



INTRODUCTION BY THE DIRECTOR-GENERAL

During the reporting period, the strategic focus of the National Department of Health was on the implementation of health sector priorities known as the 10 Point Plan, which have already been outlined by the Minister in his Foreword. The Department's Strategic Plan for 2009/10–2011/12 served as an important vehicle for implementation. Highlights of the Department's progress towards the 10 Point Plan are reflected below.

HIGHLIGHTS OF THE DEPARTMENT'S PERFORMANCE IN 2009/10

Implementing National Health Insurance (NHI)

The Department worked closely with the Ministerial Advisory Committee on National Health Insurance (NHI) in the design of NHI for South Africa. A technical support unit for NHI was established in the Department. A draft NHI policy is under discussion. This policy will form the basis for public consultation on the NHI.

Improving the Quality of Health Services

The Department continued to develop and institutionalise the national core standards. A revised set of organisational standards was approved by the National Health Council (NHC). The performance of 31 health facilities against the revised core standards was assessed during the pilot phase.

Quality improvement initiatives were developed by 1,112 health facilities, focusing on the six priority areas, namely: patient safety, cleanliness, infection control, staff attitudes, waiting times and drug supply. These are being monitored to ensure improvement in patient experiences of health care in the public sector. The Department also commenced with the development of a suitable institutional framework for quality management and the accreditation of health facilities.

Overhauling the health care system and improving its management

The Department also continued with plans to overhaul the health system to improve its management and effectiveness. In January 2010, the NHC adopted the terms of reference (ToR) developed by the Development Bank of Southern Africa (DBSA) for assessing the functionality, efficiency and appropriateness of the organisational structure of hospitals, as well as the appropriateness of the hospital delegations. Significant progress has been made, and this work will be completed during 2010/11. The key objective is to ensure that the health system is managed by appropriately trained and qualified managers, working in a supportive environment.

Improving Human Resource Planning, Development and Management

The success of health sector interventions to improve the health of all South Africans hinges on the availability of

appropriately trained, adequately qualified and well motivated health workers of diverse categories, providing the required skills mix in all health facilities. The health workforce is the tipping point of the health sector's performance. During the reporting period, the department reviewed, analysed and provided feedback on the Human Resources for Health (HRH) plans of eight provinces. A service provider was also identified to conduct training in HRH planning in all Provinces. The revision of the national HRH planning framework also commenced. This will be completed in 2010/11.

The Department completed a comprehensive audit on all nursing colleges in the country. The audit results pointed to the need to enhance the infrastructure of these institutions, to investigate the impact of the 4 year nursing program on the production of nurses for the public sector, to enhance the recruitment of nursing educators, in order to improve the production of nurses.

Revitalising infrastructure

Planning for the revitalisation of 17 hospitals started during the reporting period. The building of seven hospitals will commence in 2010/11. Construction work started at three revitalisation hospitals, namely: Thabazimbi, Khayelitsha and Mitchell's Plain.

Accelerating the implementation of the HIV and AIDS and Sexually Transmitted Infections National Strategic Plan 2007–11, and increasing the focus on TB and other communicable diseases.

The National Strategic Plan for HIV and AIDS 2007–2011 continued to guide the health sector's interventions, with a focus on the four pillars of the strategy: prevention, treatment, care and support. The Department's interventions were supported by the South African National AIDS Council (SANAC) sectors to ensure a robust multisectoral AIDS response in the country.

Voluntary Counseling and Testing (VCT) services were offered in all fixed PHC facilities. The Department has started to implement a health worker-initiated HIV Counseling and Testing (HCT) campaign, aimed at making people know their status early by massively scaling up provider initiated HCT services in public and private health facilities, to reach people in their homes, work place and public spaces. Key messages disseminated seek to demonstrate the benefits of prevention and early access to treatment through providing HCT services at community level in homes, work place and public space to provide an opportunity of every South Africa to know their status so that they can take responsibility to prevent new infections.

The Department distributed 445 156 000 male condoms. This marked significant progress from the 284 million male condoms distributed in 2008/09. A total of 3,6 million female condoms were also dispensed, which was lower than the 4 276 000 female condoms distributed in 2008/09.

A total of 550 accredited facilities that offer antiretroviral therapy (ART) were established, with 900 down referral sites. Additional sites were established ahead of the commencement of the HCT campaign, which has resulted in over 1 000 accredited sites. A total of 494 775 new adult patients were initiated on ART during 2009/10, which exceeded the target of 215 000. A total of 45 044 new child patients under the age of 15 years were also initiated on ART, which exceeded the target of 33 000.

Behaviour change communication initiatives among young people were accelerated. A total of 270 peer educators were trained on comprehensive sexual reproductive health (SRH) issues. The programme reached 3, 532 283 youth, training on life skills, SRH and HIV and AIDS information through partnerships with NGOs.

To enhance the management of Tuberculosis (TB), 9,730 health professionals were trained in the clinical aspects of TB, while 3 866 non- professionals also received training to provide care and support to TB patients, ensure treatment adherence and raise community awareness and literacy about TB.

Improving the performance of laboratory services for TB management remains a challenge. Only 56% of TB sputa had a turnaround time (TAT) of less than 48 hours against the target of 65% for 2009/10. This reflects limited progress from the 53% reported in 2008/09. South Africa faces a high level of TB-HIV co-infection, estimated at 73%. During the period under review, 56,6% of multidrug-resistant (MDR) patients and 65,6% of extensively drug-resistant (XDR) patients were started on ARV treatment. This was lower than the set target of 100%, and will be scaled up going forward.

Implementing mass mobilisation for better health among the population

During the period under review, the health sector implemented interventions to protect South African children against vaccine preventable diseases. Nationally, a full immunisation coverage of 93,7% for children under-1 year of age was reached. There were variations in immunisation coverage between districts. With regard to measles, 47 of the 52 districts reached a measles immunisation coverage of 80% and above for children under 1-year.

Two new vaccines were introduced into the Expanded Programme on Immunisation (EPI) schedule to protect South African children against Rotavirus and pneumococcal diseases, which are among the leading causes of child mortality. A coverage of 22,8% for the pneumococcal vaccine and 34,6% for the Rotavirus vaccine was achieved.

The Prevention of Mother to Child Transmission (PMTCT) programme underwent substantial review during the reporting period and a number of the clinical protocols were revised. Of the 92,7% of pregnant women who were tested for HIV, about 76,9% of the HIV-positive pregnant women were put on Highly Active Antiretroviral Therapy (HAART). The percentage of HIV-exposed infants who received Nevirapine for the prevention of mother to child transmission was 91,7%. The real impact of these interventions, however, will only be felt when child and infant mortality rates decrease. The DoH is systematically working towards this.

To improve antenatal care, 164 of the 549 identified maternity facilities implemented the Basic Antenatal Care (BANC) programme. During the reporting period, 30% of women were reviewed within three days following delivery of their infants, which was in line with the 2009/10 target. This was to ensure that the mothers and their newborns were in a good state of health.

With regard to women's health, progress was made in the early identification of cervical cancer. The cervical cancer screening coverage increased from 22% in 2008/09 to 47,7% in 2009/10.

A 14% reduction in malaria cases was achieved between 2008/09 and 2009/10, which exceeded the 2009/10 target of 5%. The number of malaria cases decreased from 6 415 in 2008/09 to 5 502 in 2009/10. The malaria case fatality rate was 1%, which was a 37% increase for the season 2009/10 when compared to 2008/09. This resulted from a sudden upsurge of malaria cases and malaria related mortality during January 2010, particularly in Mpumalanga province.

Conclusion

Key milestones were achieved towards the priorities that the National Department of Health had set itself for 2009/10. The highlight of these must be the several improvements in financial management, which resulted in the Department receiving an Unqualified Audit Opinion from the Auditor-General.

Looking ahead, the Department will dedicate greater effort and resources to address the key objectives that could not be attained during 2009/10, owing to capacity constraints. Key focus will be on the four outcomes that the health sector must achieve during 2010-2014, namely: Increasing Life Expectancy; Decreasing Maternal and Child Mortality; Combating HIV and AIDS and Decreasing the Burden of diseases from Tuberculosis and Strengthening Health System Effectiveness. Emphasis will be on doing things differently, and doing different things.



MS MP MATSOSO
DIRECTOR-GENERAL: HEALTH
DATE: 31-08-2010