately 170 Student Emergency Care Practitioners who will be trained, however, the skills mix of EMS personnel does not meet the national targets and training capacity is a limiting factor.

New ambulance stations have been constructed at Hermanus, Caledon, Atlantis and Riversdale. Ten Metropolitan VW Crafter ambulances were procured to augment the ambulance fleet.

An important development in EMS is the establishment of the Emergency Medicine component which will co-ordinate and provide clinical governance of emergency services across the platform. An Acute Emergency Case Load Management Policy (AECLMP) has been developed to ensure the flow of emergency patients to the appropriate level of care.

The aero-medical service provided by the Red Cross Air Mercy Service continues to transport patients requiring long distance transfer from rural locations to the metropolitan hospitals, thereby retaining ambulances in rural towns to service local emergency calls.

The strengthening of the Planned Patient Transport system, HealthNET, relieves the emergency ambulance service by transporting non-emergency patients within and between districts.

Expansion of community-based care services through the Expanded Public Works Programmes (EPWP) in Health to enable people to be managed in communities where they live.

Community-based services complement and enhance services provided at public health facilities by providing appropriate services in community settings thus alleviating the pressure on health facilities.

The key focus of the EPWP training has been the strengthening of the home-based care programme through the EPWP training as a skills development programme to ensure a safety net for de-hospitalised patients to be nursed in their homes and communities where they live.

At the end of 2007/08 there were 16 827 home-based care clients seen and for Quarter 1 of 2008/09 the caregivers were able to see 18 227 home-based care clients, 58 238 Community Integrated Management of Childhood illnesses (CIMCI) children and 1 692 TB DOTS clients in the rural districts. This is against a backdrop that the recruitment of the additional 1 000 plus caregivers was done over a 3 months period and not in place at the beginning of the quarter.

Of the home-based care clients seen, 2 013 of these were hospital referrals versus a set quarterly target of 2 050. This translates to 11 per cent hospital referral rate for the quarter.

Construction, upgrading and improved maintenance of health facilities with a special focus in the 2008/09 financial year on planned construction of the Khayelitsha and Mitchells Plain hospitals in the Cape Metro.

Funding has been approved for the construction of the Khayelitsha and Mitchell's Plain Hospitals.

Khayelitsha District Hospital:

The construction of the preliminary site works is in progress and it is anticipated that it will be completed in March 2009. The tender for the construction of the new hospital was awarded on 5 January 2009 and the anticipated completion date is March 2012.

Mitchells Plain District Hospital:

Tenders for the construction of the new hospital have closed and bids are being evaluated. It is anticipated that the tender will be awarded in March 2009 with completion in May 2012.

The capital infrastructure programme for the construction of new facilities and the upgrading of existing facilities is proceeding as planned.

The following projects were completed in 2008/09:

The new community health centre for Wellington

The construction of a new ward and outpatients at the Helderberg Hospital.

The construction of new forensic mortuaries at George and Hermanus.

Phase 1 of the upgrading of Riversdale Hospital is complete and Phase 2 is in construction

Phase 3 of the revitalisation of Worcester Hospital and Phase 4, the final phase, will commence in July 2009.

The new casualty wing at Khayelitsha Community Health Centre.

Examples of key projects in progress:

Phase 1 of the upgrading of Caledon Hospital will be completed during the 2008/09 financial year.

Construction work is proceeding satisfactorily on the revitalisation of Paarl Hospital and completion is anticipated in December 2009.

The construction of the new casualty unit at Eerste River Hospital has commenced.

Completion of the mortuaries at Malmesbury, Worcester and Paarl has been delayed due to the insolvency of the contractor. A new contractor has been appointed and completion is anticipated in mid-2009.

Strengthened TB programmes with special focus on improved cure rates and the management of multi and extreme drug resistant TB.

TB has been identified by the President as a high priority as reflected in the State of the Nation address, declaring it to be one of the apex priorities of government. In line with the priorities of the National Department of Health strengthening TB control in the Western Cape has been a key focus area in 2008/2009.

The TB cure rate has increased from 68.6 per cent in 2004/05 to 77.4 per cent in 2008/07; the smear conversion rate at 2 months for new smear positive PTB cases has increased form 59.3 per cent in 2004/05 to 63.3 per cent in 2007/08. The incidence of TB has slightly decreased from 1 038 per 100 000 in 2006/07 to 1 004 per 100 000 in 2007/08. Drug Resistant TB Registers were implemented as from January 2007 and 861 cases were registered in 2007 and 485 cases from January to June 2008.

Additional funding was allocated in the 2008/2009 financial year to the TB hospitals for strengthening the staff capacity at all TB hospitals.

There are no waiting lists for M(X)DR TB patients, but the waiting list for TB sensitive patients requiring hospitalisation remains a challenge and is being addressed in a holistic manner.

A further development has been the identification of patients with extreme drug resistant tuberculosis (XDR TB), in the Western Cape. To date 132 such patients were identified of whom 69 died. The revised MDR DOTS Plus strategy, which requires admission for six months, as well as the increase in the number and acuity of absolute cases, will increase the pressure on hospital beds.

There is a focused target at the hospital treatment of M(X) DR TB patients in the province as well as the monthly follow-up of discharged M(X)DR TB patients at the MDR centres. This deliverable is in line with the National Tuberculosis Strategic Plan for South Africa: 2007 – 2011.

Patients who can be managed through the home-based care system are being discharged to make way for more acutely ill patients. Due to the fact that there are only two TB hospitals in the Metro, the drainage areas for patients being referred from these hospitals to acute hospitals are being redefined.

Care and management of people living with HIV and AIDS with a greater focus on targeted prevention interventions and district health based treatment.

Strengthen programmes for the prevention of HIV transmission and treatment and care of HIV and AIDS patients:

The Conditional Grant that provides funding to implement the provisions of the Comprehensive Plan and now the National Strategic Plan (NSP) is currently inadequate to provide for prevention of HIV transmission programmes and the care, management and treatment of people with HIV and AIDS.

Social mobilisation targeted interventions:

A key finding of the NSP analysis of the last Five Year Plan is that the ABC messages have not delivered the desired outcomes. To address this and the need for 'clear and non-confusing' messages around HIV prevention, a process of consultation with those involved in youth interventions to develop a new set of messages for both young people and older men, has begun. A two-year campaign based on this strategy is anticipated.

Antiretroviral treatment (ART):

1 500 patients are currently enrolled monthly for ART at 62 accredited facilities, with outreach to smaller sites. At the end of June 2008, the cumulative total was 41 671 (adults 37 615 and children 4 056). Successful ART services have been extended to Brooklyn Chest TB hospital and Pollsmoor correctional facility and both were accredited in September 2008. By end March 2009, a total of 70 accredited sites will be accredited with a patient enrolment target of 52 829 based on current enrolment although the target in the APP is 45 863.

For 2008/09, the two high burden sub-districts of Khayelitsha and Mitchell's Plain have been prioritised to begin the process. Twenty sites (twelve in the Metro, six in Eden, two in Drakenstein/ Breede Valley) have in total been identified for phased implementation.

Address service pressures in mental health, obstetric and neonatal services, surgery and emergency care

Various steps were taken to manage the service pressures more effectively. The need for psychiatric outreach and support in the management of substance abuse was identified and a plan is being developed to address this matter.

Strengthened mechanisms to assess the burden of disease and strategies developed with other departments to begin to reduce the burden of disease.

The Burden of Disease (BoD) Project has two main components:

Institutionalisation of Surveillance System

The report on the Burden of Disease estimated for the Province and trends since 1998 – 2006 has been completed.

Mortality reports for sub-districts in the Metro 2001 - 2006 and for sub-districts in the Overberg and Cape Winelands 2004 - 2006 have been completed.

The functions of data collection and management of mortality statistics in the district office information units have been institutionalised in the Department in partnership with the Department of Home Affairs and the City of Cape Town.

An electronic provincial wide injury mortality surveillance based on the National Injury Surveillance System (NIMMS) called the Provincial Injury Surveillance System (PIMMS) has been developed.

Reduction of the burden of disease

Recommendations have been made to PGWC that efforts to reduce the burden of disease should focus on addressing injuries and alcohol as a risk factor.

Evidence based recommendations of interventions that can be implemented have been provided to PGWC.

Formal recommendations in the form of an article in the Provincial State of the Province publication are soon to be published by the Premier. This article also provides evidence based recommendations on how the difficulty in intersectoral action could be addressed.

Substantive input into the development of the Liquor Act, 2008 which seeks to address one of the key risk factors in the driving of the BoD in the province. The input provided by the Department to the development of the Liquor Act was based largely on the evidence generated from the BoD.

Galvanised momentum on the creation of the research sub committee in the Provincial Road Traffic Coordinating Committee. The BoD project will be a member of the committee with the aim of supporting the development of an integrated surveillance system for Road Traffic Injuries and determinants thereof.

Together with the Department of Social Development and Community Safety, the Department of Health is developing a documentary to challenge and undermine pervasive norms, attitudes and beliefs about alcohol use to promote the decrease in misuse of alcohol in the Western Cape. This documentary will be completed by the end of March 2009 and will be shown in relevant settings (schools, health clinics, places of work, prisons, to traffic offenders etc.) accompanied by workshops discussing different aspects of the film and an evaluation process to evaluate behaviour change.

Strengthened human resource and financial management to improve performance.

Specific posts for human resource and financial management that need to be filled have been identified. Although many of these posts are at various stages of being filled the Department struggles to retain these categories of staff as other departments compete to appoint staff from this limited pool. The Department will continue to train staff in the various functions and in particular in financial governance.

3. Outlook for 2009/10

The two clinical service divisions in the Department, i.e. District Health Services and Programmes, and Central, Regional and Associated Psychiatric Hospitals and Emergency Medical Services have identified the following four key performance areas as the basis for integrated service delivery in 2009/10:

Acute services, including Emergency Medical Services and acute hospital services

The finalisation of the packages of care for level 1, 2 and 3 services during 2008/09 enabled the acute hospital activities to be quantified and will facilitate measurable service shifts in 2009/10 and beyond.

The number of acute beds increased from 2007/08 to 2008/09 and it is assumed that there will be no major increase in the number of beds across the platform during 2009/10.

The separation of level 2 and 3 services in the central hospitals is an important step towards the restructuring of the service platform.

The appointment and effective functioning of level 2 clinical heads remains a critical step to consolidate clinical governance for the general specialty disciplines.

Tygerberg and Groote Schuur Hospitals will explore alternative lodging arrangements for clients who require specific services over a period of time but who do not require active care whilst in hospital.

The eight general specialties will be divided into three service clusters, i.e.:

Cluster 1: Emergency medicine, internal medicine, psychiatry

Cluster 2: Surgery, orthopaedics, anaesthetics

Cluster 3: Obstetrics and gynaecology, paediatrics and neonatology.

Ambulatory care including outreach and support

The following will be addressed in the transformation of ambulatory services during 2009/10:

Institutionalise the ambulatory services related to the three general specialty service clusters within the outreach and support policy.

Improve chronic disease management through the appropriate relocation of stable patients with chronic diseases to the Primary Health Care facilities.

Infectious disease management;

The key strategic focus areas for the management of clients with HIV and AIDS and TB across the platform are:

HIV prevention: implement an integrated, combined prevention strategy.

HIV treatment: enroll and manage clients at accredited ART sites, implement a nurse-led, doctor supported model of care (STRETCH model).

Consolidate the infectious diseases platform from PHC to level 3 services.

Steps will be taken to improve the management of TB patients across the service platform, e.g. the line management of the TB hospitals will be transferred to the respective sub-structure/district management teams, stable TB patients will be decanted into primary health care and community-based services to create more capacity to admit TB patients into acute hospitals.

De-hospitalised care

Expand access to mental health de-hospitalised care by providing a continuum of care for psychiatric clients, for example in sub-acute care, group homes and psycho-social rehabilitation groups; and for intellectually disabled clients in residential care and day care centres.

Other key issues include:

Restructuring emergency medical services to achieve improved response times and begin to achieve response times closer to the national norms.

Expansion of community-based care services through the Expanded Public Works Programmes in Health to enable people, requiring health services, to be managed in communities where they live.

Infrastructure: Increase the percentage of total health budget allocated to maintenance and commence the construction of Khayelitsha and Mitchells Plain Hospitals.

Strengthened human resource and financial management to improve performance.

4. Receipts and financing

Summary of receipts

Table 4.1 hereunder gives the sources of funding for the vote.

Table 4.1Summary of receipts

		Outcome						Medium-ter	rm estimate	
Receipts R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Treasury funding	2000,000	2000/01	2001/00	2000/00	2000/00	2000,00	2000/10	2000/03	2010/11	201112
Equitable share	3 627 255	4 075 807	4 740 434	5 618 625	5 740 952	5 615 881	6 638 622	18.21	7 315 553	7 998 813
Conditional grants	1 814 939	2 011 991	2 259 588	2 633 668	2 682 678	2 682 678	2 819 092	5.08	3 232 463	3 449 105
Financing		27 657	2 200 000	2 000 000	37 656	37 656	44 924	19.30	50 000	0 110 100
Asset Finance Reserve		4 389					40 000			
Provincial Revenue Fund		23 268			37 656	37 656	4 924	(86.92)	50 000	
Total Treasury funding	5 442 194	6 115 455	7 000 022	8 252 293	8 461 286	8 336 215	9 502 638	13.99	10 598 016	11 447 918
Departmental receipts										
Sales of goods and services other than capital assets	200 081	223 712	348 057	265 161	265 161	264 852	295 639	11.62	295 639	295 639
Transfers received Fines, penalties and forfeits	67 916 1	63 652	137 607	115 163	135 002	135 002	85 163	(36.92)	22 256	11 543
Interest, dividends and rent on land	96	204	624	724	724	1 033	724	(29.91)	724	724
Sales of capital assets	24	10	10	11	11	11	13	18.18	13	13
Financial transactions in assets and liabilities	8 500	16 482	11 548	8 621	8 621	8 621	8 621		8 621	8 621
Total departmental receipts	276 618	304 060	497 846	389 680	409 519	409 519	390 160	(4.73)	327 253	316 540
Total receipts	5 718 812	6 419 515	7 497 868	8 641 973	8 870 805	8 745 734	9 892 798	13.12	10 925 269	11 764 458

Summary of receipts:

Total receipts increase by R1 147 billion or 13.12 per cent from R8.746 billion in the revised estimates of 2008/09 to R9.893 billion in 2009/10.

Treasury Funding

Equitable share funding increases by 15.09 per cent from R5 768 billion in the revised estimate of 2008/09 to R6 638 billion in 2009/10.

Conditional grant transfers increase by 11.41 per cent from R2 530 billion in the revised estimate of 2008/09 to R2 819 billion in 2009/10.

Departmental receipts:

Income from the 'sale of goods and services other than capital assets' increases by a net 11.49 per cent, from the adjusted appropriation of R265.161 million in 2008/09 to R295.639 million in 2009/10 and for the 2009 MTEF period.

The total for "sale of goods and services other than capital assets" includes a technical baseline adjustment of R20 million annually for the 2009/10 MTEF period. This is reflected in the item Hospital Fees. This is to account for Commission Expenditure for Debt Collection that was previously not reflected under expenditure, but as net revenue within Hospital Fees.

Receipts from health patient fees are the largest contributor to this source. Patient fee receipts increase by 12.18 per cent from the adjusted appropriation of R242.307 million in 2008/09 to R271.811 million in 2009/10. The 'Fair Revenue Target' model, implemented in 2007, was again used to determine the 2009 MTEF patient fee targets. The model is premised on historical data regarding the potential raisings and collections, besides factoring in the outstanding debt.

Transfers received, including transfers received from universities and technikons for the utilisation of resources at the institutions, and donations received from International Organisations decrease from R135.002 million in 2008/09 to R85.163 million in 2009/10, decreasing over the 2009 MTEF to R22.256 million in 2010/11 and to R11.543 million in 2011/12. The reduction results primarily from a reduction in transfers received from International Organisations. Relevant here is the Global Fund receipts, which are pre-determined through agreement and are fixed for the medium-term estimate.

Interest, dividends and rent on land, generated through interest charged on bursary debt and outstanding patient fees is projected to remain at 2008 figures for the 2009 MTEF period.

Sales of capital assets, comprising income generated mainly from the sale of condemned/obsolete equipment/ furniture, are projected to increase by 18 per cent over the 2009 MTEF period.

Financial transactions in assets and liabilities, comprising income generated from the repayment of contract debt, salary overpayments, refunds of previous years' expenditure is projected to remain at 2008 figures for the 2009 MTEF period.

Donor funding (excluded from vote appropriation)

Table 4.2 hereunder gives the sources of donor funding and details of any terms and conditions attached to donor funds.

Table 4.2Summary of donor funding

Name of donor funding	Me	dium-term estimate	
R'000	2009/10	2010/11	2011/12
TB/HIV Global fund	1 000	1 000	1 000
European Union fund	8 100		
Total donor funding	9 100	1 000	1 000

Note:

Please note that the Global fund donation is included in the Department's vote appropriation (Sub-programme 2.10)

Summary of donor funding:

The Department receives donor funding from:

Global Fund for HIV and AIDS

The Global Fund donates funding to the HIV and AIDS prevention that is not described separately here as it is incorporated into the main accounting structure as a separate sub-programme in Programme 2, as approved by Treasury.

Global Fund Grant for TB and HIV

The TB/HIV Global Fund donation is for a specific project and not linked to the Global Fund contribution to HIV and AIDS in Sub-programme 2.10.

Purpose

In response to a proposal submitted by the Department of Health, South Africa the Global Fund against HIV and AIDS, TB and Malaria (GFATM) agreed to support the expansion of TB and HIV collaborative activities over a period of five (5) years. The initial funding has been approved for two years with a possibility of a further three (3) years subject to the performance of the programme. The main objective of the fund is to strengthen capacity at all levels. The main activities for implementation are:

Refurbishment of a MDR-TB Hospital according to an approved business plan submitted by the individual Provinces.

The recruitment and appointment of District Information Officers (one per district) on a 2-year contract.

Conducting training on TB and HIV collaborative activities for doctors and nurses. The tender has been awarded to the Foundation for Professional Development.

European Union Fund

The Partnership for the Delivery of Primary Health Care including HIV and AIDS (PDPHC) Programme is funded by the European Union and was initiated as a pilot project funding two districts per province in the following provinces Gauteng, Limpopo, KwaZulu-Natal, Eastern Cape and Western Cape for non-profit organisations (NPOs) to provide community based services (CBS). These NPOs receive financial and technical support from government to ensure high quality service provision. The Western Cape requested to roll out the project to all its districts in order to address equity and the EU PDPHCP agreed to this.

In the Western Cape the community based care services have now expanded in such a way that NPOs rendering integrated home-based care have increased from 24 in 2004/05 to 110 to date. As at 31 December 2008, there were 21 772 category 2 and 3 clients that had benefited from the programme.

Community based services complement and enhance services provided at public health facilities by providing appropriate services in a natural community setting thus alleviating the pressure on health facilities. As part of building social capital, the CBS programme also creates mechanisms for communities to be fully aware of their health needs (Burden of Disease) and their determinants. The aim of this is for communities to be empowered to actively participate in addressing disease prevention and/or participates in programmes that enhance treatment such as adherence support groups. The end result of a well-managed CBS should be a major reduction in hospitalisation of community members.

The EU has embarked on an exit strategy and reducing funding to the province each year until its exit in March 2010.

5. Payment summary

Key assumptions

In crafting the budget for the 2009/10 MTEF the Department assumed the following:

The occupation specific dispensation for nurses and other categories of personnel such as doctors, dentist and pharmacists will be fully funded.

Inflation will be fully funded.

Improved conditions of service will be fully funded.

Funding for HIV and AIDS and TB will be augmented to provide the required level of service.

The conditional grants will be increased by inflation at least.

The increases in the Government Motor Tariffs will be fully funded.

However, the budget for HIV and AIDS does not allow the Department to provide the required level of service nor have all the conditional grants been increased by inflation.

In allocating the budget for 2009/10 key consideration has been to facilitate the further implementation of the Comprehensive Service Plan in order to reshape the services to treat patients at the appropriate levels of care optimising the use of the limited resource envelope.

The underlying principles of Healthcare 2010 and the Comprehensive Service Plan remain:

Quality care at all levels;

Accessibility of care;

Estimates of Provincial Expenditure 2009

Efficiency;

Cost effectiveness;

Primary health care approach;

Collaboration between all levels of care; and

De-institutionalisation of chronic care.

National priorities

As reflected in the budget bid made to the National Treasury the priorities of the National Department of Health for 2009/10 are:

Human resources for health in the occupations specific dispensations.

Primary Health Care:

Maternal, child and women's health and nutrition which includes vaccines and the household and community component of IMCI.

Tuberculosis

Health information systems (HIS)

The National Emergency Medical Services (EMS) plan

Conditional grants:

HIV and AIDS

National Tertiary Services Grant (NTSG)

Health Professions Training and Development Grant (HPTDG).

Provincial priorities

The provincial priorities for which additional funding was requested include:

Strengthening of Emergency Medical Services

Allocation of appropriate funding to maintenance and infrastructure improvements.

Strengthening of services to facilitate the implementation of the Comprehensive Service Plan.

Human resources.

Programme summary

Table 5.1 below shows the budget or estimated expenditure per programme and Table 5.2 per economic classification (in summary). Details of the Government Financial Statistics (GFS) economic classifications are attached as an annexure to this vote.

Table 5.1 Summary of payments and estimates

			Outcome						Medium-ter	m estimate	
	Programme R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
		2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
1.	Administration ^a	167 291	162 125	205 333	300 788	275 250	275 250	313 813	14.01	345 909	372 615
2.	District Health Services ^{c,d,g}	1 629 951	1 922 792	2 707 578	2 964 886	3 102 808	3 128 808	3 503 630	11.98	3 898 758	4 185 738
3.	Emergency Medical Services	255 851	277 844	341 877	386 026	392 735	407 318	488 136	19.84	538 061	579 603
4.	Provincial Hospital Services ^c	1 295 905	1 397 635	1 306 027	2 305 977	2 358 641	2 358 641	2 621 311	11.14	2 889 410	3 112 495
5.	Central Hospital Services ^{b,c}	1 980 705	2 123 000	2 349 884	1 801 295	1 859 539	1 859 539	1 911 422	2.79	2 106 917	2 269 586
6.	Health Sciences and Training	79 009	98 858	133 706	178 520	179 110	179 110	191 334	6.82	210 904	227 187
7.	Health Care Support Services ^g	93 075	92 906	81 785	97 086	97 938	97 938	177 978	81.73	198 100	199 605
8.	Health Facilities Management ^{e,f}	217 025	344 355	371 678	607 395	604 784	439 130	685 174	56.03	737 210	817 629
	tal payments and timates	5 718 812	6 419 515	7 497 868	8 641 973	8 870 805	8 745 734	9 892 798	13.12	10 925 269	11 764 458

^a MEC total remuneration package: R1 327 560 with effect from 1 April 2008.

^b National Conditional grant: National tertiary services - R1 583 991 000 (2009/10), R1 763 234 000 (2010/11) and R1 848 976 000 (2011/12).

National Conditional grant: Health professional training and development - R362 935 000 (2009/10), R384 711 000 (2010/11) and R407 794 000 (2011/12).

^d National Conditional grant: Comprehensive HIV and Aids - R309 913 000 (2009/10) , R448 834 000 (2010/11) and R480 994 000 (2011/12).

e National Conditional grant: Hospital revitalisation - R388 845 000 (2010/11), R440 554 000 (2009/10) and R485 501 000 (2011/12).

^f National Conditional grant: Infrastructure grant to Provinces - R114 924 000 (2009/10), R128 879 000 (2010/11) and R155 614 000 (2011/12).

9 National Conditional grant: Forensic pathology services - R58 484 000 (2009/10), R66 251 000 (20010/11) and R70 226 000 (2011/12).

Summary by economic classification

Table 5.2 Summary of provincial payments and estimates by economic classification

		Outcome						Medium-terr	n estimate	
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Current payments	4 871 013	5 627 221	6 612 655	7 507 649	7 671 451	7 720 927	8 638 307	11.88	9 609 192	10 310 561
Compensation of employees	2 976 610	3 419 042	4 138 765	4 771 834	4 833 626	4 852 708	5 364 971	10.56	5 904 975	6 343 926
Goods and services	1 892 503	2 206 764	2 470 797	2 735 815	2 837 825	2 866 587	3 273 336	14.19	3 704 217	3 966 635
Financial transactions in assets and liabilities	1 900	1 415	3 093			1 632		(100.00)		
Transfers and subsidies to	502 598	378 356	410 989	461 704	474 925	475 032	505 285	6.37	555 477	599 129
Provinces and municipalities	225 571	141 475	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466
Departmental agencies and accounts	9 263	6 089	3 580	4 374	4 374	4 374	4 712	7.73	5 194	5 595
Universities and technikons	54 429	1 275	1 400	1 567	1 567	1 567	1 708	9.00	1 883	2 028
Non-profit institutions	152 143	164 525	191 404	212 388	220 206	220 206	217 889	(1.05)	236 624	254 867
Households	61 192	64 992	63 681	79 864	73 864	73 971	89 419	20.88	98 564	106 173
Payments for capital assets	345 201	413 938	474 224	672 620	724 429	549 775	749 206	36.28	760 600	854 768
Buildings and other fixed structures	163 879	234 589	297 470	508 828	556 763	382 109	509 319	33.29	513 733	546 999
Machinery and equipment Software and other intangible assets	181 127 195	179 116 233	176 704 50	163 792	152 616 15 050	152 616 15 050	239 887	57.18 (100.00)	246 867	307 769
Total economic classification	5 718 812	6 419 515	7 497 868	8 641 973	8 870 805	8 745 734	9 892 798	13.12	10 925 269	11 764 458

Transfers to public entities

Table 5.3 Summary of departmental transfers to public entities - None

Transfers to development corporations

Table 5.4 Summary of departmental transfers to other entities

		Outcome						Medium-tern	n estimate	
Entities R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
<u></u>	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Universities										
Metro	00.407									
Stellenbosch	22 437									
Western Cape	9 835									
Cape Town	18 996									
Cape Peninsula University	3 161	1 275	1 400	1 567	1 567	1 567	1 708	9.00	1 883	2 028
Cape Medical Depot Trading	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
Account								0100		
SETA	1 947	2 045	2 169	2 801	2 801	2 801	2 997	7.00	3 304	3 559
Provincial Aided Hospitals										
St Joseph	5 483	5 757	6 045	6 591	6 591	6 591	7 184	9.00	7 902	8 535
Sarah Fox	3 842	4 034	4 644	4 618	4 618	4 618	5 034	9.01	5 537	5 980
Maitland Cottage	4 376	4 595	4 825	5 919	5 919	5 919	7 232	22.18	7 972	8 587
Booth Memorial	7 138	7 796	8 570	8 924	8 924	8 924	9 727	9.00	10 700	11 556
Clanwilliam	6 793	7 029	3 787							
Radie Kotze	3 850	4 043	4 503	4 612	4 612	4 612	5 027	9.00	5 541	5 969
Murraysburg	2 177	2 360	2 478	2 620	826	826		(100.00)		
Prince Albert	3 380	3 500						, ,		
Uniondale	2 595	2 850	2 993	3 185	749	749		(100.00)		
Laingsburg	2 905							, ,		
SA Red Cross Air Mercy	11 835	16 053	18 873	21 000	21 000	21 000	22 890	9.00	25 231	27 179
Conradie Care Centre	25 744	27 008	28 439	30 952	30 952	30 952	33 738	9.00 9.00	37 111	40 081
	25 /44	27 000	20 439	30 952	30 952	30 952	33/30	9.00	37 111	40 00 1
Tuberculosis (Contract Hospitals)										
DP Marais	8 291	5 330								
Non Government Organisation										
HIV/Aids	31 103	34 245	47 601	53 337	52 788	52 788	51 542	(2.36)	61 542	67 696
Nutrition	1 622	1 374	1 721	1 636	1 636	1 636	1 722	5.26	1 898	2 045
NGO (APH)	1 022	10/4	1 021	1 115	1 115	1 000	1722	(100.00)	1 000	2 040
HCW: NGO's	451	486	1 02 1	1113	1115	1115		(100.00)		
Santa Guidance	431	400	98							
Global Fund	16 730	18 451	90 19 649	18 397	22 726	22 726	8 713	(61.66)	1 326	
Expanded Public Works	10/30	10 401	19 049	10 23/	22 120	22 120	0/13	(61.66)	1 320	
Programme			12 000	19 732	28 000	28 000	30 000	7.14	33 068	35 621
ТВ							1 400		1 540	1 663
Health Committees, Mental Health, Social Capital	13 811	19 533	24 157	29 750	29 750	29 750	33 680	13.21	37 256	39 956
Total departmental transfers to development corporations	215 835	171 889	196 384	218 329	226 147	226 147	224 309	(0.81)	243 701	262 491

Transfers to local government

		Outcome					Medium-term estimate				
Departmental transfers R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate			
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12	
Category A	104 662	129 915	142 740	155 838	167 241	167 241	189 663	13.41	213 212	230 466	
Category B	58 284										
Category C	54 481	9 318	8 184	7 673	7 673	7 673	1 894	(75.32)			
Total departmental transfers to local government	217 427	139 233	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466	

Table 5.5 Summary of departmental transfers to local government by category

Departmental Public-Private Partnership (PPP) projects

Table 5.6 Summary of departmental Public-Private Partnership projects

	During	Tota	I cost of pro	oject					Medium-term	n estimate	
Project description R'000	Project Unitary Annual Fee at time of contract	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
		2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Projects under implementation ^a		1 273		35 639	38 031	38 031	38 031	43 587	14.61	47 946	51 314
PPP unitary charge				34 995	36 956	36 956	36 956	42 491	14.98	46 740	50 012
Advisory fees		1 273			150	150	150	60	(60.00)	66	71
Project monitoring cost				644	925	925	925	1 036	12.00	1 140	1 231
New projects ^b			1 633	11 138							
PPP unitary charge				10 811							
Advisory fees			1 633	327							
Total Public-Private Partnership projects		1 273	1 633	46 777	38 031	38 031	38 031	43 587	14.61	47 946	51 314

^a Projects signed in terms of Treasury Regulation 16.

^b Projects in preparation, registered in terms of Treasury Regulation 16.

Disclosure notes for projects signed in terms of Treasury Regulation 16

Project name	Western Cape Rehabilitation Centre Public Private Partnership
Brief description	Provision of equipment, facilities management and all associated services at the Western Cape Rehabilitation Centre and the Lentegeur Hospital.
Date PPP Agreement signed	8 December 2006 (full service commencement date 1 March 2007).
Duration of PPP Agreement	12 Years
Escalation Index for Unitary fee	CPIX
Net present value of all payment obligations discounted at appropriate duration government bond yield	R31.286 million (2007/08) as approved in terms of Treasury Approval III.
Variations/amendments to PPP agreement	Full service commencement date was 1 March 2007, after a period of remedial works between signature & full service commencement date. No variations/ amendments have been served and agreed upon.
Cost implications of variations/amendments	See above comment.
Significant contingent fiscal obligations including termination payments, guarantees, warranties, and indemnities and maximum estimated value of such liabilities	These contingent fiscal obligations and its estimated value will be determined in accordance with the PPP Agreement and will depend on the type of obligation and the impact that it has on the concession period.

6. Programme description

Programme 1: Administration

Purpose: To conduct the strategic management and overall administration of the Department of Health.

Analysis per sub-programme

Sub-programme 1.1: Office of the MEC

rendering of advisory, secretarial and office support services

Sub-programme 1.2: Management

policy formulation, overall management and administration support of the department and the respective regions and institutions within the department

to make limited provision and maintenance of accommodation needs

Policy developments:

The Department continues to address the governance requirements of the National Health Act, 2003, (Act 61 of 2003). The occupation specific dispensation for nurses was implemented from 1 July 2007, and the process has been audited by representatives of the National Auditor-General. The occupation specific dispensation for doctors, dentists, pharmacists and emergency medical services personnel and other health professionals will be implemented in a phased manner over the MTEF period.

Changes: policy, structure, service establishment, etc. Geographic distribution of services:

The Human Resource Plan was finalised during 2008. There has been further work in refining the staff establishments developed in the Comprehensive Service Plan. The alignment of the establishments with the service needs will be achieved through the implementation of the Human Resource Plan.

Priority funding is allocated to the following:

A priority allocation of R4.096 million has been allocated to the Department for shift of the internal audit function from Treasury to the Department.

There is a priority allocation of R14.500 million to address cost pressures in information technology (IT).

Expenditure trends analysis:

The allocation to Administration increases to 3.17 per cent of the vote in 2009/10 in comparison to the 3.15 per cent allocated in the revised estimate of 2008/09, which amounts to a nominal increase of R38.563 million or 14.01 per cent from the revised estimate for 2008/09.

Service delivery measures

Dreamme/Sub pregramme/Derfermence Mecourse	Esti	mated Annual Targ	gets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
PROGRAMME PERFORMANCE MEASURES			
(Customised: National specific)			
Programme 1: Administration			
Human Resource and Quality Assurance			
Number of medical officers per 100 000 people	37	37	37
Number of medical officers per 100 000 people in rural districts	13	13	13
Number of professional nurses per 100 000 people	100	100	100
Number of professional nurses per 100 000 people in rural districts	80	80	80
Number of pharmacists per 100 000 people	15	15	15
Number of pharmacists per 100 000 people in rural districts	12	12	12
Vacancy rate for professional nurses	13%	13%	13%
Attrition rate for doctors	20%	20%	20%
Attrition rate for professional nurses	10%	10%	10%
Absenteeism rate for professional nurses	2.7%	2.7%	2.7%
Percentage of hospitals with employee satisfaction surveys	65%	65%	65%
Nurse clinical workload (PHC)	27	28	35
Doctor clinical workload (PHC)	29	27	25
Supernumerary staff as percentage of establishment	0	0	0
PROGRAMME PERFORMANCE MEASURES			
(Customised: Provincial specific)			
Programme 1: Administration			
Data submission rate of prioritised data sets	85% (11 760/ 13 836)	92% (12 729/ 13 836)	100% (13 836/ 13 836
Number of budget programmes whose core data has been incorporated into the central data repository.	8	8	8
Percentage of hospitals where the Hospital Information System (HIS) has been implemented.	70% (28/41)	80% (32/41)	90% (36/41)
Percentage of hospitals with up to date asset register	100% (41/41)	100% (41/41)	100% (41/41)
Number of health districts with up to date PHC asset register (excluding hospitals)	9	9	9
Number of items on dues out (stock outs) at the Central Medicine Depot (CMD)	<50	<50	<50
Percentage of complaints resolved within 25 days.	75% of complaints received	75% of complaints received	75% of complaints received

Table 6.1 Summary of payments and estimates – Programme 1: Administration

			Outcome						Medium-tern	n estimate	
	Sub-programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
1.	Office of the Provincial Minister ^a	3 535	3 738	3 840	4 637	5 284	5 284	5 531	4.67	6 097	6 567
2.	Management	163 756	158 387	201 493	296 151	269 966	269 966	308 282	14.19	339 812	366 048
	Central Management	155 688	149 100	191 379	283 238	256 841	256 841	297 150	15.69	327 541	352 830
	Decentralised Management	8 068	9 287	10 114	12 913	13 125	13 125	11 132	(15.18)	12 271	13 218
Tot	al payments and estimates	167 291	162 125	205 333	300 788	275 250	275 250	313 813	14.01	345 909	372 615

^a MEC total remuneration package: R1 327 560 with effect from 1 April 2008.

Table 6.1.1 Summary of provincial payments and estimates by economic classification – Programme 1: Administration

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	120 529	148 837	190 504	221 241	244 744	244 744	280 101	14.45	308 750	332 586
Compensation of employees	67 174	69 853	81 317	99 928	98 331	96 253	115 822	20.33	127 668	137 525
Goods and services	53 007	78 979	109 101	121 313	146 413	148 348	164 279	10.74	181 082	195 061
Financial transactions in assets and liabilities	348	5	86			143		(100.00)		
Transfers and subsidies to	19 407	8 922	7 921	20 816	14 816	14 816	22 150	49.50	24 415	26 300
Provinces and municipalities	153	39								
Universities and technikons	2 330									
Households	16 924	8 883	7 921	20 816	14 816	14 816	22 150	49.50	24 415	26 300
Payments for capital assets	27 355	4 366	6 908	58 731	15 690	15 690	11 562	(26.31)	12 744	13 729
Machinery and equipment	27 225	4 358	6 901	58 731	15 690	15 690	11 562	(26.31)	12 744	13 729
Software and other intangible assets	130	8	7							
Total economic classification	167 291	162 125	205 333	300 788	275 250	275 250	313 813	14.01	345 909	372 615

Details of transfers and subsidies:

		Outcome						Medium-tern	n estimate	
Economic classification R'000			Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Transfers and subsidies to (Current)	19 407	8 922	7 921	20 816	14 816	14 816	22 150	49.50	24 415	26 300
Provinces and municipalities	153	39								
Municipalities	153	39								
Municipalities	153	39								
of which										
Regional services council levies	153	39								
Universities and technikons	2 330									
Households	16 924	8 883	7 921	20 816	14 816	14 816	22 150	49.50	24 415	26 300
Social benefits	387	229	94	230	230	230	145	(36.96)	159	172
Other transfers to households	16 537	8 654	7 827	20 586	14 586	14 586	22 005	50.86	24 256	26 128
Ľ										

Programme 2: District Health Services

Purpose: To render Primary Health Care and District Hospital Services.

Analysis per sub-programme

Sub-programme 2.1: District Management

planning and administration of services, managing personnel and financial administration and the co-ordinating and management of the day hospital organisation and community health services rendered by local authorities and non-governmental organisations within the Metro and determining working methods and procedures and exercising district control

Sub-programme 2.2: Community Health Clinics

rendering a nurse driven primary health care service at clinic level including visiting points, mobile- and local authority clinics

Sub-programme 2.3: Community Health Centres

rendering a primary health service with full-time medical officers in respect of mother and child, health promotion, geriatrics, occupational therapy, physiotherapy, psychiatry, speech therapy, communicable diseases, mental health, etc.

Sub-programme 2.4: Community Based Services

rendering a community based health service at non-health facilities in respect of home based care, abuse victims, mental- and chronic care, school health, etc.

Sub-programme 2.5: Other Community Services

rendering environmental and port health etc.

Sub-programme 2.6: HIV and Aids

rendering a primary health care service in respect of HIV and Aids campaigns and special projects

Sub-programme 2.7: Nutrition

rendering a nutrition service aimed at specific target groups and combines direct and indirect nutrition interventions to address malnutrition

Sub-programme 2.8: Coroner Services

rendering forensic and medico legal services in order to establish the circumstances and causes surrounding unnatural death

Sub-programme 2.9: District Hospitals

rendering of a hospital service at district level

Sub-programme 2.10: Global Fund

strengthen and expand the HIV and Aids prevention, care and treatment programmes

Policy developments:

The assumption of responsibility for Personal Primary Health Care (PPHC) in the rural districts has been completed. A final decision with respect to the assumption of responsibility for PPHC in the Metro is still to be made.

Changes: policy, structure, service establishment, etc. Geographic distribution of services:

The District Health System (DHS)

The priority is to strengthen and extend the district health system via the six district offices and the four Metro substructure offices during 2009/10.

The clinical governance in the DHS will be enhanced by the further appointment of family physicians.

The integrated model for emergency care that is being piloted in the Cape Winelands and the Eastern sub-district in the Metro will be institutionalised across the province during 2009/10 with the appointment of nine emergency care specialists who will support clinical governance in emergency services in specified geographic areas. The model for providing emergency care in non-hospital towns with a population over 5 000 will be rolled out to 56 per cent of the towns in 2009/10.

Community Based Services (CBS)

In order to establish an integrated community-based service platform to render the full package of quality CBS in all districts of the Western Cape the following are a priority:

Provision of home-based care, in-patient palliative care, sub-acute care and chronic care to prioritised clients in all six districts.

Deliver quality home community based services in all six districts.

The number of carers will increase from 2 300 in 2008/09 to 2 500 in 2009/10.

The key focus for 2009/10 is to increase the sub-acute beds by 60 in the Metro and the rural districts will explore the possibility of using under utilised beds in district hospitals for the purposes of 'de-hospitalisation'.

District hospital services

From 2009/10 Victoria Hospital will be transferred from Sub-programme 4.1 to Sub-programme 2.9 and will become a designated district hospital with predominantly level 1 beds.

Contractors have commenced work on the Khayelitsha District Hospital and the Mitchells Plain District Hospital. The hubs of the Khayelitsha and Mitchells Plain District Hospitals are in the interim located at Tygerberg and Lentegeur Hospitals respectively.

The key priority is to increase the quantum of acute district hospital services offered in the 2 413 beds in the 34 district hospitals in the province.

Emergency services will be strengthened as five clinical governance and training complexes for emergency medicine headed by emergency medicine specialists will be established.

The following improvements are planned for 2009/10:

Shift of level 1 and 2 paediatric services between Tygerberg, Karl Bremer and Helderberg Hospitals.

Kangaroo mother care to be improved across the service platform.

Shift of level 1 medicine services from Groote Schuur Hospital to GF Jooste Hospital.

Level 1 elective surgical procedures for Klipfontein and Mitchells Plain sub-districts to be rendered at Khayelitsha District Hospital and Eerste River Hospital.

Increase the quantum of level 1 orthopaedics in Khayelitsha District Hospital and Eerste River Hospital.

Increase the medical officer capacity to perform level 1 anaesthetic procedures in district hospitals.

Shifting level 1 obstetric services from Groote Schuur Hospital to Mowbray Maternity Hospital.

Chronic Disease Management

Approximately 1.5 million chronic disease medication prescriptions were issued via alternative systems during 2008/09 and this is projected to increase to 2.2 million in 2009/10.

Clinical audits for priority diseases will be incrementally institutionalised in all sub districts starting with all 8 subdistricts in the Metro in 2009/10.

Tuberculosis (TB)

The goal of the Department is to reduce morbidity and mortality due to TB through the following strategic objectives:

Strengthen the implementation of the DOTS strategy through expansion and enhancement of high quality DOTS in high TB burden sub-districts which are Khayelitsha, Cape Town Eastern, Cape Town Western, Cape Town Norther, Klipfontein, Drakenstein, Breede Valley, Mitchells Plain, Tygerberg, George and Mossel Bay.

Address HIV positive TB and M(X)DR TB to ensure adequate treatment and management of these patients.

Although the budget structure for the TB hospitals is located in Programme 4, from 2009/10 the line management of the TB hospitals will be transferred to the respective substructure management teams in Programme 2 to facilitate the seamless continuum of care for TB patients from community based care to TB hospitals.

HIV and AIDS

Funds from the conditional grant funds are allocated to expand and maintain the prevention, treatment and care initiatives for HIV and AIDS.

The provincial strategy is based on the National HIV and AIDS and STI Strategic Plan (NSP) and which focuses on:

Prevention which includes social mobilisation and behavioural change and interventions which include prevention of mother-to-child transmission (PMTCT), voluntary counselling and testing (VCT) and the provision of male and female condoms.

Decreasing the morbidity and mortality of HIV and AIDS of which the provision of anti-retroviral therapy (ART) is one of the components.

The provincial programme is co-ordinated by the Provincial AIDS Council which has officially endorsed the Provincial Strategic Plan 2007-2011 which provides the roadmap for increased effort and commitment to contain the spread of HIV with ambitious targets aligned with the National Strategic Plan.

The key deliverables for 2009/10 include:

Managing approximately 48 000 clients on daily ART at various sites across the Province.

Accredit six additional treatment sites in the Province.

Start the transfer of 740 stable ART clients from the central hospitals to PHC ART sites.

Expansion of the nurse-led, doctor-supported ART model to nine additional PHC sites.

Women's Health

Women's health remains a priority area, providing women with adequate preventive and curative interventions. Areas of focus are antenatal care particularly, before 20 weeks gestation, and screening for cervical cancer. Basic Antenatal Care (BANC) is a national quality improvement programme which focuses on the early identification of at risk pregnant women and the early referral to the appropriate level of care and has to date been rolled out to 245 PHC facilities and this will be rolled out to an additional 20 in 2009/10. Progress is being made in integrating women's health with broader programmes across the health care platform. The Department will implement an operational plan to respond to the ten national recommendations in the Saving Mothers Report III, to reduce maternal deaths.

Child and youth health

Greater emphasis is placed on child and youth health. Improving immunisation of children remains a priority. The programme focuses on increasing the number of districts with a 90 per cent immunisation coverage for children under one year of age. The National Department of Health announced the intention to introduce the rotavirus vaccine, for children 10 - 14 weeks of age, and pneumococcal vaccine, which is administered at 6 weeks, 14 weeks and at 9 months for 2009/10. This will be implemented in a phased manner.

The significant peak in diarrhoeal disease that is experienced in the summer months continues. A diarrhoeal task team consisting of members from communication, health promotion, health programmes, Metro District Health Services, regional and tertiary hospitals and the City of Cape Town have addressed the service pressures through a strategy that includes identification of 'hot spots' in all sub-districts, community-based services such as awareness and education programmes, improved PHC management and referral, management and transportation of critically ill children referred to hospital and improved hospital management of these children.

Joint planning and programme implementation efforts are underway to strengthen inter-departmental liaison and intergovernmental relations with the Departments of Education, Social Development and Local Government in joint focus areas of early childhood development and school health.

Coroner Services

Coroner services have been shifted to Sub-programme 7.3: Forensic Pathology Services.

Global Fund

Phase 2 of the Global Fund grant is added to the HIV and Aids budget of the Department. The Global Fund Grant enables the Department to rapidly implement strategies to promote the management, prevention and treatment of people with HIV and Aids through augmentation of the funding provided from the equitable share and conditional grants. The plan had been that the Department would take over services funded by the Global Fund over a four-year period, however, due to the demand far exceeding the availability of resources the Department is in the process of requesting permission from the Global Fund to reapply for additional funding.

Expenditure trends analysis:

Programme 2 is allocated 35.42 per cent of the total vote in 2009/10 in comparison to the 35.78 per cent that was allocated in the adjusted budget for 2008/09. This translates into a nominal increase of R374.822 million or 11.98 per cent. Forensic Pathology Services have been reallocated from Sub-programme 2.8 to Sub-programme 7.3 and Victoria Hospital has shifted from Sub-programme 4.1 to Sub-programme 2.9 from 2009/10.

Description (October 1997) (Description of Management	Estin	nated Annual Targ	gets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
PROGRAMME PERFORMANCE MEASURES			
(Customised: National specific)			
Programme 2: District Health Services			
Provincial PHC expenditure per uninsured person	R388	R410	R428
Total PHC headcount per annum	14 645 765	14 645 765	14 645 765
PHC utilisation rate per capita	2.76	2.74	2.73
PHC utilisation rate per uninsured population	3.7	3.68	3.67
PHC utilisation rate under 5 years	5	5	5
Percentage of sub-districts offering full package of PHC services	100%	100%	100%
Percentage of fixed PHC facilities supported by a doctor a least once a week	80%	85%	90%
Supervision rate	100%	100%	100%
PHC Expenditure per headcount at Provincial PHC facilities	R112	R117	R117
Percentage of complaints resolved within 25 days	25%	30%	40%
2.1 District Hospitals			
Caesarean section rate for district hospitals	20%	20%	20%
Number of patient day equivalents (PDEs) for district hospitals	1 187 327	1 234 821	1 284 213
OPD total headcounts in district hospitals	691 042	725 594	761 874
Casualty/emergency/trauma headcount	376 091	394 896	414 640
Comprehensive OPD headcount in district hospitals (OPD + casualty/emergency/trauma)	1 067 133	1 120 490	1 176 514
Percentage district hospitals with patient satisfaction survey using DoH template	100%	100%	100%
Percentage of district hospitals with mortality and morbidity meetings every month	75%	80%	85%
Percentage of district hospitals with clinical audit meetings every month	35%	40%	45%
Percentage complaints resolved within 25 days in district hospitals	50%	60%	70%
Case fatality rate in district hospitals for surgery separations	1.0%	1.0%	1.0%
Average length of stay in district hospitals	3.2 days	3 days	3 days
Bed utilisation rate (based on usable beds) in district hospitals	86%	85%	85%
Total separations in district hospitals	267 246	277 936	289 053
Expenditure per patient day equivalent in district hospitals	R930	R950	R957

Service delivery measures

Des manuel (October and the Constant of Des formation of Manual of Constant of	Estin	nated Annual Tar	gets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
2.2 HIV and AIDS, TB and STI Control			
Percentage fixed PHC facilities offering PMTCT	82% (245/299)	87% (259/299)	88% (262/299)
Percentage fixed PHC facilities offering VCT to non-antenatal clients (VCT facility rate)	97% (290/299)	99% (295/299)	100% (299/299)
Percentage hospitals offering PEP for occupational HIV exposure	100% (41/41)	100% (41/41)	100% (41/41)
Percentage hospitals offering PEP for sexual abuse	100% (41/41)	100% (41/41)	100% (41/41)
Male condom distribution rate from public sector health facilities	39.2	43	47.1
STI partner treatment rate	20.5%	21%	22%
Nevirapine newborn uptake rate	95%	95%	95%
Nevirapine uptake - antenatal clients	90%	90%	90%
Clients HIV pre-test counseled rate in fixed PHC facilities	3.8%	4.0%	4.0%
HIV testing rate (excluding antennal)	95%	95%	95%
ART Service points registered	76	84	90
ART patients - total registered	68 236	84 230	99 526
Percentage of fixed facilities with any ARV drug stock out	0	0	0
Percentage of fixed facilities referring patients to ARV sites for assessment	100% (290/290)	100% (290/290)	100% (290/290)
CD4 test at ARV treatment service points with turnaround time > 6 days	Not available	Not available	Not available
Percentage of dedicated HIV and AIDS budget spent	100%	100%	100%
Percentage of TB cases with a DOT supporter	91%	92%	93%
TB treatment interruption rate	9%	9%	8%
Percentage of TB sputa specimens with turnaround time less than 48 hours	72%	73%	75%
Percentage of new smear positive PTB cases cured at first attempt	78%	79%	80%
New MDR TB cases reported –annual percentage change	Not available	Not available	Not available
New XDR cases reported – annual percentage change	Not available	Not available	Not available
2.3 Maternal, Child and Woman Health			
Percentage of fixed PHC facilities with DTP - Hib vaccine stock out	<2%	<2%	<2%
Full immunisation coverage under 1 year	95%	95%	95%
Measles coverage under 1 year	93%	93%	93%
Vitamin A coverage under 1 year	92%	93%	93%
Percentage of fixed PHC facilities implementing IMCI	85% 254/299	90% 269/299	95% 284/299
Percentage of fixed PHC facilities certified as youth friendly	18% 53/299	18% 53/299	18% 53/299
Cervical cancer screening coverage	8.0%	8.5%	9%
Percentage of hospitals offering TOP services	77% 37/48	80% 38/48	83% 40/48
Percentage of CHCs offering TOP services	5.7% 3/59	7% 4/59	7.0% 4/59
Percentage of facilities certified as baby friendly	29.7% (22/74)	33.7% (25/74)	37.8% (28/74)
Total deliveries in facilities	92 000	92 500	93 000
Facility delivery rate	97%	97%	97%
Institutional delivery rate for women under 18 years	7.5%	7.5%	7.5%
2.4 Non-Communicable Diseases Control			
Number of trauma centers for victims of violence	42	42	42

	Esti	mated Annual Ta	rgets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
Number of health districts with health care waste management plan implemented	6	6	6
Percentage of hospitals providing occupational health programmes	90%	90%	95%
Percentage of schools implementing Health Promoting School Programme (HPSP)	20	25	30
Integrated epidemic preparedness and response plans implemented	Y	Y	Y
Outbreak responded to within 24 hours	95%	95%	95%
Malaria fatality rate	0	0	0
Cholera fatality rate	0	0	0
Cataract surgery rate (Number per million population)	1 800	2 000	2 200
Number of cataract surgery operations	7 400	7 700	8 000
PROGRAMME PERFORMANCE MEASURES			
(Customised: Provincial specific)			
Programme 2: District Health Services			
2.1 - 2.3 District health Services			
The number of District Health Plans formally approved by the District Health Council	5	6	6
The number of PHC facilities that have the required infrastructure and equipment to implement the PHCIS.	78	110	130
The number of principal family physicians and family physicians appointed within the District Health System	17	30	32
The number of family medicine registrars employed in the District Health Service	60	80	80
The number of CHCs and /or CDCs offering nurse based extended hours to 21:30 on weekdays and 08:00 to 12:00 on weekends	18	18	18
Percentage of non-hospital towns with populations of more than 5 000 that have access to an emergency service on a 24 hour basis	56%	61%	65%
Number of prescriptions dispensed through an alternative dispensing system	1 500 000	1 600 000	1 650 000
Number of sub-districts undertaking annual clinical audits for the management of chronic diseases using the integrated tool	8	20	32
2.4 Community based services: DHS			
Total number of NPO appointed home carers	2 500	2 600	2 700
Total number of registered active HBC clients	29 000	30 000	31 000
Total CBS headcounts per annum (client visits)	2 056 000	2 060 000	2 065 000
Number of palliative, sub-acute and chronic care beds	783	783	803
Bed utilisation rate in palliative, sub-acute and chronic care beds	85%	85%	85%
2.5 Community based services: Disease prevention and control			
Percentage of bacteriological water samples taken from water services authorities conforming to standards.	92.5%	93%	94%
Percentage of chemical water samples taken from water services authorities conforming to standards.	96%	96.5%	97%
Percentage of households with access to potable water within 200m.	96%	96.5%	97%
Percentage of sewage effluent samples complying with requirements.	71%	72%	72%

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Decaronmo/Sub programmo/Derfermence Meccures	Esti	mated Annual Ta	irgets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
2.6: and 2.10: HIV and Aids; and STI and TB control			
Number of new ART patients	22 480	15 994	15 296
Number of persons tested for HIV, excluding antenatal	323 000	361 000	380 000
Number of female condoms distributed from public health facilities	550 000	600 000	650 000
PMTCT transmission rate	4.0%	4.0%	4.0%
Smear conversion rate at 2 months for new smear positive PTB cases	73%	74%	75%
2.4 - 2.5 and 2.7 Community based services: Maternal, child and women health and nutrition			
Percentage of women making antenatal booking before 20 weeks	60%	65%	70%
Percentage of fixed and non-fixed PHC facilities offering BANC	58% (265/460)	62% (285/460)	66% (305/460)
Women year contraceptive protection rate	36%	38%	40%
Developmental screening rate in children under 1 year of age	1.2	1.4	1.6
Early neonatal death rate (ENNDR) for babies > 1 000g at PPIP sites	4.2	4.0	3.8
Percentage of underweight children under 5 years	0.78	0.78	0.78
2.9 District hospitals			
Number of district hospital beds	2 413	2 460	2 460

Table 6.2 Summary of payments and estimates – Programme 2: District Health Services

			Outcome						Medium-term	estimate	
	Sub-programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
1.	District Management	88 606	94 151	103 010	151 247	153 812	153 812	187 565	21.94	206 749	222 711
2.	Community Health Clinics ^a	316 372	372 910	430 608	564 498	638 240	638 240	750 561	17.60	827 326	891 202
3.	Community Health Centres ^a	521 255	552 220	677 703	718 642	676 288	676 288	800 149	18.31	881 986	950 082
4.	Community Based Services ^a	43 499	98 295	125 738	115 670	118 260	118 260	117 802	(0.39)	129 850	139 876
5.	Other Community Services	53 076	32 312	52 414	1	1	1	1		1	1
6.	HIV and Aids ^b	122 655	168 579	239 899	241 467	241 467	276 467	309 913	12.10	448 834	480 994
7.	Nutrition	13 700	15 136	16 810	17 782	17 868	17 868	18 452	3.27	20 339	21 910
8.	Coroner Services	2 004	51 966	122 266	64 352	94 980	85 980	1	(100.00)	1	1
9.	District Hospitals ^a	419 084	456 673	854 454	987 187	1 014 888	1 014 888	1 245 566	22.73	1 372 959	1 478 961
10.	Global Fund	49 700	80 550	84 676	104 040	147 004	147 004	73 620	(49.92)	10 713	
То	tal payments and estimates	1 629 951	1 922 792	2 707 578	2 964 886	3 102 808	3 128 808	3 503 630	11.98	3 898 758	4 185 738

^a 2009/10: Conditional grant: Health professional training and development: R85 708 000 (Compensation of employees R55 710 000; Goods and services R29 998 000).

^b 2009/10: Conditional grant: Comprehensive HIV and Aids: R309 913 000 (Compensation of employees R100 270 000; Goods and services R131 095 000, Transfers and subsidies R78 355 000 and Machinery and Equipment R193 000).

Note: Contributing factors to the increase of funding in this programme in 2007/08 are the creation of the District Health Service structures in Sub-programme 2.1 and the allocation of GF Jooste, Helderberg and Karl Bremer Hospitals from sub-programme 4.

Note: Contributing factors to the decrease of funding in sub-programme 2.5 in 2008/09 are the shift of allocations to more appropriate sub-programmes within programme 2 (mostly to sub-programme 2.2).

Note: Contributing factors to the increase of funding in this programme are the allocation of Victoria Hospital from sub-programme 4.1 to sub-programme 2.9 with effect of 1 April 2009.

Note: The Forensic Services previously in Sub-programme 2.8 has been transferred to Sub-programme 7.3 with effect of 1 April 2009.

Table 6.2.1 Summary of provincial payments and estimates by economic classification – Programme 2: District Health Services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Current payments	1 297 618	1 615 460	2 299 983	2 587 792	2 644 589	2 679 482	3 071 360	14.63	3 454 342	3 706 598
Compensation of employees	732 167	940 896	1 399 729	1 636 021	1 662 287	1 677 180	1 884 033	12.33	2 064 305	2 223 465
Goods and services	565 348	674 357	899 456	951 771	982 302	1 002 011	1 187 327	18.49	1 390 037	1 483 133
Financial transactions in assets and liabilities	103	207	798			291		(100.00)		
Transfers and subsidies to	308 196	279 899	307 597	330 123	341 076	341 183	352 550	3.33	387 121	417 776
Provinces and municipalities	219 456	139 797	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466
Universities and technikons	2 695									
Non-profit institutions	84 775	137 859	154 685	164 622	164 172	164 172	157 767	(3.90)	170 353	183 480
Households	1 270	2 243	1 988	1 990	1 990	2 097	3 226	53.84	3 556	3 830
Payments for capital assets	24 137	27 433	99 998	46 971	117 143	108 143	79 720	(26.28)	57 295	61 364
Buildings and other fixed structures		4 904	49 609	28 392	78 938	69 938	27 050	(61.32)		
Machinery and equipment	24 132	22 517	50 352	18 579	38 205	38 205	52 670	37.86	57 295	61 364
Software and other intangible assets	5	12	37							
Total economic classification	1 629 951	1 922 792	2 707 578	2 964 886	3 102 808	3 128 808	3 503 630	11.98	3 898 758	4 185 738

Details of transfers and subsidies:

	-	Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Transfers and subsidies to (Current)	308 196	279 899	307 419	330 123	341 076	341 183	352 550	3.33	387 121	417 776
Provinces and municipalities	219 456	139 797	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466
Municipalities	219 456	139 797	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466
Municipalities	219 456	139 797	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466
of which										
Regional services council levies	2 029	564								
Universities and technikons	2 695									
Non-profit institutions	84 775	137 859	154 507	164 622	164 172	164 172	157 767	(3.90)	170 353	183 480
Households	1 270	2 243	1 988	1 990	1 990	2 097	3 226	53.84	3 556	3 830
Social benefits	1 270	2 003	1 988	1 990	1 990	2 097	3 226	53.84	3 556	3 830
Other transfers to households		240								
Transfers and subsidies to (Capital)			178							
Non-profit institutions			178							

Programme 3: Emergency Medical Services

Purpose: The rendering of pre-hospital emergency medical services including inter-hospital transfers and planned patient transport.

Analysis per sub-programme:

Sub-programme 3.1: Emergency Transport

rendering emergency medical services including ambulance services, special operations, communications and air ambulance services

Sub-programme 3.2: Planned Patient Transport

rendering planned patient transport including local outpatient transport (within the boundaries of a given town or local area) and inter-city/town outpatient transport (into referral centres)

Policy developments:

The strengthening of Emergency Medical Services to improve response times remains a priority. Emergency Medical Services is represented in 50 towns in the Western Cape and achieves response time performance of 60 per cent priority 1 urban responses within 15 minutes in towns where there are stations and 75 per cent priority 1 responses within 40 minutes in rural areas or towns where there are no emergency service stations.

Only approximately 30 per cent of the ambulance stations are purpose built but progress is being made in building new stations. New ambulance stations have recently been constructed in Hermanus, Caledon, Atlantis and Riversdal.

The FIFA 2010 Health Unit is located within Emergency Medical Services and is responsible for coordination of all health planning and preparation for the tournament which includes: health command and control, health services, i.e. hospital preparedness, forensic pathology services and environmental health, EMS including aero-medical, disaster medicine and bio chemical response capability, and the establishment of a medical facility at the 2010 stadium which includes staffing and equipping this facility.

The emergency medicine component of Emergency Medical Services will focus on facility based emergency medicine and the links between institutions and will expand the pilot District Health Services projects to all rural and metropolitan districts.

The strategic management of emergency medicine will occur through an EMS strategic management team consisting of the chief directors of the District Health Services and Hospital Services and the Director: Emergency Medical Services and an operational team will be developed in each of the nine substructure offices in the province. Emergency medicine will facilitate the establishment of emergency centres as single functional units with medicine and trauma under one line manager.

Emergency medicine will develop a provincial structure to deal with transversal clinical services, training and teaching, research and quality management all of which deal with clinical governance across the platform of pre-hospital emergency care and emergency centre, emergency medicine.

The Acute Emergency Case Load Management Policy (AECLMP) has been developed and will be used by operational management teams and emergency centre teams to drive the flow of emergency patients to the appropriate level of care.

Two Emergency Medicine specialists have been appointed and more will be appointed in the regional hospitals to improve the quality of care in emergency units in 2009/10 This will improve the quality of referrals between EMS personnel and the hospital staff and improve the turnaround time of ambulances resulting in better response times. Structures will be put in place to improve co-ordination and communication between different components to improve the service.

Changes: policy, structure, service establishment, etc. Geographic distribution of services:

In order to address the 34 per cent vacancy rate EMS has recruited Emergency Care Practitioners who will progress to training on the mid-level worker programme as emergency care technicians. The skills mix of EMS personnel is not yet aligned with the national targets with recruitment and training being the limiting factor. The absence of a formal qualification in medical dispatch is a factor that inhibits the development of the communications personnel and retards the efficiency of the communication system which is a vital link in the response times.

Emergency Medical Services will implement an incubator transfer module that is specifically equipped to deal with neonates in each of the districts.

The following minimum amounts are earmarked for Emergency Medical Services: R495.611 million in 2009/10; R546.301 million in 2010/11 and R588.479 million in 2011/12. The earmarked amounts include funding for Programme 3: Emergency Medical Services and Sub-programme 6.2: Emergency Medical Services Training Colleges

The objectives of the funding are to:

Ensure the provision of sufficient resources for the rendering of an effective and efficient emergency and patient transport service.

Train appropriate numbers of emergency medical care personnel to meet the quantitative and qualitative needs of Emergency Medical Services.

Maintain and improve standards of emergency medical care through the continuous development of Emergency Medical Care.

Expenditure trends analysis:

In 2009/10 Emergency Medical Services is allocated 4.93 per cent of the vote in comparison to the 4.66 per cent that was allocated in the revised budget of 2008/09. This amounts to a nominal increase of R80.818 million or 19.84 per cent.

	Estim	ated Annual Ta	argets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
PROGRAMME PERFORMANCE MEASURES			
(Customised: National specific)			
Programme 3: Emergency Medical and Patients Transport Services			
Total number of rostered ambulances	250	250	230
Rostered ambulances per 1000 people	0.05 (250/5 342)	0.05 (250/ 5 364)	0.04 (230/5 385)
Percentage of hospitals with patient transporters	0%	0%	0%
Average kilometers travelled per ambulance (per annum)	62 400 (15 600 000/ 250)	62 400 (15 600 000/ 250)	60000 (13 800 000/ 230)
Total kilometers travelled by all ambulances	15 600 000	15 600 000	13 800 000
Percentage of locally based staff with training in BAA	45% (600/ 1 332)	38% (506/ 1 332)	32% (426/1 332)
Percentage of locally based staff with training in AEA	45% (600/1 332)	50% (666/ 1 332)	54.5% (726/1 332)
Percentage of locally based staff with training in ALS (paramedics)	10% (33/1 332)	12% (160/1 332)	13.5% (180/ 1 332)
Percentage of P1 calls with a response of time <15 minutes in an urban area	30% (CAD Data Change over) (28 350/ 94 500)	35% (CAD Data) (33 075 / 94 500)	40% (37 800/ 94 500)
Percentage of P1 calls with a response of time <40 minutes in a rural area	70% (CAD Data Change over) (22 050/ 31 500)	75% (CAD/Data) (23 625/ 31 500)	80% (252 00/ 31 500)
Percentage of all calls with response time within 60 minutes	65% (CAD Data Change over) (273 000/ 420 000)	70% (CAD Data) (294 000/ 420 000)	75% (315 000/ 420 000)
Percentage of operational rostered ambulances with single person crews	0%	0%	0%
Percentage of ambulance trips used for inter-hospital transfers	20% (84 000/ 420 000)	20% (84 000/ 420 000)	20% (84 000/ 420 000)
Percentage of green code patients transported by ambulance	30% (126 000/ 420 000)	30% (126 000/ 420 000)	30% (126000/ 420 000)

Service delivery measures

Drogramme/Sub-programme/Derfermence Meccures	Estin	nated Annual T	argets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
Cost per patient transported by ambulance	R970	R1 031	R1 080
Percentage of ambulances with less than 200 000 kms on the odometer	60% (156/260)	60% (156/260)	60% (138/230)
Number of EMS emergency cases - total	420 000	420 000	420 000
EMS referral cases	Definition to be clarified	-	-
PROGRAMME PERFORMANCE MEASURES			
(Customised: Provincial specific)			
Programme 3: Emergency Medical Services			
3.1 Emergency Medical services and 3.2 Planned patient transport			
Percentage of all emergency responses in less than 30 minutes	60% CAD Data (252 000/ 420 000)	65% CAD Data (273 000/ 420 000)	70% CAD Data (294 000/ 420 000)
Percentage of telephone calls answered within 12 seconds	80% (240 000/ 300 000)	90% (270 000/ 300 000)	90% (270 000/ 300 000)
The number of emergency medicine consultants appointed	12	12	12
Number of ambulances procured	10	0	0
The percentage of metropolitan hospitals with trunking radios in their emergency centres	100% (10/10)	100% (10/10)	100% (10/10)

Table 6.3 Summary of payments and estimates – Programme 3: Emergency Medical Services

			Outcome					Medium-term estimate				
	Sub-programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12	
1.	Emergency Transport	250 130	268 597	321 120	362 114	368 648	382 174	459 713	20.29	506 731	545 854	
2.	Planned Patient Transport	5 721	9 247	20 757	23 912	24 087	25 144	28 423	13.04	31 330	33 749	
Т	otal payments and estimates	255 851	277 844	341 877	386 026	392 735	407 318	488 136	19.84	538 061	579 603	

Earmarked allocations:

Included in sub-programme 3.1: Emergency Transport is an earmarked allocation amounting to R459 713 000 (2009/10), R506 731 000 (2010/11) and R545 854 000 (2011/12) for the purpose of Emergency Medical Services.

Included in sub-programme 3.2: Planned Patient Transport is an earmarked allocation amounting to R28 423 000 (2009/10), R31 330 000 (2010/11) and R33 749 000 (2011/12) for the purpose of Emergency Medical Services.

Table 6.3.1 Summary of provincial payments and estimates by economic classification – Programme 3: Emergency Medical Services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate	2040/44	2014/42
								2008/09	2010/11	2011/12
Current payments	217 824	247 063	301 357	352 350	359 059	373 642	451 435	20.82	497 606	536 026
Compensation of employees	157 556	167 467	204 437	246 905	251 614	257 881	291 716	13.12	321 552	346 378
Goods and services	59 477	79 275	95 907	105 445	107 445	115 089	159 719	38.78	176 054	189 648
Financial transactions in assets and liabilities	791	321	1 013			672		(100.00)		
Transfers and subsidies to	12 278	16 165	18 930	21 066	21 066	21 066	22 956	8.97	25 304	27 257
Provinces and municipalities	353	95								
Non-profit institutions	11 835	16 053	18 873	21 000	21 000	21 000	22 890	9.00	25 231	27 179
Households	90	17	57	66	66	66	66		73	78
Payments for capital assets	25 749	14 616	21 590	12 610	12 610	12 610	13 745	9.00	15 151	16 320
Buildings and other fixed structures	8 128									
Machinery and equipment	17 621	14 604	21 590	12 610	12 610	12 610	13 745	9.00	15 151	16 320
Software and other intangible assets		12								
Total economic classification	255 851	277 844	341 877	386 026	392 735	407 318	488 136	19.84	538 061	579 603

Details of transfers and subsidies:

Economic classification R'000	Outcome						Medium-term estimate			
	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Transfers and subsidies to (Current)	12 278	16 165	18 930	21 066	21 066	21 066	22 956	8.97	25 304	27 257
Provinces and municipalities	353	95								
Municipalities	353	95								
Municipalities	353	95								
of which										
Regional services council levies	353	95								
Non-profit institutions	11 835	16 053	18 873	21 000	21 000	21 000	22 890	9.00	25 231	27 179
Households	90	17	57	66	66	66	66		73	78
Social benefits	90	17	57	66	66	66	66		73	78
L										

Programme 4: Provincial Hospital Services

Purpose: Delivery of hospital services, which are accessible, appropriate, effective and provide general specialist services, including a specialised rehabilitation service, as well as a platform for training health professionals and research.

Analysis per sub-programme:

Sub-programme 4.1: General (Regional) Hospitals

rendering of hospital services at a general specialist level and a platform for training of health workers and research

Sub-programme 4.2: Tuberculosis Hospitals

to convert present tuberculosis hospitals into strategically placed centres of excellence in which a small percentage of patients may undergo hospitalisation under conditions, which allow for isolation during the intensive phase of treatment, as well as the application of the standardised multi-drug resistant (MDR) protocols

Sub-programme 4.3: Psychiatric/Mental Hospitals

rendering a specialist psychiatric hospital service for people with mental illness and intellectual disability and providing a platform for the training of health workers and research

Sub-programme 4.4: Rehabilitation Services

rendering of high intensity specialised rehabilitation services for persons with physical disabilities, including the provision of orthotic and prosthetic services

Sub-programme 4.5: Dental Training Hospitals

rendering an affordable and comprehensive oral health service and training, based on the primary health care approach

Policy developments:

Reshaping of the services in the provincial hospitals is key element in the implementation of the Comprehensive Service Plan.

Changes: policy, structure, service establishment, etc. Geographic distribution of services:

General Hospitals

From 2008/09 the Equitable Share funding of level 2 services in central hospitals was transferred from Programme 5 to Programme 4, with the separation of the management of level 2 and 3 services in the central hospitals. From 2009/10 Victoria Hospital will be designated as a district hospital with predominantly level one beds and shifted from Programme 4.1 to Programme 2.9 in District Health Services.

Acute hospital services

The appointment of level 2 heads is a key issue in the reconfiguration of services. In the Cape Metropole transformation of the services are managed across the Metro in a holistic manner and are divided organisationally into Metro East and Metro West.

Key priorities for acute hospital services include:

The implementation of the Acute Emergency Case Load Management Policy (AECLMP) and improve triage policy.

Strengthening emergency units at regional hospitals. Regional hospitals will play a central role in the clinical governance of emergency medicine across the districts.

The appointment of emergency medical specialists in the three rural regional hospitals, i.e. George, Worcester and Paarl Hospitals, to provide overall clinical governance across all emergency centres in the respective geographic areas.

Reconfiguration of functional internal medicine beds in the Metro East and Metro West and the uniform implementation of the outreach and support system for internal medicine in the three rural regions.

Shift of level 2 internal medicine services from GF Jooste Hospital to Groote Schuur Hospital.

Complete the shift of level 2 surgical service from Karl Bremer Hospital to Tygerberg Hospital with a quantum of level 2 outreach service to be maintained at Karl Bremer Hospital.

Level 2 elective surgical service shift for Mitchells Plain sub-district from GF Jooste Hospital to Groote Schuur Hospital.

Strengthening level 2 psychiatric services in regional hospitals by appointing one community psychiatrist per sub-structure with specialist clinics per district hospital, creating capacity for 10 more acute beds in the Associated Psychiatric Hospitals and additional specialist ambulatory services.

Increasing day surgery capacity and strengthen surgical capacity in rural regional hospitals.

Consolidation of level 2 orthopaedic services in the Metro East and Metro West.

Identification of orthopaedic procedures that can be shifted to day care surgery and to level 1 hospitals.

Implementing the Metro anaesthetic plan and the provision of outreach and support and after hour specialist support.

Strengthening anaesthetic capacity in the rural hospitals with additional sessional anaesthetic capacity at Worcester Hospital for outreach to the Overberg district.

Provision of specialist outreach services from level 2 gynaecology services.

Completion of the neonatal and paediatric service shifts in the Metro East and Metro West.

Strengthening responsiveness to the diarrhoeal season.

Strengthening kangaroo mother care in the rural regions.

Ambulatory care

The identification and quantification of the number of patients visiting outpatient departments that can be devolved to lower levels of care.

Relocation of first trimester termination of pregnancies.

Infectious disease management

Decanting stable ARV patients in regional hospitals to community health centres.

Improving the management of HIV and AIDS.

Implementation of TB control measures within general hospitals.

De-hospitalised care

Quantify the patients that fit the case definition who could be managed at the sub-acute level of care.

Tuberculosis Hospitals

Priorities for TB hospitals include:

Improving access to TB hospital beds and shifting sub-acute patients, in acute beds in general hospitals, to beds in TB hospitals. An additional 20 paediatric beds are to be commissioned at Harry Comay Hospital.

The audiology service at Brooklyn Chest Hospital will be expanded and will also serve DP Marais Hospital. This is important as the TB medication is potentially ototoxic. A soundproof audio booth will also be installed at Harry Comay Hospital.

In the light of the increasing acuity and co-morbidity of patients specialist outreach and support to TB hospitals needs to be systematically strengthened. The internal medicine departments of regional hospitals will assume responsibility of the clinical governance within TB hospitals.

Ensuring an efficient mechanism to shift stable TB patients from in-patient care facilities to primary health care and community-based services in order to create more capacity in TB hospitals.

Establishing accredited ARV services at DP Marais, Sonstraal and Harry Comay Hospitals.

The implementation of an integrated TB and HIV adherence model.

Improved clinical governance to enhance quality of care and reviewing the approach to managing chronic defaulters and the criteria for admission and discharge of patients to TB hospitals.

Establish capacity at Brooklyn Chest Hospital to manage acute, complex and often co-infected TB cases, with the appropriate clinical governance from level 2 internal medicine and paediatric units.

Attention will be given to improving the psychosocial element of care for patients in TB hospitals including the employment of additional counsellors and establishment of recreational facilities at all M(X)DR TB centres. A register with detailed incident reporting of all patients who abscond from treatment will be implemented.

Psychiatric Hospitals

The key priorities for psychiatric hospitals include:

To support general regional hospitals to continue with the commissioning of level 2 beds in line with the CSP and to integrate the assertive community team (ACT) services into acute adult services.

Ambulatory services will be strengthened to support District Health Services and day care centres will be established at each psychiatric facility which provides specialist rehabilitation for vulnerable groups.

The de-hospitalisation of chronic patients and the closure of chronic Intellectual Disability beds will continue towards the target of 100 patient discharges for 2009/10, with the shifting of funds to create more community-based residential places.

Fund level 3 (24 hour supervision) group home placements for people requiring an exit plan from sub-acute facilities to prevent unnecessary readmission to the psychiatric hospitals.

Increased stepdown facilities for stepdown patients have been created at William Slater House and Stikland House.

Rehabilitation Services

The following hospitals were previously classified as chronic medical hospitals: Maitland Cottage Hospital, Booth Memorial Hospital, Western Cape Rehabilitation Centre, Sarah Fox Hospital, St Joseph's Home, Malmesbury Infectious Diseases Hospital and Nelspoort Hospital. In 2006/07, Maitland Cottage Hospital, which is closely linked to Red Cross War Memorial Children's Hospital, was shifted to Programme 5, while the Booth Memorial Hospital, Sarah Fox Hospital and St Joseph's Home were shifted to Programme 2. From 2007/08 Nelspoort Hospital was allocated to sub-programme 2.4 and only Western Cape Rehabilitation Centre remains in sub-programme 4.4. For this reason as from the 2008/09 financial year the sub-programme has been designated as rehabilitation services. From 2008/09 the Orthotic and Prosthetic service was transferred from Sub-programme 7.3 to Sub-programme 4.4 and managed by the Western Cape Rehabilitation Centre.

Priorities include:

The Western Cape Rehabilitation Centre will provide technical expertise to the District Health Services to facilitate the development of community-based rehabilitation in terms of the objectives of the Comprehensive Service Plan.

The centre will continue to develop rehabilitation capacity at all levels through the presentation of training modules on wheelchair and buggy seating as well as the 3-week basic and 2-week advanced courses on neurological rehabilitation.

As one of six listed WHO training providers the WCRC will continue to develop capacity through training modules on wheelchair and buggy seating.

Efforts to find innovative ways to deal with the backlog in mobility, prosthetic and orthotic assistive devices will continue.

The plan to reduce waiting times for orthotic and prosthetic services will be incrementally implemented.

Commissioning the Health and Wellness Centre project for persons living with a disability in the communities of Mitchells Plain and Khayelitsha.

Providing support to the Mitchells Plain district hospital and sub-district community health centres as part of the implementation of the district health system and the CSP. The JAC pharmacy dispensing module which is one of the HIS modules is scheduled for implementation in early 2009/10 as part of the pharmaceutical support to the 'Mitchells Plain District Hospital' wards on the Lentegeur site.

Dental Training Hospitals

Services will continue within the platform provided for the training of dental health professionals.

A Comprehensive Oral Health Service Plan for the province has been developed and approved. Full implementation will be phased in as resources become available, however, the plan will ensure that existing staff and resources available to oral health services are more appropriately utilised.

The key priorities for dental training hospitals are:

Fluoridating the "oral environment" by means of the school fluoride rinsing and or brushing programme.

Selective fissure sealant which targets the first permanent molar teeth of grade 1 children in four schools.

Implementation of the primary oral care treatment package which includes early diagnosis and treatment of grade 1 learners, contingency care for the second to sixth school years which provides conservative care for permanent dentition and emergency care, and contingency care for high school children and adults on demand

There will be an aggressive oral health education and promotion programme focussing on mother and child care to address the profound problem of early childhood caries.

Expenditure trends analysis

Programme 4 is allocated 26.5 per cent of the vote during 2009/10 in comparison to the 26.97 per cent that was allocated in the 2008/09 revised budget. This amounts to a nominal increase of R262.670 million or 11.14 per cent. Funding for Victoria Hospital has been shifted from Sub-programme 4.1 to Sub-programme 2.9 from 2009/10.

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Service delivery measures

Prog	ramme/Sub-programme/Performance Measures	Estimated Annual Targets					
Fiby	annicious-programmer enormance measures	2009/10	2010/11	2011/12			
PROGRA	MME PERFORMANCE MEASURES						
Customis	ed: National specific)						
Programn	ne 4: Provincial Regional Hospitals						
Note: Fo	r each of the following indicators in Programme 4:						
Regiona	: Refers to level 2 services in regional hospitals						
Central:	Refers to level 2 services in central hospitals but funded from Programme 4						
Total:	Refers to the sum of level 2 activities in central and regional hospitals.						
Caesare	an section rate for regional hospitals – Total	35%	33%	33%			
Caesare	an section rate for regional hospitals – Regional	33%	33%	33%			
Caesare	an section rate for regional hospitals – Central	38%	33%	33%			
Number	of patient day equivalents in regional hospitals - Total	1 002 926	1 042 713	1 042 713			
Number	of patient day equivalents in regional hospitals – Regional	551 768	570 196	570 196			
Number	of patient day equivalents in regional hospitals - Central	451 158	472 517	472 517			
OPD tota	al headcounts in regional hospitals – Total	592 349	592 349	592 349			
OPD tota	al headcounts in regional hospitals – Regional	271 241	271 241	271 241			
OPD tota	al headcounts in regional hospitals – Central	321 108	321 108	321 108			
Casualty	/emergency/trauma headcount – Total	283 729	283 729	283 729			
Casualty	/emergency/trauma headcount – Regional	153 729	153 729	153 729			
Casualty	/emergency/trauma headcount – Central	130 000	130 000	130 000			
	nensive OPD total headcount in regional hospitals casualty/ emergency/trauma) – Total	876 078	876 078	876 078			
	al headcount in regional hospitals - casualty/ emergency/trauma) – Regional	424 970	424 970	424 970			
	al headcount in regional hospitals casualty/ emergency/trauma) - Central	451 108	451 108	451 108			
	ge of regional hospitals with patient satisfaction survey using plate – Total	100% [8/8]	100% [8/8]	100% [8/8]			
	ge of regional hospitals with patient satisfaction survey using plate – Regional	100% [5/5}	100% [5/5}	100% [5/5}			
	ge of regional hospitals with patient satisfaction survey using plate – Central	100% [3/3]	100% [3/3]	100% [3/3]			
	ge of regional hospitals with mortality and morbidity meetings nth – Total	100% [8/8]	100% [8/8]	100% [8/8]			
	ge of regional hospitals with mortality and morbidity meetings nth – Regional	100% [5/5}	100% [5/5}	100% [5/5}			
	ge of regional hospitals with mortality and morbidity meetings nth – Central	100% [3/3]	100% [3/3]	100% [3/3]			
– Total	ge of regional hospital with clinical audit meetings every month	100% [8/8]	100% [8/8]	100% [8/8]			
month –	ge of regional hospitals with clinical audit meetings every Regional	100% [5/5}	100% [5/5}	100% [5/5}			
month –		100% [3/3]	100% [3/3]	100% [3/3]			
Percenta – Total	ge of complaints resolved within 25 days in regional hospitals	100%	100%	100%			
Percenta – Regio i	ge of complaints resolved within 25 days in regional hospitals nal	100%	100%	100%			

Programme/Sub-programme/Performance Measures	Estimated Annual Targets				
Programme/Sub-programme/Performance measures	2009/10	2010/11	2011/12		
Percentage of complaints resolved within 25 days in regional hospitals - Central	100%	100%	100%		
Case fatality rate in regional hospitals for surgery separations – Total	3.85%	3.85%	3.85%		
Case fatality rate in regional hospitals for surgery separations – Regional	1.7%	1.8%	1.8%		
Case fatality rate in regional hospitals for surgery separations – Central	6%	6%	6%		
Average length of stay in regional hospitals – Total	4.5 days	4.5 days	4.5 days		
Average length of stay in regional hospitals – Regional	4 days	4 days	4 days		
Average length of stay in regional hospitals – Central	5 days	5 days	5 days		
Bed utilisation rate based on usable beds in regional hospitals – Total	88%	85%	85%		
Bed utilisation rate based on usable beds in regional hospitals – Regional	90%	85%	85%		
Bed utilisation rate based on usable beds in regional hospitals - Central (based on usable beds)	85%	85%	85%		
Total separations in regional hospitals – Total	175 867	195 838	195 838		
Total separations in regional hospitals – Regional	111 324	128 239	128 239		
Total separations in regional hospitals – Central	64 543	67 599	67 599		
Expenditure per patient day equivalent in regional hospitals- Total	R1 630	R1 667	R1 745		
Expenditure per patient day equivalent in regional hospitals- Regional	R1 313	R1 351	R1 414		
Expenditure per patient day equivalent in regional hospitals-Central	R2 019	R2 049	R2 145		
4.1 General Hospitals	2 242	2 400	2 400		
rogramme 4: Provincial Hospital Services					
Number of beds in regional hospitals- Total	2 342	2 400	2 400		
Number of beds in regional hospitals – Regional	1 307	1 316	1 316		
Number of beds in regional hospitals - Central	1 035	1 084	1 084		
Total number of patient days in regional hospitals - Total	723 126	769 663	769 663		
Total number of patient days in regional hospitals - Regional	400 412	431 670	431 670		
Total number of patient days in regional hospitals - Central	321 155	337 993	337 993		
4.2 Tuberculosis Hospitals					
	1 120	1 287	1 287		
Number of beds in TB hospitals	1 120				
Number of beds in TB hospitals Total number of patient days in TB hospitals	311 435	355 036	404 740		
·		355 036 424 380	404 740 424 380		
Total number of patient days in TB hospitals	311 435				
Total number of patient days in TB hospitals Number of patient day equivalents [PDE] in TB hospitals	311 435 349 460 2 076	424 380	424 380		
Total number of patient days in TB hospitals Number of patient day equivalents [PDE] in TB hospitals OPD total headcount in TB hospitals Percentage of TB hospitals with patient satisfaction survey using DoH	311 435 349 460 2 076 100%	424 380 2 117 100%	424 380 2 117 100%		
Total number of patient days in TB hospitals Number of patient day equivalents [PDE] in TB hospitals OPD total headcount in TB hospitals Percentage of TB hospitals with patient satisfaction survey using DoH template Percentage of TB hospitals with mortality and morbidity meetings every	311 435 349 460 2 076 100% [6/6] 100%	424 380 2 117 100% [6/6] 100%	424 380 2 117 100% [6/6] 100%		
Total number of patient days in TB hospitals Number of patient day equivalents [PDE] in TB hospitals OPD total headcount in TB hospitals Percentage of TB hospitals with patient satisfaction survey using DoH template Percentage of TB hospitals with mortality and morbidity meetings every month	311 435 349 460 2 076 100% [6/6] 100% [6/6] 100%	424 380 2 117 100% [6/6] 100% [6/6] 100%	424 380 2 117 100% [6/6] 100% [6/6] 100%		
Total number of patient days in TB hospitals Number of patient day equivalents [PDE] in TB hospitals OPD total headcount in TB hospitals Percentage of TB hospitals with patient satisfaction survey using DoH template Percentage of TB hospitals with mortality and morbidity meetings every month Percentage of TB hospitals with clinical audit meetings every month	311 435 349 460 2 076 100% [6/6] 100% [6/6] 100% [6/6]	424 380 2 117 100% [6/6] 100% [6/6] 100% [6/6]	424 380 2 117 100% [6/6] 100% [6/6] 100% [6/6]		
Total number of patient days in TB hospitals Number of patient day equivalents [PDE] in TB hospitals OPD total headcount in TB hospitals Percentage of TB hospitals with patient satisfaction survey using DoH template Percentage of TB hospitals with mortality and morbidity meetings every month Percentage of TB hospitals with clinical audit meetings every month Percentage of complaints resolved within 25 days in TB hospitals	311 435 349 460 2 076 100% [6/6] 100% [6/6] 100% [6/6]	424 380 2 117 100% [6/6] 100% [6/6] 100% [6/6] 100%	424 380 2 117 100% [6/6] 100% [6/6] 100% [6/6]		
Total number of patient days in TB hospitals Number of patient day equivalents [PDE] in TB hospitals OPD total headcount in TB hospitals Percentage of TB hospitals with patient satisfaction survey using DoH template Percentage of TB hospitals with mortality and morbidity meetings every month Percentage of TB hospitals with clinical audit meetings every month Percentage of complaints resolved within 25 days in TB hospitals Average length of stay in TB hospitals	311 435 349 460 2 076 100% [6/6] 100% [6/6] 100% [6/6] 100% 85 days	424 380 2 117 100% [6/6] 100% [6/6] 100% [6/6] 100% 85 days	424 380 2 117 100% [6/6] 100% [6/6] 100% [6/6] 100% 85 days		

	Estimated Annual Targets					
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12			
4.3 Psychiatric Hospitals						
Number of beds in specialist psychiatric hospitals	1 796	1 796	1 796			
Total number of patient days	557 209	568 580	580 184			
Number of stepdown beds	125	125	125			
Bed uitlisation rate of stepdown beds	85%	85%	85%			
Total number of patient days in stepdown beds	38 781	38 781	38 781			
Number of patient day equivalents [PDEs] in psychiatric hospitals	580 141	607 725	607 725			
OPD total headcount in psychiatric hospitals	22 932	22 932	22 932			
Percentage of psychiatric hospitals with patient satisfaction survey using DoH template	100% [4/4]	100% [4/4]	100% [4/4]			
Percentage of psychiatric hospitals with mortality and morbidity meetings every month	100% [4/4]	100% [4/4]	100% [4/4]			
Percentage of psychiatric hospitals with clinical audit meetings every month	100% [4/4]	100% [4/4]	100% [4/4]			
Percentage of complaints resolved within 25 days in psychiatric hospitals	100%	100%	100%			
Average length of stay in psychiatric hospitals	100 days	100 days	100 days			
Bed utilisation rate, based on useable beds, in psychiatric hospitals	85%	85%	85%			
Total separations in psychiatric hospitals	4,628	4,455	4,455			
Expenditure per patient day equivalent in psychiatric hospitals	R657	R667	R698			
4.4 Rehabilitation services						
Number of beds in WCRC	156	156	156			
Total number of patient days	49 600	51 246	51 246			
Number of orthotic and prosthetic devices manufactured.	5 610	6 910	6 910			
Percentage of orthotic and prosthetic devices requiring remanufacture.	2% (112/ 5 610)	2% (138 6 910)	2% (138/ 6 910)			
Number of patients on waiting list for orthotic and prosthetic services for over 6 months.	420	220	220			
Number of patient day equivalents in rehabilitation hospitals	51 804	53 079	53 079			
OPD total headcount in rehabilitation hospitals	6 137	6 200	6 200			
Percentage of rehabilitation hospitals with patient satisfaction survey using DoH template	100% [1/1]	100% [1/1]	100% [1/1]			
Percentage of rehabilitation hospitals with mortality and morbidity meetings every month	100% [1/1]	100% [1/1]	100% [1/1]			
Percentage of rehabilitation hospitals with clinical audit meetings every month	100% [1/1]	100% [1/1]	100% [1/1]			
Percentage of complaints resolved within 25 days in rehabilitation hospitals	100%	100%	100%			
Average length of stay in rehabilitation hospitals	50 days	47 days	45 days			
Bed utilisation rate, based on useable beds, in rehabilitation hospitals	85%	90%	90%			
Total separations in rehabilitation hospitals	1 004	1 139	1 139			
Expenditure per patient day equivalent in rehabilitation hospitals	R1 909	R1 981	R2 074			

Programme/Sub-programme/Performance Measures	Estimated Annual Targets					
Frogramme/Sub-programme/Ferrormance measures	2009/10	2010/11	2011/12			
4.5 Dental training hospitals						
Number of patient visits per annum	197 676	198 000	198 000			
Number or theatre cases per annum.	1 300	1 300	1 300			
Number of patients provided with dentures per annum.	1 500	1 500	1 500			
Number of students graduating per annum.	240	240	240			

Table 6.4 Summary of payments and estimates – Programme 4: Provincial Hospital Services

			Outcome						Medium-tern	n estimate	
	Sub-programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
1.	General Hospitals ^a	795 425	909 634	718 190	1 637 900	1 665 148	1 665 148	1 845 237	10.82	2 033 962	2 190 999
2.	Tuberculosis Hospitals ^a	66 116	76 379	101 671	122 463	134 575	134 575	155 621	15.64	171 537	184 781
3.	Psychiatric/Mental Hospitals ^a	279 060	300 496	344 390	377 700	388 523	388 523	430 171	10.72	474 168	510 777
4.	Chronic Medical Hospitals ^a	96 569	55 202	79 888	99 302	100 299	100 299	111 600	11.27	123 014	132 512
5.	Dental Training Hospitals ^a	58 735	55 924	61 888	68 612	70 096	70 096	78 682	12.25	86 729	93 426
Тс	otal payments and estimates	1 295 905	1 397 635	1 306 027	2 305 977	2 358 641	2 358 641	2 621 311	11.14	2 889 410	3 112 495

^a 2009/10: Conditional grant: Health professional training and development: R77 227 000 (Compensation of employees R50 197 000; Goods and services R27 030 000).

Note: Contributing factors to the decrease of funding in this programme in 2007/08 are the allocation of GF Jooste, Hottentots Holland and Karl Bremer Hospitals from sub-programme 4.1 to sub-programme 2.9 and Nelspoort Hospital from sub-programme 4.4 to sub-programme 2.4.

Note: The increase in 2008/09 is due to the shift of the equitable share funding for level 2 beds in the central hospitals that is allocated to sub-programme 4.1 from sub-programme 5.1 and Orthotic and Prosthetic Services previously in Sub-programme 7.4 been transferred to Sub-programme 4.4.

Note: Contributing factors to the decrease of funding in this programme in 2009/10 are the allocation of Victoria Hospital from sub-programme 4.1 to sub-programme 2.9.

Table 6.4.1 Summary of provincial payments and estimates by economic classification – Programme 4: Provincial Hospital Services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Current payments	1 208 538	1 371 149	1 292 376	2 290 862	2 332 104	2 332 104	2 587 418	10.95	2 852 051	3 072 251
Compensation of employees	805 659	880 442	877 609	1 546 622	1 568 100	1 568 100	1 735 946	10.70	1 913 494	2 061 230
Goods and services	402 669	490 215	414 480	744 240	764 004	763 870	851 472	11.47	938 557	1 011 021
Financial transactions in assets and liabilities	210	492	287			134		(100.00)		
Transfers and subsidies to	66 734	9 531	2 686	3 718	3 718	3 718	4 174	12.26	4 601	4 956
Provinces and municipalities	2 217	648								
Universities and technikons	6 877									
Non-profit institutions	55 533	6 018	1 021	1 115	1 115	1 115		(100.00)		
Households	2 107	2 865	1 665	2 603	2 603	2 603	4 174	60.35	4 601	4 956
Payments for capital assets	20 633	16 955	10 965	11 397	22 819	22 819	29 719	30.24	32 758	35 288
Buildings and other fixed structures			11							
Machinery and equipment	20 633	16 853	10 948	11 397	22 819	22 819	29 719	30.24	32 758	35 288
Software and other intangible assets		102	6							
Total economic classification	1 295 905	1 397 635	1 306 027	2 305 977	2 358 641	2 358 641	2 621 311	11.14	2 889 410	3 112 495

Details of transfers and subsidies:

		Outcome					Medium-term estimate				
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12	
Transfers and subsidies to (Current)	66 734	9 531	2 686	3 718	3 718	3 718	4 174	12.26	4 601	4 956	
Provinces and municipalities	2 217	648									
Municipalities	2 217	648									
Municipalities	2 217	648									
of which											
Regional services council levies	2 217	648									
Universities and technikons	6 877										
Non-profit institutions	55 533	6 018	1 021	1 115	1 115	1 115		(100.00)			
Households	2 107	2 865	1 665	2 603	2 603	2 603	4 174	60.35	4 601	4 956	
Social benefits	2 107	2 865	1 665	2 603	2 603	2 603	4 174	60.35	4 601	4 956	
L											

Programme 5: Central Hospital Services (Highly Specialised Services)

Purpose: To provide tertiary health services and create a platform for the training of health workers.

Analysis per sub-programme

Sub-programme 5.1: Central Hospital Services

rendering of a highly specialised medical health and **quaternary** services on a national basis and a platform for the training of health workers and research

Policy developments:

The central hospitals in the Western Cape, i.e. Groote Schuur, Tygerberg and Red Cross War Memorial Children's Hospitals, provide secondary, tertiary and quaternary care to the citizens of the Western Cape and from other provinces, largely the Eastern Cape.

Apart from the key decisions regarding the employment status of clinical heads of department, the final drafts for the bilateral and multilateral agreements between the Department and the four Institutes of Higher Education have been concluded. When approved these agreements will replace outdated Joint Agreements dating back to 1926 and will include the Universities of Stellenbosch, Cape Town, the Western Cape, and the Cape Peninsula University of Technology.

The total service platform accommodates 5.6 million health science student hours for students trained by the four Higher Educational Institutions. In future the various Institutes of Higher Education will have equal access to defined health facilities.

A Comprehensive Service Plan Working Group has been set up to facilitate the implementation of the CSP in the central hospitals and consists of the Deans of the Faculties of Health Sciences of the Universities of Cape Town and Stellenbosch and senior departmental officials.

The key changes in central hospitals to facilitate the implementation of the Comprehensive Service Plan include:

Differentiating tertiary and secondary services within each hospital for both inpatients and outpatients. The impact of this is illustrated by the fact that from 2008/09 the funding for level 2 services in the central hospitals was allocated to Programme 4.

Establishing a Unitary Western Cape Tertiary Service with a shared vision across the highly specialised services.

Ensuring equitable access to highly specialised services to all citizens of the Western Cape.

Ensuring appropriate organisational alignment to enable the management by level of care.

Co-ordinating clinicians: Since 2004 the Department has appointed co-ordinating clinicians in the major specialities to improve clinical governance, i.e. quality and safety of care, uniform clinical guidelines, seamless patient care management, ensuring the right patient gets managed at the right level right, and with the right skills and at the right costs. Co-ordinating clinicians devote fifty percent of their time to these functions across all levels of care across the province. The co-ordinating clinicians play a significant role in co-ordinating their specific discipline as well as the clinical governance within the Department and the responsibility will be assumed by the level 2 clinical heads once appointed during 2009.

Changes: policy, structure, service establishment, etc. Geographic distribution of services:

The CSP requires the establishment of a single Western Province Tertiary Services platform, in which performance and staff targets are guided by the CSP, and there is equal access to the platform and appropriate governance mechanisms across the platform. The process of refining the staff establishments as defined in the CSP has been completed at the Red Cross War Memorial Children's Hospital and is currently underway at Tygerberg Hospital and will commence at Groote Schuur Hospital early in 2009/10.

The service priorities for 2009/10 include:

Acute hospital services:

To improve the level 3 functionality by ensuring that the services function within the level 3 package of care and performance parameters.

Improve efficiencies to respond to service pressures, especially in emergency care, obstetrics and neonatal care, critical care and increasing theatre time and performance.

Continue to asses patient profiles in level 3 service areas to ensure these are appropriate for level 3 and redirect patients where appropriate, while providing outreach and support.

There will be a specific emphasis on child health with commitment to the progressive realisation of the rights of the child.

Establish lodging facilities for selected patients who need highly specialised services on a daily basis to complete their treatment programme but who do not need care between treatment sessions.

Ensure appropriate patients attending level 3 out patients and refer to other levels of care where appropriate.

Clinical governance:

Implement formal outreach and support to lower levels of care.

Improve infection prevention and control mechanisms, e.g. reduce the transmission or TB in hospitals by upgrading infrastructure and ensuring protection to prevent transmission.

Establish a Unitary Western Cape Tertiary Service.

Appoint level 2 clinical heads responsible for level 2 services in their respective disciplines in the various geographical areas.

Corporate governance:

Implement the recommendations of the Organisational Development investigation that is in progress.

Ensure availability of essential equipment to render efficient tertiary services.

Improved contract management.

Institutional specific annual operational plans to be developed for each central hospital.

Individual Central Hospitals

Red Cross War Memorial Children's Hospital (RCWMCH)

A key challenge is to improve point of entry per sub-district for acute paediatric cases, especially in the Klipfontein, Mitchells Plain and Khayelitsha sub-districts as these cases currently impact on the point of entry services at Red Cross War Memorial Children's Hospital.

The Red Cross Children's Hospital Trust continues to play an important role in the development of the hospital's infrastructure.

Tygerberg Hospital

Level 3 and part of level 2 surgical services were relocated from Karl Bremer Hospital to Tygerberg Hospital during 2008/09 and this will be completed during 2009/10 with a quantum of level 2 outreach services being maintained at Karl Bremer Hospital.

In internal medicine the level 2 services at Tygerberg Hospital will be consolidated with improved linkages to the level 2 services at Karl Bremer Hospital.

The CSIR was appointed to survey and report on the condition of Tygerberg Hospital, which is in urgent need of upgrading/renovation. The business case for the revitalisation of Tygerberg Hospital was approved by the National Department of Health but funding is not currently available. The possibility of handling this project as a public private partnership is being considered. Maintenance will continue until such time as the new structure is built.

Groote Schuur Hospital

In internal medicine the level 2 services for the Mitchells Plain sub-district will shift from GF Jooste Hospital to Groote Schuur Hospital.

Establish functional level 2 orthopaedic beds that are separate from the level 3 beds at Groote Schuur Hospital and develop and strengthen the outreach and support from Groote Schuur Hospital level 2 services to the services in the Metro West acute hospitals.

Other strategies:

The Modernisation of Tertiary Services (MTS) funds were primarily allocated to pilot the installation of a digital picture archiving and communication system (PACS) at Tygerberg Hospital during 2008/09, prior to rolling out the system to the rest of the province. This system enabled images to be viewed on a digital screen and paper copies to be printed as required. Once fully established all medical imaging services in the province will be linked through a provincial wide PADS/RIS system with telemedicine capacity. This system will require the support of a well functioning information system and its implementation is dependent upon stability being achieved in the current network. A priority allocation of R31.804 million is made for the Modernisation of Tertiary Services for 2009/10.

Expenditure trends analysis:

The central hospital services are allocated 19.32 per cent of the vote in 2009/10 in comparison to the 21.26 per cent of the vote that was allocated in the revised budget of 2008/09. This amounts to a nominal increase of R51.883 million or 2.79 per cent. This refers only to the funding for level 3 services. In addition to this the central hospitals receive equitable share funding which is allocated in Programme 4.

Budget*	Audited 2005/6	Audited 2006/7	Audited 2007/8	2008/9 Revised	2009/10	20010/11	20011/12
Office DDG	22 644	1 907	3 172	6 808	56 038	61 769	66 538
Programme 5							
Groote Schuur	838 628	910 050	996 525	1 126 151	1 221 965	1 346 944	1 450 938
Programme 4				277 931	341 185	376 080	405 117
Programme 5	838 628	910 050	996 525	848 220	880 780	970 864	1 045 821
Red Cross	245 946	265 999	312 876	359 120	384 056	423 336	456 021
Programme 4				74 771	59 936	66 066	71 167
Programme 5	245 946	265 999	312 876	284 349	324 120	357 270	384 854
Maitland Cottage		4 595	4 825	5 919	7 232	7 972	8 587
Programme 5							
Tygerberg	873 487	940 299	1 032 487	1 190 684	1 269 812	1 399 685	1 507 751
Programme 4				476 441	626 560	690 643	743 965
Programme 5	873 487	940 299	1 032 487	714 243	643 252	709 042	763 785
Total	1 980 705	2 123 000	2 349 884	2 688 682	2 939 103	3 239 706	3 489 835
Programme 4				829 143	1 027 681	1 132 789	1 220 249
Programme 5	1 980 705	2 123 000	2 349 884	1 859 539	1 911 422	2 106 917	2 269 586
Sum 3 hospitals	1 958 061	2 116 348	2 341 887	2 675 955	2 875 833	3 169 965	3 414 709
Programme 4				829 143	1 027 681	1 132 789	1 220 249
Programme 5	1 958 061	2 116 348	2 341 887	1 846 812	1 848 152	2 037 175	2 194 460
Cost of level 3 beds as	% of total cost o	f central hospit	als		64.26%	64.26%	64.26%

Analysis of budget for central hospitals

Service delivery measures

Customised: National specific) rogramme 5: Central and Tertiary Hospitals Caesarian section rate for central hospitals Number of patient day equivalents in central hospitals OPD Total headcount at central hospitals Percentage of central hospitals with a patient satisfaction survey using DoH template Percentage of central hospitals with mortality and morbidity meetings every month Percentage of central hospitals with clinical audit meetings every a month Percentage of complaints resolved within 25 days at central hospitals Case fatality rate in central hospitals for surgery separations Average length of stay in central hospitals Bed utilisation rate, based on useable beds, in central hospitals	Esti	mated Annual Ta	rgets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
PROGRAMME PERFORMANCE MEASURES			
(Customised: National specific)			
Programme 5: Central and Tertiary Hospitals			
Caesarian section rate for central hospitals	44%	44%	44%
Number of patient day equivalents in central hospitals	606 698	606 698	606 698
OPD Total headcount at central hospitals	486 538	486 538	486 538
Percentage of central hospitals with a patient satisfaction survey using DoH template	100%	100%	100%
Percentage of central hospitals with mortality and morbidity meetings every month	100%	100%	100%
Percentage of central hospitals with clinical audit meetings every a month	100%	100%	100%
Percentage of complaints resolved within 25 days at central hospitals	100%	100%	100%
Case fatality rate in central hospitals for surgery separations	3.5%	3.5%	3.5%
Average length of stay in central hospitals	6.5	6.5	6.5
Bed utilisation rate, based on useable beds, in central hospitals	83.00%	83.00%	83.00%
Total separations in central hospitals	68 387	68 387	68 387
Expenditure per patient day equivalent in central hospitals	R2 700	R2 870	R3 004

Programme/Sub-programme/Performance Measures	Est	imated Annual Ta	rgets
Programme/Sub-programme/Ferrormance measures	2009/10	2010/11	2011/12
PROGRAMME PERFORMANCE MEASURES			
(Customised: Provincial specific)			
Programme 5: Central Hospital Services			
5.1 Central Hospital Services			
Number of L3 beds in central hospitals	1 460	1 460	1 460
Total number of patient days in central hospitals	444 519	444 519	444 519
Number of L3 beds in Groote Schuur Hospital	607	607	607
Total number of patient days in Groote Schuur Hospital	184 810	184 810	184 810
Number of L3 beds in Tygerberg hospital	608	598	598
Total number of patient days in Tygerberg Hospital	185 115	182 070	182 070
Number of L3 beds in Red Cross Children's Hospital.	245	255	255
Total number of patient days in Red Cross Children's Hospital	74 594	77 639	77 639
Red Cross War Memorial Children's Hospital			
Caesarian section rate at Red Cross War Memorial Children's Hospital	Not applicable	Not applicable	Not applicable
Number of patient day equivalents at Red Cross War Memorial Children's Hospital	101 809	105 964	105 964
OPD Total headcount at Red Cross War Memorial Children's Hospital	81 645	84 977	84 977
Red Cross War Memorial Children's Hospital has a patient satisfaction survey using DoH template	Yes	Yes	Yes
Red Cross War Memorial Children's Hospital has mortality and morbidity meetings at least once a month	Yes	Yes	Yes
Red Cross War Memorial Children's Hospital has clinical audit meetings at least once a month	Yes	Yes	Yes
Percentage of complaints resolved within 25 days at Red Cross War Memorial Children's Hospital	100%	100%	100%
Case fatality rate for surgery separations at Red Cross War Memorial Children's Hospital	0.40%	0.40%	0.40%
Average length of stay at Red Cross War Memorial Children's Hospital	6.5	6.5	6.5
Bed utilisation rate, based on useable beds at Red Cross War Memorial Children's Hospital	83%	83%	83%
Total separations at Red Cross War Memorial Children's Hospital	11 476	11 944	11 944
Expenditure per patient day equivalent at Red Cross War Memorial Children's Hospital	R2 821	R2 882	R3 017
Groote Schuur Hospital			
Caesarian section rate at Groote Schuur Hospital	49%	49%	49%
Number of patient day equivalents at Groote Schuur Hospital	252 237	252 237	252 237
OPD Total headcount in Groote Schuur Hospital	202 280	202 280	202 280
Groote Schuur Hospital has a patient satisfaction survey using DoH template	Yes	Yes	Yes
Groote Schuur Hospital has mortality and morbidity meetings at least once a month	Yes	Yes	Yes
Groote Schuur Hospital has clinical audit meetings at least once a month	Yes	Yes	Yes
Percentage of complaints resolved within 25 days	80%	80%	80%
Case fatality rate in Groote Schuur Hospital for surgery separations	3.5%	3.5%	3.5%
Average length of stay at Groote Schuur Hospital	6.5	6.5	6.5
Bed utilisation rate , based on useable beds, at Groote Schuur Hospital	83%	83%	83%
Total separations at Groote Schuur Hospital	28 432	28 432	28 432

Drogramme/Sub programme/Derformence Macourse	Esti	mated Annual Ta	irgets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
Expenditure per patient day equivalent at Groote Schuur Hospital	R3 095	R3 290	R3 444
Tygerberg Hospital			
Caesarian section rate at Tygerberg Hospital	39%	39%	39%
Number of patient day equivalents at Tygerberg Hospital	252 652	248 497	248 497
OPD total headcount at Tygerberg Hospital	202 613	199 281	199 281
Tygerberg Hospital has a patient satisfaction survey using DoH template	Yes	Yes	Yes
Tygerberg Hospital has mortality and morbidity meetings at least once a month	Yes	Yes	Yes
Tygerberg Hospital has clinical audit meetings at least once a month	Yes	Yes	Yes
Percentage of complaints resolved within 25 days at Tygerberg Hospital	100%	100%	100%
Case fatality rate in Tygerberg Hospital for surgery separations	3.5%	3.5%	3.5%
Average length of stay at Tygerberg Hospital	6.5	6.5	6.5
Bed utilisation rate, based on useable beds, at Tygerberg Hospital	83.00%	83.00%	83.00%
Total separations at Tygerberg Hospital	28 479	28 011	28 011
Expenditure per patient day equivalent at Tygerberg Hospital	R2 256	R2 439	R2 553

Table 6.5 Summary of payments and estimates – Programme 5: Central Hospital Services

	Outcome						Medium-term estimate			
Sub-programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 09/10 2008/09 2		2011/12
1. Central Hospital Services ^{a,b}	1 980 705	2 123 000	2 349 884	1 801 295	1 859 539	1 859 539	1 911 422	2.79	2 106 917	2 269 586
Total payments and estimates	1 980 705	2 123 000	2 349 884	1 801 295	1 859 539	1 859 539	1 911 422	2.79	2 106 917	2 269 586

^a 2009/10: Conditional grant: National tertiary services: R1 583 991 000 (Compensation of employees R997 914 000; Goods and services R570 237 000 and Machinery and Equipment R15 840 000).

^b 2009/10: Conditional grant: Health professional training and development: R200 000 000 (Compensation of employees R150 000 000; Goods and services R50 000 000).

Note: Contributing factors to the decrease in funding in 2008/09 is the shift of the equitable share funding for level 2 beds in the central hospitals that is allocated to sub-programme 4.1.

Note: The 2009/10 allocation for this programme is mainly based on the Conditional grants for National tertiary services and Health professional training and development, with a small equitable share component. The low increase in this programme is due to the low increases in these conditional grants. This does not mean that the hospitals are allocated less funds in real terms. The total budgets of the three Central hospitals (in both sub-programmes 5.1 and 4.1) increased by 8.6 per cent.

Table 6.5.1 Summary of provincial payments and estimates by economic classification – Programme 5: Central Hospital Services

		Outcome						Medium-term	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	1 863 190	2 034 319	2 275 510	1 750 422	1 792 919	1 792 919	1 827 940	1.95	2 014 897	2 170 46
Compensation of employees	1 146 347	1 293 684	1 500 187	1 158 490	1 167 984	1 167 984	1 184 831	1.44	1 306 012	1 406 8
Goods and services	716 460	740 484	774 448	591 932	624 935	624 694	643 109	2.95	708 885	763 6
Financial transactions in assets and liabilities	383	151	875			241		(100.00)		
Transfers and subsidies to	46 193	8 560	8 555	7 650	7 650	7 650	10 433	36.38	11 500	12 3
Provinces and municipalities	3 222	857								
Universities and technikons	40 260									
Non-profit institutions		4 595	4 825	5 919	5 919	5 919	7 232	22.18	7 972	8 5
Households	2 711	3 108	3 730	1 731	1 731	1 731	3 201	84.92	3 528	38
Payments for capital assets	71 322	80 121	65 819	43 223	58 970	58 970	73 049	23.87	80 520	86 7
Machinery and equipment	71 275	80 121	65 819	43 223	43 920	43 920	73 049	66.32	80 520	86 7
Software and other intangible assets	47				15 050	15 050		(100.00)		
Total economic classification	1 980 705	2 123 000	2 349 884	1 801 295	1 859 539	1 859 539	1 911 422	2.79	2 106 917	2 269 5

Details of transfers and subsidies:

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Transfers and subsidies to (Current)	46 193	8 560	8 555	7 650	7 650	7 650	10 433	36.38	11 500	12 388
Provinces and municipalities	3 222	857								
Municipalities	3 222	857								
Municipalities of which	3 222	857								
Regional services council levies	3 222	857								
Universities and technikons	40 260									
Non-profit institutions		4 595	4 825	5 919	5 919	5 919	7 232	22.18	7 972	8 587
Households	2 711	3 108	3 730	1 731	1 731	1 731	3 201	84.92	3 528	3 801
Social benefits Other transfers to households	2 711	3 008 100	3 730	1 731	1 731	1 731	3 201	84.92	3 528	3 801
L										

Programme 6: Health Sciences and Training

Purpose: Rendering of training and development opportunities for actual and potential employees of the department of Health.

Analysis per sub-programme:

Sub-programme 6.1: Nurse Training College

training of nurses at undergraduate, and post-basic level. Target group includes actual and potential employees

Sub-programme 6.2: Emergency Medical Services (EMS) Training College

training of rescue and ambulance personnel. Target group includes actual and potential employees

Sub-programme 6.3: Bursaries

provision of bursaries for health science training programmes at undergraduate and postgraduate levels. Target group includes actual and potential employees

Sub-programme 6.4: Primary Health Care (PHC) Training

provision of PHC related training for personnel, provided by the regions

Sub-programme 6.5: Training (Other)

provision of skills development interventions for all occupational categories in the department. Target group includes actual and potential employees

Policy developments:

The Human Resource Development Strategy was developed and adopted during 2008/09.

The Department adopted a Provincial Nursing Strategy in March 2007 and a formal Nurse Training Framework and is in the process of implementing this strategy.

Develop an integrated framework for the co-ordination of training for emergency care practitioners in the Western Cape.

Develop a policy framework with regard to funding models for the implementation of skills development.

Develop a framework for the improvement and maintenance of competence project for health professionals at district level (iMOCOMP).

A competency profile assessment will be conducted in phases from August 2008 to March 2010 to address the human resource development requirements arising from the CSP and the Human Resource Plan.

Changes: policy, structure, service establishment, etc. Geographic distribution of services:

The achievement of Healthcare 2010 is dependent on the provision of a constant supply of health science professionals and support staff at sustainable levels to ensure effective service delivery. Training interventions must be informed by health service needs and priorities and designed in such a way as to ensure that learners are empowered to assume responsibilities and challenges of realities in the workplace.

Nurse training:

Currently the training of nurses is fragmented. Therefore an Integrated Nursing Education Model has been developed which seeks to establish the nursing schools as satellite campuses of the Western Cape College of Nursing (WCCN). Currently there is no approved nursing school offering a one-year midwifery training course and midwives are therefore only trained as part of the four-year diploma or degree registered nurse courses. The WCCN has submitted a midwifery curriculum to the South African Nursing Council for approval. If the curriculum is approved it will be used by the nursing schools and the proposed Mowbray Nursing School as a satellite campus of the WCCN. There is a similar shortage of registered nurses with psychiatric nursing training which is also only available as part of the four-year course diploma or degree course. However, the one-year psychiatric nursing science diploma has been recently approved for the Associated Psychiatric Hospital nursing campus and the first 12 students commenced their training in July 2008.

Emergency medical services training (EMS):

The academic capacity for training EMS personnel consist of training staff in EMS and the staff of the Cape Peninsula University of Technology (CPUT) with whom the Department has a memorandum of understanding.

A midlevel category of Emergency Care Practitioner, trained through an Emergency Care Technician (ECT) course forms part of the future staffing cadre and will ultimately replace the Basic and Intermediate Life Support categories. This qualification has been approved by the Health Professions Council of South Africa (HPCSA) with CPUT commencing training during 2008.

Advanced life support (paramedic) training can be obtained via a National Diploma (three years) or via a CCA which takes nine months.

Emergency services personnel with rescue qualifications are urgently required and although there are modules that are recognised by the HPSA the training mandate is still being finalised.

Key priorities therefore include:

- Increasing the critical mass of personnel with all levels of qualifications.
- Formalising medical rescue training.
- Formalising emergency communications training.

Bursaries:

Bursaries are granted for higher education to both serving and prospective employees as a tool for recruitment and retention and are awarded for all relevant categories of training.

A challenge is the unavailability of ring-fenced posts into which to recruit graduate bursars which affects the Departments ability to recruit newly qualified personnel and creates financial risk to the Department as a result of non-recoverable debt if the graduate bursars are unemployed.

Primary Health Care:

The Improvement of the Maintenance of Competencies Project (iMOCOMP) is based on a partnership between District Health Services and the four Higher Education Institutions in the Western Cape. The purpose of the training is to maintain the skills and knowledge amongst academically isolated health professionals in the rural and peri-urban areas.

Training and development:

Various training programmes are provided to all categories of staff based on priorities identified in the Workplace Skills Plan and the CSP.

The Expanded Public Works Programme (EPWP)

The EPWP provides training to community care givers employed by non profit organisations to deliver community based services. The strategy also provides stipend work opportunities and or training to relief workers who are recruited from the community.

Expenditure trends analysis:

Programme 6 is allocated 1.93 per cent of the vote in 2009/10 in comparison to the 2.05 per cent allocated in the revised estimate of 2008/09. This amounts to a nominal increase of R12.224 million or 6.82 per cent.

There is also an earmarked allocation of R7.475 million in 2009/10 to the Emergency Medicine Training College.

Service delivery measures

	Esi	timated Annual Targe	ets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
PROGRAMME PERFORMANCE MEASURES			
(Customised: National specific)			
Programme 6: Health Sciences and Training			
Intake of medical students (Number)	1 780	1 869	1 869
Intake of nurse students (Number)	1 236	1 557	1 557
Number of students with bursaries from the province	3 055	3 340	3 340
Attrition rates in first year of medical school (Percentage)	4%	4%	4%
Attrition rates in first year of nursing school (Percentage)	10%	10%	10%
Number of basic medical students graduating	320	402	402
Number of basic nurse students graduating.	299	400	400

	E	Estimated Annual Targets				
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12			
Number of medical registrars graduating.	44	44	44			
Number of advanced nurse students graduating.	199	199	199			
Average training cost per basic nursing graduate (Rand)	R14 000	R15 300	R15 300			
Development component of HPT & D grant spent	0%	0%	0%			
Programme 6: Health Sciences and Training						
6.1 Nursing						
Number of Registered Nurses in training at WCCN (Post Basic [Advanced] Diploma R212)	90	105	200			
Number of Registered Nurses in training at WCCN (Post Basic Diploma R48)	30	160	190			
Number of Registered Nurses in training at WCCN (Diploma R254)	30	50	50			
Number of Registered Nurses in training at WCCN (Diploma R880)	25	50	50			
Number of Student Nurses in training at WCCN (Basic Diploma R425)	1 185	1 448	1 687			
Total number of nurses in training at the WCCN I	1 360	1 813	2 177			
Number of Registered Nurses in training at the nursing schools (Bridging i.e. R683)	70	150	150			
Number of sub-categories of nurses in training at the nursing schools (Mid-level workers i.e. R2175)	265	265	275			
Number of sub-categories of nurses in training at the nursing schools (Mid-level workers i.e. R2176)-	70	70	70			
Total number of nurses in training t the Nursing Schools	405	485	495			
Total number of nursing students in training	1 765	2 298	2 672			
Sub-programme 6.2: EMS Training						
Number of student intake for the National Diploma EMC	25	30	30			
Number of student intake for the Critical Care Assistant (CCA) (Paramedic) course	18	12	12			
Number of student intake for the Ambulance Emergency Assistant (AEA) (5-months course)	82	72	72			
Number of student intake for the Basic Ambulance Assistant (BAA) (5- week course)	120	144	144			
Number of student intake for the Medical Rescue Training course	90	100	100			
Number of student intake for emergency service continuous medical training (CME Training) (1 or 2 day courses)	480	500	500			
Number of student intake for Emergency Communications	44	48	48			
Number of student intake for the National Certificate in Communications	30	40	50			
Number of graduates from the National Diploma: EMC	25	25	25			
Number of graduates from the Critical Care Assistant (CCA) Paramedic course	10	20	20			
Number of graduates from the Ambulance Emergency Assistant (AEA) course (5- months course)	65	65	65			
Number of graduates from the Basic Ambulance Assistant (BAA) course (5-week course)	122	122	122			
Number of graduates from the Medical Rescue Training course	90	90	90			
Number of graduates from the emergency Continuous Medical Education (CME) Training (1 or 2 day courses)	480	480	480			
Number of graduates from the Emergency Communications Training ¹	44	44	44			
Number of graduates from the National Certificate in Communications	40	50	60			

	E	stimated Annual Tar	rgets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
GRAND TOTAL:	836	876	876
Number of learners to complete programmes per year.			
Sub-programme 6.3: Education : Bursaries			
Number of students with bursaries			
Number of nursing professionals with bursaries	2 210	2 340	2 574
Number of health professionals with bursaries	394	419	461
Number of other professionals with bursaries	11	12	13
Number of other professionals with bursaries	440	569	626
Number of graduating nursing professional bursars	314	346	381
Number of graduating health professional bursars	43	47	52
Number of graduating other professional bursars	6	6	6
Number of graduating support services bursars	352	387	426
Sub-Programme 6.4: Primary Health Care (PHC) iMOCOMP			
Number of people trained through iMOCOMP	2 200	3 000	3 300
Administrative levy payable to HWSETA in terms of skills development legislation.	R2,394 m	R2,514 m	R2,640 m
Number of Community Care Givers (CCGs) learners	2 000	2 400	2 600
Number of graduating Community Care Givers (CCGs)	1 800	2 160	2 340
Number of data capturers interns	108	120	-

Table 6.6 Summary of payments and estimates – Programme 6: Health Sciences and Training

			Outcome					Medium-term estimate			
	Sub-programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
1.	Nursing Training College	32 812	26 746	32 117	36 467	36 955	36 955	40 397	9.31	44 529	47 967
2.	Emergency Medical Services Training Colleges	3 104	3 705	6 152	7 359	7 461	7 461	7 475	0.19	8 240	8 876
3.	Bursaries	41 098	50 397	52 178	56 145	56 145	56 145	61 198	9.00	67 457	72 665
4.	Primary Health Care Training				1	1	1	1		1	1
5.	Training Other	1 995	18 010	43 259	78 548	78 548	78 548	82 263	4.73	90 677	97 678
Тс	otal payments and estimates	79 009	98 858	133 706	178 520	179 110	179 110	191 334	6.82	210 904	227 187

Earmarked allocation:

Included in sub-programme 6.2: Emergency Medical Services Training Colleges is an earmarked allocation amounting to R7 475 000 (2009/10), R8 240 000 (2010/11) and R8 876 000 (2011/12) for the purpose of Emergency Medical Services.

Table 6.6.1Summary of provincial payments and estimates by economic classification – Programme 6:
Health Sciences and Training

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	35 959	47 330	69 237	101 211	93 413	93 413	99 813	6.85	110 022	118 517
Compensation of employees	26 787	20 605	25 243	30 948	31 538	31 538	35 932	13.93	39 607	42 665
Goods and services	9 139	26 699	43 981	70 263	61 875	61 806	63 881	3.36	70 415	75 852
Financial transactions in assets and liabilities	33	26	13			69		(100.00)		
Transfers and subsidies to	42 339	51 210	63 746	76 424	84 692	84 692	90 937	7.37	100 238	107 977
Provinces and municipalities	66	14								
Departmental agencies and accounts	1 947	2 045	2 169	2 801	2 801	2 801	2 997	7.00	3 304	3 559
Universities and technikons	2 267	1 275	1 400	1 567	1 567	1 567	1 708	9.00	1 883	2 028
Non-profit institutions			12 000	19 732	28 000	28 000	30 000	7.14	33 068	35 621
Households	38 059	47 876	48 177	52 324	52 324	52 324	56 232	7.47	61 983	66 769
Payments for capital assets	711	318	723	885	1 005	1 005	584	(41.89)	644	693
Machinery and equipment	711	318	723	885	1 005	1 005	584	(41.89)	644	693
Total economic classification	79 009	98 858	133 706	178 520	179 110	179 110	191 334	6.82	210 904	227 187

Details of transfers and subsidies:

		Outcome						Medium-term estimate			
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12	
Transfers and subsidies to (Current)	42 339	51 210	63 746	76 424	84 692	84 692	90 937	7.37	100 238	107 977	
Provinces and municipalities	66	14									
Municipalities	66	14									
Municipalities	66	14									
of which											
Regional services council levies	66	14									
Departmental agencies and accounts	1 947	2 045	2 169	2 801	2 801	2 801	2 997	7.00	3 304	3 559	
Entities receiving transfers	1 947	2 045	2 169	2 801	2 801	2 801	2 997	7.00	3 304	3 559	
SETA	1 947	2 045	2 169	2 801	2 801	2 801	2 997	7.00	3 304	3 559	
Universities and technikons	2 267	1 275	1 400	1 567	1 567	1 567	1 708	9.00	1 883	2 028	
Non-profit institutions			12 000	19 732	28 000	28 000	30 000	7.14	33 068	35 621	
Households	38 059	47 876	48 177	52 324	52 324	52 324	56 232	7.47	61 983	66 769	
Social benefits	101	46	3	90	90	90	98	8.89	108	117	
Other transfers to households	37 958	47 830	48 174	52 234	52 234	52 234	56 134	7.47	61 875	66 652	

Programme 7: Health Care Support Services

Purpose: To render support services required by the Department to realise its aims.

Analysis per sub-programme:

Sub-programme 7.1: Laundry Services

rendering a laundry service to hospitals, care and rehabilitation centres and certain local authorities

Sub-programme 7.2: Engineering Services

rendering a maintenance service to equipment and engineering installations, and minor maintenance to buildings

Sub-programme 7.3: Forensic Services

rendering specialised forensic and medico-legal services in order to establish the circumstances and causes surrounding unnatural death. This function has been transferred from sub-programme 2.8

Sub-programme 7.4: Orthotic and Prosthetic Services

rendering specialised orthotic and prosthetic services

Sub-programme 7.5: Medicine Trading Account

managing the supply of pharmaceuticals and medical sundries to hospitals, community health centres and local authorities

Policy developments:

Engineering services:

The Department has accepted that urgent attention needs to be paid to improving the maintenance of health facilities and medical equipment.

In 2007 the Department of Health appointed the CSIR to carry out a situational analysis and make recommendations to substantially improve the maintenance of both buildings and equipment. The CSIR confirmed that the Department has a serious backlog in respect of maintenance work, which confirmed the need for additional funding. They concluded that there is a serious lack of capacity to effectively manage the maintenance function.

The key recommendations made by the CSIR guide the policy direction in respect of maintenance. These are currently being addressed and are as follows:

Maintenance terms and definitions have been developed and are included in the maintenance policy document. These are required for policy and the service delivery agreements. These were issued during the 2008/09 financial year.

Immovable Asset Register (IAR)

Currently there is no up-to-date immovable asset register of the Department of Health's estate; without which it is difficult to plan, manage and maintain health facilities in a fully co-ordinated manner.

IDIP is assisting the Department to update the Western Cape Department of Health IAR which will comply with the legislative requirements and guidelines laid down by National Treasury, the National Department of Health and GIAMA. The IDIP technical assistant is assisting Department prepare its User Asset Management Plan (U-AMP), a GIAMA requirement.

In terms of GIAMA the Department of Transport and Public Works has to prepare a Custodian Asset Management Plan (C-AMP) if appointed as the custodian of immovable property in each Province.

Condition assessment

The last formal assessment of the condition of the Department of Health's estate was undertaken in 1995/6. The property portfolio has not been kept up to date by the Department of Works and Public Works and IDIP will need to work with the Departments of Transport and Public Works, and Health to ensure new condition surveys are undertaken. Without these it is not possible to accurately plan maintenance proactively or motivate for an acceptable level of funding for planned and backlog maintenance.

It is the intention that following the development of the updated IAR, a condition assessment be undertaken by the Department of Transport and Public Works, using the structured process recommended by the National Department of Health, so that the requirements of GIAMA can be fully addressed. In addition the Department of Transport and Public Works have to value each facility in terms of GIAMA.

Funding estimates

Using the IAR and the condition assessment the funding required for normal maintenance and backlog maintenance will be determined.

A strategy will be determined to proactively address the backlog.

This plan will be consolidated into an approach to National Treasury for special funding in consultation with the Department of Transport and Public Works and Treasury.

Changes: policy, structure, service establishment, etc. Geographic distribution of services:

Laundries:

The infrastructure or provincial laundries has been significantly upgraded in the last two financial years and the systematic replacement of equipment will continue during the 2009/10 financial year.

It is planned to upgrade the Lentegeur Laundry as part of the new Mitchells Plain Hospital Revitalisation Project which will include the purchase of new equipment.

Engineering services:

Changes: policy, structure, service establishment, etc. Geographic distribution of services

To start addressing the maintenance backlog, the CSIR provided a list of actions that could lead to "quick wins". An additional R10 million was allocated to the Programme 7.2 budget in 2008/09, a portion of which was aimed at implementing the "quick wins". This additional amount will be allocated again annually.

The following have been addressed in terms of the "quick wins" identified by the CSIR.

The Engineering organogram has been reviewed and was forwarded to HRM Directorate in October for further attention.

The maintenance management framework document (MMF) was aligned according to the maintenance policy requirements. The maintenance policy is now 90 per cent complete.

All available equipment operation and maintenance manuals have been distributed to hospital maintenance staff.

The procedures for appropriate cost allocation of maintenance work for 2009/10 has been documented and will be finalised with all the role players early in 2009.

The maintenance budget has been ring-fenced to prevent misutilsation of maintenance funds. Treasury has earmarked maintenance funding which is subject to quarterly reporting.

District office managers were given maintenance protocols defining the levels of maintenance and budgeting for maintenance.

Comprehensive maintenance management systems have been set up at the George and Worcester Hospitals. However, these systems may be too costly for full roll out to all hospitals in the Province.

A basic condition and suitability assessment of rural clinics was completed in 2008. The Provincial Government has assumed responsibility for the service rendered by these clinics and the property is being transferred into the name of the Provincial Government. The assessment will inform maintenance budgeting and prioritisation.

An Engineering and Technical Support Services Maintenance web page will be available during 2009 on the existing provincial network to consolidate all relevant documentation (policy, guidelines, manuals, etc.) in a version controlled environment.

In 2007 the Department of Health submitted a business case for the implementation of the Infrastructure Development Improvement Programme (IDIP). National Treasury is currently funding IDIP and a technical assistant has been attached to the Department of Health. He has been assisting the Department, along with his other duties, to implement the CSIR recommendations.

One of the first assignments for the Health Technical Assistant (HTA) was to carry out an organisational review of infrastructure delivery within the Department. The review proposed that a new Infrastructure Management Unit was required and ratification is now awaited from Provincial Cabinet for a new Chief Directorate of Infrastructure Management to be created. A Maintenance Policy has been drafted and the HTA is currently involved with the WCDH GIAMA responsibilities and asset management system.

Forensic Pathology Services (FPS)

Forensic Pathology Service (FPS) renders a service via two academic Forensic Pathology Laboratories in the Metro, three referral FPS Laboratories and smaller FPS Laboratories and Holding Centres in the West Coast, Cape Winelands, Overberg, Eden and Central Karoo Districts.

The Forensic Pathology Service (FPS) renders a standardised, objective, impartial and scientifically accurate service, which complies with national protocols and procedures for the medico-legal investigation of death to serve the judicial processes in the Western Cape.

There is concern that medico-legal cases are under-reported. The Department has therefore identified the need to improve the Forensic Pathology Services in the rural districts. The high workload impacts on the ability to recruit and retain personnel to the service, which is compounded by the fact that the universities are not training sufficient forensic pathologists.

Expenditure trends analysis:

Programme 7 is allocated 1.80 per cent of the vote in 2009/10 in comparison to the 1.12 per cent allocated in the 2008/09 adjusted budget. This amounts to a nominal increase of R80.040 million or 81.73 per cent, which is largely the result of the shift of Forensic Pathology Services from Sub-programme 2.8 to Sub-programme 7.3 from 2009/10 and the earmarked allocation of R58.088 million for maintenance, R64.163 million in 2010/11 and R69.163 million in 2011/12.

	Est	imated Annual Ta	rgets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
PROGRAMME PERFORMANCE MEASURES			
(Customised: Provincial specific)			
Programme 7: Health Care Support Services			
7.1 Laundries			
Total number of pieces of linen laundered:	20.5 m	20.5 m	21 m
Number of pieces of linen laundered: in-house laundries.	15 m	15 m	15.5 m
Number of pieces of linen laundered: outsourced services.	5.5 m	5.5 m	5.5 m
Average cost per item laundered in in-house laundries.	R1.90	R1.95	R2.00
Average cost per item laundered in out-sourced laundries.	R1.70	R1.70	R1.80
7.2 Engineering			
Maintenance backlog as % of replacement value	6% 800m/ 13bn	6% 800m/ 13bn	5% 700m/ 13bn
Cost of utilities per bed	R7 300	R7 300	R7 500
Number of reportable incidents in terms of Occupational Health and Safety Act	160	160	150
Number of maintenance jobs completed both in-house and outsourced	13 000	13 100	13 200
7.3 Forensic Services			
Percentage of posts filled according to Human Resource Plan	92% (282/306)	92% (282/306)	92% (282/306)
Percentage of autopsies performed	80% (8 000/10 000)	85% (8 500/10 000)	85% (8 500/10 000)
Average Forensic Pathology Services response time (from receipt of call to arrival on scene)	38 minutes	38 minutes	38 minutes
Percentage of Forensic Pathology Services personnel budget spent on training	1.5% 679 350/ 45 290 000	1.5% 757 920/ 50 528 000	1.5% 818 550/ 54 570 000
7.5 Medicine Trading Account			
Working capital	R58.3 million	R62.9 million	R68 million

Service delivery measures

Table 6.7 Summary of payments and estimates – Programme 7: Health Care Support Services

			Outcome						Medium-tern	n estimate	
	Sub-programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
1.	Laundry Services	38 230	46 547	34 696	45 181	45 636	45 636	48 998	7.37	54 009	58 179
2.	Engineering Services	31 620	33 615	35 732	50 330	50 727	50 727	58 088	14.51	64 163	69 163
3.	Forensic Services ^a	7 288			1	1	1	69 176	6917500.00	78 037	70 226
4.	Orthotic and Prosthetic Services	8 621	8 700	9 946	1	1	1	1		1	1
5.	Medicine Trading Account	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
Т	otal payments and estimates	93 075	92 906	81 785	97 086	97 938	97 938	177 978	81.73	198 100	199 605

^a 2009/10: Conditional grant: Forensic pathology services: R58 484 000 (Compensation of employees R45 290 000; Goods and services R12 546 000 and Machinery and Equipment R648 000).

Note: The Orthotic and Prosthetic Services previously in Sub-programme 7.4 has been transferred to Sub-programme 4.4 with effect from 1 April 2008.

Note: The Forensic Services previously in Sub-programme 2.8 has been transferred to Sub-programme 7.3 with effect from 1 April 2009.

Earmarked allocation:

Included in sub-programme 7.2: Engineering is an earmarked allocation amounting to R58 088 000 (2009/10), R64 163 000 (2010/11) and R69 163 000 (2010/11) for the purpose of Maintenance.

Table 6.7.1 Summary of provincial payments and estimates by economic classification – Programme 7: Health Care Support Services

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Current payments	83 901	74 014	79 832	94 454	95 306	95 306	174 771	83.38	194 566	195 796
Compensation of employees	40 920	39 360	43 953	44 672	45 524	45 524	104 681	129.95	116 127	114 057
Goods and services	42 949	34 441	35 858	49 782	49 782	49 700	70 090	41.03	78 439	81 739
Financial transactions in assets and liabilities	32	213	21			82		(100.00)		
Transfers and subsidies to	7 451	4 067	1 554	1 907	1 907	1 907	2 085	9.33	2 298	2 475
Provinces and municipalities	104	23								
Departmental agencies and accounts	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
Households	31		143	334	334	334	370	10.78	408	439
Payments for capital assets	1 723	14 825	399	725	725	725	1 122	54.76	1 236	1 334
Buildings and other fixed structures	48									
Machinery and equipment	1 675	14 825	399	725	725	725	1 122	54.76	1 236	1 334
Total economic classification	93 075	92 906	81 785	97 086	97 938	97 938	177 978	198 100	199 605	82

Details of transfers and subsidies:

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Transfers and subsidies to (Current)	135	23	143	334	334	334	370	10.78	408	439
Provinces and municipalities	104	23								
Municipalities	104	23								
Municipalities	104	23								
of which										
Regional services council levies	104	23								
Households	31		143	334	334	334	370	10.78	408	439
Social benefits	31		143	334	334	334	370	10.78	408	439
Transfers and subsidies to (Capital)	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
Departmental agencies and accounts	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
Entities receiving transfers	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
CMD Capital Augmentation	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
L										

Table 6.7.2 Payments and estimates - Details of Central Medical Trading Account

			Outcome						Medium-term	n estimate	
	Sub-programme R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
		2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
1.	Administration	24 648	24 359	21 848	29 750	36 730	36 730	32 850	(10.56)	36 074	36 074
2.	Medicine Provision	284 321	293 711	312 868	381 865	342 000	342 000	420 000	22.81	462 000	462 000
Т	otal payments and estimates	308 969	318 070	334 716	411 615	378 730	378 730	452 850	19.57	498 074	498 074

Note:

The numbers indicated for the financial years 2005/06 to 2007/08 are calculated/based on the cash basis and not the accrual basis.

Table 6.7.2.1 Payments and estimates – Details of Central Medical Trading Account

		Outcome					Medium-term estimate				
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate			
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12	
Current payments	308 009	317 607	334 260	410 900	378 500	378 555	452 050	19.41	497 194	497 194	
Compensation of employees	11 376	11 948	13 000	16 000	13 500	13 500	17 600	30.37	19 300	19 300	
Goods and services	296 631	305 659	321 260	394 900	365 000	365 055	434 450	19.01	477 894	477 894	
Financial transactions in assets and liabilities	2										
Transfers and subsidies to	. 68	37		55	55						
Provinces and municipalities	29	7		55	55						
Households	39	30									
Payments for capital assets	892	426	456	660	175	175	800	357.14	880	880	
Machinery and equipment	892	426	456	660	175	175	800	357.14	880	880	
Total economic classification	308 969	318 070	334 716	411 615	378 730	378 730	452 850	19.57	498 074	498 074	
Total expenditure	308 969	318 070	334 716	411 615	378 730	378 730	452 850	19.57	498 074	498 074	
Less: Estimated Revenue	306 818	317 584	338 143	411 615	378 730	378 730	452 850	19.57	498 074	498 074	
Deficit (Surplus) to be voted	2 151	486	(3427)								

Programme 8: Health Facilities Management

Purpose: To provide for new health facilities, upgrading and maintenance of existing facilities, including the hospital revitalisation and provincial infrastructure grants.

Analysis per sub-programme

Sub-programme 8.1: Community Health Facilities

Sub-programme 8.2: Emergency Medical Rescue

Sub-programme 8.3: District Hospital Services

Sub-programme 8.4: Provincial Hospital Services

Sub-programme 8.5: Central Hospital Services

Sub-programme 8.6: Other Facilities

to provide for new health facilities, upgrading and maintenance of existing facilities, including the hospital revitalisation and provincial infrastructure grants

Policy developments:

The Department is participating in the Infrastructure Development Improvement Programme (IDIP). An IDIP business case has been approved by the Head of Department and the Provincial Minister. Treasury has provided a Technical Advisor to the Department who is determining the capacity requirements of the Department to implement the IDIP. An Infrastructure Management component will be established in the Department during 2009/10.

Community health facilities

The community health facilities are to be upgraded to facilitate the shift of healthcare to the lowest appropriate level. Over the MTEF period the priority will be to provide new CHCs in line with the requirements of the Comprehensive Service Plan.

Over the past three years new community health centres have been constructed in Swellendam, Montagu, Simondium and Wellington. During the MTEF period new community health centres are planned for Knysna (Witlokasie), Plettenberg Bay (Kwanakuthula), Malmesbury (Wesbank), Du Noon and Mitchells Plain. New clinics are planned for Grassy Park and Friemersheim.

Emergency Medical Service (EMS)

The substantial improvement of the Emergency Medical Service has been identified as a priority for the Department of Health. In support of this policy the intention is to relocate all ambulance stations to purpose built accommodation at appropriate hospital premises. It is planned to achieve this in the next 5 years.

The ambulance stations at Bredasdorp, Lentegeur, Oudtshoorn and Stellenbosch were upgraded during 2008/09.

The construction of a new ambulance station at Worcester is in progress and new ambulance stations are planned for Ceres, Vredendal, Vredenburg, De Doorns, Plettenberg Bay Leeu Gamka, and Khayelitsha are planned during the MTEF period.

District Hospital Services

The provision of adequate level 1 (district) beds in the Metropole is a priority for the Department of Health. Construction on the new district hospital for Khayelitsha will commence late in 2008 while construction of the hospital for Mitchells Plain will commence early in 2009.

Hospital Revitalisation funding has been requested for new district hospitals to replace the Helderberg and Mossel Bay Hospitals. Business cases for both these hospitals have been approved.

Provincial Hospital Services

Regional Hospitals are being strengthened to improve level 2 services and will expand the accessibility of general specialist services to the communities that need them most. The business case for the revitalisation of Victoria Hospital has been approved by the National Department of Health.

The planned replacement of Somerset Hospital as part of the precinct will not materialise before the 2010 Soccer World Cup. Interim measures have been planned to prevent the existing hospital becoming dysfunctional as a result of developments in the immediate vicinity of the stadium for the soccer World Cup. The provincial Cabinet has approved additional funding for this work.

All of the TB Hospitals have been provincialised and require urgent and significant upgrading, and this work has been accommodated in the outer year of the MTEF and beyond. The business case of Brooklyn Chest Hospital has been approved but is currently not funded.

Central Hospital Services

The replacement of the Tygerberg Hospital will be undertaken as part of the Hospital Revitalisation Programme as soon as funding is approved by National Treasury.

The renovation and upgrading of the wards at the Red Cross War Memorial Children's Hospital is a priority that will be jointly funded from the Health Capital budget and the Children's Hospital Trust. The existing operating theatre suite will be upgraded during 2009. The upgrading of wards is ongoing.

Smaller, but essential upgrading projects at Groote Schuur Hospital will be funded from the Provincial Infrastructure Grant.

Forensic Mortuaries

The forensic mortuaries were transferred from the South African Police Services to the Department of Health. The physical infrastructure is being upgraded, to meet the requirements of the Forensic Service and the Occupational Health and Safety Act, 1993 (Act 85 of 1993) for which funding is being made available via the Forensic Pathology Services conditional grant. New forensic mortuaries are under construction in George, Paarl, Hermanus, Malmesbury. and Worcester. Significant escalation in infrastructure costs will impact on the ability to upgrade infrastructure as per the implementation plan.

Changes: policy, structure, service establishment, etc. Geographic distribution of services:

In order to accommodate the service requirements of Healthcare 2010 an infrastructure plan for hospitals and ambulance stations has been compiled. A similar plan for primary health care facilities is in draft form.

Maintenance backlog

As stated in Programme 7 there is a serious backlog of maintenance work. The construction of new hospitals under the Hospital Revitalisation Programme to replace the most dilapidated infrastructure will substantially reduce the hospital maintenance backlog. Similarly the upgrading of facilities using Provincial Infrastructure Grant funding will reduce the backlog.

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Planning, design, construction and commissioning

There is a lack of capacity in respect of experienced technical and professional personnel both in the Departments of Health, and Transport and Public Works, which hampers the planning, design, construction and commissioning process.

The Hospital Revitalisation Programme is projecting an under-expenditure of approximately R78 million in addition to the planned roll-over of R87 million in the 2008/09 financial year. A concerted effort has been made to expedite the completion of planning during the latter part of 2008 and it is predicted that the full HRP budget, including roll-overs from 2008/09 will be spent in 2009/10 and 2010/11.

Programme management and accountability

The management of this programme poses a challenge, and in particular that which relates to financial administration and accountability. The present arrangement makes the accounting officer of Health accountable for all expenditure and the programme performance, without direct jurisdiction over the actions that lead to such expenditure.

The management of the Programme will be addressed as part of the IDIP process. In line with the IDIP business plan a new organisational structure is being created to manage the programme as required by the Division of Revenue Act (DORA). The new structure will also provide capacity to fulfil the requirements of the Government Immovable Asset Management Act (GIAMA). It was intended to fill the posts of the new structure during 2008, however, the process of creating the new structure has not yet been finalised and the filling of the posts is likely to only occur in 2009. The plan provides of the establishment of programme management capacity in Health.

Expenditure trends analysis:

Programme 8 is allocated 6.93 per cent of the vote in 2009/10 in comparison to the 5.02 per cent that was allocated in the 2008/09 revised estimate. This translates into a nominal increase of R246.044 million or 56.03 per cent. There is an earmarked allocation of R113.405 million for maintenance for 2009/10 with a carry through to the outer years of the MTEF. There is a once-off priority allocation of R40 million for the casualty at Somerset Hospital.

Service delivery measures

Programmo/Sub-programmo/Dorformance Massuroo	Estin	nated Annual Tar	gets
Programme/Sub-programme/Performance Measures	2009/10	2010/11	2011/12
PROGRAMME PERFORMANCE MEASURES			
(Customised: National specific)			
Programme 8: Health Facilities Management			
Equitable share capital programme as % of total health expenditure	0.69%	0.27%	0.27%
Hospitals funded on the Revitalisation programme %	14%	14%	18%
Expenditure on facility maintenance as % of total health expenditure	1.14%	1.26%	1.23%
Expenditure on equipment maintenance as % of total health expenditure	0.75%	0.72%	0.70%
Hospitals with up to date asset register.	Reported in Programme 1		
Health districts with up to date PHC asset register (excluding hospitals)	Reported in Programme 1		
Fixed PHC facilities with access to piped water	100%	100%	100%
Fixed PHC facilities with access to mains electricity	100%	100%	100%
Fixed PHC facilities with access to fixed line telephone	100%	100%	100%
Average backlog of service platform in fixed PHC facilities	R240 million	R240 million	R240 million
Average backlog of service platform in district hospitals	R2 000 million	R2 000 million	R2 000 million
Average backlog of service platform in regional hospitals	R150 million	R100 million	R100 million
Average backlog of service platform in specialised hospitals (including TB & psychiatric hospitals)	R2 030 million	R2 030 million	R2 030 millior
Average backlog of service platform in tertiary and central hospitals	R1 400 million	R1 400 million	R1 400 millior
Average backlog of service platform in provincially aided hospitals	R13 million	R13 million	R13 million
Projects completed on time %	Information not		
Project budget over run %	available due to current capacity constraints		
District hospital beds per 1000 uninsured population	0.59	0.59	0.59
Regional Hospital beds per 1000 uninsured population	0.63	0.63	0.63
Percentage of population within 5km of fixed PHC facility	95%	95	95
PROGRAMME PERFORMANCE MEASURES			
(Customised: Provincial specific)			
Programme 8: Health Facilities Management			
Fotal infrastructure expenditure on community health facilities as a % of backlog R300 million)	15.5%	33.0%	32.0%
Percentage of ambulance stations built for purpose 50 ambulance stations)	75%	80%	82%
Fotal infrastructure expenditure on district hospitals as a % of backlog R2 billion)	14.7%	18.0%	26.0%
Fotal infrastructure expenditure on provincial hospitals as a % of backlog R1,85 billion)	11.0%	8.4%	4.1%
Total infrastructure expenditure on central hospitals as a % of backlog R1,4 billion)	7.2%	6.7%	7.3%

Table 6.8 Summary of payments and estimates – Programme 8: Health Facilities Management

			Outcome					Medium-term estimate					
	Sub-programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12		
1.	Community Health Facilities ^{a,b}	13 126	31 249	28 400	34 213	31 159	28 922	46 550	60.95	98 991	95 944		
2.	Emergency Medical Rescue Services ^{a,b}	213	9 093	18 706	12 385	11 077	13 013	27 120	108.41	17 850	10 730		
3.	District Hospital Services a,b	27 639	58 649	55 281	220 119	226 949	141 809	294 619	107.76	359 114	520 240		
4.	Provincial Hospital Services a,b	134 037	191 900	201 568	260 284	264 547	188 081	203 210	8.04	155 117	76 495		
5.	Central Hospital Services ^b	36 131	41 092	52 320	67 244	58 819	55 115	100 375	82.12	93 638	101 720		
6.	Other Facilities ^a	5 879	12 372	15 403	13 150	12 233	12 190	13 300	9.11	12 500	12 500		
Тс	tal payments and estimates	217 025	344 355	371 678	607 395	604 784	439 130	685 174	56.03	737 210	817 629		

^a 2009/10: Conditional grant: Hospital revitalisation: R388 845 000 (Compensation of employees R12 010 000; Goods and services

R20 054 000; Machinery and Equipment R57 436 000 and Buildings and other fixed structures R299 345 000).

^b 2009/10: Conditional grant: Provincial infrastructure grant: R114 924 000 (Buildings and other fixed structures R114 924 000).

Earmarked allocation:

Included in sub-programme 8.1: Community Health Facilities is an earmarked allocation amounting to R21 200 000 (2009/10), R25 000 000 (2010/11) and R25 000 000 (2011/12) for the purpose of Maintenance.

Included in sub-programme 8.3: District hospital services is an earmarked allocation amounting to R12 600 000 (2009/10), R19 340 000 (2010/11) and R19 340 000 (2011/12) for the purpose of Maintenance.

Included in sub-programme 8.4: Provincial hospital services is an earmarked allocation amounting to R23 305 000 (2009/10), R26 637 000 (2010/11) and R29 790 000 (2011/12) for the purpose of Maintenance.

Included in sub-programme 8.5: Central hospital services is an earmarked allocation amounting to R50 000 000 (2009/10), R60 000 000 (2010/11) and R64 000 000 (2011/12) for the purpose of Maintenance.

Included in sub-programme 8.6: Other facilities is an earmarked allocation amounting to R6 300 000 (2009/10), R7 000 000 (2010/11) and R7 000 000 (2011/12) for the purpose of Maintenance.

Table 6.8.1 Summary of provincial payments and estimates by economic classification – Programme 8: Health Facilities Management

		Outcome						Medium-tern	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	43 454	89 049	103 856	109 317	109 317	109 317	145 469	33.07	176 958	178 326
Compensation of employees		6 735	6 290	8 248	8 248	8 248	12 010	45.61	16 210	11 760
Goods and services	43 454	82 314	97 566	101 069	101 069	101 069	133 459	32.05	160 748	166 566
Transfers and subsidies to		2								
Provinces and municipalities		2								
Payments for capital assets	173 571	255 304	267 822	498 078	495 467	329 813	539 705	63.64	560 252	639 303
Buildings and other fixed structures	155 703	229 685	247 850	480 436	477 825	312 171	482 269	54.49	513 733	546 999
Machinery and equipment	17 855	25 520	19 972	17 642	17 642	17 642	57 436	225.56	46 519	92 304
Software and other intangible assets	13	99								
Total economic classification	217 025	344 355	371 678	607 395	604 784	439 130	685 174	56.03	737 210	817 629

Details of transfers and subsidies - None

7. Other programme information

Personnel numbers and costs

Table 7.1: Personnel numbers and costs

	Programme R'000	As at 31 March 2006	As at 31 March 2007	As at 31 March 2008	As at 31 March 2009	As at 31 March 2010	As at 31 March 2011	As at 31 March 2012
1.	Administration	364	383	401	420	471	481	484
2.	District Health Services	6 318	6 858	9 320	9 898	10 314	10 463	10 530
3.	Emergency Medical Services	1 249	1 295	1 563	1 759	1 846	1 885	1 897
4.	Provincial Hospital Services	6 880	7 098	5 896	9 731	9 582	9 783	9 847
5.	Central Hospital Services	8 416	8 446	8 575	5 508	5 540	5 656	5 693
6.	Health Sciences and Training	224	153	159	177	187	191	192
7.	Health Care Support Services	428	438	398	358	598	607	578
8.	Health Facilities Management	14	24	27	32	44	55	36
To	tal personnel numbers	23 893	24 695	26 339	27 883	28 582	29 121	29 257
Tot	tal personnel cost (R'000)	2 976 610	3 419 042	4 138 765	4 852 708	5 364 971	5 904 975	6 343 926
Un	it cost (R'000)	125	138	157	174	188	203	217

Note:

The total personnel numbers exclude the staff of the Medical Depot.

The staff numbers are derived from the personnel budgets, using the same average cost per employee in real terms.

The cost per person (unit cost) is slightly overstated because the rand values includes sesional staff, periodic and extraordinary appointments, while the numbers exclude these categories.

Table 7.2: Departmental personnel number and cost

		Outcome						Medium-term	n estimate	
Description	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Total for department Personnel numbers	00.000	04.005	00.000	00.004	07 745	07.000	28 582	0.54	00 404	00.057
(head count)	23 893	24 695	26 339	28 004	27 745	27 883	20 302	2.51	29 121	29 257
Personnel cost (R'000)	2 976 610	3 419 042	4 138 765	4 771 834	4 833 626	4 852 708	5 364 971	10.56	5 904 975	6 343 926
of which										
Human resources										
component Personnel numbers (head count)	109	134	154	164	162	163	167	2.45	170	171
Personnel cost (R'000)	15 988	20 784	25 159	29 007	29 383	29 499	32 613	10.56	35 896	38 564
Head count as % of total for department	0.46	0.54	0.58	0.59	0.58	0.58	0.58		0.58	0.58
Personnel cost as % of total for department	0.54	0.61	0.61	0.61	0.61	0.61	0.61		0.61	0.61
Finance component										
Personnel numbers (head count)	88	88	97	103	102	103	105	1.94	107	108
Personnel cost (R'000)	13 999	14 880	18 012	20 767	21 036	21 119	23 349	10.56	25 699	27 60
Head count as % of total for department	0.37	0.36	0.37	0.37	0.37	0.37	0.37		0.37	0.37
Personnel cost as % of total for department	0.47	0.44	0.44	0.44	0.44	0.44	0.44		0.44	0.44
Full time workers										
Personnel numbers (head count)	21 837	22 637	23 525	25 012	24 781	24 904	25 528	2.51	26 009	26 13
Personnel cost (R'000)	2 621 722	2 941 706	3 560 948	4 105 633	4 158 798	4 175 217	4 615 962	10.56	5 080 575	5 458 24
Head count as % of total for department	91.39	91.67	89.32	89.32	89.32	89.32	89.31		89.31	89.3
Personnel cost as % of total for department	88.08	86.04	86.04	86.04	86.04	86.04	86.04		86.04	86.04
Part-time workers										
Personnel numbers (head count)	84	84	81	86	85	86	88	2.33	90	90
Personnel cost (R'000)	17 901	17 460	21 135	24 369	24 684	24 781	27 397	10.56	30 155	32 39
Head count as % of total for department	0.35	0.34	0.31	0.31	0.31	0.31	0.31		0.31	0.3
Personnel cost as % of total for department	0.60	0.51	0.51	0.51	0.51	0.51	0.51		0.51	0.5
Contract workers										
Personnel numbers (head count)	1 972	1 974	2 733	2 906	2 879	2 893	2 966	2.52	3 022	3 03
Personnel cost (R'000)	336 987	459 876	556 682	641 832	650 144	652 710	721 612	10.56	794 245	853 28
Head count as % of total for department	8.25	7.99	10.38	10.38	10.38	10.38	10.38		10.38	10.3
Personnel cost as % of total for department	11.32	13.45	13.45	13.45	13.45	13.45	13.45		13.45	13.4

The staff numbers are as at 31 March; The costs are for the financial year.

The staff numbers exclude NOA (Nature of Appointment) 3 (Sessional staff), 17 (Periodical appointments) and 32 (extra-ordinary appointments).

Human resources component include all staff with HRM related job titles, as staff at institutions are not classified as such on PERSAL.

The same principle applies to Finance Staff.

Full time workers are staff with NOA 1 (permanent), 2 (Probation), 4 (Temporary) and 16 (political).

Part time workers are staff with NOA 6 and 7.

Contract workers are staff with NOA 5.

Training

Table 7.3: Payments on training

			Outcome						Medium-tern	n estimate	
	Programme R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
1.	Administration	1 370	571	354	884	884	884	924	4.50	961	961
	Other	1 370	571	354	884	884	884	924	4.50	961	961
2.	District Health Services	5 850	8 698	8 542	8 590	12 018	12 018	8 977	(25.30)	9 380	9 380
	of which Other of which	5 850	8 698	8 542	8 590	12 018	12 018	8 977	(25.30)	9 380	9 380
4.	Provincial Hospital Services	3 038	3 201	2 788	5 121	6 727	6 727	5 351	(20.45)	5 592	5 592
	of which										
	Other	3 038	3 201	2 788	5 121	6 727	6 727	5 351	(20.45)	5 592	5 592
5.	Central Hospital Services of which	1 597	1 812	2 003	3 314	2 748	2 748	3 463	26.02	3 619	3 619
	Other	1 597	1 812	2 003	3 314	2 748	2 748	3 463	26.02	3 619	3 619
6.	Health Sciences and Training	79 009	98 832	133 706	178 520	179 110	179 110	191 333	6.82	210 902	227 186
	of which Subsistence and travel	1 047	3 030	3 394	5 425	4 703	4 703	4 915	4.50	5 924	5 924
	Payments on tuition	41 098	50 397	52 178	56 145	56 145	56 145	61 197	9.00	67 456	72 665
	Other	36 864	45 405	78 134	116 950	118 262	118 262	125 221	5.88	137 522	148 597
7.	Health Care Support Services	203	240	351	370	381	381	335	(11.96)	350	350
	of which Other	000	0.40	054	070	204	201	0.05	(11.00)	050	050
8.	Health Facilities	203	240 1 628	351 241	370	381 610	381 610	335	(11.96)	350	350
о.	Mangagement		1 628	241		610	610		(100.00)		
	of which Other		1 628	241		610	610		(100.00)		
	Olliei		1 020	241		010	010		(100.00)		
То	tal payments on training	91 067	114 982	147 985	196 799	202 478	202 478	210 383	3.90	230 804	247 088

Note:

Excludes Professional training and development grant for all the financial years.

Table 7.4: Information on training

		Outcome						Medium-tern	n estimate	
Description				Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Number of staff	23 893	24 695	26 339	28 004	27 745	27 883	28 582	2.51	29 121	29 257
Number of personnel trained	14 100	11 612	13 062	14 991	14 991	14 991	15 741	5.00	17 315	18 180
of which										
Male	2 679	3 209	3 814	5 929	5 929	5 929	6 225	4.99	6 848	7 190
Female	11 421	8 403	9 248	9 062	9 062	9 062	9 515	5.00	10 466	10 989
Number of training opportunities	12 579	12 589	16 193	17 492	17 492	17 492	17 813	1.84	18 176	18 176
of which										
Tertiary ¹	395	818	650	892	892	892	1 013	13.57	1 176	1 176
Other	12 184	11 771	15 543	16 600	16 600	16 600	16 800	1.20	17 000	17 000
Number of bursaries offered ²	1 238	1 514	1 655	1 946	1 946	1 946	2 042	4.93	2 164	2 164
Number of interns appointed	127	68	90	130	130	130	140	7.69	150	150
Number of learnerships appointed ³	220	216	216	310	310	310	348	12.26	360	360

Note:

¹ Part-time bursaries (PTB) - awarded/offered to employees.

² Full-time bursaries (FTB) - awarded/offered to prospective employees.

³ Learnerships funded by HWSETA.

Reconciliation of structural changes

Table 7.5: Reconciliation of structural changes – None

Table B.1 Specification of receipts

		Outcome						Medium-term	n estimate	
Receipts R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Sales of goods and services other than capital assets	200 081	223 712	348 057	265 161	265 161	264 852	295 639	11.62	295 639	295 639
Sales of goods and services produced by department (excluding capital assets)	199 237	222 989	347 338	264 361	264 361	264 052	295 041	11.74	295 041	295 041
Administrative fees	4 268	4 000	4 976	5 081	5 081	5 081	4 929	(2.99)	4 929	4 929
Inspection fees	877	284	170	237	237	237	773	226.16	773	773
Licences or permits	476	624	615	710	710	710	176	(75.49)	170	170
Request for information	2 915	3 092	4 191	4 134	4 134	4 134	3 982	(3.68)	3 982	3 982
Other sales of which	194 969	218 989	342 362	259 280	259 280	258 971	290 112	(3.00)	290 112	290 112
Academic services: Registration, tuition & examination fees	32	16	40	15	15	15	5	(66.67)	5	5
Boarding services Commission on insurance	4 078 2 758	3 399 2 807	6 617 2 838	5 782 2 968	5 782 2 968	5 782 2 968	7 268 2 922	25.70 (1.55)	7 268 2 922	7 268 2 922
Hospital fees	176 027	200 786	319 096	242 307	242 307	242 307	271 811	12.18	271 811	271 811
Rental of buildings, equipment and other services	2 842	2 815	2 851	2 930	2 930	2 930	2 930		2 930	2 930
Sales of goods	3 985	3 607	3 803	413	413	104	366	251.92	366	366
Vehicle repair service	152	201	174	85	85	85	38	(55.29)	38	38
Services rendered	5 059	5 324	6 905	4 740	4 740	4 740	4 740	(00.20)	4 740	4 740
Photocopies and faxes	36	34	38	40	40	40	32	(20.00)	32	32
Sales of scrap, waste, arms and other used current goods (excluding capital assets)	844	723	719	800	800	800	598	(25.25)	598	598
Transfers received from	67 916	63 652	137 607	115 163	135 002	135 002	85 163	(36.92)	22 256	11 543
Universities and technikons	10 109	11 050	11 140	11 123	11 123	11 123	11 543	3.78	11 543	11 543
International organisations	57 807	52 598	126 467	104 040	121 991	121 991	73 620	(39.65)	10 713	
Public corporations and private enterprises		4			1 888	1 888		(100.00)		
Fines, penalties and forfeits	1									
Interest, dividends and rent on land	96	204	624	724	724	1 033	724	(29.91)	724	724
Interest	96	204	624	724	724	1 033	724	(29.91)	724	724
Sales of capital assets	24	10	10	11	11	11	13	18.18	13	13
Other capital assets	24	10	10	11	11	11	13	18.18	13	13
Financial transactions in assets and liabilities Recovery of previous year's	8 500	16 482	11 548	8 621	8 621	8 621	8 621		8 621	8 621
expenditure	2 469	3 800	2 230	2 551	2 551	2 551	3 753	47.12	3 753	3 753
Staff debt	5 864	4 108	2 620	2 359	2 359	2 359	3 394		3 394	3 394
Unallocated credits Cash surpluses	164 3	8 569 5	6 695 3	3 706 5	3 706 5	3 706 5	1 470 4	(60.33) (20.00)	1 470 4	1 470 4
Total departmental receipts	276 618	304 060	497 846	389 680	409 519	409 519	390 160	(4.73)	327 253	316 540

Table B.2 Summary of payments and estimates by economic classification

		Outcome						Medium-term	estimate	
Economic classification R'000				Main appro-	Adjusted appro-	Revised		% Change from Revised estimate		
	Audited	Audited	Audited	priation	priation	estimate	2000/40		2040/44	2011/12
Current payments	2005/06 4 871 013	2006/07 5 627 221	2007/08 6 612 655	2008/09 7 507 649	2008/09 7 671 451	2008/09 7 720 927	2009/10 8 638 307	2008/09 11.88	2010/11 9 609 192	2011/12 10 310 561
Compensation of employees	2 976 610	3 419 042	4 138 765	4 771 834	4 833 626	4 852 708	5 364 971	10.56	5 904 975	6 343 926
Salaries and wages	2 621 023	3 029 045	3 668 483	4 094 340	4 149 017	4 168 099	4 614 068	10.70	5 076 219	5 453 535
Social contributions	355 587	389 997	470 282	677 494	684 609	684 609	750 903	9.68	828 756	890 391
Goods and services	1 892 503	2 206 764	2 470 797	2 735 815	2 837 825	2 866 587	3 273 336	14.19	3 704 217	3 966 635
of which	1 002 000	2 200 701	2 110 101	2700 010	2 001 020	2 000 001	0 210 000	11.10	0101211	0 000 000
Administrative fees	3 861	1 159	612	641	641	641	664	3.59	732	787
Advertising	11 029	16 420	15 662	9 648	23 142	25 077	26 479	5.59	29 432	31 955
Assets <r5 000<="" td=""><td>31 511</td><td>31 749</td><td>34 107</td><td>43 804</td><td>44 372</td><td>44 372</td><td>50 425</td><td>13.64</td><td>58 667</td><td>59 440</td></r5>	31 511	31 749	34 107	43 804	44 372	44 372	50 425	13.64	58 667	59 440
Audit cost: External	5 454	5 898	8 013	7 838	11 838	11 838	11 657	(1.53)	12 852	13 820
Bursaries (employees) Catering: Departmental activities	3 035 333	2 567 2 081	3 850 3 990	3 916 2 716	3 916 3 411	3 916 3 411	4 387 3 488	12.03 2.26	4 838 3 978	5 201 4 267
Communication	333 34 185	41 936	47 585	51 369	51 469	51 469	54 493	5.88	61 833	66 322
Computer services	22 584	22 277	43 372	39 322	42 381	42 381	52 479	23.83	58 177	62 528
Cons/prof: Business and advisory	16 001	30 948	75 671	87 322	95 573	95 573	102 661	7.42	112 320	120 736
services										
Cons/prof: Infrastructure &		124	1 303							
planning										
Cons/prof: Laboratory services	233 666	264 982	282 719	307 069	307 636	307 636	356 654	15.93	391 806	420 401
Cons/prof: Legal cost	727	2 428	4 613	2 802	3 801	3 801	4 329	13.89	4 773	5 134
Contractors	164 339	88 612	96 923	75 337	79 484	79 484	100 855	26.89	112 620	121 089
Agency and support/	188 775	270 473	243 459	231 287	263 578	263 578	262 052	(0.58)	295 265	316 826
outsourced services	100	100	120	440	440	440		0.70	407	500
Entertainment Inventory: Food and food supplies	168 39 682	196 47 271	139 57 703	413 62 327	413 63 536	413 63 536	441 67 836	6.78 6.77	497 76 500	533 82 099
Inventory: Fuel, oil and gas	12 947	14 749	20 862	22 156	22 206	22 206	26 633	19.94	30 342	32 515
Inventory: Raw materials	22 277	20 135	18 109	25 513	29 874	29 874	33 544	12.28	37 296	39 775
Inventory: Medical supplies	748 982	860 212	966 336	1 083 933	1 107 614	1 126 948	1 304 876	15.79	1 491 621	1 596 120
Inventory: Other consumables	46 436	55 032	55 916	65 337	69 626	69 626	76 628	10.06	86 043	92 011
Inventory: Stationery and printing	23 442	30 501	32 134	37 428	38 206	38 206	42 525	11.30	48 452	51 957
Lease payments	10 348	17 188	26 568	34 302	34 308	34 308	37 113	8.18	42 099	45 158
Owned and leasehold property	173 386	222 846	247 565	287 261	295 969	295 887	342 112	15.62	394 643	418 723
expenditure	0.400	4 4 7 0	1 010	0.040	0.040	0.040	0.464	F 77	0.400	2 612
Transport provided departmental activity	2 169	4 173	1 912	2 046	2 046	2 046	2 164	5.77	2 433	2012
Travel and subsistence	63 663	99 229	122 676	142 849	145 703	153 347	207 228	35.14	233 085	251 027
Training and staff development	12 104	27 261	34 284	78 865	65 501	65 432	66 711	1.95	74 483	83 256
Operating expenditure	19 679	24 596	21 889	25 006	26 053	26 053	28 862	10.78	32 503	34 913
Venues and facilities	1 720	1 721	2 825	5 308	5 528	5 528	6 040	9.26	6 927	7 430
Financial transactions in assets and	1 900	1 415	3 093			1 632		(100.00)		
liabilities								, , , , , , , , , , , , , , , , , , ,		
Transfers and subsidies to	502 598	378 356	410 989	461 704	474 925	475 032	505 285	6.37	555 477	599 129
Provinces and municipalities	225 571	141 475	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466
Municipalities	225 571	141 475	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466
Municipalities	225 571	141 475	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466
of which										
Regional services council levies	8 144	2 242								
Departmental agencies and accounts	9 263	6 089	3 580	4 374	4 374	4 374	4 712	7.73	5 194	5 595
Entities receiving transfers	9 263	6 089	3 580	4 374	4 374	4 374	4 712	7.73	5 194	5 595
CMD Capital Augmentation	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
SETA	1 947	2 045	2 169	2 801	2 801	2 801	2 997	7.00	3 304	3 559
Universities and technikons	54 429	1 275	1 400	1 567	1 567	1 567	1 708	9.00	1 883	2 028
Non-profit institutions	152 143	164 525	191 404	212 388	220 206	220 206	217 889	(1.05)	236 624	254 867
Households	61 192	64 992	63 681	79 864	73 864	73 971	89 419	20.88	98 564	106 173
Social benefits	6 697	8 168	7 680	7 044	7 044	7 151	11 280	57.74	12 433	13 393
Other transfers to households	54 495	56 824	56 001	72 820	66 820	66 820	78 139	16.94	86 131	92 780
Payments for capital assets	345 201	413 938	474 224	672 620	724 429	549 775	749 206	36.28	760 600	854 768
Buildings and other fixed structures	163 879	234 589	297 470	508 828	556 763	382 109	509 319	33.29	513 733	546 999
Buildings	163 879	234 589	297 470	508 828	556 763	382 109	509 319	33.29	513 733	546 999
Machinery and equipment	181 127	179 116	176 704	163 792	152 616	152 616	239 887	57.18	246 867	307 769
Transport equipment	9 050	14 996	22 510	6 100	7 314	7 314	11 463	56.73	12 512	13 478
Other machinery and equipment	172 077	164 120	154 194	157 692	145 302	145 302	228 424	57.21	234 355	294 291
	195	233	50		15 050	15 050		(100.00)		
Software and other intangible	195	200			10 000			()		
Software and other intangible assets	195	200			10 000			()		

Table B.2.1 Payments and estimates by economic classification – Programme 1: Administration

		Outcome						Medium-term	estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	120 529	148 837	190 504	221 241	244 744	244 744	280 101	14.45	308 750	332 586
Compensation of employees	67 174	69 853	81 317	99 928	98 331	96 253	115 822	20.33	127 668	137 525
Salaries and wages	59 262	61 082	71 259	85 643	83 837	81 759	100 043	22.36	110 275	118 789
Social contributions	7 912	8 771	10 058	14 285	14 494	14 494	15 779	8.87	17 393	18 736
Goods and services	53 007	78 979	109 101	121 313	146 413	148 348	164 279	10.74	181 082	195 061
of which										
Administrative fees	948	969	604	639	639	639	662	3.60	730	785
Advertising	4 597	14 189	8 923	1 730	15 321	17 256	17 544	1.67	19 309	21 107
Assets <r5 000<="" td=""><td>1 439</td><td>1 573</td><td>2 818</td><td>1 035</td><td>1 035</td><td>1 035</td><td>1 073</td><td>3.67</td><td>1 183</td><td>1 272</td></r5>	1 439	1 573	2 818	1 035	1 035	1 035	1 073	3.67	1 183	1 272
Audit cost: External Catering: Departmental activities	5 435 95	5 600 268	7 422 321	7 838 428	11 838 428	11 838 428	11 657 421	(1.53)	12 852 465	13 820 500
Communication	4 431	5 246	5 495	5 7 1 2	5 754	5 754	5 964	(1.64) 3.65	6 576	7 071
Computer services	16 014	13 610	34 579	34 114	37 114	37 114	46 164	24.38	50 897	54 728
Cons/prof: Business and advisory	8 610	16 120	23 710	35 825	43 076	43 076	46 885	8.84	51 685	55 577
services										
Cons/prof: Infrastructure &		5	26							
planning										
Cons/prof: Legal cost	641	2 322	4 562	2 739	3 738	3 738	4 262	14.02	4 699	5 053
Contractors Agency and support/	290 1 035	118 7 692	8 259 1 833	9 604 1 403	9 604 1 454	9 604 1 454	10 751 1 477	11.94 1.58	11 853 1 628	12 746 1 751
outsourced services	1 035	7 092	1 000	1403	1 434	1 404	14/7	1.50	1 020	1751
Entertainment	119	93	99	176	176	176	182	3.41	201	216
Inventory: Food and food supplies	67	8						0.11	201	210
Inventory: Fuel, oil and gas	2			1	1	1	1		1	1
Inventory: Raw materials	32	6	1	2	2	2	2		2	2
Inventory: Medical supplies	148	34	1	4	4	4	4	0.05	5	5
Inventory: Other consumables Inventory: Stationery and printing	21 1 831	18 1 952	35 2 572	52 2 582	52 3 114	52 3 114	54 3 228	3.85 3.66	59 3 559	64 3 827
Lease payments	543	801	711	1 031	1 031	1 031	1 069	3.69	1 178	1 267
Owned and leasehold property	250	335	184	231	231	231	239	3.46	264	284
expenditure										
Travel and subsistence	4 282	5 701	5 429	7 230	7 861	7 861	8 556	8.84	9 433	10 143
Training and staff development	1 370	571	354	7 424	2 424	2 424	2 513	3.67	2 770	2 979
Operating expenditure Venues and facilities	475	1 191	230 933	326	326	326	338	3.68	373	401
	332	557		1 187	1 190	1 190	1 233	3.61	1 360	1 462
Financial transactions in assets and liabilities	348	5	86			143		(100.00)		
Transfers and subsidies to	19 407	8 922	7 921	20 816	14 816	14 816	22 150	49.50	24 415	26 300
Provinces and municipalities	153	39								
Municipalities	153	39								
Municipalities	153	39								
of which	100	23								
Regional services council levies	153	39								
Universities and technikons	2 330									
		0 000	7 004	20 816	14 040	14 040	22 150	49.50	01 11F	26 200
Households Social benefits	16 924 387	8 883 229	7 921 94	20 8 16	14 816 230	14 816 230	22 150	(36.96)	24 415 159	26 300 172
Other transfers to households	16 537	8 654	7 827	20 586	14 586	14 586	22 005	50.86	24 256	26 128
Payments for capital assets	27 355	4 366	6 908	58 731	15 690	15 690	11 562	(26.31)	12 744	13 729
Machinery and equipment	27 355	4 366	6 908	58 731	15 690	15 690	11 562	(26.31)	12 744	13 729
Transport equipment	21 223	4 330 96	1 941	00701	10 000	10 000	112	(20.01)	12 174	10123
Other machinery and equipment	07 00r			E0 704	15 600	15 600		(07 00)	10 744	10 700
	27 225	4 262	4 960	58 731	15 690	15 690	11 450	(27.02)	12 744	13 729
Software and other intangible assets	130	8	7							
	167 291	162 125	205 333	300 788	275 250	275 250	313 813	14.01	345 909	

Economic classification R'000	Outcome						Medium-term estimate				
	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate			
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12	
Current payments	1 297 618	1 615 460	2 299 983	2 587 792	2 644 589	2 679 482	3 071 360	14.63	3 454 342	3 706 598	
Compensation of employees	732 167	940 896	1 399 729	1 636 021	1 662 287	1 677 180	1 884 033	12.33	2 064 305	2 223 465	
Salaries and wages	644 660	830 633	1 234 751	1 404 443	1 427 619	1 442 512	1 620 024	12.31	1 774 259	1 911 032	
Social contributions	87 507	110 263	164 978	231 578	234 668	234 668	264 009	12.50	290 046	312 433	
Goods and services	565 348	674 357	899 456	951 771	982 302	1 002 011	1 187 327	18.49	1 390 037	1 483 133	
of which											
Administrative fees Advertising	1 2 050	35 1 746	8 3 001	1 3 456	1 3 359	1 3 359	1 3 937	17.21	1 4 641	1 4 965	
Assets <r5 000<="" td=""><td>2 030 9 442</td><td>10 752</td><td>16 335</td><td>14 697</td><td>14 821</td><td>14 821</td><td>17 039</td><td>14.97</td><td>20 086</td><td>21 491</td></r5>	2 030 9 442	10 752	16 335	14 697	14 821	14 821	17 039	14.97	20 086	21 491	
Audit cost: External	2	284	572		11021				20000	21.001	
Bursaries (employees)	26			5	5	5	6	20.00	7	7	
Catering: Departmental activities	207	738	1 239	1 551	1 596	1 596	1 692	6.02	1 995	2 135	
Communication Computer services	10 028 3 635	15 030 6 967	19 485 7 050	21 916 3 408	21 884 3 408	21 884 3 408	23 938 4 184	9.39 22.77	28 218 4 933	30 192 5 278	
Cons/prof: Business and advisory	2 303	3 643	7 050 5 101	3 408 3 534	3 408 3 534	3 400 3 534	3 945	11.63	4 933 4 650	5 27 6 4 975	
services	•			'							
Cons/prof: Infrastructure &		8	646								
planning											
Cons/prof: Laboratory services	66 619	85 402	117 715	123 038	123 605	123 605	154 862	25.29	170 766	182 713	
Cons/prof: Legal cost Contractors	54 19 467	38 18 292	11 21 212	17 18 351	17 21 163	17 21 163	19 23 871	11.76 12.80	22 28 120	24 30 091	
Agency and support/	46 005	57 154	90 016	69 631	91 037	91 037	94 500	3.80	111 398	119 192	
outsourced services	10 000	01 101			01.001	01001		0.00		110 102	
Entertainment	35	51	23	119	119	119	133	11.76	157	168	
Inventory: Food and food supplies	11 315	15 445	22 563	22 298	22 427	22 427	25 032	11.62	29 508	31 573	
Inventory: Fuel, oil and gas	4 063	5 293	9 207	10 992	10 992	10 992	13 496	22.78	15 909	17 022	
Inventory: Raw materials Inventory: Medical supplies	3 536 305 664	3 102 332 816	2 419 428 854	4 790 475 974	5 135 478 252	5 135 497 961	5 732 610 327	11.63 22.57	6 756 721 671	7 229 768 001	
Inventory: Other consumables	10 425	13 841	18 585	20 857	21 486	21 486	23 982	11.62	28 270	30 248	
Inventory: Stationery and printing	8 857	12 740	14 714	18 359	18 535	18 535	20 688	11.62	24 388	26 094	
Lease payments	2 071	4 065	8 719	14 616	14 572	14 572	16 265	11.62	19 173	20 515	
Owned and leasehold property	33 308	43 822	57 467	60 799	62 192	62 192	69 417	11.62	81 829	87 555	
expenditure Transport provided departmental	285	804	490	609	609	609	680	11.66	801	857	
activity	205	004	490	009	009	009	000	11.00	001	007	
Travel and subsistence	14 048	23 682	34 340	39 273	39 493	39 493	46 726	18.31	55 081	58 935	
Training and staff development	5 850	8 698	8 543	11 994	12 018	12 018	13 414	11.62	15 813	16 919	
Operating expenditure	5 065	9 148	10 092	8 369	8 925	8 925	9 962	11.62	11 743	12 565	
Venues and facilities	987	761	1 049	3 117	3 117	3 117	3 479	11.61	4 101	4 388	
Financial transactions in assets and liabilities	103	207	798			291		(100.00)			
Transfers and subsidies to	308 196	279 899	307 597	330 123	341 076	341 183	352 550	3.33	387 121	417 776	
Provinces and municipalities	219 456	139 797	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466	
Municipalities	219 456	139 797	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466	
Municipalities	219 456	139 797	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466	
of which											
Regional services council levies	2 029	564									
Universities and technikons	2 695										
Non-profit institutions	84 775	137 859	154 685	164 622	164 172	164 172	157 767	(3.90)	170 353	183 480	
Households							3 226				
	1 270	2 243	1 988	1 990	1 990	2 097		53.84	3 556	3 830	
Social benefits	1 270	2 003	1 988	1 990	1 990	2 097	3 226	53.84	3 556	3 830	
Other transfers to households		240									
Payments for capital assets	24 137	27 433	99 998	46 971	117 143	108 143	79 720	(26.28)	57 295	61 364	
Buildings and other fixed structures		4 904	49 609	28 392	78 938	69 938	27 050	(61.32)			
Buildings		4 904	49 609	28 392	78 938	69 938	27 050	(61.32)			
Machinery and equipment	24 132	22 517	43 003 50 352	18 579	38 205	38 205	52 670	37.86	57 295	61 364	
Transport equipment	2 739	4 636	9 024	1 300	2 514	2 514	5 433	116.11	5 989	6 451	
Other machinery and equipment	21 393	17 881	41 328	17 279	35 691	35 691	47 237	32.35	51 306	54 913	
Software and other intangible assets	5	12	37								
Total economic classification	1 629 951	1 922 792	2 707 578	2 964 886	3 102 808	3 128 808	3 503 630	11.98	3 898 758	4 185 738	
i otal oconomic classification	1023 301	1 322 / 32	2101010	∠ 304 000	J 102 000	J 120 000	2 202 020	11.90	0 0 0 0 1 00	+ 100 / 30	

 Table B.2.3 Payments and estimates by economic classification – Programme 3: Emergency Medical Services

	Outcome						Medium-term estimate				
Economic classification R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate		% Change from Revised estimate			
						2008/09	2009/10	2008/09	2010/11	2011/12	
Current payments	217 824	247 063	301 357	352 350	359 059	373 642	451 435	20.82	497 606	536 026	
Compensation of employees	157 556	167 467	204 437	246 905	251 614	257 881	291 716	13.12	321 552	346 378	
Salaries and wages	134 322	142 401	175 298	211 959	216 150	222 417	250 876	12.80	276 535	297 885	
Social contributions	23 234	25 066	29 139	34 946	35 464	35 464	40 840	15.16	45 017	48 493	
Goods and services	59 477	79 275	95 907	105 445	107 445	115 089	159 719	38.78	176 054	189 648	
of which											
Advertising	132		41	141	141	141	159	12.77	176	189	
Assets <r5 000<="" td=""><td>3 795</td><td>2 152</td><td>4 485</td><td>3 485</td><td>3 485</td><td>3 485</td><td>3 860</td><td>10.76</td><td>4 255</td><td>4 576</td></r5>	3 795	2 152	4 485	3 485	3 485	3 485	3 860	10.76	4 255	4 576	
Catering: Departmental activities Communication	12 3 616	43 3 752	112 4 293	330 4 220	330 4 220	330 4 220	337 4 447	2.12 5.38	372 4 903	400 5 271	
Computer services	368	3752	4 293	4 220	4 220	4 220	4 447 450	18.42	4 903	533	
Cons/prof: Business and advisory	315	560	345	100	100	100	108	8.00	119	127	
services											
Cons/prof: Infrastructure &			21								
planning											
Cons/prof: Legal cost	2	054		007	007	007	005	7.50	4 000		
Contractors Agency and support/	715 55	851 48	1 111 121	897 104	897 104	897 104	965 104	7.58	1 063 115	1 144 123	
outsourced services	55	40	121	104	104	104	104		115	125	
Entertainment				5	5	5	5		6	6	
Inventory: Food and food supplies	1	6		-		-				-	
Inventory: Fuel, oil and gas	489	856	1 463	1 492	1 492	1 492	1 765	18.30	1 946	2 092	
Inventory: Raw materials	565	698	558	705	705	705	758	7.52	836	899	
Inventory: Medical supplies Inventory: Other consumables	4 857	3 844 366	4 695 3 243	4 269	4 269	4 269 588	4 958 632	16.14 7.48	5 466 697	5 878	
Inventory: Stationery and printing	213 663	300 810	3 243 1 286	588 1 017	588 1 017	000 1 017	1 094	7.48	1 206	750 1 297	
Lease payments	2 533	5 386	6 129	6 979	6 979	6 979	7 506	7.55	8 274	8 897	
Owned and leasehold property expenditure	3 223	2 579	1 706	1 623	1 623	1 623	1 745	7.52	1 922	2 068	
Travel and subsistence	35 278	54 182	65 755	74 281	76 281	83 925	125 633	49.70	138 477	149 241	
Operating expenditure	2 645	2 770	54	4 619	4 619	4 619	4 967	7.53	5 476	5 889	
Venues and facilities		17	183	210	210	210	226	7.62	249	268	
Financial transactions in assets and liabilities	791	321	1 013			672		(100.00)			
Transfers and subsidies to	12 278	16 165	18 930	21 066	21 066	21 066	22 956	8.97	25 304	27 257	
Provinces and municipalities	353	95									
Municipalities	353	95									
Municipalities	353	95									
of which											
Regional services council levies	353	95									
Non-profit institutions	11 835	16 053	18 873	21 000	21 000	21 000	22 890	9.00	25 231	27 179	
Households	90	17	57	66	66	66	66	0.00	73	78	
Social benefits	90	17	57	66	66	66	66		73	78	
Payments for capital assets	25 749	14 616	21 590	12 610	12 610	12 610	13 745	9.00	15 151	16 320	
Buildings and other fixed structures	8 128	14 010	21 330	12 010	12 010	12 010	10 / 40	3.00	13 131	10 320	
, and the second											
Buildings	8 128										
Machinery and equipment	17 621	14 604	21 590	12 610	12 610	12 610	13 745	9.00	15 151	16 320	
Transport equipment	5 770	10 264	11 545	4 800	4 800	4 800	5 232	9.00	5 767	6 212	
Other machinery and equipment	11 851	4 340	10 045	7 810	7 810	7 810	8 513	9.00	9 384	10 108	
Software and other intangible assets		12									

Table B.2.4 Payments and estimates by economic classification – Programme 4: Provincial Hospital Services

	Outcome						Medium-term estimate			
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	1 208 538	1 371 149	1 292 376	2 290 862	2 332 104	2 332 104	2 587 418	10.95	2 852 051	3 072 251
Compensation of employees	805 659	880 442	877 609	1 546 622	1 568 100	1 568 100	1 735 946	10.70	1 913 494	2 061 230
Salaries and wages	707 450	777 854	775 403	1 326 900	1 345 841	1 345 841	1 492 914	10.93	1 645 605	1 772 658
Social contributions	98 209	102 588	102 206	219 722	222 259	222 259	243 032	9.35	267 889	288 572
Goods and services	402 669	490 215	414 480	744 240	764 004	763 870	851 472	11.47	938 557	1 011 021
of which										
Administrative fees	2 912	3		1	1	1	1		1	1
Advertising	1 358	166	996	1 836	1 836	1 836	1 980	7.84	2 183	2 347
Assets <r5 000<br="">Audit cost: External</r5>	10 427 17	7 827 14	5 175 19	9 182	9 302	9 302	9 839	5.77	10 848	11 665
Catering: Departmental activities	10	76	272	332	982	982	958	(2.44)	1 056	1 135
Communication	9 118	10 397	9 729	12 618	12 668	12 668	12 749	0.64	14 056	15 114
Computer services	2 442	1 176	1 206	1 257	1 316	1 316	1 487	12.99	1 639	1 762
Cons/prof: Business and advisory services	3 156	4 068	36 556	40 092	40 092	40 092	41 173	2.70	45 392	48 809
Cons/prof: Infrastructure &		111	506							
planning										
Cons/prof: Laboratory services	52 114	61 459	42 889	88 521	88 521	88 521	95 452	7.83	105 233	113 161
Cons/prof: Legal cost Contractors	16 25 069	16 17 319	3 13 638	26 21 026	26 21 161	26 21 161	27 25 481	3.85 20.41	29 28 083	32 30 218
Agency and support/	63 751	110 667	64 541	102 172	103 310	103 310	98 668	(4.49)	108 779	116 971
outsourced services								(
Entertainment	2	2	2	29	29	29	30	3.45	33	35
Inventory: Food and food supplies	14 898	16 555	16 477	26 047	26 127	26 127	26 831	2.69	29 581	31 809
Inventory: Fuel, oil and gas Inventory: Raw materials	2 219 5 482	2 306 3 797	3 039 3 286	4 976 7 428	5 026 7 444	5 026 7 444	5 678 7 645	12.97 2.70	6 259 8 428	6 731 9 063
Inventory: Medical supplies	126 845	155 585	132 200	297 460	313 591	313 457	386 826	23.41	426 308	460 174
Inventory: Other consumables	12 947	15 534	12 133	19 356	19 545	19 545	20 072	2.70	22 129	23 795
Inventory: Stationery and printing	6 319	8 107	6 131	8 792	8 862	8 862	9 101	2.70	10 033	10 789
Lease payments Owned and leasehold property	3 342 46 193	3 830 54 619	4 638 46 379	6 991 73 606	7 041 73 921	7 041 73 921	7 231 75 913	2.70 2.69	7 972 83 693	8 572 89 996
expenditure										
Transport provided departmental activity	1 204	2 551	1 059	1 206	1 206	1 206	1 239	2.74	1 365	1 468
Travel and subsistence	4 555	5 934	6 238	8 134	8 137	8 137	8 858	8.86	9 765	10 501
Training and staff development Operating expenditure	3 038 4 874	3 201 4 858	2 788 4 565	6 728 6 363	6 728 6 854	6 728 6 854	6 909 7 039	2.69 2.70	7 617 7 760	8 191 8 344
Venues and facilities	361	37	15	61	278	278	285	2.52	315	338
Financial transactions in assets and liabilities	210	492	287			134		(100.00)		
Transfers and subsidies to	66 734	9 531	2 686	3 718	3 718	3 718	4 174	12.26	4 601	4 956
Provinces and municipalities	2 217	648	2 000	5710	5710	5710	4 1/4	12.20	4 00 1	4 330
Municipalities	2 217	648								
Municipalities	2 217	648								
of which	2211	010								
Regional services council levies	2 217	648								
Universities and technikons	6 877									
Non-profit institutions	55 533	6 018	1 021	1 115	1 115	1 115		(100.00)		
Households	2 107	2 865	1 665	2 603	2 603	2 603	4 174	60.35	4 601	4 956
Social benefits	2 107	2 865	1 665	2 603	2 603	2 603	4 174	60.35	4 601	4 956
Beumanta fan eenitel eenste	00.000	40.055	40.005	44.007	00.040	00.040	00 740	20.04	00 750	25.000
Payments for capital assets	20 633	16 955	10 965	11 397	22 819	22 819	29 719	30.24	32 758	35 288
Buildings and other fixed structures			11							
Buildings	00.000	40.050	11	44.007	00.040	00.040	00 7/0	20.04	00 750	05.000
Machinery and equipment	20 633	16 853	10 948	11 397	22 819	22 819	29 719	30.24	32 758	35 288
Transport equipment	541	10.000	10.010		00.015	00.045	686	07.00	756	815
Other machinery and equipment	20 092	16 853	10 948	11 397	22 819	22 819	29 033	27.23	32 002	34 473
Software and other intangible assets		102	6							
Total economic classification	1 295 905	1 397 635	1 306 027	2 305 977	2 358 641	2 358 641	2 621 311	11.14	2 889 410	3 112 495

Table B.2.5 Payments and estimates by economic classification – Programme 5: Central Hospital Services

		Outcome						Medium-term	estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	1 863 190	2 034 319	2 275 510	1 750 422	1 792 919	1 792 919	1 827 940	1.95	2 014 897	2 170 461
Compensation of employees	1 146 347	1 293 684	1 500 187	1 158 490	1 167 984	1 167 984	1 184 831	1.44	1 306 012	1 406 846
Salaries and wages	1 016 760	1 158 616	1 345 672	993 463	1 002 355	1 002 355	1 018 955	1.66	1 123 171	1 209 888
Social contributions	129 587	135 068	154 515	165 027	165 629	165 629	165 876	0.15	182 841	196 958
Goods and services	716 460	740 484	774 448	591 932	624 935	624 694	643 109	2.95	708 885	763 615
of which										
Advertising	2 797	319	2 442	1 972	1 972	1 972	2 196	11.36	2 391	2 571
Assets <r5 000<="" td=""><td>5 861</td><td>8 484</td><td>3 861</td><td>4 290</td><td>4 614</td><td>4 614</td><td>5 040</td><td>9.23</td><td>5 488</td><td>5 901</td></r5>	5 861	8 484	3 861	4 290	4 614	4 614	5 040	9.23	5 488	5 901
Catering: Departmental activities Communication	9 5 783	19 6 293	103 7 413	50 5 625	50 5 665	50 5 665	50 5 887	3.92	55 6 411	59 6 894
Computer services	106	138	172	113	113	113	132	16.81	144	154
Cons/prof: Business and advisory services	350	549	2 013	600	1 600	1 600	1 697	6.06	1 848	1 987
Cons/prof: Laboratory services	114 672	118 121	122 115	95 510	95 510	95 510	106 340	11.34	115 807	124 527
Cons/prof: Legal cost Contractors	14 97 685	52 33 265	37 33 605	20 20 991	20 22 191	20 22 191	21 34 032	5.00 53.36	23 37 176	25 40 030
Agency and support/	77 909	91 616	76 265	54 865	64 561	64 561	63 669	(1.38)	69 335	74 557
outsourced services Entertainment	9	24	9	72	72	72	76	5.56	83	89
Inventory: Food and food supplies	13 178	14 381	17 721	12 939	13 939	13 939	14 781	6.04	16 096	17 309
Inventory: Fuel, oil and gas Inventory: Raw materials	5 400 4 614	5 061 5 283	5 771 5 550	3 182 4 352	3 182 8 352	3 182 8 352	3 712 8 857	16.66 6.05	4 042 9 645	4 346 10 371
Inventory: Medical supplies	309 242	365 187	396 018	306 183	311 455	311 214	299 248	(3.84)	334 306	357 811
Inventory: Other consumables	14 774	19 314	18 129	14 443	17 914	17 914	18 996	6.04	20 687	22 245
Inventory: Stationery and printing	5 033	5 673	6 544	5 231	5 231	5 231	5 547	6.04	6 041	6 496
Lease payments Owned and leasehold property expenditure	1 484 47 304	2 713 52 633	5 301 58 914	4 055 45 730	4 055 52 730	4 055 52 730	4 300 55 916	6.04 6.04	4 683 60 891	5 035 65 477
Transport provided departmental activity	673	818	363	231	231	231	245	6.06	267	287
Travel and subsistence	1 896	2 523	3 106	3 071	3 071	3 071	3 452	12.41	3 759	4 042
Training and staff development	1 596	1 813	2 003	2 748	2 748	2 748	2 914	6.04	3 173	6 375
Operating expenditure Venues and facilities	6 037 34	6 205	6 848 145	5 243 416	5 243 416	5 243 416	5 560 441	6.05 6.01	6 054 480	6 510 517
Financial transactions in assets and liabilities	383	151	875	110	110	241		(100.00)	100	011
Transfers and subsidies to	46 193	8 560	8 555	7 650	7 650	7 650	10 433	36.38	11 500	12 388
Provinces and municipalities	3 222	857								
Municipalities	3 222	857								
Municipalities	3 222	857								
of which										
Regional services council levies	3 222	857								
Universities and technikons	40 260									
Non-profit institutions		4 595	4 825	5 919	5 919	5 919	7 232	22.18	7 972	8 587
Households	2 711	3 108	3 730	1 731	1 731	1 731	3 201	84.92	3 528	3 801
Social benefits	2 711	3 008	3 730	1 731	1 731	1 731	3 201	84.92	3 528	3 801
Other transfers to households		100								
Payments for capital assets	71 322	80 121	65 819	43 223	58 970	58 970	73 049	23.87	80 520	86 737
Machinery and equipment	71 275	80 121	65 819	43 223	43 920	43 920	73 049	66.32	80 520	86 737
Other machinery and equipment	71 275	80 121	65 819	43 223	43 920	43 920	73 049	66.32	80 520	86 737
Software and other intangible assets	47				15 050	15 050		(100.00)		
Total economic classification	1 000 705	2 122 000	2 240 004	1 904 005	1 950 520	1 950 520	1 044 400	0.70	2 106 917	2 260 500
rotal economic classification	1 980 705	2 123 000	2 349 884	1 801 295	1 859 539	1 859 539	1 911 422	2.79	2 106 917	2 269 586

 Table B.2.6 Payments and estimates by economic classification – Programme 6: Health Sciences and Training

		Outcome						Medium-term	n estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	35 959	47 330	69 237	101 211	93 413	93 413	99 813	6.85	110 022	118 517
Compensation of employees	26 787	20 605	25 243	30 948	31 538	31 538	35 932	13.93	39 607	42 665
Salaries and wages	22 993	17 811	22 076	26 576	27 101	27 101	30 901	14.02	34 061	36 691
Social contributions	3 794	2 794	3 167	4 372	4 437	4 437	5 031	13.39	5 546	5 974
Goods and services of which	9 139	26 699	43 981	70 263	61 875	61 806	63 881	3.36	70 415	75 852
Administrative fees Advertising Assets <r5 000<br="">Bursaries (employees) Catering: Departmental activities Communication Computer services Cons/prof: Business and advisory services Cons/prof: Infrastructure & planning Contractors Agency and support/ outsourced services Entertainment Inventory: Fuel, oil and gas Inventory: Raw materials Inventory: Nedical supplies Inventory: Other consumables Inventory: Other consumables Inventory: Stationery and printing Lease payments Owned and leasehold property expenditure</r5>	357 3009 610 19 1267 3 1 267 3 1 141 494 153 18 148 145 236 863	140 343 2 567 899 785 7 3 012 1 1 2 683 701 772 14 222 627 268 1 291	5 406 3 850 1 925 684 29 5 178 102 25 398 1 225 398 1 841 786 6 177 329 391 4 345	185 467 3 911 10 655 50 3 451 233 600 2 900 875 300 11 235 588 411 3 404	185 467 3 911 10 655 50 3 451 233 600 2 900 875 300 11 235 588 411 3 404	185 467 3 911 10 655 50 3 451 233 600 2 900 875 300 11 235 588 411 3 404	218 539 4 381 11 719 62 3 866 261 625 2 1 008 1 078 336 1 078 336 1 3 263 3 815 5 585	17.84 15.42 12.02 10.00 9.77 24.00 12.03 12.02 4.17 12.00 23.20 12.00 18.18 11.91 12.07 11.92 12.07	240 594 4 831 12 793 68 4 262 288 689 2 1 112 1 189 371 15 290 726 508 4 201	258 639 5 194 13 853 73 4 585 309 741 3 1 195 1 278 398 16 312 781 546 4 519
Travel and subsistence Training and staff development Operating expenditure Venues and facilities	1 047 48 304 5	3 030 11 110 141 84	3 395 20 004 66 454	4 703 48 980 85 207	4 703 40 592 85 207	4 703 40 523 85 207	5 585 39 653 95 232	18.75 (2.15) 11.76 12.08	6 157 43 706 105 256	6 621 47 130 113 275
Financial transactions in assets and liabilities	33	26	13			69		(100.00)		
Transfers and subsidies to	42 339	51 210	63 746	76 424	84 692	84 692	90 937	7.37	100 238	107 977
Provinces and municipalities	66	14								
Municipalities Municipalities of which	66 66	14 14								
Regional services council levies	66	14								
Departmental agencies and accounts Provide list of entities receiving transfers	1 947 1 947	2 045 2 045	2 169 2 169	2 801 2 801	2 801 2 801	2 801 2 801	2 997 2 997	7.00 7.00	3 304 3 304	3 559 3 559
SETA	1 947	2 045	2 169	2 801	2 801	2 801	2 997	7.00	3 304	3 559
Universities and technikons	2 267	1 275	1 400	1 567	1 567	1 567	1 708	9.00	1 883	2 028
Non-profit institutions			12 000	19 732	28 000	28 000	30 000	7.14	33 068	35 621
Households	38 059	47 876	48 177	52 324	52 324	52 324	56 232	7.47	61 983	66 769
Social benefits	101	46	3	90	90	90	98 56 434	8.89	108	117
Other transfers to households	37 958	47 830	48 174	52 234	52 234	52 234	56 134	7.47	61 875	66 652
Payments for capital assets	711	318	723	885	1 005	1 005	584	(41.89)	644	693
Machinery and equipment Other machinery and equipment	711 711	318 318	723 723	885 885	1 005 1 005	1 005 1 005	584 584	(41.89) (41.89)	644 644	693 693
Total economic classification	79 009	98 858	133 706	178 520	179 110	179 110	191 334	6.82	210 904	227 187

 Table B.2.7 Payments and estimates by economic classification – Programme 7: Health Care Support

 Services

		Outcome						Medium-term	estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	83 901	74 014	79 832	94 454	95 306	95 306	174 771	83.38	194 566	195 796
Compensation of employees	40 920	39 360	43 953	44 672	45 524	45 524	104 681	129.95	116 127	114 057
Salaries and wages	35 576	34 152	37 913	38 288	39 046	39 046	90 026	130.56	98 372	96 478
Social contributions	5 344	5 208	6 040	6 384	6 478	6 478	14 655	126.23	17 755	17 579
Goods and services	42 949	34 441	35 858	49 782	49 782	49 700	70 090	41.03	78 439	81 739
of which										
Advertising	95		214	312	312	312	422	35.26	465	488
Assets <r5 000<="" td=""><td>190</td><td>347</td><td>275</td><td>597</td><td>597</td><td>597</td><td>791</td><td>32.50</td><td>872</td><td>915</td></r5>	190	347	275	597	597	597	791	32.50	872	915
Catering: Departmental activities				2	2	2	2		3	3
Communication Cons/prof: Infrastructure & planning	599	428	461 2	563	563	563	710	26.11	783	821
Cons/prof: Laboratory services	261									
Contractors	11 498	9 098	9 989	3 430	3 430	3 430	4 415	28.72	4 866	5 106
Agency and support/	19	50	2 332	2 462	2 462	2 462	2 947	19.70	3 248	3 408
outsourced services Entertainment	2	4	3	5	5	5	6	20.00	7	7
Inventory: Food and food supplies	82	4 181	98	143	143	143	184	20.00	203	213
Inventory: Fuel, oil and gas	280	532	596	638	638	638	903	41.54	996	1 045
Inventory: Raw materials	7 895	6 472	5 328	7 936	7 936	7 936	10 214	28.70	11 258	11 813
Inventory: Medical supplies	2 208	2 688	4 461	32	32	32	3 500	10837.50	3 850	4 235
Inventory: Other consumables Inventory: Stationery and printing	7 908 324	5 711 455	3 070 487	9 806 704	9 806 704	9 806 704	12 629 2 000	28.79	13 911 2 254	14 597
Lease payments	324 139	400 122	487	704 219	704 219	704 219	2 000	184.09 28.77	2 254 311	2 395 326
Owned and leasehold property	8 403	4 050	3 816	16 661	16 661	16 579	21 662	30.66	23 866	23 694
expenditure Transport provided departmental activity	7									
Travel and subsistence	2 557	3 829	4 122	5 841	5 841	5 841	7 969	36.43	9 944	10 943
Training and staff development	202	241	351	381	381	381	490	28.61	541	567
Operating expenditure	279	231	24				900		990	1 089
Venues and facilities	1	2		50	50	50	64	28.00	71	74
Financial transactions in assets and liabilities	32	213	21			82		(100.00)		
Transfers and subsidies to	7 451	4 067	1 554	1 907	1 907	1 907	2 085	9.33	2 298	2 475
Provinces and municipalities	104	23								
Municipalities	104	23								
Municipalities	104	23								
of which										
Regional services council levies	104	23								
Departmental agencies and accounts	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
Entities receiving transfers	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 036
CMD Capital Augmentation	7 316	4 044	1 411	1 573	1 573	1 573	1 715	9.03	1 890	2 030
, c										
Households	31		143	334	334	334	370	10.78	408	439
Social benefits	31		143	334	334	334	370	10.78	408	439
Payments for capital assets	1 723	14 825	399	725	725	725	1 122	54.76	1 236	1 334
Buildings and other fixed structures	48									
Buildings	48									
Machinery and equipment	1 675	14 825	399	725	725	725	1 122	54.76	1 236	1 334
Other machinery and equipment	1 675	14 825	399	725	725	725	1 122	54.76	1 236	1 334
Total economic classification	93 075	92 906	81 785	97 086	97 938	97 938	177 978	81.73	198 100	199 605

 Table B.2.8 Payments and estimates by economic classification – Programme 8: Health Facilities

 Management

		Outcome						Medium-term e	estimate	
Economic classification R'000	Audited	Audited	Audited	Main appro-priation	Adjusted appro-priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Current payments	43 454	89 049	103 856	109 317	109 317	109 317	145 469	33.07	176 958	178 326
Compensation of employees		6 735	6 290	8 248	8 248	8 248	12 010	45.61	16 210	11 760
Salaries and wages		6 496	6 111	7 068	7 068	7 068	10 329	46.14	13 941	10 114
Social contributions		239	179	1 180	1 180	1 180	1 681	42.46	2 269	1 646
Goods and services	43 454	82 314	97 566	101 069	101 069	101 069	133 459	32.05	160 748	166 566
of which										
Administrative fees		12								
Advertising			40	16	16	16	23	43.75	27	30
Assets <r5 000<="" td=""><td></td><td>271</td><td>752</td><td>10 051</td><td>10 051</td><td>10 051</td><td>12 244</td><td>21.82</td><td>15 341</td><td>12 981</td></r5>		271	752	10 051	10 051	10 051	12 244	21.82	15 341	12 981
Catering: Departmental activities Communication		38 5	18 25	13 60	13 60	13 60	17 79	30.77 31.67	20 93	22 106
Computer services		24	30	00	00	00	15	51.07	30	100
Cons/prof: Business and advisory		2 996	2 768	3 720	3 720	3 720	4 987	34.06	4 364	4 676
services										
Contractors	9 612	9 668	9 084	805	805	805	1 079	34.04	1 171	1 445
Agency and support/ outsourced services		3 246	7 953	50	50	50	62	24.00	73	83
Entertainment		20	2	5	5	5	7	40.00	8	9
Inventory: Food and food supplies		12	3	-	-		-		-	-
Inventory: Raw materials		5	383							
Inventory: Medical supplies		44	101							
Inventory: Other consumables		26	544							
Inventory: Stationery and printing		137	71	155	155	155	208	34.19	245	278
Lease payments		3	450							
Owned and leasehold property	33 842	63 517	74 754	85 207	85 207	85 207	113 405	33.09	137 977	145 130
expenditure										
Travel and subsistence		348	291	316	316	316	449	42.09	469	601
Training and staff development		1 627	241	610	610	610	818	34.10	863	1 095
Operating expenditure		52	10	1	1	1	1		2	2
Venues and facilities		263	46	60	60	60	80	33.33	95	108
Transfers and subsidies to		2								
Provinces and municipalities		2								
Municipalities										
		2								
Municipalities		2								
of which										
Regional services council levies		2								
Payments for capital assets	173 571	255 304	267 822	498 078	495 467	329 813	539 705	63.64	560 252	639 303
Buildings and other fixed structures	155 703	229 685	247 850	480 436	477 825	312 171	482 269	54.49	513 733	546 999
Buildings	155 703	229 685	247 850	480 436	477 825	312 171	482 269	54.49	513 733	546 999
Machinery and equipment	17 855	25 520	19 972	17 642	17 642	17 642	57 436	225.56	46 519	92 304
Other machinery and equipment	17 855	25 520	19 972	17 642	17 642	17 642	57 436	225.56	46 519	92 304
Software and other intangible	13	99								
assets	.5									
Total according along it in the	047.005	244.055	074 070	007.005	004 704	400,400	005 171	50.00	707 040	047.000
Total economic classification	217 025	344 355	371 678	607 395	604 784	439 130	685 174	56.03	737 210	817 629



Table B.4 Transfers to local government by transfers/grant type, category and municipality

		Outcome						Medium-tern	n estimate	
Municipalities R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Total departmental transfers/grants										
Category A	104 662	129 915	142 740	155 838	167 241	167 241	189 663	13.41	213 212	230 466
City of Cape Town	104 662	129 915	142 740	155 838	167 241	167 241	189 663	13.41	213 212	230 466
Category B	58 284									
Beaufort West	1 463									
Bitou	3 510									
Breede River/Winelands	850									
Breede Valley	3 997									
Cederberg	707									
Drakenstein	7 699									
George	11 981									
Knysna	3 738									
Hessequa	1 040									
Matzikama	749									
Mossel Bay	3 766									
Oudtshoorn	1 362									
Overstrand	1 230									
Prince Albert	335									
Saldanha Bay	4 000									
Stellenbosch	6 570									
Swartland	2 829									
Theewaterskloof	2 112									
Witzenberg	346									
Category C	54 481	9 318	8 184	7 673	7 673	7 673	1 894	(75.32)		
Cape Winelands	17 140	1 311								
Central Karoo	4 910	1 369	1 622	1 306	1 306	1 306	323	(75.27)		
Eden	13 641	2 540	2 707	2 612	2 612	2 612	645	(75.31)		
Overberg	7 921	1 684	2 165	1 687	1 687	1 687	416	(75.34)		
West Coast	10 869	2 414	1 690	2 068	2 068	2 068	510	(75.34)		
Total transfers to local government	217 427	139 233	150 924	163 511	174 914	174 914	191 557	9.51	213 212	230 466

Table B.4.1 Transfers to local government by transfers/grant type, category and municipality

		Outcome						Medium-tern	n estimate	
Municipalities R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Personal Primary Health Care Services	206 214	112 758	118 623	128 232	130 113	130 113	158 246	21.62	174 431	187 898
Category A	97 589	112 638	118 623	128 232	130 113	130 113	158 246	21.62	174 431	187 898
City of Cape Town	97 589	112 638	118 623	128 232	130 113	130 113	158 246	21.62	174 431	187 898
Category B	57 863									
Beaufort West	1 463									
Bitou	3 510									
Breede River/Winelands	850									
Breede Valley	3 997									
Cederberg	707									
Drakenstein	7 699									
George	11 981									
Knysna	3 738									
Hessequa	1 040									
Matzikama	749									
Mossel Bay	3 766									
Oudtshoorn	1 362									
Overstrand	1 230									
Prince Albert	335									
Saldanha Bay	3 839									
Stellenbosch	6 355									
Swartland	2 784									
Theewaterskloof	2 112									
Witzenberg	346									
Category C	50 762	120								
Cape Winelands	16 545									
Central Karoo	4 465									
Eden	12 538									
Overberg	7 165	120								
West Coast	10 049									

Note: Excludes regional services council levy.

Table B.4.2 Transfers to local government by transfers/grant type, category and municipality

		Outcome						Medium-tern	n estimate	
Municipalities R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Integrated Nutrition	2 997	2 973	3 150	3 308	3 308	3 308	3 604	8.95	3 973	4 279
Category A	2 997	2 973	3 150	3 308	3 308	3 308	3 604	8.95	3 973	4 279
City of Cape Town	2 997	2 973	3 150	3 308	3 308	3 308	3 604	8.95	3 973	4 279

Note: Excludes regional services council levy. Due to structural changes comparitive figures cannot be submitted.

Table B.4.3 Transfers to local government by transfers/grant type, category and municipality

		Outcome						Medium-tern	n estimate	
Municipalities R'000	Audited	Audited	Audited	Main appro- priation	Adjusted appro- priation	Revised estimate		% Change from Revised estimate		
	2005/06	2006/07	2007/08	2008/09	2008/09	2008/09	2009/10	2008/09	2010/11	2011/12
Global Fund	7 296	12 645	11 403	11 705	21 227	21 227	2 894	(86.37)		
Category A	3 773	3 447	3 609	4 032	13 554	13 554	1 000	(92.62)		
City of Cape Town	3 773	3 447	3 609	4 032	13 554	13 554	1 000	(92.62)		
Category C	3 523	9 198	7 794	7 673	7 673	7 673	1 894	(75.32)		
Cape Winelands	595	1 311								
Central Karoo	363	1 369	1 232	1 306	1 306	1 306	323	(75.27)		
Eden	1 103	2 540	2 707	2 612	2 612	2 612	645	(75.31)		
Overberg	756	1 564	2 165	1 687	1 687	1 687	416	(75.34)		
West Coast	706	2 414	1 690	2 068	2 068	2 068	510	(75.34)		

Note: Excludes regional services council levy. Due to structural changes comparitive figures cannot be submitted.

Table B.4.4 Transfers to local government by transfers/grant type, category and municipality

		Outcome						Medium-term	n estimate	
Municipalities R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
HIV and Aids										
HIV and Alds	920	10 857	17 748	20 266	20 266	20 266	26 813	32.31	34 808	38 289
Category A	303	10 857	17 358	20 266	20 266	20 266	26 813	32.31	34 808	38 289
City of Cape Town	303	10 857	17 358	20 266	20 266	20 266	26 813	32.31	34 808	38 289
Category B	421									
Saldanha Bay	161									
Stellenbosch	215									
Swartland	45									
Category C	196		390							
Central Karoo	82		390							
West Coast	114									

Note: Excludes regional services council levy. Due to structural changes comparitive figures cannot be submitted.

Table B.5 Provincial payments and estimates by district and local municipality

		Outcome						Medium-tern	n estimate	
Municipalities R'000	Audited 2005/06	Audited 2006/07	Audited 2007/08	Main appro- priation 2008/09	Adjusted appro- priation 2008/09	Revised estimate 2008/09	2009/10	% Change from Revised estimate 2008/09	2010/11	2011/12
Cape Town Metro	4 669 240	5 241 344	5 558 367	6 587 228	6 761 651	6 666 319	7 540 655	13.12	8 327 636	8 967 299
West Coast Municipalities	141 134	158 428	290 263	293 845	301 626	297 372	336 375	13.12	371 481	400 016
Matzikama	18 825	21 132	41 797	48 223	49 500	48 802	55 202	13.11	60 964	65 647
Cederberg	19 993	22 443	26 164	30 284	31 086	30 648	34 668	13.12	38 285	41 220
Bergrivier	842	945	15 575	20 423	20 964	20 668	23 378	13.11	25 819	27 803
Saldanha Bay	22 466	25 219	49 158	77 435	79 485	78 364	88 643	13.12	97 894	105 414
Swartland	57 407	64 441	60 741	117 480	120 591	118 890	134 484	13.12	148 519	159 920
Across wards and municipal projects	21 601	24 248	96 828							
Cape Winelands Municipalities	453 950	509 571	834 209	882 079	905 436	892 669	1 009 748	13.12	1 115 134	1 200 78
Witzenberg	23 519	26 401	38 860	44 963	46 154	45 503	51 471	13.12	56 843	61 209
Drakenstein	162 567	182 485	315 233	356 804	366 252	361 087	408 446	13.12	451 076	485 723
Stellenbosch	39 335	44 155	63 945	77 898	79 961	78 833	89 172	13.11	98 479	106 044
Breede Valley	179 970	202 021	262 924	346 484	355 658	350 643	396 634	13.12	438 029	471 67
Breede River/Winelands	30 448	34 179	140 980	55 930	57 412	56 603	64 025	13.11	70 707	76 13
Across wards and municipal projects	18 111	20 330	12 267							
Overberg Municipalities	74 651	83 797	178 254	183 428	188 285	185 630	209 977	13.12	231 892	249 70
Theewaterskloof	21 808	24 480	50 458	96 966	99 534	98 130	111 000	13.12	122 586	132 00
Overstrand	17 509	19 654	46 695	41 799	42 906	42 301	47 849	13.12	52 843	56 90
Cape Agulhas	11 317	12 703	19 134	21 575	22 146	21 834	24 698	13.12	27 275	29 37
Swellendam	12 220	13 718	21 572	23 088	23 699	23 365	26 430	13.12	29 188	31 43
Across wards and municipal projects	11 797	13 242	40 395							
Eden Municipalities	333 059	373 865	549 801	598 949	614 809	606 141	685 640	13.12	757 199	815 36
Kannaland	7 801	8 756	13 367	14 449	14 832	14 622	16 540	13.12	18 267	19 67
Hessequa	19 788	22 212	34 658	44 656	45 838	45 192	51 119	13.12	56 455	60 79
Mossel Bay	31 916	35 827	49 249	61 712	63 346	62 453	70 644	13.12	78 017	84 00
George	170 101	190 942	224 228	329 011	337 723	332 962	376 632	13.12	415 939	447 88
Oudtshoorn	47 072	52 839	75 812	78 571	80 651	79 514	89 944	13.12	99 330	106 96
Bitou	5 126	5 754	8 419	20 699	21 247	20 948	23 695	13.11	26 168	28 17
Knysna	32 035	35 960	48 389	49 851	51 171	50 450	57 066	13.11	63 023	67 86
Across wards and municipal projects	19 220	21 575	95 679							
Central Karoo Municipalities	46 778	52 510	86 974	96 444	98 998	97 602	110 403	13.12	121 927	131 29
Laingsburg	3 112	3 493	5 909	6 024	6 184	6 096	6 896	13.12	7 616	8 20
Prince Albert	4 385	4 923	4 025	6 525	6 698	6 603	7 469	13.12	8 249	8 88
Beaufort West	24 947	28 003	58 344	83 895	86 116	84 903	96 038	13.11	106 062	114 20
Across wards and municipal projects	14 334	16 091	18 696							
Total provincial expenditure by district and local municipality	5 718 812	6 419 515	7 497 868	8 641 973	8 870 805	8 745 734	9 892 798	13.12	10 925 269	11 764 45

Note: Projects disaggregated per district.

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Table B.6 Summary of details of expenditure for infrastructure by category

ŀ						ſ				ľ	ľ	ľ	Ī			
Å.	No. Project name	Region/	Municipality	Project Description/	Project duration	Juration	Programme	EPWP	Total project cost	ect cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	et cost Estimated Professional Construction/ expenditure Fees Budget Budget Budget I Drevious	MTEF Forward Estimates	EF stimates
		DISTRICT		Iype or Infrastructure	Date: Start	Date: Finich	,		At start	At com-	years		MTEF 2009/10		MTEF 2010/11 MTEF 2011/12	MTEF 2011/12
					Note 1	Note 2			1 2131	pletion	R'000	R'000	R'000	R'000	R'000	R'000
1	I New and renlacement assets	ement ass	ets													

-	1. New and replacement assets	ement asse	its												
NO	OWN FUNDS														
<i>~</i>	1 Bonnievale	Cape	Breede	New	1-Apr-12	31-Mar-13	31-Mar-13 8.2 Emergency	3 000	3 350					350	2 750
	ambulance	Winelands River/	River/	ambulance			medical rescue								
	station		Winelands	station			services								
2	De Doorns	Cape	Breede	New	1-Feb-10	31-Mar-11	31-Mar-11 8.2 Emergency	2 800	3 000		200		200	2 600	200
	ambulance	Winelands Valley	Valley	ambulance			medical rescue								
				station			services								
с	Heidelberg	Eden	Hessequa	New	1-Apr-12	31-Mar-13	31-Mar-13 8.2 Emergency	3 000	3 200					250	2 800
	ambulance			ambulance			medical rescue								
				station			services								
4	Leeu Gamka	Central	Prince	New	1-Jun-09	31-May-10	31-May-10 8.2 Emergency	8 200	8 500	120	600	4 500	5 100	3 000	280
	ambulance	Karoo	Albert	ambulance			medical rescue								
	station			station			services								
5	Malmesbury	West Coast Swartland		New	1-Jun-11	31-May-12	I-Jun-11 31-May-12 8.2 Emergency	5 500	6 000					1 300	4 500
	ambulance			ambulance			medical rescue								
	station			station			services								
9	Tulbach	Cape	Witzenberg New	New	1-Apr-10	31-Mar-11	8.2 Emergency	3 000	3 200		250		250	2 800	150
	ambulance	Winelands		ambulance			medical rescue								
	station			station			services								
7	Vredendal	West Coast	West Coast Matzikama New	New	1-Jun-09	31-May-10	31-May-10 8.2 Emergency	7 800	8 050	500	009	5 450	6 050	1 500	
	ambulance			ambulance			medical rescue								
	station			station			services								
8	Wellington	Cape	Drakenstein New	New	11-Aug-06	11-Aug-06 30-Jun-08	8.1 Community	18 000	20 500	19 500	200	800	1 000		
	community health Winelands	Winelands		community			health facilities								
	centre			health centre											
Sub	Subtotal: Own Funds	6						51 300	55 800	20 120	1 850	10 7 50	12 600	11 800	10 680

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No.	Project name	Region/ District	Municipality	Project Description/	Project	Project duration	Programme	EPWP	Total project cost	ect cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available	MTEF Forward Estimates	EF stimates
		חפתוכו		iype or Infrastructure	Date: Start	Date: Finish			At ctart	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
					Note 1	Note 2			11910 14	pletion	R'000	R'000	R'000	R'000	R'000	R'000
GР																
-	Beaufort West clinic		Beaufort West	New clinic	1-Jun-12	31-May-13			7 800	8 000						1 000
	Beaufort West hospital	Central Karoo	Beaufort West	New bulk store			8.3 District hospital services		2 000	3 500	750	150	2 500	2 650	100	
с С	Ceres hospital - ambulance station	Cape Winelands	Witzenberg	New ambulance station and emergency department	1-Jun-09	30-Apr-10	8.2 Emergency medical rescue services		7 000	10 500	600	500	6 000	6 500	3 400	
4	Du Noon community health centre	Unicity	Cape Town	New community health centre	1-Jun-10	31-Mar-12	8.1 Community health facilities		18 000	25 000		500		500	6 000	18 000
5		Eden	Mossel Bay	te	1	15-Dec-11	8.1 Community health facilities		1 800	2 000					50	1 900
	Ŷ	Unicity	Cape Town New clinic	New clinic		31-May-10	8.1 Community health facilities		8 500	12 500	750	006	7 500	8 400	2 850	500
			Cape Town	New OPD & wards	2	12-Dec-08			15 720	17 300	16 800	80	200	280		
	Hermanus community health centre	5LG	Overstrand	New community health centre		30-Apr-13			18 000	20 000					300	5 200
	Khayelitsha clinic Unicity		Cape Town	clinic	!	30-Nov-12			11 000	12 000					300	5 200
	Maitland community health centre	Unicity	C	nunity h centre	1	31-Dec-13	8.1 Community health facilities		17 000	18 000						2 500
7	Malmesbury - Wesbank community health centre	West Coast Swartland		New community health centre	1-Jun-09	30-Nov-10	8.1 Community health facilities		18 000	25 000	1 250	1 000	5 250	6 250	15 000	2 500

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Table B.6 Summary of details of expenditure for infrastructure by category

Vote 6: Health

Estimates of Provincial Expenditure 2009

Tab	Table B.6 Summ	ary of de	tails of ext	Summary of details of expenditure for infrastructure	or infrast		by category									
Š	Project name	Region/ Distant	Municipality	Project Description/	Project	Project duration	Programme	EPWP	Total project cost	ect cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available	MTEF Forward Esti	MTEF Forward Estimates
		DISTLICT		iype or Infrastructure	Date: Start	Date: Finish			At start	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
					Note 1	Note 2			100010	pletion	R'000	R'000	R'000	R'000	R'000	R'000
12	Mitchell's Plain community health centre	Unicity	Town	New community health centre		3	8.1 Community health facilities		22 000	25 000					300	6 200
5 5 7 8 7 8 8		Eden	Bitou	llance n		0	8.2 Emergency medical rescue services		4 500	6 000	200	300	2 800	3 100	2 150	50
5 4 E T 0 0	Plettenberg Bay/ Kwanokuthula community health centre		Bitou	New community health centre	1	30-Nov-11	8.1 Community health facilities		18 000	20 000	1 200	2 400	4 000	6 400	10 000	006
15 F	Rawsonville clinic Cape Winel	ands	Breede Valley	New clinic	1-Nov-11	31-Oct-12	8.1 Community health facilities		10 000	12 000					200	2 000
Subt	Subtotal: IGP								179 320	216 800	21 550	5 830	28 250	34 080	40 650	50 950
HRP																
-	Khayelitsha hospital	Unicity	Cape Town	Cape Town New hospital { and ambulance station	5-Jan-09	4-Jan-12			480 000	536 000	52 000	11 000	120 000	131 000	195 000	136 000
1			Cape Town			~	8.3 District hospital services		14 000	14 300	10 300	400	3 600	4 000		
		Unicity	Cape Town	oital		N	8.3 District hospital services		480 000	553 000	30 000	10 000	000 86	108 000	210 000	168 000
	Plain	Unicity	own		1-Mar-12	e	8.3 District hospital services		30 000	31 000						500
2	Worcester hospital	Cape Winelands	Breede Valley	New DMC and ambulance station	14-Nov-06 9-Apr-09		8.2 Emergency medical rescue services		10 900	16,400	11 500	500	4 000	4 500	400	

Estimates of Provincial Expenditure 2009

Table B.6		ary of de	tails of ex	Summary of details of expenditure for infrastructure	or infrastr	_	by category									
No.	Project name	Region/	Municipality	Project Description/	Project duration	luration	Programme	EPWP	Total project cost		Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available		MTEF Forward Estimates
		DISTRICT		iype or Infrastructure	Date: Start	Date: Finish			At start	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
		_			Note 1	Note 2				pletion	R'000	R'000	R'000	R'000	R'000	R'000
	a	Unicity	Cape Town	Cape Town Infrastructure			8.3 District hospital services						(80 000))	(185 341)	(18 700)
-	٩	Unicity	Cape Town	Infrastructure			8.3 District hospital services						22 805		(22805)	
	sha	Unicity	Cape Town	Cape Town Health Tech			8.3 District hospital services					3 000		3 000	13 000	47 000
		Unicity	Cape Town OD+QA	OD+QA			8.3 District hospital services					4 000		4 000	6 000	3 000
		Unicity	Cape Town	Cape Town Health Tech			8.3 District hospital services					2 000		2 000	10 000	47 000
10 Mitchell' hospital	s Plain	Unicity	Cape Town OD+QA	OD+QA			8.3 District hospital services					2 000		2 000	5 000	4 000
Subtotal: HRP	HRP								1 014 900	1 150 700	103 800	32 900	168 405	201 305	231 254	386 800
Total nev	Total new and replacement assets	acement a	ssets						1 245 520	1 423 300	145 470	40 580	207 405	247 985	283 704	448 430
2. Maint	Maintenance and repairs	d repairs														
Vote (Vote 6: Health						8.1 Community health facilities					1 200	20 000	21 200	25 000	25 000
							8.3 District hospital services					600	12 000	12 600	19 340	19 340
							8.4 Provincial hospital services					1 800	21 505	23 305	26 637	29 790
							8.5 Central hospital services					5 000	45 000	50 000	60 000	64 000
							8.6 Other facilities					300	6 000	6 300	7 000	7 000
Total ma	Total maintenance and repairs	and repair	S									8 900	104 505	113 405	137 977	145 130

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Table B.6 Summary of details of expenditure for infrastructure by category

No.	Project name	Region/	Municipality	Ď	Project duration	duration	Programme	EPWP	Total pro	Total project cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available		MTEF Forward Estimates
		DISTRICT		iype or Infrastructure	Date: Start	Date: Finish			∆t ctart	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
					Note 1	Note 2			1 2131	pletion	R'000	R'000	R'000	R'000	R'000	R'000
નં	3. Upgrades and additions	dditions														
õ	OWN FUNDS															
-	1 Brooklyn Chest	Unicity	Cape Town Repair &	Repair &	1-Feb-09	31-Mar-10	0 8.4 Provincial		5 500	6 200	1 000	415	4 500	4 915	285	
	TB hospital			renovation to			hospital									
				kitorieri, stari houses			services									
2	George Harry	Eden	George	Repair &	20-Nov-08 19-Feb-09		8.4 Provincial		1 000	1 400	500		800	800	100	
	Comay TB			renovation to			hospital									
				two wards			services									
ო	Red Cross	Unicity	Cape Town Ward	Ward	1-Apr-09	31-Mar-10	8.5 Central		24 320	24 320		800	3 935	4 735	8 320	000 6
	hospital			upgrade			hospital									
				(managed by			services									
				Trust)												
4	Paarl Sonstraal	Cape	Drakenstein Repair &	Repair &	30-Dec-08 29-Sep-09	29-Sep-09	8.4 Provincial		5 800	000 9	950	600	4 350	4 950	100	
_	TB hospital	Winelands		renovation to			hospital									
				hospital and			services									
				parking area												
5	TB hospitals (to			Improvement			8.4 Provincial		19 334	19 334					9 195	11 704
	1 = 11 = -4 = -10			and a second sec		-				-						

19 334 19 334 19 334 19 334 19 334 9 195 9 195 10 0spital services 55 934 57 254 2 450 18 15 13 600 18 000 1 11-Jun-13 31-May-15 8.4 Provincial 37 000 40 000 40 000 40 000 18 15 13 565 15 400 18 000 1 11-Jun-13 31-May-15 8.4 Provincial 37 000 40 000 22 550 22 000 70 480 550 18 00 10 14-Feb-07 21-Feb-09 8.3 District 19000 22 550 22 000 70 480 550 18 00 10 14-Feb-07 21-Feb-09 8.3 District 19000 22 550 22 000 70 480 550 10 10 14-Feb-07 21-Feb-09 8.3 District 19000 22 550 22 000 70 480 550 10 10 14-Feb-07 21-Feb-09 8.3 District 19000 22 550 22 000 70 480 550 10 10 10 10 10 1															
Inospital Inospital <thinospital< th=""> Inospital <thinospital< th=""> Inospital <thinospital< th=""> <thinospital< th=""> <thino< td=""><td>TB hospitals (to</td><td></td><td></td><td>Improvement</td><td></td><td></td><td>8.4 Provincial</td><td>19 334</td><td>19 334</td><td></td><td></td><td></td><td></td><td>9 195</td><td>11 704</td></thino<></thinospital<></thinospital<></thinospital<></thinospital<>	TB hospitals (to			Improvement			8.4 Provincial	19 334	19 334					9 195	11 704
58 04 57 254 57 255 2450 1815 13 585 15 400 18 00 58 04 rospital 37 000 40 000 40 000 40 000 70 480 550 18 480 18 00 8 03 05trict 19 000 22 550 22 000 70 480 550 550 9 8.3 District 19 000 22 550 22 000 70 480 550 9 8.3 District 18 3 District 700 700 700 700 1 8.3 District 6800 8 000 700 700 700	be allocated)			to existing hospitals			hospital services								
5 8.4 Provincial 37 000 40 000 40 000 40 000 550 550 550 9 8.3 District 19 000 22 550 22 000 70 480 550 550 hospital services 19 000 22 550 22 000 70 480 550 550 1 8.3 District 6800 8 000 70 700 700 750 3 750	ubtotal: Own Fund	s						55 954	57 254	2 450	1 815	13 585	15 400	18 000	20704
5 8.4 Provincial 37 000 40 000 hospital 37 000 40 000 550 550 9 8.3 District 19 000 22 550 22 000 70 480 550 9 8.3 District 68.0 70 70 480 550 70 1 8.3 District 68.00 8 000 700 70 780 550 750 1 8.3 District 6800 8 000 750 750 750 3 750 1 8.3 District 500 700 750 750 3 750	ЗР														
hospital 37 000 40 000 40 000 550 500 500 500	Brooklyn Chest	City of	Cape Town	New XDR	1-Jun-13	-	8.4 Provincial								
9 8.3 District 19 000 22 550 22 000 70 480 550 hospital services 70 680 70 70 50 50 1 8.3 District 6 800 8 000 750 500 1 250 3 750	TB hospital	Cape Town		wards			hospital services	37 000	40 000						3 000
hospital hospital services 6800 8000 750 500 3750 hospital services 3750 500 3750 3750	Caledon hospital	-Overberg	Theewaters	New wards	14-Feb-07	Ĩ	8.3 District	19 000	22 550	22 000	20	480	550		
services 6 800 8 000 750 500 1 250 3 750 hospital services 3 root 1 8.3 District 1 8.3 District 3 root	Phase 1			and			hospital								
1 8.3 District 6 800 8 000 750 720 1 250 3 750 hospital services 2800 8 000 750 750 3 750 3 750				ambulance			services								
1 8.3 District 6 800 8 000 750 750 3 750 hospital services 3 root 1 250 3 750				station											
hospital services	Caledon hospital	-Overberg	Theewaters	Disa building	31-Jan-10		8.3 District	6 800	8 000		750	500	1 250	3 750	3 000
services	Phase 2			renovation			hospital								

Tai	Table B.6 Summ	ary of de	tails of ex	Summary of details of expenditure for infrastructure	or infrast		by category									
No.	Project name	Region/	Municipality	Project Description/	Project	Project duration	Programme	EPWP	Total project cost	ject cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available	MT Forward	MTEF Forward Estimates
		DISILICI		iype or Infrastructure	Date: Start	Date: Finich			At start	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
					Note 1	Note 2			ALSIAL	pletion	R'000	R'000	R'000	R'000	R'000	R'000
4	Caledon hospital	Overberg	Theewaters Upgrading kloof electrical supply		10-Jul-08	11-Dec-08	8.3 District hospital services		1 150	2 400	2 175	25	200	225		
5		Unicity	Cape Town	New emergency department	5-Sep-08				20 780	27 500	4 000	1 800	18 000	19 800	2 900	600
9	Groote Schuur hospital	Unicity	Cape Town	Alterations to Clarendon & Carinus nurse home	1-Jun-12		-		2 200	2 500					100	2 000
7	Groote Schuur hospital	Unicity	Cape Town	ns to int	1-Apr-10	~	8.5 Central hospital services		4 200	5 000		200		200	1 500	2 800
α 264		Unicity	Cape Town Building manage system upgrade	Building management system upgrade	1-Jun-13		8.5 Central hospital services		4 000	4 500						1 500
o	Groote Schuur hospital	Unicity	Cape Town	E-Floor upgrade	1		8.5 Central hospital services		5 300	7 500	20				200	4 500
10	Groote Schuur hospital	Unicity	Cape Town	Improved parking facilities for oncology & psychiatry	1-Apr-12	31-Mar-13	8.5 Central hospital services		450	500						500
11	Groote Schuur hospital	Unicity	Cape Town	i	1	1	8.5 Central hospital services		2 000	2 100	700		1 300	1 300	100	
12	Groote Schuur hospital	Unicity	Cape Town Masterplan			•	8.5 Central hospital services					2 000		2 000		
13	Groote Schuur hospital	Unicity	Cape Town NMB fire detection phase 1		19-Oct-06	15-Dec-08	8.5 Central hospital services		10 200	12 000	11 900		100	100		

Estimates of Provincial Expenditure 2009

Ta	Table B.6 Summ	nary of de	tails of ex _l	Summary of details of expenditure for infrastructure	or infrasti		by category									
No.	Project name	Region/	Municipality	Project Description/	Project (Project duration	Programme	EPWP	Total project cost	ject cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available	MT Forward	MTEF Forward Estimates
		DISTRICT		lype of Infrastructure	Date: Start	Date: Finish	,		At start	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
					Note 1	Note 2			ALSIGH	pletion	R'000	R'000	R'000	R'000	R'000	R'000
14		Unicity		NMB fire detection phase 2		01	8.5 Central hospital services		3 000	3 500					50	3 000
15		Unicity	Cape Town	OMB alterations & upgrade		10	8.5 Central hospital services		6 500	7 000						1 000
16		Unicity	Cape Town	Provision of airconditionin g in certain areas of NMB	1-Apr-13	4			500	700						1 000
17		Unicity	Cape Town	Relocation of child care centre	1-Oct-10				2 200	2 500					700	1 800
18		Unicity		Relocation of engineering workshop		0	8.5 Central hospital services		4 500	6 000	123	300	2 7 00	3 000	2 800	11
		Unicity	Cape Town	Survey for space utilisation	15-Jan-08	~	8.5 Central hospital services		1 000	3 200	500	2 700		2 700		
20		Unicity	Cape Town	023 nt sia	1-Jun-09	31-Dec-09	8.5 Central hospital services		1 500	1 640	150	50	1 390	1 440	50	
21		Unicity	Cape Town	Upgrade pharmacy store		0	8.5 Central hospital services		1 500	2 000			1 800	1 800	200	
22		Unicity	Cape Town	Upgrade security phase 1		0	8.5 Central hospital services		5 000	6 000	400	200	3 700	3 900	1 650	550
23	23 Groote Schuur hospital	Unicity	Cape Town	ng of roads ices	1-Jun-12	31-May-13	8.5 Central hospital services	2500	4 000	4 500					200	3 700

Estimates of Provincial Expenditure 2009

No. Project name	Region/	Municipality	Project Description/	Project (Project duration	Programme	EPWP	Total project cost	ect cost	Estimated expenditure to date from	Professional Fees Budget	Construction/ Maintenance Budget	Total available		MTEF Forward Estimates
	District		Type of Infrastructure	Date:	Date: Einich	0			At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
				Otarr Note 1	Note 2			At start	pletion	R'000	R'000	R'000	R'000	R'000	R'000
	Overberg		New ward, OPD & admin	~		8.3 District hospital services		38 000	41 000		3 000		3 000	15 000	21 000
	Unicity	uwo	Trauma upgrade			8.3 District hospital services		15 000	28 000					500	15 000
26 Knysna hospital			Upgrade casualty & new OPD			8.3 District hospital services		12 200	16 000		929		929	8 600	6 000
			e			8.1 Community health facilities		18 000	21 000	0£	1 800		1 800	8 491	10 344
28 Lamberts Bay hospital ambulance station	West Coast	West Coast Cederberg	Ambulance station upgrade			8.2 Emergency medical rescue services		1 200	1 622	162	120	1 300	1 420	100	
			Trauma and pharmacy upgrade (co- funded GF)	1	30-Nov-10	8.1 Community health facilities		25 100	37 875	1 500				20 000	1 200
	Cape Winelands	. <u>c</u>	Ugrade			8.4 Provincial hospital services		18 000	20 000						1 800
	Eden	Hessequa				8.3 District hospital services		16 000	17 000	8 000	920	4 380	5 300		
	Eden		Resurface roads			8.3 District hospital services		1 400	1 500	1 000	100	400	500		
	Unicity	nwo	Replacement clinic			8.1 Community health facilities		20 000	22 000					500	6 500
34 Robertson hospital	Cape Winelands	Breede Valley	Extension to maternity ward	1-Feb-10	31-Oct-10	8.3 District hospital		2 750	3 000		230	200	430	2 570	

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Tat	Table B.6 Summ	ary of de	tails of ex _l	Summary of details of expenditure for infrastructure	or infrast		by category									
No.	Project name	Region/ Distant	Municipality	Project Description/ T	Project -	Project duration	Programme	ЕРМР	Total project cost	ect cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available		MTEF Forward Estimates
		DISTLICT		iype or Infrastructure	Date: Start	Date: Finish			At ctart	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
					Note 1	Note 2			AI SIGIL	pletion	R'000	R'000	R'000	R'000	R'000	R'000
	_		Stellenbosc (h	Casualty upgrade		2	8.3 District hospital services		6 500	2 000					500	5 500
	E	ſſġ	Swellendam	New casualty and offices		30-Sep-12	8.3 District hospital services		12 500	13 000						2 000
		Unicity		East side electric fence upgrade	ł	0			3 800	4 000	100	100	3 600	3 700	200	
		Unicity	Cape Town			1	8.5 Central hospital services		7 500	8 000	200	200	7 400	7 600	200	
39		Unicity		ふた		30-Nov-10	8.5 Central hospital services		12 800	13 200	100	1 000	3 500	4 500	8 300	300
		Unicity	Cape Town	Fire door upgrade phase 2		30-Nov-09	8.5 Central hospital services		3 500	4 000	2 200		1 800	1 800		
		Unicity		Kitchen upgrade			8.5 Central hospital services		11 000	12 000	180	1 000	3 000	4 000	000 2	820
		Unicity	Cape Town	Lift upgrading blocks 21, 22, 53		22-Oct-09			7 800	8 000	750	450	6 650	7 100	150	
	Tygerberg hospital	Unicity	Cape Town	New helipad		0	8.5 Central hospital services		500	200	200	20	480	500		
		Unicity	Cape Town Psychiatric ward upgra	de			8.5 Central hospital services		3 500	4 000					1 918	2 082
45	Tygerberg hospital	Unicity	Cape Town	Medical record upgrade	1-Apr-12	31-Mar-13	8.5 Central hospital services		3 500	4 000						741

Estimates of Provincial Expenditure 2009

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No. Project name	Region/	Municipality	Project Description/	Project duration	duration	Programme	EPWP	Total project cost	ect cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available	MTEF Forward Estimates	EF stimates
	DISTRICT		lype of Infrastructure	Date: Start	Date: Finich	,		At start	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
				Note 1	Note 2			AI SIGIL	pletion	R'000	R'000	R'000	R'000	R'000	R'000
46 Tygerberg hospital	Unicity	Cape Town A5 Bronco Theate and Pulmonolog ICU upgrac	- Se		31-Mar-13	8.5 Central hospital services		2 750	3 000						600
47 Tygerberg hospital	Unicity	Cape Town New main entrance ai receoption area	рг	1-Apr-12	31-Mar-13	8.5 Central hospital services		2 500	2 750	- - - - - - - - - - - - - - - - - - -					600
48 Tygerberg hospital	Unicity	Cape Town	Cape Town Upgrade lift 1 bank	1-Apr-12	30-Nov-13	8.5 Central hospital services		8 500	10 000						1 150
Subtotal: IGP								397 080	474 237	56 390	17 964	62 880	80 844	88 229	104 664
Other 1 Somerset	Unicity	Cape Town	Cape Town Relocation of 1-Apr-09 31-Dec-09 8.4 Provincial	1-Apr-09	31-Dec-09	8.4 Provincial		3 500	4 000		100	3 800	3 900		
hospital			SCM to Shipley Building			hospital services			-						
2 Somerset hospital	Unicity 0	Cape Town Enabling work for F 2010 Wor Cup	Enabling work for FiFA 2010 World Cup	1-Apr-09	31-Mar-10	31-Mar-10 8.4 Provincial hospital services		35 000	38 000		4 500	31600	36 100		

Estimates of Provincial Expenditure 2009

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Tab	Table B.6 Summary of details of expenditure for infrastructure by category	nary of de	stails of ex	cpenditure f	or infrast	ructure b	y category									
, S	Project name	Region/	Municipality		Project (Project duration	Programme	EPWP	Total project cost		Estimated Prexpenditure From From Drevious	Professional Fees Budget	Construction/ Maintenance Budget	Estimated Professional Construction/ expenditure Fees Budget Budget Budget Drevious		MTEF Forward Estimates
		DISTRICT		iype or Infrastructure	Date: Start	Date: Finish			At atout	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2010/11 MTEF 2011/12
					Note 1	Note 2			1191914	pletion	R'000	R'000	R'000	R'000	R'000	R'000
4 R	4. Rehabilitation, renovations and refurbishments	renovation	is and refur	bishments												
нгр																
- 1	Brooklyn Chest Unicity Cape Town Hospital	Unicity	Cape Town	Hospital			8.4 Provincial									1 000
	hospital			undrade			hospital									

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ble B.6 Summary of details of expenditure for infrastructure by catego

4. 8. 8	4. Rehabilitation, renovations and refurbishments	renovation	s and refur	bishments											
-	Brooklyn Chest	Unicity	Cape Town Hospital	Hospital			8.4 Provincial								1 000
<u> </u>	hospital			upgrade			hospital services								
~	George hospital	Eden	George	Hospital	1-Apr-09	31-Mar-11	8.4 Provincial	56 000	65 000	3 000	1 000	28 000	29 000	29 000	4 000
				upgrade	_		hospital								
				phase 3	_		services								
3	Paarl hospital		Draken-	Hospital	10-Apr-06	15-Dec-09	8.4 Provincial	332 000	370 000	258 000	10 000	80 000	000 06	12 000	
		Winelands	stein	upgrade			hospital								
					-		services								
4	Paarl TC	Cape	Draken-	Community	15-May-09	14-May-11	8.1 Community	10 000	13 000	1 000				10 000	2 000
2	Newman	Winelands	stein	health centre	_		health facilities								
0	community health			upgrade (co-	_										
0	centre			funded GF)											
5	Paarl hospital	Cape	Draken-	New	1-Oct-09	3-Jun-11	8.4 Provincial	18 000	20 000	1 000	1 500	5 000	6 500	12 500	
		Winelands	stein	administration			hospital								
				block			services								
< 9	Valkenberg	Unicity	Cape Town	Hospital			8.4 Provincial	1 300 000	1 400 000	1 200	3 040		3 040	000 9	6 201
	hospital			upgrading			hospital								
			_	_	_	_	services								
7	Valkenberg	Unicity	Cape Town	Emergency	1-Jun-09	31-May-10	8.4 Provincial	5,000	10,000	500	800	006 9	7 700	1 800	
-	hospital			repairs to			hospital								
				admin			services								
_				building											
8	Vredenburg	West Coast	West Coast West Coast	Upgrading	29-Oct-08	28-Jul-09	8.3 District	3,700	4,050	1 000	500	2 800	3 300		
	nospital			phase 1B-			hospital								
				Various			services								
				internal work											
> 6	Vredenburg	West Coast	West Coast West Coast	Upgrading	15-Feb-09	14-May-10	8.3 District	36,000	39,000	2 000	1 500	24 500	26 000	11 000	
-	hospital			phase 2A			hospital								
			_	_	_		services								
10 \	10 Vredenburg	West Coast	West Coast West Coast Upgrading	Upgrading	31-Jan-10 30-Dec-12		8.3 District	90,000	150,000	3 000	10 000	2 000	12 000	50 000	60 000
<u></u>	hospital			phase 2B			hospital								

services

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° Š	Project name	Region/	Municipality	Project Description/	Project	Project duration	Programme	EPWP	Total pro	Total project cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available	M ⁻ Forward	MTEF Forward Estimates
		District		Iype of Infrastructure	Date: Start	Date: Finish	,		Δt start	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
					Note 1	Note 2				pletion	R'000	R'000	000.N	R'000	R'000	R'000
11	er	Cape		Hospital	26-Jun-03	31-Dec-08	8.4 Provincial		170 000	266 000	262 000	096	3 040	4 000		
		Winelands	Valley	upgrade phase 3			hospital services									
12 V	Worcester	Cape	Breede	Hospital	1-Jul-09	31-Mar-11	8.4 Provincial		23 220	45 000	2 000	2 000	5 500	7 500	25 500	1 000
		Winelands	Valley	upgrade phase 4			hospital services									
13 F		Unicity	Cape Town	Infrastructure			8.4 Provincial						(80 000)	(80 000)		
	allocation "						nospital services									
	d)	Unicity	NN	HRP unit			8.6 Other facilities					2 000		7 000	5 500	5 500
15 0	George hospital	Eden	George	Health Tech			8.4 Provincial					17 000		17 000	6 000	4 000
							hospital services									
16	George hospital	Eden	George	OD+QA			8.4 Provincial					2 000		2 000	2 000	1 000
							hospital									
	ĺ						services									
17 F	Paarl hospital	Cape	-Li	Health Tech			8.4 Provincial					19 500		19 500	000 6	10 000
		Winelands	stein				nospital services									
18 F	Paal hospital	Cape	-u	OD+QA			8.4 Provincial					3 000		3 000	2 000	1 000
		Winelands	stein				hospital services									
19 F	Paarl TC	Cape	Draken-	Health Tech			8.1 Community					1 000		1 000		
~	Newman	Winelands	stein				health facilities									
	community health centre															
20 \	Valkenberg	Unicity	Cape Town	OD+QA			8.4 Provincial					1 000		1 000	1 000	1 000
<u> </u>	hospital						hospital									
							services	T								
21	Vredenburg	West Coast	West Coast West Coast Health Tech	Health Tech			8.3 District					2 000		7 000	12 000	
							nospital services									
22 \	Vredenburg	West Coast	West Coast West Coast OD+QA	OD+QA			8.3 District					2 000		2 000	2 000	1 000
							hospital									
							services									

Table B.6 Summary of details of expenditure for infrastructure by category

Tal	Table B.6 Summ	ary of de	tails of ex	Summary of details of expenditure for infrastructure	or infrastr		by category									
No.	Project name	Region/	Municipality	Project Description/	Project duration	Juration	Programme	EPWP	Total project cost	ect cost	Estimated expenditure to date from previous	Professional Fees Budget	Construction/ Maintenance Budget	Total available	MTEF Forward Estimates	EF stimates
		DISTRICT		iype or Infrastructure	Date: Start	Date: Finish			At start	At com-	years		MTEF 2009/10		MTEF 2010/11	MTEF 2011/12
					Note 1	Note 2			71 31811	pletion	R'000	R'000	R'000	R'000	R'000	R'000
23	Worcester	Cape	Breede	Health Tech			8.4 Provincial					17 000		17 000	10 000	
		spu	Valley				hospital services									
24			Breede	OD+QA			8.4 Provincial					2 000		2 000	2 000	1 000
	hospital	Winelands	Valley				hospital services									
Sub	Subtotal: HRP								2 043 920	2 382 050	534 700	109 800	77 740	187 540	209 300	98 701
Tot	Total rehabilitaiton, renovations and refurbishments	ı, renovatio	ins and refu	urbishments					2 043 920	2 382 050	534 700	109 800	77 740	187 540	209 300	98 701
Gra	Grand Total Programme 8	amme 8										183 659	501 515	685 174	737 210	817 629
Б	OTHER CAPITAL PROJECTS	PROJECTS														
2.10	2.10 Global Fund ARV clinic extensions	V clinic exte	nsions													
. –	Mitchells Plain	Unicity	Cape Town Extension,	Extension,	1-Aug-08	28-Feb-10	2.10 Global		000 6	11 890	2 100	500	5 300	5 800		
	community health			pharmacy			Fund									
	centre			upgrade (co- funded IGP)												
2		Unicity	Cape Town	Cape Town Extension,	31-Oct-08	30-Jun-09	2.10 Global		2 000	10 105	1 900	400	3 700	4 100		
	Mapongwana			pharmacy		_	Fund									
	community health centre			upgrade												
ო	Retreat	Unicity	Cape Town Extension,	Extension,	30-Oct-08	31-Dec-09	2.10 Global		8 000	10 850	2 100	400	3 600	4 000		
	community health			pharmacy			Fund									
	centre			upgrade												
4	Paarl TC	Cape	Drakenstein	Extension,	1-Feb-09	30-Jun-10	2.10 Global		14 000	15 500	500	1 500	11 650	13 150		
	Newman	Winelands		pharmacy		_	Fund									
	community health			upgrade (co-												
	centre			tunded HKP)		Ī										
Sub	Subtotal: 2.10 Global	-							38 000	48 345	6 600	2 800	24 250	27 050		
Tot	Total other capital projects	projects							38 000	48 345	6 600	2 800	24 250	27 050		
h						ſ				t	ſ			Ī	Ī	

Note 1 Site handover/commencement of construction - DATE OF LETTER OF ACCEPTANCE

Total infrastructure

817 629

737 210

712 224

525 765

186 459

^{Note 2} Construction completion date (take over date) - PRACTICAL COMPLETION DATE

 $^{
m Note\,3}$. Unauthorised funding is show as to give an accurate reflection of the progress of the HRP Program

Table B.6(a): Additional Health information

5										
Ŋ	Project name	Region/	Municipality	Tuna of structura	Regional/District/ Central Hospital,	Project	Project duration	Project cost	t cost	Main budget
ġ		District		i ype ol all uolul e	Clinic/Community Health Care	Date: Start	Date: Finish	At start	At completion	MTEF 2009/10 R'000
1.		Idings and infrastr	ucture)							
	Atlantis/Wesfleur ambulance station	Unicity	Cape Town	Brick structure	dical	(0	26-Mar-07	4 000	4 430	830
	GF Jooste hospital: ARV clinic Unicity		Cape Town	Pre-fab structure	District hospital services	1-Aug-07	31-Mar-08	4 200	4 570	4 570
	/ health	Unicity	Cape Town	Brick structure	i		31-Mar-09	2 000	8 000	600
	Malmesbury Westbank community health centre	West Coast	Swartland	Brick structure			30-Sep-09	7 500	8 400	200
	nity health	Cape Winelands	Breede River/ Winelands	Brick structure			5-Jul-07	6 800	7 050	2 234
	Plettenberg Bay- Kwanaokuthula community health centre	Eden	Bitou	Brick structure	Communities health facilities		30-Nov-09	15 000	16 500	500
	Simondium community health Cape Winelands centre	Cape Winelands	Drakenstein	Brick structure		31-Jul-06	30-Jul-07	8 100	8 900	4 700
		Overberg	Overstrand	Brick structure			12-May-07	5 200	5 400	2 600
	Beaufort West new ambulance Central Karoo station and DMC	Central Karoo	Beaufort-west	Brick structure		27-Jul-06	30-Jul-07	6 000	8 882	5 735
		Overberg	Overstrand	Brick structure	dical		24-Jun-07	5 400	5 900	3 400
	Helderberg hospital new OPD	Unicity	Cape Town	Pre-fab structure			14-Aug-07	6 000	6 300	5 900
	Helderberg hospital new ward		Cape Town	Pre-fab structure			23-May-07	7 500	7 500	4 500
	Khayelitsha community health Unicity centre Site B new casualty	Unicity	Cape Town	Pre-fab structure			14-Nov-07	5 000	5 000	5 000
	Vredendal hospital ambulance West Coast station	West Coast	Matzikama	Brick structure	Emergency medical rescue services	1-Mar-08	31-Oct-08	6 500	2 000	168

Estimates of Provincial Expenditure 2009

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Table B.6(a): Additional Health information

ON O	Droiact nama	Region/	Municinality	Tuna of etructura	Regional/District/ Central Hospital,	Project	Project duration	Project cost	cost	Main budget
		District		ו אחב מו מרומו ב	Clinic/Community Health Care	Date: Start	Date: Finish	At start	At completion	MTEF 2009/10 R'000
	Wellington community health centre	Cape Winelands	Drakenstein	Brick structure			10-Aug-07	15 400	16 400	12 700
	Worcester hospital ambulance Cape Winelands station and DMC	Cape Winelands	Breede River/ Winelands	Brick structure	Emergency medical rescue services	14-Nov-06	13-Aug-07	11 000	11 200	6 700
Tot	Total new construction (buildings and infrastructure)	ings and infrastruc	sture)					120 600	131 432	63 337
'n	REHABILITATION/UPGRADING	DING								
	Bredasdorp ambulance station upgrade	Overberg	Cape Agulhas	Brick structure	Emergency medical rescue services	15-Jan-07	14-Jun-07	200	750	500
	Caledon hospital upgrade	Overberg	Theewaterskloof	Brick structure	District hospital services	22-Jan-07	21-Oct-08	16 000	17 000	9 828
Tot	Total rehabilitation/upgrading							16 700	17 750	10 328
		Region/	-	-	Number of Clinics	Project	Project duration	Project cost	cost	Main budget
NO.	Project name	District	Municipality	Number of hospitals	(including Community Health Centres)	Date: Start	Date: Finish	At start	At completion	MTEF 2007/08 R'000
ы.	RECURRENT MAINTENANCE	CE								
Tot	Fotal recurrent maintenance									
Note :	^{Note 1} Site handover/commencement of construction ^{Note 2} Construction completion date (take over date)	of construction take over date)								