

ANNUAL REPORT

DEPARTMENT OF HEALTH

PROVINCE OF MPUMALANGA

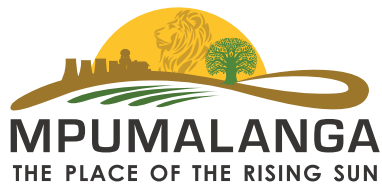
2018

2019

FINANCIAL YEAR



health
MPUMALANGA PROVINCE
REPUBLIC OF SOUTH AFRICA







DEPARTMENT OF HEALTH
PROVINCE OF MPUMALANGA
VOTE NO. 10
ANNUAL REPORT
2018/2019 FINANCIAL YEAR



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PART A: GENERAL INFORMATION



LIST OF ABBREVIATIONS/ACRONYMS

ACRONYMS	
AIDS	Acquired Immune Deficiency Syndrome
APP	Annual Performance Plan
ARI	Acute Respiratory Infections
ART	Anti-retroviral Treatment
BANC	Basic Antenatal Care
BOD	Burden of Disease
CARMMA	Campaign on Accelerated Reduction of Maternal and Child Mortality in Africa
CCMDD	Central Chronic Medication Dispensing and Distribution
CDC	Community Day Centre
CEO	Chief Executive Officer
CHC	Community Health Centre
CHWs	Community Health Workers
CMR	Child Mortality Rate
CoE	Compensation of Employees
CPIX	Consumer Price Index
CSR	Cataract Surgery Rate
DMER	District Health Expenditure Review
DHP	District Health Plan
DHS	District Health Services
DHIS	District Health Information System
DHMIS	District Health Management Information System
DoE	Department of Education
DOH	Department of Health
DORA	Division of Revenue Act
DOTS	Directly Observed Treatment Sort Course
DPC	Disease Prevention and Control
DPSA	Department of Public Service and Administration
DR	Drug Resistant
DSD	Department of Social Development
DPWRT	Department of Public Works Roads and Transport

ACRONYMS	
DOTS	Directly Observed Treatment Sort Course
DPC	Disease Prevention and Control
DPSA	Department of Public Service and Administration
DR	Drug Resistant
DSD	Department of Social Development
DPWRT	Department of Public Works Roads and Transport
ECD	Early Childhood Development Center
EDL	Essential Drug List
EMS	Emergency Medical Services
ESMOE	Essential Steps in Managing Obstetric Emergencies
ETR.Net	Electronic TB Register
FMC	Financial Management Committee
GDP	Gross Domestic Product
HAST	HIV & AIDS, STI and TB Control
HCSS	Health Care Support Services
HCT	Health Care Provider Initiated Counseling and Testing
HFM	Health Facilities Management
HHCC	Household Community Components
HIV	Human Immuno-deficiency Virus
HOD	Head of Department
HPTDG	Health Professional Training and Development Grant
HPV	Human papillomavirus
HR	Human Resources
HRC	Human Resource Committee
HRD	Human Resource Development
HRM	Human Resource Management
HST	Health Sciences and Training
HTA	High Transmission Area

ACRONYMS	
ICT	Information Communication Technology
IDP	Integrated Development Plan
IHPF	Integrated Health Planning Framework
IMCI	Integrated Management of Childhood Illnesses
IPT	Isoniazid Preventive Therapy
KMC	Kangaroo Mother Care
MBFI	Mother and Baby Friendly Hospital Initiative
MCWH&N	Maternal, Child, Women's Health and Nutrition
MDGs	Millennium Development Goals
MDR	Multi-drug Resistant
MEC	Minister of Executive Council
MMC	Male Medical Circumcision
MMR	Maternal Mortality Rate
MPAC	Mpumalanga Provincial AIDS Council
MRC	Medical Research Council
MTEF	Medium-term Expenditure Framework
MTSF	Medium-term Strategic Framework
NCD	Non Communicable Diseases
NDOH	National Department of Health
NDP	National Development Plan
NGO	Non-governmental Organisation
NHA	National Health Act
NHI	National Health Insurance
NHIRD	National Health Repository and Data Warehousing
NHLS	National Health Laboratory Services



MEC: HEALTH

Hon. Sasekani Manzini

3 FOREWORD BY THE MEC

A Long and healthy life for all remains our core mandate as the Department of Health and a critical factor in the development of any nation and it is for this reason, we will continue to strive to provide the best quality health care services to our people, in order to enable them to be active participants in the economy of our Province. It is our belief that a healthy nation is a productive nation which is why we have not deviated from the National Development Goals (NDG) and 2030 Sustainable Development Goals (SDG) goals which seeks to:

- Increase the average male and female life expectancy at birth to 70 years;
- End the epidemics of AIDS, Tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water- borne diseases and other communicable diseases;
- Reduce the global maternal mortality ratio to less than 70 per 100,000 live births;
- End preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births;
- Reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol;
- Achieve Universal Health Coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all;
- Ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes;
- Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and developing States

We must celebrate that our people in Mpumalanga are able to live longer than before, the life expectancy at birth is now estimated on average at 63.4 years (60.6 males and 66.1 females) as per StatsSA mid-year population estimates 2018 from 54.2 years (52.8 males and 57.1 females) in 2011. This is indicative of a functional health system and is as a result of improved health outcomes such as:

- A huge drop in maternal mortality rate from 120 per 100 000 live births in 2017/18 financial year to 92.4 per 100 000 live births in

2018/19 financial year. However, we are still experiencing challenges on the rising teenage pregnancy and we are working closely with Departments of Education and Social Development to address this scourge.

- A significant drop in mother to child HIV transmission rate from 1.1% in 2017/18 financial year to 0.9% in 2018/19 financial year.
- Increasing number of patients enrolled in the antiretroviral treatment programme from 411 905 in 2017/18 financial year to 464 569 in 2018/19 financial year. However, we are observing an increase in HIV new infections and we will intensify our efforts to combat HIV and AIDS.

As the Department of Health (DoH) in the province, we are tasked to improve the quality of health and wellbeing of all people of Mpumalanga by providing a needs based, people centered, equitable health care delivery system through an integrated network of health care services provided by a cadre of dedicated and well skilled health workers.

The Department also completed a number of infrastructure projects and some are multi-year projects which will be completed in the year 2019. The Department is doing its best to deliver the state-of-the-art health facilities.

As government, we are forging ahead with the implementation of the Universal Health Coverage (UHC) through the implementation of the National Health Insurance (NHI). The objective of the NHI is to put in place the necessary funding and health service delivery mechanisms that will enable the creation of an efficient, equitable and sustainable health system in South Africa. It is a financing system that will ensure the provision of essential health care to all citizens of South Africa regardless of their employment status and ability to make a direct monetary contribution to the NHI fund.

The Province, like the rest of the country, faces a quadruple burden of diseases like HIV and AIDS, tuberculosis, high maternal and child mortality and non-communicable diseases. We have distributed male and female condoms, initiated clients on Anti-retroviral therapy and more work is being done to ensure that we continue to educate people about the disease.

Improved waiting time and issues of safety for our patients and staff remain close to my heart and in the next few years, the Department will pay a special focus and invest in interventions to improve these areas so that our people continue to be treated with best services in all our facilities.

The electronic complaints and compliments management system and the soon to be launched MEC's hotline will ensure that the plight of our people are given priority and redressed on time. The Department shall continue to prioritize people's lives by providing the best health care for all its citizens and improve patient experience of care.



MS. SJ MANZINI (MPL)

MEC: HEALTH

27/08/19

DATE



HEAD: HEALTH

Dr. Savera Mohangi

4. REPORT OF THE ACCOUNTING OFFICER

4.1 Overview of the operations of the department

The financial year 2018/2019 came at a critical point where the country has been concluding 25 years into a Democratic government and as we conclude the 5th administration, the year has been a challenging one because providing a Healthy Life for All South African's comes with great responsibilities. However, as a Department we have worked hard to ensure that all South Africans are provided with better quality health care.

Our overall performance has been gradually improving over the past five years from 44% in 2014/15 financial year to 54% in 2018/19 financial year, although it is a slight drop from 60% reported in 2017/18 financial year.

The Department has over the past years worked diligently to realise the National Development Plan (NDP) targets for both average male and female life expectancy at birth to improve to 70 years by 2030. The provision of quality healthcare has seen the male and female life expectancy at birth in Mpumalanga improved from 53.1 years males and 56.2 years females for the period 2006 to 2011 and 56.9 years males and 63.2 years females for the period 2011 to 2016 to 61.1 years males and 67.3 years females (average of 64.2 years) according to the Mid-Year Population Estimates 2018 for the period 2016 to 2021. This is attributable to the following key interventions among others:

- The implementation of the provincial strategy to amplify implementation of programmes focusing on the reduction of maternal and infant mortalities has yielded positive outcomes in the following:
- Maternal Mortality has decreased from 133 per 100 000 in 2014/15 financial year to 92.4 per 100 000 live births in 2018/19 financial year surpassing the target of 145 per 100 000 live births.
- Antenatal care 1st visit before 20 weeks increased from

49% in 2014/15 financial year to 76% in the 2018/19 financial year surpassing the planned target of 74%.

- Antenatal clients initiated on Antiretroviral treatment has improved from 95.8% in 2016/17 financial year to 99% in the 2018/19 financial year, surpassing the planned target of 97.5%
- 0.9% of babies test HIV positive when tested on Polymerase Chain Reaction (PCR) around 10 weeks against the planned target of 1.5%, mother to child HIV transmission is currently below 1%.
- 97.1% of children under 1 year were fully immunised during the year under review.
- Significant progress have been made to increase the number of Medical Male Circumcision in the province from 49 685 males in 2014/15 financial year to 81 049 males in 2018/19 financial year, surpassing the annual target of 44 000. This brings the target to a cumulative total of 413 274 since inception of the programme. The Department is soliciting support from developmental partners to increase the demand for voluntary MMC.
- Strides have been made to improve retention in care for HIV positive clients to be enrolled and retained on treatment, 464 569 total clients remained on ART treatment at the end of March 2019 compared to 283 932 remained on ART treatment at the end of March 2015.

Significant strides have also been made to improve the audit outcome from the Auditor General towards the attainment of an unqualified opinion, the Department improved from seven qualifications in 2015/16 financial year to three in 2016/17 financial year and one in 2017/18 financial year which has not been fully addressed in the 2018/19 financial year – that of contingency liability.

The Department has been able to reduce accruals and payable

from R851 million in 2017/18 financial year to R581 million in the year under review. This is as a result of an analysis that was conducted on Anti-retroviral drugs versus patient activity versus National Funding in collaboration with National Department of Health. The funding for HIV/AIDS was adjusted in line with the HIV prevalence. The initiative has assisted the Department to alleviate the budget pressure on medication.

The Department is committed to improving access to quality of health care by progressively increasing platforms for services delivery in preparation of the National Health Insurance (NHI). To date, over R6.55 billion has been invested in health infrastructure to ensure equitable access to health care facilities between 2009 – 2019 term alone.

The following projects have been in progress during the year under review:

- **5 Clinics are under constructions (Oakley, Pankop, Msukaligwa, Vukuzakhe and Nhlazatshe 6) which will be commissioned in**

2019/20 financial year.

- **2 Clinics (Ethandukukhanya and Balfour CHC's) to be advertised and contractors to be appointed during the first quarter of 2019/20 financial year.**
- **4 Modern High-Tech hospitals (Mapulaneng, Middelburg, Mmamethlake and Bethal) are in different phases of construction.**

During 2018/19 financial year, we have implemented an electronic complaints and compliments management system, as well as patient safety index system to improve response time and redress of all complaints from facility users. Furthermore, the Department conducts a Patient Experience of Care survey to measure the effectiveness of the health system in the provision of quality of care.

4.2 OVERVIEW OF THE FINANCIAL RESULTS OF THE DEPARTMENT:

Departmental receipts

Departmental receipts	2018/2019			2017/2018		
	Estimate	Actual Amount Collected	(Over)/Under Collection	Estimate	Actual Amount Collected	(Over)/Under Collection
	R'000	R'000	R'000	R'000	R'000	R'000
Sale of goods and services other than capital assets	73 826	63 828	9 998	69 207	75 640	(6 433)
Interest, dividends and rent on land	4 166	6 515	(2 349)	3 713	4 010	(297)
Sale of capital assets	288	4 138	(3 850)	1 000	4 565	(3 565)
Financial transactions in assets and liabilities	1 143	4 264	(3 121)	708	3 612	(2 904)
Total	79 423	78 745	678	74 628	87 827	(13 199)

The Department has under collected by R678 thousand rand to a total of R78 745 million from the planned estimated target of R79 423 million which is due to the non-payments by the Road Accident Fund. The Department will constantly engage the Road Accident Fund to pave a way forward to resolve the unpaid claims.

4.2.1 Tariff policy

Patient tariffs are determined by the National Department of Health Revenue Steering Committee and approved by the National Health Council in line with guidelines sets by the National Department of Health. Tariffs for small items are determined by the Provincial Department Revenue Forum and approved by Provincial Treasury.

List of free services

- Any person suffering from a suspected or confirmed communicable, formidable or notifiable disease.
- Any officer of the Department who, in the performance of his/her official duties, handles or comes into contact with any drug, poison, gas, radio-active substances, radio-therapeutic or diagnostic equipment or other electronic equipment and is for this reason required to undergo medical examination and treatment.
- A patient who visits a clinic or hospital on recommendation of family planning staff, including free transport to such clinic or hospital, for the specific purpose of being sterilised, notwithstanding the fact that such procedure is performed by a Post-vasectomy persons for scheduled sperm count.
- Personnel employed in the Department who are injured on duty, and the Department accepts liability.
- Persons whom general health advisory services (including oral health and visits to ante-natal clinics) are provided
- Persons who present themselves for immunisations and other measures to combat notifiable infectious diseases.
- School children except those children whose medical aid / or dental health care might be covered by a medical aid or insurance who are referred with a letter of authority from the school nursing services for basic primary health oral health care services for all treatment arising from such letter of authority.
- Committed children, who in terms of the Child Care Amendment Act of 1996, are committed to the care of a children's home or foster parents.
- Any person suffering from, Kwashiorkor and Pellagra.
- Mentally disturbed patients admitted to psychiatric hospitals in terms of Mental Health Act 17 of 2002.
- Services in respect of termination of pregnancy to be rendered free of charge and if complications have developed as a result of the termination, until the patient has been cured or the conditions as a result of the complication has been stabilised.
- Pregnant women and children under the age of 6 years.

Programme Expenditure

Programme Name	2018/2019			2017/2018		
	Final Appropriation	Actual Expenditure	(Over)/ Under Expenditure	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure
	R'000	R'000	R'000	R'000	R'000	R'000
Programme 1	289 609	289 607	2	342 113	342 113	0
Programme 2	8 031 721	8 031 679	42	7 182 004	7 182 004	0
Programme 3	363 422	363 412	10	371 519	371 519	0
Programme 4	1 368 773	1 368 773	0	1 302 741	1 302 741	0
Programme 5	1 224 452	1 222 888	1 564	1 120 507	1 154 506	(33 999)
Programme 6	365 839	365 838	1	375 526	367 797	7 729
Programme 7	157 928	157 928	0	200 304	177 021	23 283
Programme 8	1 317 847	1 256 296	61 551	1 265 339	1 185 312	80 027
Total	13 119 591	13 056 421	63 170	12 160 053	12 083 013	77 040

The Department had slightly improved in spending from 99.4 percent to 99.5 percent. Programme 5 had under spent by R1, 564 million compared to over expenditure of R33, 999 million in the previous financial year due to delay in delivery of medical equipment. Furthermore, Programme 8 under spent by R61, 785 million compared to R80, 027 million in 2017-18 financial year, due to infrastructural challenges. The Department had strengthen the section by appointing infrastructure professionals and had established better inter-departmental communication strategies.

Virements/roll overs

Virements

- An amount of R675, 000 will be reduced from Programme 3 to defray overspending in Programme 2 and 6. The Virement is 0.2% of the Adjusted Appropriation of Programme 3.
- A Saving amounting to R4, 480,000 from Programme 5 will be utilised to defray overspending in Programme 1 which is 0.4% of the Adjusted Appropriation.
- A budget of R9, 596,000 will be reduced from Programme 6 to cover overspending in four programmes namely 1. The virement is 2.6% of the Adjusted Appropriation of the programme.
- An amount of R40, 034,000 will be reduced from Programme 8 to defray overspending in Programme 1, 2, 4 and 7. The Virement is 2.9% of the Adjusted Appropriation of Programme.
- The year-end virements were effected to the adjusted Budget which entailed moving funds from Compensation of Employees to defray overspending on Goods and Services for items medical supplies and medicine; and Households for medico legal claims. A budget from Building and Other Fixed Structures was utilised to set of spending on Machinery and Equipment for medical equipment. All virements were within the permitted 8% limit as prescribed by the Treasury Regulations.

Rollovers Requested

Conditional Grants	R'000
Human Papillomavirus Vaccine Grant	2 775
National Treasury Service Grant	1408
Health Professional Training and Development Grant	223
EPWP-Incentive Grant for Province- Health	27
Voted- Health Facilities Management	57 537
Total	61 970

National Treasury Service Grant

Delayed delivery of medical equipment ordered

New or proposed activities

None

Health Professional Training and Development Grant

Delayed delivery and invoicing of medical equipment and textbooks

Supply chain management

1. The Department did not have any unsolicited bid proposal during the 2018/2019 financial year.
2. During the 2018/2019 financial the following committees were established in order to prevent the irregular expenditure from recurring:

EPWP-Incentive Grant for Province- Health

Late invoicing by suppliers

- District Acquisition Committee
- Hospital Finance Committee
- Economising Committee
- Bid Specification Committee (Ad hoc)
- Bid Evaluation Committee (Ad hoc)
- Bid Adjudication Committee

Voted- Health Facilities Management

Capital projects were not finalised in time resulting in delay in payment.

The supply chain management forum was held with all three districts to share all relevant information with the districts including hospitals

Unauthorised Expenditure

No unauthorised expenditure occurred during 2018/19 financial year.

3. During the year ender review the Department experienced the following challenges:

Fruitless and wasteful expenditure

An amount of R731 000 was incurred relating to late payment of suppliers. The incidents are still under investigation by the Financial Misconduct Committee who will then prescribe suitable consequences.

- Implementation of the Preferential Procurement Regulations of 2017 in relation to local content – Circulars were issued to all officials responsible for the procurement of goods and services to adhere to the regulations and ensure that it is implemented on all the designated commodities. The implementation Preferential Procurement Regulations of 2017 was further shared with the district offices and hospitals during the Supply Chain Management forum
- Bid committees not complying with applicable laws and regulations – 47 officials were trained on bid committees to evaluate and adjudicate bids in line with all the applicable laws and regulations.

Future plans of the department

None

Gifts and Donations received in kind from non-related parties

Refer to annexure 1H in the annual financial statement

Public Private Partnerships

None

Discontinued activities / activities to be discontinued

None

Exemptions and deviations received from the National Treasury



No exemption from the PFMA or treasury and deviations from the financial reporting requirements received for the current financial year

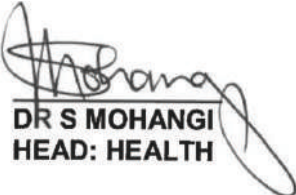
Events after the reporting date

None

Other

None

In conclusion, I would like to acquiesce my deepest appreciation to the Executive Authority for entrusting me with the responsibility to implement the mandate of the Department of Health. I will be failing in my duties if I don't acknowledge and appreciate the support I received from the committed workforce in the Department including support partners. I invite you to continue investing your energies as we continue to face new challenges and successes in the future.


DR S MOHANGI
HEAD: HEALTH

DATE: 27/08/19



5.STATEMENT OF RESPONSIBILITY AND CONFIRMATION OF ACCURACY FOR THE ANNUAL REPORT

All information and amounts disclosed throughout the annual report are consistent.

The annual report is complete, accurate and is free from any omissions.

The annual report has been prepared in accordance with the guidelines on the annual report as issued by National Treasury.

The Annual Financial Statements (Part E) have been prepared in accordance with the modified cash standard and the relevant frameworks and guidelines issued by the National Treasury.

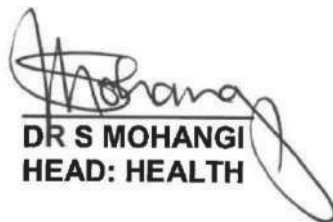
The Accounting Officer is responsible for the preparation of the annual financial statements and for the judgements made in this information.

The Accounting Officer is responsible for establishing, and implementing a system of internal control that has been designed to provide reasonable assurance as to the integrity and reliability of the performance information, the human resources information and the annual financial statements.

The external auditors are engaged to express an independent opinion on the annual financial statements.

In my opinion, the annual report fairly reflects the operations, the performance information, the human resources information and the financial affairs of the department for the financial year ended 31 March 2019.

Yours faithfully


DR S MOHANGI
HEAD: HEALTH

DATE: 27/08/19

6 STRATEGIC OVERVIEW

a. Vision

“A Healthy Developed Society”.

b. Mission

The Mpumalanga Department of Health (DoH) is committed to improve the quality of health and well-being of all people of Mpumalanga by providing a needs-based, people centred, equitable healthcare delivery system through an integrated network of healthcare services provided by a cadre of dedicated and well skilled health workers.

c. Values

- Commitment
- Appropriateness
- Timeliness
- Collectiveness
- Competency

7. LEGISLATIVE AND OTHER MANDATES

A. CONSTITUTIONAL MANDATES

In terms of the Constitution of the Republic of South Africa (Act No. 108 of 1996), the Department is guided by the following sections and schedules:

- Section 27 (1) Everyone has the right to have access to
 - (a) healthcare services, including reproductive healthcare.
- (3) No one may be refused emergency medical treatment.
- Section 28 (1) Every child has the right to basic health care services.
- Schedule 4, which lists health services as a concurrent national and provincial legislative competence.

B. LEGAL MANDATES

- **National Health Act (Act No. 61 of 2003, as amended)**

Provides a framework for a structured uniform health system within the Republic, taking into account the obligations imposed by the constitution and other laws on the national, provincial and local governments with regard to health services and to provide for matters connected therewith.

- **Pharmacy Act (Act No. 53 of 1974, as amended)**

Provides for the establishment of the South African Pharmacy

Council and for its objects and general powers; to extend the control of the council to the public sector; and to provide for pharmacy education and training, requirements for registration, the practice of pharmacy, the ownership of pharmacies and the investigative and disciplinary powers of the council; and to provide for matters connected therewith. Medicines and related Substance Control Act (Act No. 101 of 1965, as amended)

- **Medicines and Related Substance Control Act (Act No. 101 of 1965, as amended)**

Provides the registration of medicines intended for human and for animal use; for the registration of medical devices; for the establishment of a Medicines Control Council; for the control of medicines, Scheduled substances and medical devices; for the control of manufacturers, wholesalers and distributors of medicines and medical devices; and for the control of persons who may compound and dispense medicines; and for matters incidental thereto

- **Mental Health Care Act (Act No. 17 of 2002)**

Provides a legal framework for the care, treatment and rehabilitation of persons who are mentally ill; to set out different procedures to be followed in the admission of such persons; to establish review boards in respect of every health establishment; to determine their powers and functions; to provide for the care and administration of the property of mentally ill persons; to repeal certain laws; and to provide for matters connected therewith

- **Medical Schemes Act (Act No.131 of 1998)**

Provides for the regulation of the medical schemes industry to ensure consonance with national health objectives.

- **Council for Medical Schemes Levy Act (Act No.58 of 2000)**

Provides a legal framework for the council to charge medical schemes certain fees

- **Nursing Act (Act No. 33 of 2005)**

Provides for the regulation of the nursing profession.

- **Human Tissue Act (Act No. 65 of 1983)**

Provides for the administration of matters pertaining to human tissue.

- **Sterilisation Act (Act No. 44 of 1998)**

Provides a legal framework for sterilisations, also for persons with mental health challenges.

- **Choice on Termination of Pregnancy Act (Act No. 92 of 1996 as amended)**

Provides a legal framework for the termination of pregnancies, based on choice under certain circumstances.

- **Tobacco Products Control Act (Act No. 83 of 1993 as amended)**

Provides for the control of tobacco products, the prohibition of smoking in public places and for advertisements of tobacco products as well as the sponsoring of events by the tobacco industry.

- **National Health Laboratory Service Act (Act No.37 of 2000)**

Provides for a statutory body that offers laboratory services to the public health sector.

- **South African Medical Research Council Act (Act 58 of 1991)**

Provides for the establishment of the South African Medical Research Council and its role in relation to health research

- **The Allied Health Professions Act (Act No.63 of 1982 as amended)**

To provide for the control of the practice of allied health professions, and for that purpose to establish an Allied Health Professions Council of South Africa and to determine its functions; and to provide for matters connected therewith.

- **Foodstuffs, Cosmetics and Disinfectants Act (Act No. 54 of 1972 as amended) Employment Equity Act (No.55 of 1998)**

Provides for the measures that must be put into operation in the workplace in order to eliminate discrimination and promote affirmative action.

- **Skills Development Act (Act No. 97 of 1998)**

Provides for the measures that employers are required to take to improve the levels of skills of employees in the workplace.

- **Occupational Health and Safety Act (Act No. 85 of 1993, as amended)**

Provides for the requirements that employers must comply with to create a safe environment for employees in the workplace.

- **Compensation for Occupational Injuries and Diseases Act (No. 130 of 1993, as amended)**

Provides for compensation disablement caused by occupational injuries or diseases sustained or contracted by employees in the course of their employment and for death resulting from such injuries or diseases.

- **Performance Management (Part 5, Chapter 4 of The Public Service regulations, 2016)**

Provides systems for performance management and development through which employees can manage performance and can be developed to maximise performance that will be in line with the strategic plan of the department which is based on a medium term expenditure framework for improved service delivery by the department.

- Negotiated Service Delivery Agreement
- Mpumalanga Economic Growth Path
- Mpumalanga strategic plan for HIV and AIDS, STIs and TB 2012 - 2016
- Integrated Development Plans (IDPs)
- District Health Management Information System Policy (DHMIS), 2011
- White Paper on The Transformation of The Health Sector, 1997
- Treasury regulations
- Public Service Regulations, 2016
- Preferential Procurement Policy Framework Regulations

RELEVANT COURT RULINGS

- **MEC for Finance & Economic Development, KwaZulu-Natal v Masifundisane Training (606/2012) [2013] ZASCA**

Public Private Partnership (PPP) – regulation 16 of the treasury regulations in respect of government Departments, promulgated in terms of the Public Finance Management Act 1 of 1999 (PMFA) – alleged that PPP not concluded in accordance with regulation 16 and PPP agreement not binding on the MEC – dispute of fact incapable of resolution on the papers – not necessary or desirable to resolve legal issue- appeal upheld

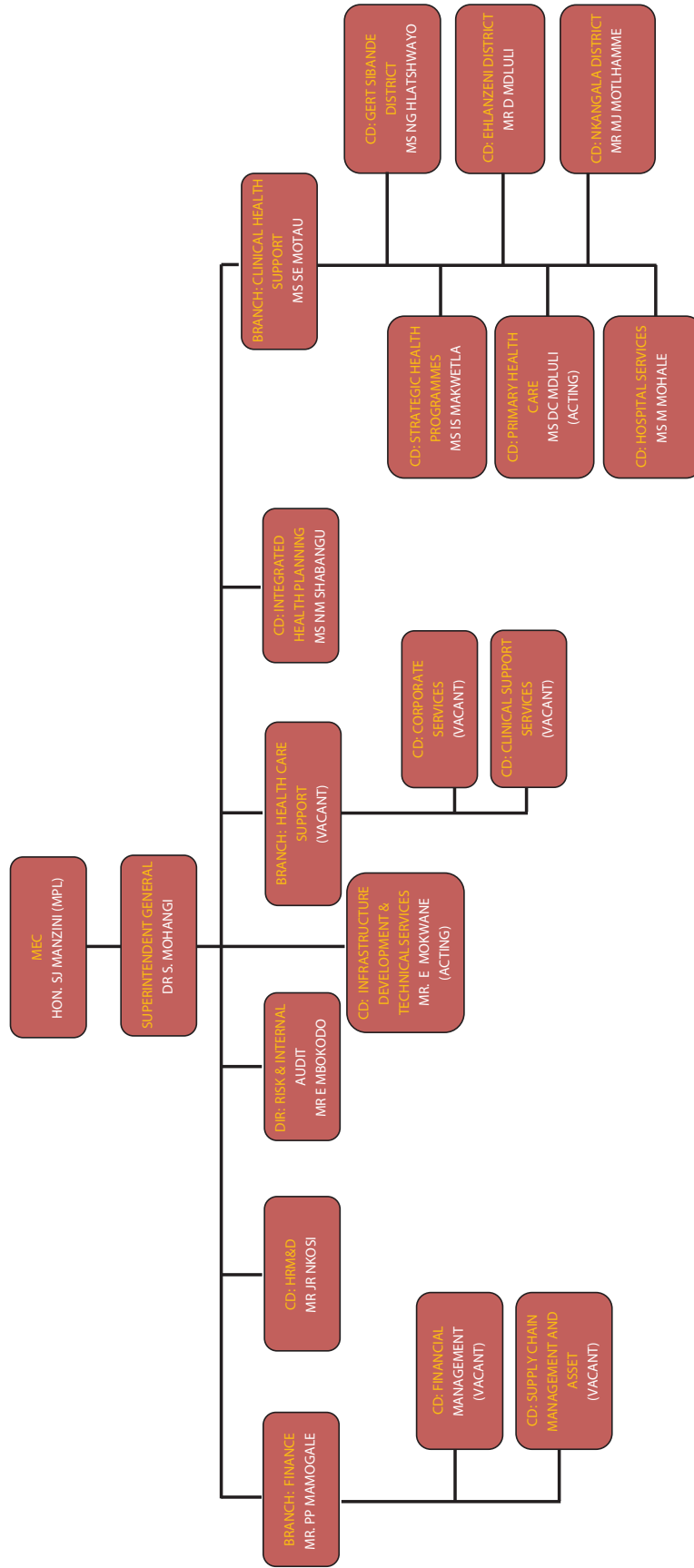
- **CCMA v Law Society, Northern Provinces (005/13) [2013] ZASCA 118**

The Law Society of the Northern Provinces contested the unconstitutionality of not allowing legal representation in terms of rule 25 (1) (c) of the rules of the Commission for Conciliation, Mediation and Arbitration (CCMA) – the appeal was upheld and the order declaring the rule as being unconstitutional by the court a quo was dismissed with costs.

C POLICY MANDATES

- National Medium Term Strategic Framework 2014 – 2019.
- Provincial Medium Term Strategic Framework 2015 – 2020.
- National Development Plan (NDP) – Vision for 2030
- National Health Systems Priorities 2009–2014 (10 Point Plan)

8. ORGANISATIONAL STRUCTURE



9 ENTITIES REPORTING TO THE MEC

Name of entity	Legislative mandate	Financial relationship	Nature of operations
None	None	None	None



PART B: PERFORMANCE INFORMATION



1. AUDITOR GENERAL'S REPORT: PREDETERMINED OBJECTIVES

The AGSA currently performs certain audit procedures on the performance information to provide reasonable assurance in the form of an audit conclusion. The audit conclusion on the performance against predetermined objectives is included in the report to management, with material findings being reported under the Predetermined Objectives heading in the Report on other legal and regulatory requirements section of the auditor's report.

Refer to page 163 of the Report of the Auditor General, published as Part E: Financial Information.

2. OVERVIEW OF DEPARTMENTAL PERFORMANCE

Mpumalanga Province is located in the north-eastern part of South Africa, bordered by Mozambique in the east and Swaziland in the south-east. The Province is also surrounded by the following provinces: Limpopo in the north, Gauteng in the west, Free State in the south-west and KwaZulu-Natal in the south-east. The province has three (3) health regions which are Ehlanzeni, Gert Sibande and Nkangala. The migration from these shared borders poses a challenge in rendering of healthcare services since demands can never be projected accurately in terms of planning and resource allocation.

The Department of Health provides health services to the citizens of the Mpumalanga Province and surrounding areas of a population of 4 523 900 (2 216 604 Males and 2 307 270 Females) of which 88% (3 981 032) are uninsured (Stats SA mid-year estimates 2018). There is a perturbing decline on total fertility rate from 3.01 (Census 2006) to 2.60 (Census 2016), while life expectancy at birth has drastically increased from average 54.2 years (52.8 males and 57.1 females), census 2016 to average 63.4 years (60.6 males and 66.1 females), census 2016.

A comprehensive package of healthcare services is provided which include:

- District health services with 287 PHC facilities
- Referral system – 23 District, 4 Regional, 4 Specialized TB and 2 Tertiary hospital services
- Health care support services

2.1 Service Delivery Environment

The Department has through a total network of 320 health facilities rendered services to an estimated 12 244 960 patient visits and headcounts at OPD and PHC service platforms

during the year under review, of those headcounts, 9 253 361 are from PHC services and 1 834 915 are hospital outpatients and 76% are patients at the age of 5 years and older, while 24% are below the age of 5 years.

In responding to the NHI which seeks to promote primary health care as key intervention to prevent and control the burden of diseases, the Department has to date established community-based structures that visits households and schools for health screening, referral and promotion of healthy lifestyle. 300 NPOs appointed 6119 community health workers to screen patients and provide health education, while 235 Ward Based PHC Outreach Teams (WBPHCOTs) covering 241 wards, visited households and 68 School Health Services Teams (SHSTs) that visited schools and screened 53 137 children ranging from grade 1 to 8.

Mpumalanga province is mostly rural or deep rural and there are many areas that are far to reach and do not meet the norm of establishing a fixed health facility. The Department is providing health care services through adequately resourced 81 Mobile Clinics (29 Ehlanzeni, 25 Gert Sibande and 27 Nkangala), covering 2561 points (Ehlanzeni 984, Gert Sibande 1116, Nkangala 461).

The referral system aims to provide quality curative services for level 2 and 3 patients through a network of 23 District hospitals which service level 1 patients, 3 Regional hospitals that service level 2 patients, 5 TB hospitals which render a specialised TB management service and 2 tertiary hospitals to services level 3 patients. The Department has serviced 1 834 915 out-patients and 1 156 684 inpatients days across 33 hospitals during the 2018/19 financial year.

The Department has a dedicated workforce of 20 412 and the vacancy rate is 8.6% including posts that have been frozen due to budget constraints.

To improve the care given to patients, the Department is conducting annual assessments on the National Core Standards in hospitals. Status determination for ideal clinic realization and a maintenance programme is implemented to strengthen the quality of health care services in PHC facilities. As a result, the Department continued to cooperate with the office of health standard compliance and through district assessor teams to execute its functions of monitoring compliance of health institutions and regularly conducting audits to monitor compliance against the six ministerial quality core standards: availability of medicine and supply, cleanliness, values and attitudes patient safety, infection prevention and control and reducing waiting time.

The plights of communities regarding their experiences in health facilities are addressed directly through a complaints and compliments management system. The Department received a total of 3481 complaints through the presidential hotline and/or submitted through health facilities' complaints mechanisms and

3046 (87.5%) complaints resolved, of those that were resolved about 2948 (96.7%) were resolved within 25 working days.

Despite all the challenges confronting the healthcare system, the province has been observing an improvement in the quality of life and life expectancy is an upward trajectory due to improved health outcomes which are attributable to the following interventions:

- The implementation of the provincial strategy to amplify implementation of programmes focusing on the reduction of maternal and infant mortalities has yielded positive outcomes in the following:
- Maternal Mortality has decreased from 133 per 100 000 in 2014/15 to 92.4 per 100 000 live births in 2018/19 surpassing the target of 145 per 100 000 live births.
- Antenatal care 1st visit before 20 weeks increased from 49% in 2014/15 to 76% in the 2018/19 surpassing the planned target of 74%.
- Antenatal clients initiated on Antiretroviral treatment has improved from 95.8% in 2016/17 to 99% in the 2018/19, surpassing the planned target of 97.5%
- 0.9% of babies test HIV positive when tested on Polymerase Chain Reaction (PCR) around 10 weeks against the planned target of 1.5%, mother to child HIV transmission is currently below 1%.
- 97.1% of children under 1 year were fully immunised during the year under review.
- Significant progress have been made to increase number of medical male circumcision in the province from 49 685 males in 2014/15 to 81 049 males in 2018/19 were circumcised during the year under review, surpassing the annual target of 44 000, this bring to a cumulative total of 413 274 since inception of the programme. The Department is soliciting support from developmental partners to increase demand for voluntary MMC.
- Strides have been made to improve retention in care for HIV positive clients to be enrolled and retained on treatment, 464 569 total clients remained on ART treatment at the end of March 2019 compared to 283 932 remained on ART treatment at the end of March 2015.

2.2 Service Delivery Improvement Plan

Main services and standards

Main services	Beneficiaries	Current/actual standard of service	Desired standard of service	Actual achievement
Maternal Health Services	All Pregnant Women	To increase early bookings in pregnancy before 20 weeks.	Increase early bookings in pregnancy before 20 weeks 74%	Early bookings in pregnancy for 20 weeks is current at 76%
Availability of essential medicine list in all health facilities	All patients and clients	Target could not be achieved due to the unavailability of drugs at the depot	95% availability of essential medicine list in all health facilities	84% availability of essential medicine list in all health facilities

Batho Pele arrangements with beneficiaries (Consultation access etc.)

Current arrangements	Desired arrangements	Actual achievements
Health facilities conducting open days	All health facilities to conduct open days	110 facilities conducted open days.

Service delivery information tool

Current information tools	Desired information tools	Actual achievements
Media	Radio	170 Media Coverage (articles) 158 talk shows 1320 radio adverts 4 outside broadcasts 109 Facebook 109 twitters
Publication	Newsletters, posters	4 newsletters 07 posters for various Department events

Complaints mechanism

Current complaints mechanism	Desired complaints mechanism	Actual achievements
Suggestion boxes	Complaints resolution within 25 working days	District hospital 95% Regional hospitals 94.4% Specialised hospitals 98.6% Tertiary hospitals 98.2%
Complaints register	Standard complaints register	Results generated from the in-house complaints management system

2.3 Organisational environment

The Department during the year under review has prioritised the filling of key management post and the following post were appointed to improve leadership in Hospitals:

- Deputy Director General – Clinical Health Services
- Deputy Director General – Finance
- Chief Executive Officer – Tintswalo Hospital
- Chief Executive Officer – Lydenburg Hospital

The Department encountered the following unrest during 2018/19:

Institution	Nature of Protest	Days lost by the Employer
Sabie hospital	Unprotected strike action	1
Mapulaneng hospital	Unprotected strike action	1
Rob Ferreira hospital	Unprotected strike action	1
Ehlanzeni District Office	Unprotected strike action	1

2.4 KEY POLICY DEVELOPMENTS AND LEGISLATIVE CHANGES

The department did not have key policy developments and legislative changes during the period under review.

3. STRATEGIC OUTCOME ORIENTED GOALS

The following progress can be reported by the Department towards achieving its strategic outcomes which are aligned to the National Development Plan vision 2030:

STRATEGIC GOAL	EXPECTED OUTCOMES	PROGRESS 2018/19
1. To improve access to health care services and continuously attain health care outcome	<ul style="list-style-type: none"> Improved access to specialists services by providing a full package of Tertiary Services (T1) Developed functional sub-specialist services Improve quality of health care service by rolling out NHI in all 3 districts Increased life expectancy from 51.6 to 57 years. Decrease under 5 mortality rate from 5.5 per 1000 live births to <5 per 1000 live births Reduce maternal mortality from 133 per 100,000 live births to <50 per 100,000 live births Improve TB cure rate from 80% to 85% Reduce infant 1st PCR positive around six week from 2.1% to <2% 	<ul style="list-style-type: none"> The following clinical specialists services are currently provided: <ul style="list-style-type: none"> Obstetrics & Gynaecology Internal Medicine Paediatrics Nephrology(Renal dialysis) which is currently an outsourced service Psychiatry including Forensic Psychiatry General surgery Orthopaedics Anaesthesiology Maxillofacial Ophthalmology Dermatology Intensive Care Radiology The Following sub-specialists domain developed: <ul style="list-style-type: none"> Dermatology Neurosurgery Plastic and Reconstructive Surgery Critical Care All 3 districts are rolling out components of NHI by implementing the eHealth strategy (HPRS) Life expectancy has improved to average 63.4 years <ul style="list-style-type: none"> Males 60.6 years Females 66.1 years Under 5 Mortality rate at 7.4 per 1000 live births Maternal Mortality rate at 92.4 per 100 000 TB cure rate 72.3% Infant 1st PCR test positive around 10 weeks at 0.9%

STRATEGIC GOAL	EXPECTED OUTCOMES	PROGRESS 2018/19
<p>2. Overhaul health system and progressively reduce health care cost</p>	<ul style="list-style-type: none"> • Improve Hospital Management by appointing Executive Management teams in all hospitals • Improve quality of care by developing and implementing Recruitment & Retention strategy • Improve communication and information management by connecting all PHC facilities to network • Improve health infrastructure and quality of care by implementing Ideal Clinics strategy to 209 facilities • Improve maintenance of health facilities by appointing 22 maintenance teams • Enhance patient care & safety and improving medical care by constructing 10 Modern hi-tech hospitals 	<ul style="list-style-type: none"> • Hospital Management by appointing Executive Management teams in all hospital: <ul style="list-style-type: none"> • 26/28 – CEOs • 29/32 – Finance Managers • 31/32 Corporate Managers • 32/32 Nursing Service Managers • Recruitment & Retention strategy developed and implemented • 49% PHC facilities and all hospitals have access to broad band connectivity • 133 PHC facilities are ideal • MOU signed with MRTT to use MRTT trained artisans and 18 (28 Cumulative) Co-operatives appointed. • 3 Modern hi-tech hospitals under construction <ul style="list-style-type: none"> • Middleburg 28%. • Bethal 83.4% • Mapulaneng (Phase 1 - 91%, Phase 2 - 100%, Phase 3 - Design complete, at Tendering stage)

4. PERFORMANCE INFORMATION BY PROGRAMME

PROGRAMME 1: ADMINISTRATION

PROGRAMME PURPOSE

The purpose of this programme is to provide the overall management of the Department, and provide strategic planning, legislative, communication services and centralised administrative support through the MEC's office and administration.

PRIORITIES

The priorities for Programme 1 have been categorised as per following sections

Supply Chain Management

Training of bid committee members (Bid Specifications, Bid Evaluations, Bid Adjudication, Economizing Committee, District Acquisition Committees and Hospital Finance Committee)

Financial Management

Improve financial management through:

- Asset management
- Management of accruals
- Management of irregular expenditure

Human Resources

- Recruitment and selection of staff in critical posts
- Achievement of Employment Equity Targets
- Human resource development
- Performance management
- Employee Relations and People Management
- Implementation of Employee Health and Wellness Programs

ICT Services

- The focus will be on Systems, ICT Infrastructure and strengthening broadband connectivity in all facilities.
- The main systems will be Patient and Administration System (PEIS) in Hospitals and Health Patient Registration System (HPRS) that will be implemented in all PHC facilities.
- Parallel to Systems, ICT infrastructure will be strengthened to ensure that there is a stable backbone upon which systems will operate. The last key area in the 2018/19 period is to ensure that all the facilities have reliable, efficient broadband connectivity.

Legal Services

- Appointment of legal officers and supporting staff as required by the Legal Services Directorate organogram must be prioritized in 2018/19, as the number of medico cases is becoming disproportionate to the number of files which are received on daily basis.
- Due to the high influx of medico cases health professionals staff need to be appropriately trained and managed to provide quality health care
- Capacitating of legal officers should be prioritised as there is a need for the establishment of a special units dealing with medico claims.
- The training of health professionals in high risk targeted areas for litigation should be adequately funded as the focus should be on monitoring and implementation of policies to avoid errors and curb claims

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme 1: Administration									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Strategic Objectives/Provincial Indicators									
Re-alignment of human resource to Departmental needs	Improve Hospital Management by appointing Executive Management teams in all hospitals. (Key Management Positions)	11	10/33	<ul style="list-style-type: none"> The status is as follows: 26/28 CEOs 30/32 Finance Management 31/32 Corporate Management 32/32 Nursing Service Manager 	28/28	24/28	<ul style="list-style-type: none"> Vacant (4/28) 2 CEOs 8 Clinical Managers 2 Nursing Service Managers 3 Finance Managers 4 Corporate Managers 	<ul style="list-style-type: none"> Target not achieved due to budgetary constraints. The following posts will be filled during the 1st and 2nd quarter of 2019/20 FY: Elsie Ballot Clinical Manager Elsie Ballot Finance Manager 2 Nursing Service Manager (NSM). Matibidi Finance Manager Lydenburg Corporate Manager Embuleni Corporate Manager Witbank TB Corporate Manager The remaining posts will be advertised in the 1st quarter of 2019/20 and filled during 2nd and 3rd quarter of 2019/20 financial year. 	
Improve quality of health care	Improve quality of care by developing and implementing Recruitment & Retention strategy	Not in plan	1	1	1 Implemented	1 Implemented	0	Target achieved.	

Programme 1: Administration									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Strengthening Health Systems Effectiveness	Improve quality of information by appointing information officers in all sub-districts	None	0 maintained	7/18	18 maintained	18 Information officers appointed	0	Target achieved.	
	Communication strategy developed	Not in plan	Not in plan	Not in plan	1	1	0	Target achieved.	
Programme Performance/ Customized Indicators (Sector Indicators)									
Improve quality of health care	Audit opinion from Auditor- General	Not in Plan	The Department received Qualified Audit Opinion from AGSA.	Qualified	Unqualified	Qualified	(Qualified on Contingency Liabilities)	The Department has maintained the previous year performance and qualified on Contingency Liabilities. An improvement plan will be developed, implemented and monitored monthly.	
	Percentage of Hospitals with broadband access	Not in Plan	Not in plan	100% (33/33 maintained)	100% (33/33 maintained)	100% (33/33 maintained)	0	Target achieved.	
Strengthening Health Systems Effectiveness	Percentage of fixed PHC facilities with broadband access	80/278	34%	29% (80/279 cumulative)	100% (287/287 maintained)	140/287	(147/287)	Target not achieved. This is due to the original contract that expired in July 2018.	
								A new service provider has been approved for appointment in February 2019 to connect all outstanding facilities in the 1st quarter of 2019/20 FY.	

Linking performance with budgets

The programme expenditure is contained at 99.9% slightly below 100%, while overall performance against pre-determined objectives is at 57% below the set target of 60%.

Sub-programme expenditure

Sub- Programme Name	2018/2018			2017/2018		
	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure
	R'000	R'000	R'000	R'000	R'000	R'000
Office of the MEC	8 628	7 899	729	8 306	7 140	1 166
Management Services	280 981	281 464	(483)	333 807	334 973	(1 166)
Total	289 609	289 363	246	342 113	342 113	-

PROGRAMME 2: DISTRICT HEALTH SERVICES (DHS)

Purpose

The purpose of the programme is to render comprehensive Primary Health Care Services to the community using the District Health System model.

The purpose of the programme is to render level 1 health services in district hospitals.

List the sub-programmes

- District Management
- District Hospitals
- Health Programmes
- Primary Health Care
- HIV and AIDS, STI and TB
- Maternal, Child and Women's Health & Nutrition (MCWH&N)
- Disease Prevention and Control (DPC)

List the strategic objectives

- Improve health care outcomes
- Expand access to health care services

Significant achievements

The Department of health renders a comprehensive Primary Health Care (PHC) services to the community through the District Health services (DHS). The Programme has recorded significant strides towards the attainment of its strategic objectives, 52% of pre-determine objectives in the APP 2018/19 have been achieved in the year under review as compared to the 60% achieved during the 2017/18 financial year.

District Management and District Hospitals

- To improve the quality of health care, the Department has managed to attain the ideal clinic status in 133/287 (46.34%) PHC facilities against the target of 116/287 (40.4%) PHC facilities. The aim is to increase the number to 191/287 PHC facilities in 2019/20 financial year.
- Twelve of the twenty three (12/23) district hospitals achieved 75% and more on National Core Standards self -assessment rate (District Hospitals) as per target for the year under review.

The Complaint Resolution within 25 working days rate for District Hospitals is at 96.8% which is the set target for 2019/20.

Maternal, Child, Women and Youth health

To improve management of maternal and child health care services, the Department has developed a strategy to amplify implementation of programmes focusing on the reduction of maternal and infant mortalities. The strategy is aimed at reducing maternal morbidity and mortality, to date, the following progress can be reported:

- Antenatal 1st visit before 20 weeks rate is at 76% against the target of 74%.
- Mother postnatal visit within 6 days rate is at 67.7% against the target of 65%.
- The Department also managed to initiate 99% of Antenatal client on ART against the target of 97.5% in the current financial year.
- Couple year protection rate is at 64% against the target of 60%



The Department has managed to achieve the following with regard to the reduction of child morbidity and mortality:

- The infant 1st PCR test positive around 10 weeks rate is at 0.9% against the target of 1.45%.
- The immunisation under 1 year coverage is at 97.1% against the target of 89%.
- 35040 School Grade 1 - learners screened for learning barriers and health related challenges against the target of 29650.
- Vitamin A 12-59 months coverage is at 66% against the target of 60%
- The diarrhoea case fatality rate is at 2.3% against the target of 3%.
- The Pneumonia Case fatality rate is at 2.7% against the target of 3.8%.
- The severe acute malnutrition case fatality rate is at 9.1% against the target of 11%.

To effectively and efficiently improve management of mental health care users, the Department has established two District Mental Health Teams during the year under review.

HIV, AIDS, STIs and Tuberculosis (HAST)

- The implementation of the HIV testing services and the Universal Test and Treat programme has seen a rise in the number of HIV testing, about 1 080 154 HIV tests were done, surpassing a target of 1 060 313 in the year under review.
- 93% of TB/HIV co-infected clients were enrolled on the antiretroviral treatment programme, reaching the target of 93%.
- Medical Male Circumcision has performed above expectation; 81 049 males were circumcised surpassing the planned target of 44 000.
- About 4.3% of confirmed TB patients died, reaching the target of 4.3% due to the compliance to TB treatment.

Non Communicable Diseases

- The Department has screened a total of 2 280 441 patients on lifestyle diseases such as diabetes (1 116 501) and hypertension (1 163 940), focusing on clients that are at high risk age of 40 years and above



Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: District Management									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Improve quality of health care	Ideal clinic status rate	Not in plan	Not in plan	99.3% (285/287)	40.4% (116/287)	46.3% (133/287)	5.9% 17/287	Target exceeded by 17 additional PHC facilities that were assessed by the teams.	
	PHC Utilisation rate	2.3	2.2	2.1	2.2 (9449034/4290009)	2.1	(0.1)	Target not achieved due to the introduction of outreach services (e.g. CCMD/ WBOTS) which decongest PHC facilities and the poor connectivity impacted on the functionality of the Health Patient Registration System (HPRS) which is aimed at improving the efficiency of managing PHC facilities. The Department has appointed a service provider to improve internet connectivity at PHC facilities and NDOH is being engaged to revise the target to respond to the PHC reengineering strategy which promotes Community based Health care by WBPHCOTs.	
	Complaints resolution within 25 days rate (PHC)	95.5%	93.7%	95%	98% (2058/2100)	96.8%	(1.2%)	Target not achieved due to inadequate implementation of the policy on complaints management. The Department will during 2019/20 monitor implementation of complaints management policy on a monthly basis.	

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: District Hospitals									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Improved quality of health care	Hospital achieved 75% and more on National Core Standards self-assessment rate (District Hospitals)	Not in Plan	Not in Plan	43.4% (10/23)	44% (10/23)	52% (12/23)	8%	Target Achieved.	
	Average Length of Stay	4.5 days	4.8 days	4.2 days	4.2 days	4.4 days	(0.2 days)	Target is within the acceptable range.	
	Inpatient Bed Utilisation Rate	71.4%	75.3%	69.5%	75% (113500/151000)	69.7%	(5.3%)	There is low utilisation due to small population size in the catchment area of some of the district hospitals. e.g. Barberton, Sabie, Matibidi, Waterval Boven, Elsie Ballot and Impungwe hospital. To review the allocated approved beds based on the new population estimate from StatsSA during 2019/20 financial year.	
	Expenditure per PDE	R 2 153	R 2 283.2	R 2 433.3	R 2 500.00	R 2 952	(R 452)	Target not achieved due to Increasing prices of commodities e.g NHLS and Medication. To review the PDE to be in line with inflation	
	Complaint Resolution within 25 working days rate (District Hospitals)	98%	95.4%	96%	95%	96%	1%	Target Achieved.	

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements Programme / Sub-programme: HIV AND AIDS, STI AND TB (HAST)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Strategic Objectives/ Provincial Indicators									
Improve health care outcomes	Female condom distribution	1 828 571	1 981 572	1 040 630	3 812 067	1 951 650	(1 860 417)	Target not achieved. 49% of the female condoms could not be distributed due to negative perceptions towards Female Condoms. The Department will continue with Advocacy, education and popularisation of Female condoms use through campaigns and other relevant platforms.	
	Improve TB cure rate	78.7%	79.5%	78.9%	82% (17674/21554)	72.3%	(9.7%)	Target not achieved. This is attributable to Interruption of treatment due to adverse effects and the missing sputum re-examinations during treatment. The Department will strengthen its efforts on patient education on the importance of sputum investigation at the end of treatment.	

Programme Performance/ Customised indicators (Sector indicators)									
ART client remain on ART end of month - total	318 228	360 037	411 905	477 288	464 569	(12 719)	Target not achieved. The low initiation is due to the go slow by Lay Counsellors on reporting HIV test positive and delays in the initiation on treatment which has an impact on the enrolment rate to treatment. The High loss to follow poses a threat in the retention in care. The Department is implementing the Ministerial Siyenza 10 point plan in conjunction with support partners to improve the retention in care and the attainment of the 90 90 90 targets. Furthermore, investment into Health system strengthening has been prioritised by appointing Data captures, Health Information Officers and the implementation of the integrated TB and HIV information system.		
TB/HIV co-infected client on ART rate	Not in Plan	39.7%	96.2%	93% (13625/14651)	93%	0	Target Achieved.		
HIV test done - total	868 897	1 053 082	1 302 122	1 060 313	1 080 154	19 841	Target achieved and exceeded by 19 841 clients tested for HIV. This is due to the strengthened provider initiated counselling and testing (PICT) and community HIV testing.		
Male condom distribution	30 per male	52 per male (77 703 335)	62 703 737	72 429 277	67 150 600	(5 278 677)	Target not achieved due to ineffective distribution of condoms at PHC level and other secondary distribution sites. The Department is developing a condom distribution tracking tool to monitor the distribution at PHC facility level and other secondary distribution sites. The tool will be implemented during the 2019/20 financial year.		

	38 439	38 262	79 187	44 000	81 049	37 049	Target achieved and exceeded by 37 049 males that were circumcised and above 50% are medical circumcision performed at traditional initiation schools. Successful collaboration with COGTA, deploying medical teams to initiation schools, support from implementation partners and close programme monitoring led to the success.
Medical male circumcision performed – Total	12.5%	39.8%	72.5%	80% (8000/10000)	94.9%	14.9%	Target achieved and exceeded due to screening for TB during Community Campaigns.
TB symptom 5yrs and older started on treatment rate	88.6%	87.4%	87.1%	89% (19183/21554)	84.9%	(4.1%)	Target not achieved due to the 6.6% Patients defaulted on treatment during the period under review. The Department will continue utilizing WBPFCOT to trace TB defaulters and the implementation of Siyenza 10 point plan will assist in reducing the defaulter rate and ensure patients are successfully treated.
TB client treatment success rate	4%	5.4%	5.2%	4.1% (884/21554)	6.6%	(2.5%)	Target not achieved. This issue to difficulty in tracing clients as they often give incorrect addresses.
TB client lost to follow up rate	4.5%	4.7%	4.3%	4.30 (927/21554)	4.3%	0	Intensify Patient Education on the importance of giving correct addresses and report any relocation. All TB Clients to be registered on HPRS and continue utilizing WBPFCOT to trace TB defaulters.
TB client death Rate	45%	54.4%	56.7%	62% (732/1182)	54.2%	(7.8%)	Target Achieved. Target not achieved due to the 21.9% (210/958) clients who died and were TB/HIV co-infected. The expansion of Bedaquiline regimen will be fast tracked in 2019/20 FY.
TB MDR treatment success rate							

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: Maternal, Child and Women's Health & Nutrition (MCWH&N)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Strategic Objective/Provincial Indicators									
Improve health care outcomes	Number of School Health Service Teams established	12	13 (43 cumulative)	32 (75 cumulative)	33	16	(17)	Target not achieved due to shortage of professional nurses at PHC facilities compromising establishment of new school health teams. The Department will establish 55 School health teams during the 2019/20 FY.	
	Strategy to amplify implementation of programmes focusing on the reduction of maternal and infant mortalities developed	Not in plan	Not in plan	Not in plan	1	1 Strategy developed	0	Target achieved.	
Programme Performance/Customized Indicators (Sector Indicators)									
	Antenatal 1 st visit before 20 weeks rate	56.6%	65.9%	73.8%	74% (56623/76518)	76%	2%	Target achieved and exceeded.	
	Mother postnatal visit within 6 days rate	Not in plan	62.5%	63.4%	65% (47345/72839)	67.7%	2.7%	Target achieved and exceeded due to the effective implementation of Mom-Connect and community campaigns.	
	Antenatal client initiated on ART rate	Not in plan	95.8%	99%	97.5% (14235/14600)	99%	1.5%	Target achieved and exceeded due to the increase in the enrolment of pregnant women on Antenatal care programme.	

Programme / Sub-programme: Maternal, Child and Women's Health & Nutrition (MCWH&N)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
	Infant 1st PCR test positive around 10 weeks rate	1.7%	1.6%	1.1%	1.45% (262/18043)	0.9%	0.55%	Target achieved and exceeded. The early identification of HIV positive pregnant mothers and early enrolment on treatment has contributed in the reduction in mother to child transmission.	
	Immunisation coverage under 1 year (annualised)	80.2%	87.1%	90.4%	89% (72120/81034)	97.1%	8.1%	Target achieved and exceeded. Community campaigns and effective utilisation of Mom-Connect contributes to the achievement.	
	Measles 2nd dose coverage (Annualised)	84.2% (1 st dose)	78.7%	89.2%	88% (73857/83928)	85.9%	(2.1%)	Target not achieved. Inadequate coverage of Early Childhood Development centres (ECDs) due to inadequate School Health Nurses. The Department will establish 55 School health teams during the 2019/20 FY.	
	Child under 5 years diarrhoea case fatality rate	5.3 per 1000	2.7 per 1000	1.9%	3% (92/3075)	2.3%	0.7%	Target achieved and exceeded due to implementation of integrated management of childhood illnesses (IMCI)	
	Child under 5 years pneumonia case fatality rate	5.3 per 1000	3.7 per 1000	2.4%	3.8% (139/3667)	2.7%	1.1%	Target achieved and exceeded due to implementation of integrated management of childhood illnesses (IMCI)	
	Child under 5 years severe acute malnutrition case fatality rate	2.9%	12.5%	9.1%	11% (108/986)	9.1%	1.9%	Target achieved and exceeded due to implementation of severe acute malnutrition (SAM) strategy.	
	School Grade 1 screening coverage	Not in plan	20%	20 587	29 650	35 040	5 390	Target achieved and exceeded. Department, prioritised the screening of grade 1 learners due to limited school health services teams.	

Programme / Sub-programme: Maternal, Child and Women's Health & Nutrition (MCWH&N)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
	School Grade 8 screening coverage (annualised)	Not in plan	13.1%	9661	21 490	18 097	(3 393)	Target not achieved. Due to limited school health services teams, the Department prioritised the screening of grade 1 learners. Conduct catch up in 2019/20 and increase the number of school health teams by 55 during 2019/20.	
	Delivery in 10 to 19 years in facility rate	Not in plan	Not in plan	12.5%	11% (8012/72839)	14.8%	(3.8%)	Target not achieved. Effects of contraceptives mostly preferred by teenagers (Nur Isterate & Triphasil) stock outs that started last year 2017/18, mostly Nkomazi and BBR Ehlanzeni. Strengthen youth friendly services. Create a demand for other Long Acting Reproductive contraception (LARC) e.g. Implanon and IUCD. Monitor and maintain uninterrupted supply of contraceptives including condoms.	
	Couple year protection rate (annualised)	39.7%	38.6%	62.4%	60% (717034/1195057)	64%	4%	Target achieved and exceeded due to the introduction of Long Acting Reproductive contraception (LARC) e.g. implanon and IUCD.	
	Cervical cancer screening coverage 30 years and older	63%	66.7%	78.7%	75% (692531/923374)	89.9%	14.9%	Target achieved and exceeded due to outreach services conducted by supporting partners.	
	Human Papilloma Virus Vaccine 1st dose coverage	Not in Plan	102%	30 876	77350	28 589	(48 761)	Target not achieved due to insufficient School health nurses that service both School health programme and Human Papilloma Virus Vaccine (HPV) campaign	
	Human Papilloma Virus Vaccine 2nd dose coverage	82.5%	Not in Plan	23 292	77 350	22 907	(54 443)	Target not achieved due to insufficient School health nurses that service both School health programme and Human Papilloma Virus Vaccine (HPV) campaign	

Programme / Sub-programme: Maternal, Child and Women's Health & Nutrition (MCWH&N)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
	Vitamin A 12- 59 months coverage (annualised)	49.9%	51.4%	58.3%	60% (205552/342587)	66%	6%	Target achieved and exceeded. Community health care workers are providing Vitamin A at Community level.	
	Maternal Mortality in facility Ratio (annualised)	108 /100 000	125.3 /100 000	120 per 100 000	145 per 100 000 Live Births (103/70988)	92.4 per 100 000 Live Births	52.6 per 100 000 Live Births	Target achieved and exceeded due to the effective implementation of the provincial Maternal and Child mortality strategy.	
	Neonatal death in facility rate	8.3 per 1 000	9.3 Per 1 000	9.7 per 1 000	9.25/1000 (657/70995)	11.5 per 1 000	(2.25 per 1 000)	Target not achieved due to inadequate skills on management of small and sick neonates, shortage of neonatal ICU beds poses a high risk. Capacitate clinicians on management of small and sick neonates and Help Baby Breath (HBB). Prioritize provision of low, high risk and ICU beds for neonatal care (Witbank) during 2019/20.	

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: Disease Prevention & Control (DPC)										
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations		
Strategic Objective/Provincial Indicators										
Improve health care outcomes	Number of District Mental Health Teams established	New Indicator	New Indicator	New Indicator	2	2	0	Target achieved.		
	Programme Performance/Customized Indicators (Sector Indicators)									
	Cataract surgery rate (Annualised)	CSR 718	CSR 805 (2 657)	CSR 313 (1 157)	CSR 1000 (3,600)	CSR 336.1 (1 493.1)	CSR 663.9 (2,106.9)	Lack of available Ophthalmologists. The Department has entered into a Memorandum of Agreement with Bureau for the Blind to address the backlog of cataract surgery and will expand the scope further.		
Malaria case fatality rate (Annualised)	0.77 per 1 00	0.5 per 1 000	1.02%	0.5%	0.60%	(0.1%)	Target not achieved. This is attributable to delayed medical seeking behaviour by majority patients. Intensify community awareness campaigns and mobile community testing of malaria and treatment on site.			

Changes to planned targets

None

Linking performance with budgets

The programme overall performance against the APP 2018/19 pre-determined objectives is 52% with an overall expenditure at 100% against allocated budget.

Sub-programme expenditure

Sub-Programme Name	2018/2019			2017/2018		
	Final Appropriation R'000	Actual Expenditure R'000	(Over)/Under Expenditure R'000	Final Appropriation R'000	Actual Expenditure R'000	(Over)/Under Expenditure R'000
District Management	380 497	380 496	1	345 577	331 895	13 682
Community Health Clinics	1 454 549	1 443 409	11 140	1 298 031	1 302 677	(4 646)
Community Health Centres	943 598	952 990	(9 392)	864 206	895 515	(31 309)
Community Based Services	19 076	18 317	759	137 781	136 745	1 036
HIV/AIDS (HAST)	1 898 883	1 888 810	10 073	1 401 468	1 420 824	(19 356)
Integrated Nutrition	10 832	10 012	820	14 209	16 838	(2 629)
District Hospitals	3 324 286	3 337 645	(13 359)	3 120 732	3 077 510	43 222
Total	8 031 721	8 031 679	42	7 182 004	7 182 004	-



PROGRAMME 3: EMERGENCY MEDICAL SERVICES

PROGRAMME PURPOSE

The purpose of Emergency Medical Services is to provide pre-hospital medical services, inter-hospital transfers, Rescue and Planned Patient Transport to all inhabitants of Mpumalanga Province within the national norms of 15 minutes in urban and 40 minutes in rural areas.

PRIORITIES

- Improved quality of health care
- Maternal, infant and child mortality reduced
- Improvement of referrals to all institutions

The Department will improve the services through the recruitment, appointment of emergency care practitioners and training to increasing the number of EMS bases and the number of rostered ambulances in the province.

Achievements

- The appointment of 6 Emergency Care Technicians and 4 ALS practitioners.
- The procurement of 17 ambulances.
- Procurement of training equipment.



Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: Emergency Medical Services (EMS)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Strategic Objective/Provincial Indicators									
Improve access to health care services									
	Improve response time by increasing the number of Operational Ambulances.	108	95	96	100 Operational Ambulances	88	(12)	Target not achieved due to ambulances with a high mileage causing frequent breakdowns and delays in repairs. Department will procure 35 ambulances during 2019/20.	
	Improve the use of resources by integrating PPTS into EMS operations.	20%	20%	20%	60%	20%	(40%)	Target not achieved due to critical posts not filled within PPTS due to financial constraints. Department will appoint 12 shift leaders and three (3) PPTS district coordinators.	
	Improve maternal outcomes by increasing the number of Obstetric ambulances.	18	6 (cumulative 24)	24	6 (Cumulative 30)	0 (cumulative 24)	(6)	Target not achieved due to the funds that were reprioritised towards procurement of critical medical equipment. Reprioritise procurement of Obstetric ambulances for 2019/20.	
Programme Performance/Customized Indicators (Sector Indicators)									
	EMS P1 urban response under 15 minutes rate.	75.5%	72.3%	71%	80%	63.3%	(16.7%)	Target not achieved due to ambulances with a high mileage causing frequent breakdowns and delays in repairs. Department will procure 35 ambulances during 2019/20.	
	EMS P1 rural response under 40 minutes rate.	71.5%	69.5%	68%	75%	63.4%	(11.6%)		
	EMS inter-facility transfer rate.	4.6%	5%	5%	40%	9.9%	(30.1%)	Target not achieved. Transfers from PHC facilities are incorrectly captured as primary calls, which results in false inter-facility transfer rate. The Department will develop a tool and train end users on correct recording and reporting of EMS inter-facility transfers during 2019/20.	

Changes to planned targets

None.

Linking performance with budgets

- Appointment of critical positions to actualise PPTS in the province.
- Purchase of new ambulance vehicles to replace and augment current fleet
- Timeous purchase of ambulance repair and maintenance services to avoid negative impact on services.
- Improve engagements with the Department of Community Safety Security and Liaison to prioritise the licensing of EMS vehicles.

Changes to planned targets

None

Linking performance with budgets

The programme expenditure is at 100% while performance is at zero.

Sub-programme expenditure

Sub- Programme Name	2018/2019			2017/2018		
	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure
	R'000	R'000	R'000	R'000	R'000	R'000
Emergency Medical Services	356 220	357 395	(1 175)	357 123	357 188	(65)
Planned Patient Transport	7 202	6 017	1 185	14 396	14 331	65
Total	363 422	363 412	10	371 519	371 519	-

PROGRAMME 4: PROVINCIAL HOSPITAL SERVICES

PROGRAMME PURPOSE

The purpose of this programme is to render level 1 and 2 health services in regional hospitals and TB specialized hospital services.

PRIORITIES

- Provision of eight core clinical domains for secondary services
- Improve quality of care by ensuring that regional hospitals comply with the national core standards
- Coordinate the referral network within the district through quarterly cluster meeting

Specialised TB

- Improve compliance with National Core Standards:
- Decentralisation of the implementation of the Bedaquiline regimen to 80% of the TB institutions
- Improved monitoring of lease agreement and improved infrastructure support

Significant Achievements

Regional Hospitals

- The Department appointed the three (3) Specialists (1 Orthopaedic Specialist, 1 Surgeon, 1 specialist: Internal Medicine at Mapulaneng).
- Theater renovated at Mapulaneng and Ermelo hospitals.
- Erection of medical waste storage bank at Ermelo Hospital.
- Establishment of in-house laundry services at Ermelo Hospital
- Procurement of 37 medical equipment including 3 operating theatre tables, 1 video endoscope system, 4 emergency trolleys, 1 CPAP machines, 5 Vital signs monitors, 10 Pulse oximeters and 2 infant incubators amongst others

TB Specialised

- The effective movement of TB patients performed at 100% which ensured improved access to TB services.
- Decentralization of MDR&XDR TB patients to sub district level.
- Procurement of 31 medical equipment including
 - 5 ECG machines,
 - 8 Vital signs monitors,
 - 4 HiPro Box,
 - 4 Infusion pumps,
 - 3 Pulse oximeters and
 - 3 defibrillators amongst others.

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: Regional Hospitals									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Improved quality of health care	Strategic Objective/Provincial Indicators								
	Functional Adverse Events Committees	3	3	3	3	3	0	Target achieved.	
Programme Performance/Customized Indicators (Sector Indicators)									
	Hospital achieved 75% and more on National Core Standards self-assessment rate.	100%	100%	66% (2/3)	100% (3/3)	33% (1/3) Themba:73% Mapulaneng: 78% Ermelo:72% (CHS assessment)	(67% (2/3))	Target not achieved due to poor management of emergency trolleys and infrastructural challenges. Prioritise training of clinicians on the management of emergency trolleys. New Mapulaneng hospital is being build. Themba and Ermelo hospitals have been included in the 10 year Infrastructure plan.	
	Average Length of Stay.	4.6 days	4.4 days	4 days	4.7 days	4.5 days	0.2 days	Target achieved, the ALOS are within acceptable norm.	
	Inpatient Bed Utilisation rate.	80.3%	81.2%	77.9%	75%	67.4%	(7.6%)	Target not achieved due the closing of a theatre in Mapulaneng as a results of infrastructural challenges during the 1 st to the 3rd quarter 2018/19 and this has ultimately affected Bed utilisation rate. The impact of the doctors' strike at Mapulaneng in the first quarter 2018/19 is evident on the overall performance.	
	Expenditure per PDE.	R 2 614	R 2 985.6	R 3 281.6	R 3 058	R 3 868.4	(R 800.4)	The Department has fixed the theatre and addressed the issues raised by the Medical Doctors at Mapulaneng Hospital.	
	Complaints Resolution within 25 working days rate.	98.7%	100%	89.1%	90%	94.4%	4.4%	Target not achieved due to the increased costs on services such as NHLS, medicine and implants. Target achieved, strengthening of hospital complaints management committees resulted in the improved management of complaints.	

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: TB Specialised Services										
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations		
Improved quality of health care	Improve access to TB services through effective movement TB patients rate for continuity of care	Not in Plan	100%	100%	100%	100%	0	Target Achieved		
	Hospital achieved 75% and more on National Core Standards self-assessment rate (specialized hospitals)	100%	100%	20% (1/5)	100% (5/5)	60% (3/5)	(40%)	Target not achieved due to poor management of emergency trolleys and infrastructural challenges. Prioritise training of clinicians on the management of emergency trolleys. Purchase of Standerton and Barberton TB hospitals has been finalised and the hospitals will be budgeted for maintenance during 2019/20.		
	Complaint Resolution within 25 working days rate (Specialised Hospitals)	100%	97.3%	100%	95%	98.6%	3.6%	Target achieved, strengthening of hospital complaints management committees resulted in the improved management of complaints.		

Changes to planned targets

None.

Linking performance with budgets

- Appointment of critical positions to actualise PPTS in the province.
- Purchase of new ambulance vehicles to replace and augment current fleet
- Timeous purchase of ambulance repair and maintenance services to avoid negative impact on services.
- Improve engagements with the Department of Community Safety Security and Liaison to prioritise the licensing of EMS vehicles.

Changes to planned targets

None

Linking performance with budgets

The Programme overall performance is at 56% against set pre-determine objective, with expenditure at 100% during the year under review.

Sub-programme expenditure

Sub- Programme Name	2018/2019			2019/2020		
	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure
	R'000	R'000	R'000	R'000	R'000	R'000
General (Regional) Hospitals	1 127 902	1 142 554	(14 652)	1 066 516	1 084 521	(18 005)
Tuberculosis (TB) Hospitals	196 817	182 362	14 455	194 586	176 879	17 707
Psychiatric/Mental Hospitals	44 054	43 857	197	41 639	41 341	298
Total	1 368 773	1 368 773	-	1 302 741	1 302 741	-



PROGRAMME 5: TERTIARY HOSPITAL SERVICES

Purpose

The purpose of the Programme is to render tertiary health care services and to provide a platform for training of health care workers and to conduct research.

Priorities

- Improve quality of care by ensuring compliance to the national core standards
- Reduce average length of stay (ALOS)
- Improve clinical governance at tertiary hospitals

Significant Achievements

- 29 registrars undergoing training for different specialties.
- The following appointments made: 1 Ophthalmologist, 3 Orthopaedic surgeons, 1 general surgeon, 30 medical interns.
- Appointment of Clinical Governance Co-ordinator at provincial office.
- Procurement of 145 medical equipment which included 20 syring pumps, 17 ICU beds with battery backup, 15 blood warmers, 20 PACS monitors, 20 Vital signs monitors, 15 Pulse Oximeter, 1 Ophthalmic surgical microscope, 3 Autoclaves tabletop, 4 ECG machines and Gyneacology laparoscopic tower with instruments amongst others.



Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: Tertiary Hospitals										
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations		
Improved Quality of Health Care	Strategic Objective/Provincial Indicators									
	Functional Adverse Events Committees	2	2	2	2	2	0	Target Achieved.		
	Programme Performance/Customized Indicators (Sector Indicators)									
	Hospital achieved 75% and more on National Core Standards self-assessment rate (Tertiary Hospitals)	100%	100%	100% (2/2)	100% (2/2)	100% (2/2)	50%	(50%)	One of the Tertiary Hospital was assessed by National Department Office of Standard Compliance before they could perform own self-assessment	
	Average Length of Stay (Tertiary Hospitals)	6.8 days	7.1 days	6.1 days	5.6 days	6.9 days	(1.3 days)		Target not achieved due to mental healthcare users that stay longer. Continue the provision of mental health services at tertiary level while the Department finalise the establishment of a mental health institution.	
	Inpatient Bed Utilisation Rate (Tertiary Hospitals)	81. %	85.8%	79.8%	75%	81.3%	(6.3%)		Admission of level 1 and 2 patients has contributed to the high bed utilisation at tertiary level. The Department shall continue monitoring the implementation of the Referral policy to ensure proper level of care during 2019/20.	
	Expenditure per PDE (Tertiary Hospitals)	R2 765	R2 910,8	R 3 161,6	R 3 836	R 4 889,91	(R1 053,91)		The increased costs on services such as NHLS, medicine and implants affected the attainment of the target. The department shall continue monitoring the cost drivers using monthly IYM reports towards improved accountability.	
	Complaint Resolution within 25 working days rate (Tertiary Hospitals)	99.4%	88.3%	98.20%	90%	98.2%	8.2%		Target achieved, strengthening of hospital complaints management committees resulted in the improved management of complaints.	

Changes to planned targets

None

Linking performance with budgets

The Programme expenditure is at 99.9% with pre-determined objectives performing at 33%.

Sub-Programme expenditure

Sub- Programme Name	2018/2019			2017/2018		
	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure
	R'000	R'000	R'000	R'000	R'000	R'000
Tertiary Hospital Services	1 224 452	1 222 888	1 564	1 120 507	1 154 506	(33 999)
Total	1 224 452	1 222 888	1 564	1 120 507	1 154 506	(33 999)

PROGRAMME 6: HEALTH SCIENCE AND TRAINING

PURPOSE

The purpose of the Health Sciences and Training programme is to ensure the provision of skills development programmes in support of the attainment of the identified strategic objectives of the Department. The programme achieved all its planned APP targets during the year under review.

PRIORITIES

- Training of Nurse Students
- Training of Health professionals
- Training of Health workers

Significant Achievements

The overachievement of 5 830 is due to the support received from developmental partners training additional health workers.

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: Health Sciences and Training (HST)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Improved quality of health care	Strategic Objective/Provincial Indicators								
	Improve human resource efficiency by training health care professionals on critical skills	4 473	4 338	6 104	5000	5 830	830	The overachievement is due to the support received from developmental partners training additional health workers.	
Programme Performance/Customized Indicators (Sector Indicators)									
	Number of Bursaries awarded for first year medicine students	99	10	10	0	0	0	Programme moved to Department of Education.	
	Number of Bursaries awarded for first year nursing students	310	241	250	90	90	0	Target achieved.	

Changes to planned targets

None

Linking performance with budgets

The programme expenditure is at 100%.

Sub-programme expenditure

Sub- Programme Name	2018/2019			2017/2018		
	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure
	R'000	R'000	R'000	R'000	R'000	R'000
Nursing Training Colleges	149 276	151 241	(1 965)	164 944	169 789	(4 845)
EMS Training Colleges	4 559	4 287	272	4 841	4 578	263
Bursaries	61 685	60 397	1 288	72 813	73 111	(298)
Primary Health Care Training	5 374	5 376	(2)	6 451	4 776	1 675
Other Training	144 945	144 537	408	126 477	115 543	10 934
Total	365 839	365 838	1	375 526	367 797	7 729

PROGRAMME 7: HEALTH CARE SUPPORT SERVICES (HCSS)

The Health Care Support Service programmes aim to improve the quality and access of health care provided through:

- The availability of pharmaceuticals and other ancillaries.
- Rendering of credible forensic health care which contributes meaningfully to the criminal justice system.
- The availability and maintenance of appropriate health technologies
- Improvement of quality of life by providing needed assistive devices.
- Coordination and stakeholder management involved in specialized care.
- Rendering in-house services within the health care value chain.

There are four directorates within programme 7 namely:

- **Pharmaceutical Services** (Pharmaceutical Depot, Policy Systems and Norms, Essential Medicine List (EML) and Programme Support and African Traditional Health Practices)
- **Forensic Health Services** (Forensic Pathology Services, Clinical Forensic Medicine and Medico-Legal Services)
- **Health Care Support** (Medical Orthotics and Prosthetics, Laboratory, Blood, Tissue and Organ (LBTO), Telemedicine)
- **Health Technology Services** (Clinical Engineering, Imaging Services)
- **Laundry Services**

7.2. PRIORITIES

The **strategic priority** of the programme is to overhaul the health care system by improving quality of care including implementation of the National Health Insurance.

- Provision of quality pharmaceutical services in all the facilities
- Provision of quality Clinical Forensic Medicine Services
- Provision of quality Forensic Pathology Services
- Provision of guidelines on the use of Laboratory, Blood, Tissue and Organ Transplant available in hospitals.
- Provision of imaging services compliant to Radiation Control prescripts;
- Provision of comprehensive medical orthotic and prosthetic care;

Significant Achievements

- The Department has significantly achieved its planned target on CCMDD programme at 261 551/220 000 since inception in 2014.
- Medical equipment purchased and delivered for Regional, TB Specialised and Tertiary Hospitals.
- KwaMhlanga facility renovated to fully comply with the OHSA, restoring the 21 facilities rendering FPS services.
- 30 Desktop and 15 laptops were procured for FPS facilities and doctors
- One debriefing session conducted for 150 FPS officials
- Accreditation of FPS doctors training with the University of Pretoria
- The Department managed to issue 754 Orthotic and Prosthetic devices above the set target of 4 000.

Programme / Sub-programme: Health Care Support Services (HCSS)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Improved quality of health care	Improve quality of care by increasing availability of medicines and surgical sundries at the Medical Depot.	79%	92%	89%	95% (295/310)	84% (262/310)	(11%)	Target not achieved due to a shortage of single entities of the ARVs and Isoniazid. The Department will continue to closely monitor the availability of medicine through improved liaison with suppliers, further to prescribe alternative medicine where applicable.	
	Number of patients initiated on Central Chronic Medicine Dispensing and Distribution (CCMDD)	Not in Plan	87 063	186 407	220 000	261 551	41 551	Target achieved and exceeded. The programme has been well marketed and well accepted by users.	
	Improve access to quality of care through compliance with Radiation Control prescripts by all facilities with X-Ray equipment	47% (14/30)	80% (24/30)	86.7% (26/30)	100% (30/30)	90% (27/30)	(10%)	Target not achieved. This is attributable to the poor quality control tests that were not done at Mmamethake and Matibidi hospitals and Phola Nsikazi CHC therefore did not comply. Prioritise procurement of X-Ray equipment and appointment of Radiographer at Phola Nsikazi.	

Programme / Sub-programme: Health Care Support Services (HCSS)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Improved quality of health care	Number of hospitals providing laundry services.	Not in Plan	31	33	28/28	28/28	0	<p>Withbank hospital: The identified site was only handed over to DPWR&T by the third quarter of 2018.</p> <p>Ermelo Hospitals: Ermelo Laundry is now functional with 10 laundry aid having commenced duty in February 2019.</p> <p>Rob Ferreira hospital The identified site is under renovation.</p>	
	Number of Orthotic and prosthetic devices issued	Not in Plan	5 942	5 277	4 000	4 754	754	Target achieved and exceeded due to the functionality of Ermelo hospital Medical Orthotic and Prosthetic (MOP) and the additional number of students made available to the province.	
	Number of hospitals with functional transfusion committees	Not in Plan	21	20	21	21	0	Target achieved	
	Number of sites rendering Forensic Pathology Services (FPS)	Not in plan	21	21	21	21	0	Target achieved.	

Changes to planned targets

None

Linking performance with budgets

The programme expenditure is at 100%.

Sub-programme expenditure

Sub- Programme Name	2018/2019			2017/2018		
	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure
	R'000	R'000	R'000	R'000	R'000	R'000
Laundries	31 028	30 878	150	27 485	25 113	2 372
Engineering	23 335	18 477	4 858	83 709	63 159	20 550
Forensic Pathology Services	84 597	86 450	(1 853)	71 559	71 996	(437)
Orthotic and Prosthetic Services	4 500	4 191	309	3 994	4 042	(48)
Medicine Trading	14 468	17 932	(3 464)	13 557	12 711	846
Total	157 928	157 928	-	200 304	177 021	23 283

PROGRAMME 8: HEALTH FACILITY MANAGEMENT (HFM)

Purpose

The purpose of the programme is to build, upgrade, renovate, rehabilitate and maintain health facilities.

List the sub-programmes

- Infrastructure Management.
- Hospital Revitalization.
- Facilities Management.

List the strategic objectives

- Improved health facility planning and accelerate infrastructure delivery.
- Re-alignment of human resource to Departmental needs.

Strategic objectives & Performance indicators, Planned Targets and Actual Achievements

Programme / Sub-programme: Health Facilities Management (HFM)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
Strategic Objective / Provincial Indicators									
Improved health facility planning and infrastructure delivery	Improve access to healthcare by increasing number of PHC facilities maintained.	107 PHC	90 PHC facilities maintained	39 (Cumulative 279/287)	5 (Cumulative 287/287)	Goromane Clinic: Progress is 100% Makoko Clinic: Progress is 100% Luphisi Clinic: Progress of Clinic structure is 100% Luphisi Clinic : Guardhouse, Refuse area, waiting area – Progress is 100% Ntunda Clinic – progress is 100%	0	Target achieved.	

Programme / Sub-programme: Health Facilities Management (HFM)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
	Number of PHC facilities constructed (new/ replacement)	Not in plan	8 (Ehlanzeni:2 Gert Sibande: 5 Nkangala:1)	6 (cumulative 14) Ehlanzeni: 5 Gert Sibande: 7 Nkangala: 2	8 Ehlanzeni: 2 Gert Sibande: 5 Nkangala: 1	<p>Ehlanzeni (2) Kanyamazane Clinic: Mbombela Bulk Earthwork is 100% Oakley Clinic : Progress is 80% Gert Sibande (5) Vukuzakhe Clinic: Progress is 52% Nhlazatshe 6 Clinic: Progress is 62% Msukaigwa Clinic: Contractor appointed awaiting finalization of documents Balfour Mini Hospital: Tender briefing done Ethandukhanya Clinic : Tender briefing done Nkangala (1) Pankop Clinic : Progress is 41%</p>	(2)	Target not achieved. <ul style="list-style-type: none"> Pankop Clinic contractor is very slow Vukuzakhe Clinic community strikes delayed the progress 	
	Number of Hospitals under maintenance	Not in Plan	Not in Plan	31	31	31	0	Target achieved.	

Programme / Sub-programme: Health Facilities Management (HFM)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
	Enhance patient care & safety and improving medical care by constructing Modern hi-tech hospitals	Not in Plan	0	3 (Planning phase)	3 (Construction)	<p>Ehlanzeni (1) Mapulaneng Hospital: Phase 1: Progress is 91% Phase 2: Progress is 100% Phase 3: Design stage is complete waiting for confirmation to go out on tender</p> <p>Gert Sibande (1) Bethal Hospital : Progress is 83,4%</p> <p>Nkangala (1) Middelburg Hospital : Progress is 28%</p>	0	Target not achieved. Mapulaneng phase 1, contractor not performing. The Department of health has proposed Termination of contract by DPWR&T and appoint a performing service provider during first quarter of 2019/20.	
	Improve maintenance of health facilities by appointing cooperatives	Not in Plan	20	10 teams appointed	16 cooperatives appointed (26 Cumulative)	18 cooperatives appointed (28 Cumulative)	2 cooperative	Target achieved and exceeded.	
Programme Performance / Customized Indicators (Sector Indicators)									

Programme / Sub-programme: Health Facilities Management (HF/M)									
Strategic objectives	Performance Indicator	Actual Achievement 2015/2016	Actual Achievement 2016/2017	Actual Achievement 2017/2018	Planned Target 2018/2019	Actual Achievement 2018/2019	Deviation from planned target 2018/2019	Comment on deviations	
	Number of health facilities that have undergone major and minor refurbishment) in NHI Pilot District	Not in plan	19 PHC facilities completed	25 PHC* (cumulative 40)	6 Hospitals 6 PHC* (cumulative 46)	14 PHC completed 5 Hospitals	0	Target achieved.	
	Number of health facilities that have undergone major and minor refurbishment outside NHI pilot District (excluding facilities in NHI Pilot District)	Not in plan	5 Hospital completed 13 PHC completed	4 Hospitals 10 PHC	2 Hospitals 6 PHC	Matikwane Hospital Renovation of roof – progress is 100% Witbank Hospital – progress is 100% Psychiatric ward – Project on planning Schuzendal Clinic: Progress is 55% Middelplaas Clinic: progress is 90% Ntunda Clinic: progress is 100% Goromane Clinic: Progress is 100% Makoko Clinic: Progress is 100% Luphisi Clinic: Progress of Clinic structure is 100% Luphisi Clinic : Guardhouse, Refuse area, waiting area – Progress is 100%	0	Target achieved.	

Changes to planned targets

None.

Linking performance with budgets

The Programme under expenditure is due to the following:

The programme expenditure is at 95.3% due to delays in performance of infrastructural projects.

Sub-programme expenditure

Sub- Programme Name	2018/2019			2017/2018		
	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure	Final Appropriation	Actual Expenditure	(Over)/Under Expenditure
	R'000	R'000	R'000	R'000	R'000	R'000
Community Health facilities	953 308	887 194	953 308	939 352	925 027	14 325
District hospital Services	97 387	106 098	97 387	59 860	57 751	2 109
Provincial Hospital Services	267 152	262 770	267 152	266 127	202 534	63 593
Total	1 317 847	1 256 062	1 317 847	1 265 339	1 185 312	80 027

5. TRANSFER PAYMENTS

5.1. Transfer payments to public entities

Name of Public Entity	Services rendered	Amount transferred	Amount spent	Achievements
None	None	None	None	None

5.2. Transfer payments to all organisations other than public entities

Name of transferee	Type of organisation	Purpose for which the funds were used	Did the dept. comply with s 38 (1) (j) of the PFMA	Amount transferred (R'000)	Amount spent by the entity	Reasons for the funds unspent by the entity
Various non-profit organisations	Non-profit organisations	Community health services	Yes	262 011 249.24	262 684 344.24	None

The table below reflects the transfer payments which were budgeted for in the period 1 April 2018 and 31 March 2019, but no transfer payments were made.

Name of transferee	Purpose for which the funds were to be used	Amount budgeted for (R'000)	Amount transferred (R'000)	Reasons why funds were not transferred
Hosanna Church Community Project	Payment of stipend	R628 272.00	R0.00	The organization was under investigation

6. CONDITIONAL GRANTS

6.1. Conditional grants and earmarked funds paid

Conditional Grant 1: EPWP Social Sector Grant

Department/ Municipality to whom the grant has been transferred	Department of Health
Purpose of the grant	Increase job creation and expansion of social service programs
Expected outputs of the grant	Improved quality of life of unemployed people through job creation and increased household income
Actual outputs achieved	22 NPOs supported, 552 jobs created, and 264 000 households received Home Based Care Services
Amount per amended DORA	R 15 021,000.00
Amount transferred (R'000)	R 13 016,000.00
Reasons if amount as per DORA not transferred	Not applicable
Amount spent by the department/ municipality (R'000)	R 14 537, 125
Reasons for the funds unspent by the entity	Invoices not processed but committed and rollover requested.
Monitoring mechanism by the transferring department	Quarterly monitoring by DOH officials, monthly reports, quarterly reviews held, quarterly and annual reports

The table below reflects the transfer payments made for the period 1 April 2018 and 31 March 2019

Name of transferee	Type of organisation	Purpose for which the funds were used	Did the dept. comply with s 38 (1) (j) of the PFMA	Amount transferred (R'000)	Amount spent by the entity	Reasons for the funds unspent by the entity
	Sun of Joy Foundation	Youth and Life Skills peer education		R 3 838 590	34,187	Delays in transferring funds due to late receipts of Audited financial statement. This resulted in organisations not spending first quarter allocation.
	Tholúlwazi Tholimpilo			R2 513 070	715 129	
	Healthcare Development and Training Institute			R4 122 260	622 566	
	Nhlengelo Home-based Care (HBC)			R1 668 839	338 767	
	Siletsimpilo Peer Education			R 984 138	193 168	
	Highveld East AIDS Project Support	HIV Testing Services (Community/ Home Based HTS including TB, and NCDs screening and referral for Ehlanzeni District)		R 13 780 605	621 083	High staff turnover and not being permitted to replace and/or place new counsellors.
	Life Line			R 17 933 125	785 561	
	Training Institute for Primary Health Care		15 097 767	479 108		

Conditional Grant 2: Conditional grants and earmarked funds paid by the department.

Department to whom the grant has been transferred	Department of Health
Purpose of the grant	Decrease the burden of disease related to the HIV and tuberculosis epidemics; to minimise maternal and child mortality and morbidity; and to optimise good health for children, adolescents and women
Expected outputs of the grant	By 2030, Zero new HIV and TB infections, zero new infections due to vertical transmission, zero preventable deaths associated with HIV and TB and zero discrimination associated with HIV, STIs and TB (UNAIDS)
Actual outputs achieved	1 080 154 HIV test done – total 80 516 Medical male circumcision 464 569 ART client remain on ART end of month 75% Antenatal 1st visit before 20 weeks rate 99% Antenatal client initiated on ART rate 0.9% Infant 1st PCR test positive around 10 weeks rate 94.5% TB symptom 5yrs and older start on treatment rate 93% TB/HIV co-infected client on ART rate
Amount per amended DORA	R 1 744 627 000
Amount transferred (R'000)	R 1 744 627 000
Reasons if amount as per DORA not transferred	None

Amount spent by the department/ municipality (R'000)	R 1 744 102 000
Reasons for the funds unspent by the entity	
Monitoring mechanism by the transferring department	Monthly variance report Quarterly DoRA report Quarterly grant reviews

6.1. Conditional grants and earmarked funds received

Conditional Grant 1: Comprehensive HIV, AIDS and TB Grant

Department to whom the grant has been transferred	Mpumalanga Department of Health
Purpose of the grant	Decrease the burden of disease related to the HIV and tuberculosis epidemics; to minimise maternal and child mortality and morbidity; and to optimise good health for children, adolescents and women
Expected outputs of the grant	By 2030, Zero new HIV and TB infections, zero new infections due to vertical transmission, zero preventable deaths associated with HIV and TB and zero discrimination associated with HIV, STIs and TB (UNAIDS)
Actual outputs achieved	1 080 154 HIV test done – total 80 516 Medical male circumcision 464 569 ART client remain on ART end of month 75% Antenatal 1st visit before 20 weeks rate 99% Antenatal client initiated on ART rate 0.9% Infant 1st PCR test positive around 10 weeks rate 94.5% TB symptom 5yrs and older start on treatment rate 93% TB/HIV co-infected client on ART rate
Amount per amended DORA	R 1 744 627 000
Amount transferred (R'000)	R 1 744 627 000
Reasons if amount as per DORA not transferred	None
Amount spent by the department/ municipality (R'000)	R 1 744 102 000
Reasons for the funds unspent by the entity	None
Monitoring mechanism by the transferring department	Monthly variance report Quarterly DoRA report Quarterly grant reviews

Conditional Grant 2: Health Facility Revitalisation Grant

Department/ Municipality to whom the grant has been transferred	Mpumalanga Department of Health
Purpose of the grant	To help accelerate construction, maintenance, upgrading and rehabilitation of new and existing infrastructure in health including, health technology, organisational development Systems and quality assurance; to enhance capacity to deliver health infrastructure.
Expected outputs of the grant	
Actual outputs achieved	
Amount per amended DORA	R 333 935 000
Amount transferred (R'000)	R 333 935 000
Reasons if amount as per DORA not transferred	None
Amount spent by the department/ municipality (R'000)	R 364 538 000
Reasons for the funds unspent by the entity	None
Monitoring mechanism by the transferring department	Monthly variance report Quarterly DoRA report Quarterly grant reviews

Conditional Grant 3: Health Professions Training and Development Grant

Department/ Municipality to whom the grant has been transferred	Mpumalanga Department of Health
Purpose of the grant	Support provinces to fund service costs associated with clinical training and supervision of health science trainees on the public service platform.
Expected outputs of the grant	
Actual outputs achieved	
Amount per amended DORA	R 114 279 000
Amount transferred (R'000)	R 114 279 000
Reasons if amount as per DORA not transferred	None
Amount spent by the department/ municipality (R'000)	R 121 944 000
Reasons for the funds unspent by the entity	None
Monitoring mechanism by the transferring department	Monthly variance report Quarterly DoRA report Quarterly grant reviews

Conditional Grant 4: Human Papillomavirus Vaccine Grant

Department/ Municipality to whom the grant has been transferred	Mpumalanga Department of Health
Purpose of the grant	To enable the health sector to prevent cervical cancer by making available Human Papillomavirus vaccination for grade four school girls in all public and special schools.
Expected outputs of the grant	
Actual outputs achieved	
Amount per amended DORA	R 17 665 000
Amount transferred (R'000)	R 17 665 000
Reasons if amount as per DORA not transferred	None
Amount spent by the department/ municipality (R'000)	R 14 413 000
Reasons for the funds unspent by the entity	Outstanding invoices received late from supplier.
Monitoring mechanism by the transferring department	Monthly variance report Quarterly DoRA report Quarterly grant reviews

Conditional Grant 5: National Tertiary Services Grant

Department/ Municipality to whom the grant has been transferred	Mpumalanga Department of Health
Purpose of the grant	Ensure provision of tertiary health services in South Africa; to compensate tertiary facilities for the additional costs associated with provision of these services.
Expected outputs of the grant	
Actual outputs achieved	
Amount per amended DORA	R 116 489 000
Amount transferred (R'000)	R 116 489 000
Reasons if amount as per DORA not transferred	None
Amount spent by the department/ municipality (R'000)	R 121 944 000
Reasons for the funds unspent by the entity	Outstanding deliveries of medical equipment and surgical consumables.
Monitoring mechanism by the transferring department	Monthly variance report Quarterly DoRA report Quarterly grant reviews

Conditional Grant 6: Expanded Public Works Programme Integrated Grant for Provinces

Department/ Municipality to whom the grant has been transferred	Mpumalanga Department of Health
Purpose of the grant	To incentivise provincial departments to expand work creation efforts through the use of labour intensive delivery methods in the following identified focus areas, in compliance with the Expanded Public Works Programme guidelines: road maintenance and the maintenance of buildings; low traffic volume roads and rural roads; other economic and social infrastructure; tourism and cultural industries; sustainable land based livelihoods; waste management.
Expected outputs of the grant	
Actual outputs achieved	
Amount per amended DORA	R 2 322 000
Amount transferred (R'000)	R 2 322 000
Reasons if amount as per DORA not transferred	None
Amount spent by the department/ municipality (R'000)	R 2 320 000
Reasons for the funds unspent by the entity	None
Monitoring mechanism by the transferring department	Monthly variance report Quarterly DoRA report Quarterly grant reviews

Conditional Grant 7: Social Sector Expanded Public Works Programme Incentive Grant for Provinces

Department/ Municipality to whom the grant has been transferred	Mpumalanga Department of Health
Purpose of the grant	To incentivise provincial social sector departments, identified in the 2017 social sector Expanded Public Works Programme log-frame to increase job creation by focusing on the strengthening and expansion of social sector programmes that have employment potential.
Expected outputs of the grant	
Actual outputs achieved	
Amount per amended DORA	R 15 021 000
Amount transferred (R'000)	R 15 021 000
Reasons if amount as per DORA not transferred	None
Amount spent by the department/ municipality (R'000)	R 14 653 000
Reasons for the funds unspent by the entity	None
Monitoring mechanism by the transferring department	Monthly variance report Quarterly DoRA report Quarterly grant reviews

7. DONOR FUNDS

7.1. Donor Funds Received

None

8. CAPITAL INVESTMENT

8.1. Capital investment, maintenance and asset management plan

The Department has completed the following projects during the year under review:

- 100% complete planning Mapulaneng Hospital Phase 02
- 100% construction of New Goromane Clinic
- 100% Mmammethlake Hospital phase 02
- 95% complete planning of Tintswalo Hospital
- 100% complete Phase 01 and 95% complete Phase 02 Upgrading of Bethal Hospital
- 27% construction progress of New Middelburg Hospital
- 31 Hospital facilities maintained
- 287 PHC's facilities maintained
- 4 Clinics were refurbished
- Makoko Clinic: Progress is 100%
- Luphisi Clinic: Progress of Clinic structure is 100%
- Luphisi Clinic : Guardhouse, Refuse area, waiting area –Progress is 100%
- Ntunda Clinic –progress is 100 %

The following are Infrastructure projects that are currently in progress:

- 35% progress of work - Construction of New Middleburg - expected completion 31 Dec 2020
- 75% progress of work - Construction of Nhlazatshe 6 clinic - expected completion 15 January 2020
- 50% progress of work - Construction of Vukuzakhe clinic - expected completion 14 January 2020
- 55% progress of work - Construction of Pankop clinic - expected completion 27 August 2020
- 90% progress of work - Construction of Oakley clinic - expected completion 10 Dec 2019
- 65% progress of work – Refurbishment of Hoxani sub-district office - expected completion 14 October 2019
- 78% progress of work – Refurbishment of Tintswalo kitchen - expected completion 29 November 2019

The Department does not have any plans to close down or down-grade any current facilities and all facilities are undergoing meyor and minor maintenance including day to day maintenance. However, the accruals amounting to R30 million had a meyor impact into the expenditure and cash flow management of the programme. The immovable assets that were disposed during the 2018/19 financial year amounts to R 161 million. The Department consolidate and reconcile the asset register on monthly basis and the current state of the department's capital assets, for example what percentage is in good, fair or bad condition is as per the below table:



Good	Fair	Bad
58	260	5

The Department has through Nation Health in-kind grant completed the following backlog maintenance in Gert Sibande district

- Evander Hospital hospital – Back log maintenance
- Standerton Hospital – Backlog maintenance
- Carolina Hospital – Backlog maintenance
- Amajuba and Elsie Ballot Hospital – Backlog maintenance
- 7 clinics – Backlog maintenance
- Mispel street Clinic
- MS Msimanga Clinic
- Paulina Morapeli CHC
- Sakhile clinic
- Stanwest /Azalia clinic
- Thubelihle CHC
- Winfred Maboja CHC

Infrastructure projects	2018/2019			2017/2018		
	Final Appropriation R'000	Actual Expenditure R'000	(Over)/Under Expenditure R'000	Final Appropriation R'000	Actual Expenditure R'000	(Over)/Under Expenditure R'000
New and replacement assets	456 339	473 351	-17 012	412 816	387 996	24 820
Existing infrastructure assets	708 025	643 058	64 967	769 800	686 364	83 436
• Upgrades and additions	515 498	408 329	107 169	478 362	483 992	-5 630
• Rehabilitation, renovations and refurbishments	13 107	14 385	-1 278	78 517	64 824	13 693
• Maintenance and repairs	179 420	220 344	-40 924	212 921	137 548	75 373
• Infrastructure transfer						
• Current	192 216	236 376	-44 160	221 868	148 891	72 977
• Capital	984 944	896 065	88 879	969 695	936 812	32 883
• Total	1 164 364	1 116 409	47 955	1 182 616	1 074 360	108 256



PART C: GOVERNANCE



1. INTRODUCTION

The Mpumalanga Department of Health has established functional governance structures such as Audit Committee and Risk Management Committee which are tasked with a responsibility to ensure that risks are managed, internal controls are adequate and effective and governance processes are implemented. The internal audit conducted a review of compliance to governance processes, and areas of improvements were noted for implementation by management. Management's commitment to maintain the highest standards of governance is essential to management of funds and resources.

2. RISK MANAGEMENT

The Mpumalanga Department of Health has an approved risk management policy, charter, strategy and implementation plan which were prepared in consultation with the Risk Committee and approved by the Head of Department. Progress on the implementation plan is reported to the Committees on a quarterly basis.

The strategic and operational risk assessment workshops was conducted 12 February 2018 whilst the operational risk assessment was finalised in March 2018 to identify new and emerging risks and determine the effectiveness of the risk management strategy.

The risk management unit operates with a moderate vacancy rate however it has a functional Risk and Ethics Committee with an independent chairperson with one audit committee member as a standing invitee and 4 successful meetings were held during the year under review. Institutional risk registers were reviewed in 1 district and 9 hospitals. Risk management awareness workshops were conducted in 9 hospitals to create awareness on the importance of risk management and communicate the framework, policy and strategy.

The Department monitors and reports on all risks to the Risk and Ethics Committee and Audit Committee quarterly on significant fraud and ICT risks. Changes on the risk profile including emerging risks are reported to the all the committees.

The delay in the submission of progress reports by management, allocated budget and shortage of staff was another challenge and robust awareness will be done to ensure conformance, compliance and subsequently improve performance in terms of service delivery and risk mitigation.

3. FRAUD AND CORRUPTION

The Department has an approved fraud prevention strategy, policy and implementation plan. The fraud prevention strategy is on the departmental intranet to ensure access by all staff. Awareness workshops are conducted regularly for management and staff at grass root level.

The Department relies on the Office of the Premier to receive allegations of fraud and corruption which have been reported through the Presidential Hotline.

All proven cases of fraud and corruption are subject to investigation and where appropriate criminal and internal disciplinary processes are instituted as required in terms of applicable legislation. The department has identified tracking and monitoring of cases as one area that requires improvement in the new year and all cases are recorded on database.

4. MINIMISING CONFLICT OF INTEREST

Members of the Senior Management Service are required to disclose to the Accounting Officer and Executive Authority respectively particulars of all registrable interests in accordance with chapter 2 of the Public Service Regulations, 2016. The objective of chapter 2 is to identify any conflicts of interest in order to promote just and fair administrative actions of officials in senior positions and thereby to protect the public service from actions that may be detrimental to its functioning. Financial Disclosure process take place annually. Should any conflict of interest arise it is dealt with in accordance with the public service regulations and related prescripts. All senior managers disclosed their financial interests for the year under review.

In respect to Remunerative Work outside the Public Service (RWOPs), the public service regulation requires public officials who are or have been doing business with the state to choose either to resign from or de-register their companies. 79 employees were granted approval by the Executive Authority to undertake remunerative work ousted the public service.

5. CODE OF CONDUCT

Human resources of the Department should demonstrate a sense of duty, piety and ethical compliance with administrative rules and regulations as provided for in terms of the Code of Conduct for the Public Services and other prescripts. In event of the infringement of the Code of Conduct, management undertakes responsibility for the correction and/or discipline thereof.

6. HEALTH SAFETY AND ENVIRONMENTAL ISSUES

The Department has a legal and social responsibility regarding the occupational health and safety of all employees in their working environment. This requires a sound occupational health and safety management system (OHSAS) due to hazards and risks that can have a detrimental effect on employees.

Critical legislation dealing with health, safety and environment is the Occupational Health and Safety (OHS) Act 85 of 1993 and Compensation of Occupational Injuries and Diseases (COIDA) Act 130 of 1993 as amended.

Section 8 (1) of OHS Act, 1993 prescribe general duties of the employer to their employees which every employer shall provide and maintain, as far as reasonably practicable, a working environment that is safe and without risks to the health of employees.

The following has been achieved in the implementation of the above legislations:

- Occupational health nurse practitioners attended the health and safety train the trainer 3 days course
- Health and safety committees were established in hospitals with OH units
- Health establishments are being audited and inspected for compliance with Occupational Health and Safety Act, 1993 (Act No.85 of 1993)
- Health risk assessments have been conducted in 29 health establishments and three sub-districts
- OHS policies, guidelines and procedures have been developed and approved, namely: disposal and handling of mercury-based equipment, medical surveillance for all employees, medical examination tools for sewage workers
- Workplace TB infection prevention and control risk assessments have been conducted by occupational hygienist and epidemiologist jointly with the provincial OHS team at Shongwe, Witbank TB and Impungwe hospitals
- Workplace ergonomics manual and material handling assessment has been carried out at Embhuleni hospital
- N95 fit test is ongoing in health establishments by suppliers on an appointment basis
- Workplace inspections are carried out by health and safety representatives
- Hepatitis immunisation programme for employees is on-going in all health establishments

7. PORTFOLIO COMMITTEES

ORAL RESPONSES TO QUESTIONS RAISED BY THE PORTFOLIO COMMITTEE ON THE DEPARTMENT OF HEALTH 2018/19 1 ST QUARTERLY PERFORMANCE REPORT, TUESDAY, 28 AUGUST 2018		
#	ORAL QUESTIONS RAISED	DEPARTMENTAL RESONSE
2018/19 1st Quarter Performance Report		
i	What is the Audit Outcome of the Department?	<p>The Department received a qualified audit opinion for the 2017/18 financial year on contingency liabilities:</p> <ul style="list-style-type: none"> • The Department did not recognize all the claims against the state and some claims were recorded with an incorrect amount resulting in the contingent liabilities being overstated by R 115 587 622. • There was insufficient appropriate audit evidence for cases amounting to R 69 085 026. • This is, however, an improvement from the 2016/17 qualified opinion on three items namely irregular expenditure, immovable and movable assets. • Audit of Pre-Determined Objectives • Programme 2- District Health Services and Programme 4: Regional and Specialized Hospitals were audited and the following outcome was received: • Programme 2: audit opinion remained unchanged from the previous financial year as a disclaimer • Programme 4: audit opinion improved from qualified in the previous financial year to unqualified audit opinion <p>An audit action plan is being developed and will be monitored on a monthly and quarterly basis to ensure that the planned Unqualified opinion is realized in 2018/19 FY.</p>
ii	The Department must send Doctors to motivate the students studying abroad and also work closely with Department of Education to establish a monitoring programme to address challenges faced by the Students?	<p>The Department will develop a programme to allow Doctors to address and motivate the students when they are enrolled to the programme and also when on vacation. Currently the Department, through its bursary section, collaborates with the Department of Education in the management of this program. An official from the Department will be part of the delegation to visit the students in Russia at the end of September 2018 as monitoring mechanism to collect and address all challenges raised by the students.</p>
iii	EMS: Residents of Hectospruit in Mjejane complained that they are promised that the ambulance is coming but it doesn't arrive and community members resort to using their own transport to the nearest hospitals such as Tonga.	<p>The Department is aware of such incidents which are usually caused by the fact that the ambulance is still responding to other calls. The officials will be encouraged to mobilize ambulance from neighboring stations to attend to long waiting calls. Furthermore, the vehicle tracking system and two-way communication radios will improve ambulance turn-around. EMS staff will also be requested to engage the callers truthfully.</p>

ORAL RESPONSES TO QUESTIONS RAISED BY THE PORTFOLIO COMMITTEE ON THE DEPARTMENT OF HEALTH 2018/19 1 ST QUARTERLY PERFORMANCE REPORT, TUESDAY, 28 AUGUST 2018		
#	ORAL QUESTIONS RAISED	DEPARTMENTAL RESONSE
iv	What are the Departmental plans to make sure that the Department does not go back to high accruals?	<p>The Department has initiated the following efficiency projects in view of reducing the health costs.</p> <ul style="list-style-type: none"> • Food and food supplies – Standardization of patient menu • Laboratory services - Compliance of all hospital to gatekeeping initiatives with evidence of savings. Analysis of hospitals tests. • Commuted Overtime - Analysis of commuted overtime for doctors • Fleet services – integration of PPTS and EMS • Medicine - Cost and business process analysis (project has started in 2017) • Coal and diesel – implementation of developed Standard operating procedures • Implants - Develop and implement standard operating procedures • Waste management - Cost analysis, develop and implement standard operating procedures <p>However, to be able to reduce the accruals , the Department will need to be given additional earmarked budget as these accruals have been accumulating over the years</p>

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v	<p>Ward 5 in Bushbuckridge, there is no clinic and the community travel for more than 8 km.</p> <p>(i) What is the plan of the Department to build new facilities during 2018/19?</p> <p>(ii) What is the role of the National Department of Health in assisting the province to build more facilities?</p>	<p>The Accounting Officer has noted the concern about wards with no clinics, however, due to budgetary constraints the Department had to decrease the number of construction of new clinics or facilities.</p> <p>(i) In 2018/19 FY, the Department has started constructions of the following facilities:</p> <ol style="list-style-type: none"> 1. Construction of New Oakley clinic – 37% construction progress 2. Construction of New Pankop clinic – 26% construction progress 3. Construction of New Goromane clinic – 70% Construction progress 4. Construction of New Schunzendal IBT clinic – 10% construction progress 5. Construction of Middelplaas IBT clinic – 10% construction progress <p>(ii) National Health is assisting the Provincial Health with construction of the following facilities:</p> <ol style="list-style-type: none"> a. Construction of New Vukuzakhe clinic – 58% Construction progress b. Construction of Nhlazatshe 6 clinic – 75% Construction Progress c. Construction of Msukaligwa clinic – Planning - Planning d. Construction of Ethandukukhanya CHC – Planning e. Construction of Balfour CHC – Planning <p>Additionally, the NDOH is currently busy with Backlog maintenance for the following 11 facilities in Gert Sibande District and are planned to be completed on 25 October 2018.</p> <ol style="list-style-type: none"> 1. Standerton hospital – 80% 2. Carolina hospital – 85% 3. Elsie Ballot hospital – 94% 4. Amajuba Memorial hospital – 80% 5. Evander hospital – 99% 6. Thussville/ MN Cindi Clinic – 10% 7. Kwazanele Clinic – 6% 8. Emthonjeni Clinic (Msukaligwa) – 8% 9. Thubelihle CHC – 100% 10. Paulina Morapeli CHC – 100% 11. Embalenhle CHC – 99%
vi	<p>The Department does not have a maintenance plan, it must consider to work closely with MRTT to provide maintenance?</p>	<p>The Department does have a costed maintenance plan in place, however, the plan is not funded due to budgetary constraints.</p> <p>Annexure A: Maintenance Plan</p>

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vii	How does the Department plan to close the vacancy rate for lower categories of staff?	<ul style="list-style-type: none"> The Department has put the following measures in place to close the vacancy rate for lower level and other vacant funded posts: All vacant funded positions are advertised once they become vacant; The facilities have identified posts to be filled utilizing overtime budget; The advert of lower category positions is advertised locally; The recruitment process of filling posts has been decentralized to facilities; The Accounting Officer only signs approvals to advertise and the last process of issuing appointment letters. The process of sorting, approval of panels to do shortlisting and interviews has been decentralized. The process of filling is being prioritised. Facilities have been requested to report progress on a monthly basis.
viii	How does the Department plan to minimize litigations as it has impact to the budget?	<ul style="list-style-type: none"> The Department has put the following plans in place to minimize ligations: Developed and implementing litigation management strategy where cases are mediated between the parties thus improving turnaround time on finalizing cases which reduces legal costs. The expenditure incurred is journalized against the relevant institutions for management to take disciplinary actions where applicable and improve clinical care. Conduct workshops in all districts on causes of litigations to create awareness on the financial implications litigation claims have on service delivery programs and to improve accountability from facility management. 15 medico claims to the value of R 116 296 000.00 have been selected for pilot project on mediation in 2018/19 FY to test the turnaround time on finalizing cases within 3-5 months. This project will test the Amendment of the State Liability Act, which will allow periodic payments on claims against the state. Utilization of service level agreements with private hospitals, to reduce future medical expenses which are paid as lump sum. This will ensure that patients are not paid upfront future medical expenses. Continuous engagement with other stakeholders such as SAPS on reporting theft of records and an MOU with Department of Home Affairs to access Hannes system for birth & death verification to improve turnaround time of investigations.
ix	Did the Department request additional funds to pay accruals or the current budget was utilized?	<p>The Department has used the current year budget to settle all the previous year's accruals.</p> <p>A meeting has been requested with Provincial Treasury to discuss the impact of accruals.</p> <p>Annexure B: Letter to Provincial Treasury</p>
x	Hospitals boards and clinic committees are dysfunctional as some boards or committees' members comprises of relatives. How best is the Department assisting hospital boards and clinic committees to be functional?	<p>The Department has developed a Policy guiding the functioning of Hospital Boards and for Clinic Committees. The policy is currently being reviewed to ensure that the boards and committees become more functional and effective. The review is envisaged to be completed by the 3rd quarter of 2018/19.</p> <p>Furthermore, the Board and Committee members are trained to outline their role and responsibilities.</p> <p>The Department is also monitoring the functionality of these governing bodies by analyzing the minutes of the meetings and support these boards and committees where there is a need.</p>

ORAL RESPONSES TO QUESTIONS RAISED BY THE PORTFOLIO COMMITTEE ON THE DEPARTMENT OF HEALTH 2018/19 1 ST QUARTERLY PERFORMANCE REPORT, TUESDAY, 28 AUGUST 2018														
#	ORAL QUESTIONS RAISED	DEPARTMENTAL RESONSE												
xi	The expired medicine, the Department must look into the infrastructure such as air-conditioners in pharmacy.	The Department will conduct an analysis of infrastructure needs at all pharmacy sections which will be including air-conditioning and thermometers during the month of September 2018.												
xii	The previous security companies were not paid on time, the Department must engage DCSSL to rectify this matter.	The Accounting Officer is in discussions with the Department of Community Safety and Security Liaison on the issue of non-payment of salaries on time and DCSSL has indicated that they have engaged the security companies to ensure that the issue of payment of salaries is done on time. The non- payment of the security guards by the previous company was escalated to DCSSL who were advising the guards to open cases so that the court can instruct the payment.												
xiii	There is a complaint that PPTS drivers deliberately leave patients to create space for hitch-hikers. Can the Department investigate the allegations?	The Accounting Officer will ensure that the process of PPTS integration into EMS is expedited and that will lead to better coordination and management of PPTS to minimize fraudulent use of the PPTS vehicles. It would be appreciated if such details can be forwarded to the Department to investigate each case separately and take the disciplinary action.												
xiv	The Annexure A on Irregular expenditure does not include the total amount.	The Department has reported irregular expenditure to Provincial Treasury in the first quarter of 2018/19 as follows: <table border="1" data-bbox="760 945 1518 1091"> <thead> <tr> <th>Month</th> <th>Amount reported</th> <th>Date reported</th> </tr> </thead> <tbody> <tr> <td>April & May 2018</td> <td>R 3 037 311.05</td> <td>21/06/2018</td> </tr> <tr> <td>June 2018</td> <td>R 6 123 120.83</td> <td>17/07/2018</td> </tr> <tr> <td>Total</td> <td>R 9 160 431.88</td> <td></td> </tr> </tbody> </table>	Month	Amount reported	Date reported	April & May 2018	R 3 037 311.05	21/06/2018	June 2018	R 6 123 120.83	17/07/2018	Total	R 9 160 431.88	
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xv	Why does the hospitals have low BUR, while they have reported a high vacancy rate?	The current organogram does not correspond with real patient activity and need at each facility, therefore the vacancy rate is not an accurate indication of staffing needs.												
xvi	Doctors in Mapulaneng hospital protested because of the issue of security, the MEC must engage with EXCO to see if the issue of security cannot be decentralized and be managed by the Department of Health, in addition a Dr was killed in Middelburg?	The office of the Executive Authority has in her short stay in the Department, written to the MEC: DCSSL alerting him about constant calls for improved security measures in health facilities. Annexure C: Letter written to MEC: DCSSL Furthermore, The Accounting Officer together with other Heads of Departments and Organised Labour are looking into the issue of improved security management and has commissioned a team in August 2018 comprising of officials in the Departments of Health and the Department of Community Safety and Security Liaison and representatives from Organised Labour to benchmark with three big hospitals in Gauteng Province (Chris Hani Baragwanath; Dr. George Mukhari and Sefako Makgatho Hospitals). The benchmark took place from 13 to 15 August 2018 and the report will be finalised on the first week of September 2018.												
xvii	What is the MEC's involvement on the Russian medical students?	The Executive Council recently resolved that both MEC SJ Manzini and MEC SI Malaza should visit students studying in Russia to engage with them and respond to their concerns to make their study in Russia more palpable. MEC has in this regard written to Hon MEC Malaza to give effect to the resolution. Annexure D: Letter to MEC: DoE												
xviii	What was the hold up on the kwaZamokuhle and were the disputes resolved?	The hold-up in the handing over of the facility was because of the dispute that was between Optimum Mine and Reaction, who was their service provider. The dispute has since been resolved, hence the hand over is planned for September 2018.												

RESPONSES TO ORAL QUESTIONS RAISED TO THE DEPARTMENT OF HEALTH ON THE QUESTIONS EMANATING FROM THE 2 ND QUARTER RESPONSES		
NO.	QUESTION	RESPONSES
FINANCIALS: IRREGULAR, FRUITLESS AND WASTEFUL EXPENDITURE		
a	<p>The Response to number II on page 1 is not complete. The Department must still answer :</p> <p>a. What caused the fruitless and wasteful expenditure?</p>	<p>Fruitless and Wasteful expenditure is caused mainly by late payment of service providers (interest charged) during the fourth quarter of the last financial year because of the cash flow challenges (hence increasing accruals).</p> <p>Payments were only processed during the first and second quarter of the current financial year.</p>
b	<p>On question iii on page 2, the department responded that it has incurred irregular expenditure of R 71 264 000. The Department must still answer:</p> <p>b. Why does the Accounting Officer refer legal cases to the Premier's Office when the PFMA instruct the Accounting Officer to investigate irregular expenditure and discipline those who have been found to have incurred it</p> <p>c. Which Prescripts allow the Accounting Officer to refer matters of her department to another accounting officer?</p> <p>d. Since the Department has been sending matters to the Premier's office ever since, can they indicate matters which have been referred to the Premier's Office, when was the matter referred and what is the progress reported by the Premier's Office.</p>	<p>a. The irregular expenditure relates to irregular appointment of service providers by the Office of the Premier. The Office of the Premier advertised this contract to assist all the Departments in the Province to defend the litigation cases.</p> <p>b. There are no prescripts allowing the Accounting Officer to refer matters to another Department but the irregular expenditure should be investigated where the act of non-compliance took place (This is a transversal contract advertised by the Office of the Premier).</p> <p>c. All legal cases, complex labour relations and external audit investigations were referred to the Office of the Premier since inception of the contract (April 2015 to date)</p> <p>Annexure A: Progress Report on All cases referred to the Office of the Premier</p>
c	<p>The department responded that part of the irregular expenditure is as a result of outsourcing the management of procurement, warehousing, and distribution of pharmaceuticals and surgical sundries</p> <p>a. Why did the Accounting Officer decide on outsourcing the management of procurement, warehousing, and distribution of pharmaceuticals and surgical sundries.</p> <p>b. How long is the contract</p> <p>c. How does the contract exist while the department has a depot</p> <p>d. How has the contract being affected by the fact that there is shortage of supply of medicine?</p>	<p>a. The Accounting Officer has outsourced the management of procurement, warehousing and distribution of pharmaceuticals and surgical sundries as the Department does not have the capacity currently to perform the function in-house.</p> <p>b. The new contract has been awarded from 01 June 2018 for a period of three years. The new contract has been audited by the Auditor General of South Africa during 2017/2018 audit and no irregularity has been identified.</p> <p>c. The Department appointed the service provider to assist in running the Depot by performing procurement, warehousing and distribution of pharmaceutical and surgical sundries.</p> <p>d. The shortage of medicines is not due to the service provider at the depot but due to shortages of national contracts and this is nation-wide.</p>

RESPONSES TO ORAL QUESTIONS RAISED TO THE DEPARTMENT OF HEALTH ON THE QUESTIONS EMANATING FROM THE 2ND QUARTER RESPONSES

NO.	QUESTION	RESPONSES
d	<p>The Department further indicated that part of the irregular expenditure was legal services awarded by the Office of the Premier.</p> <ul style="list-style-type: none"> • Can the Accounting Officer expand on why was the legal services awarded by the Office of the Premier, does this mean another Accounting Officer was taking decision on behalf of the Accounting Officer of Health, what does the law says about this? 	<ul style="list-style-type: none"> • The law as per Treasury regulations 16.A6.6, the Accounting Officer may on behalf of the Department participate in any contract arranged by means of competitive bidding process by any organ of the state, subject to written approval of such organ of state and the relevant contractor. <p>Hence the Office of the Premier advertised and all the Provincial Departments have participated in the contract.</p>
	<p>On question V on page 3 the department listed the litigations settled. The Department did not respond to the last part of the question which asked "... and the Amount due as of the 30 September 2018? In light of this the Accounting Officer must respond to the following:</p> <ul style="list-style-type: none"> • What is the amount due on contingent liabilities where a ruling has been made as per the 30 September 2018? • Has the department taken any action against those who negligently acted which resulted in the contingent liabilities • What is the state of litigation as a result of maternity ward negligence and how is the accounting officer dealing with it? 	<ul style="list-style-type: none"> a. The amount is R 3 894 067.50 b. The Department is still investigating cases of negligence and actions will be taken once the process is finalized. At times the Department cannot take disciplinary actions against employees if the occurrence of an adverse event that led to litigation is due to inadequate resources such as medical equipment, human resources and skills. c. The volume of cases is still high because some of the cases are dating back from 20 years ago. The Accounting Officer is managing the cases in that some of the cases are mediated to save legal costs and the capital amount sued.
	<p>Annexure C on question VI on page 6 did not respond to the following aspects of the question: value and the benefits derived from such contracts?</p> <ul style="list-style-type: none"> a. Can the Accounting Officer indicate the value (amount in Rand) and the benefits derived from all the contracts of the department? Respond per contract. 	<p>The contract register has been amended to include value of contracts to date as per attached Annexure. The benefits derived from such contracts are as follows:</p> <ul style="list-style-type: none"> • Reduced turnaround time for procurement • Economic of scale from bulk contracting • Improvement in the provision of quality of healthcare <p>Annexure B: Contract Register</p>

RESPONSES TO ORAL QUESTIONS RAISED TO THE DEPARTMENT OF HEALTH ON THE QUESTIONS EMANATING FROM THE 2ND QUARTER RESPONSES

NO.	QUESTION	RESPONSES
	<p>On the transfers made by the department, R 151 201 867.52 has been transferred to Home based care services</p> <ul style="list-style-type: none"> • Can the Accounting Officer list all the home based care that they made the transfer to and indicate the services provided by the home base care? • Can the Accounting Officer indicate how home based care are monitored by the department and how do they report their activities to the department • How many other home based care organisation which applied for funding but were not funded by the department and why were they not funded? • How does the home based care differ to the WBPHCOT and does the department need home base care where there is an increase in WBPHCOT (Ward Based PHC Outreach Teams) 	<p>a Yes, the Accounting Officer can provide the list of all funded Home Based Care Organizations as per attached Annexes.</p> <p>Annexure C1: List of funded Home Based Care Organizations.</p> <p>Annexure C2: The home Based Care Implementation Plan stipulating the list of activities performed by HBC organizations in supporting Primary Health Care.</p> <p>b Yes, the Accounting Officer can indicate how Home Based Care organizations are monitored.</p> <p>Each home based care organization is linked to a Public Health Facility. The Primary Health Care facility assigns Outreach Team leaders to conduct monthly visits to the Home Based Care organizations unannounced and announced monitoring visits using the attached NPO M&E tool. The Home Based Care organizations submit monthly reports to the Department on the Home Based Care data elements. See attached provincial reporting tool Provincial M&E Tool for the Care and Support Programme.</p> <p>Annexure D: Monitoring tool used by health professionals to monitor home based care organizations</p> <p>c. The total number of HBC organizations which applied for funding are as follows:-</p> <p>The Department is not able to fund all Home Based Care Organizations due to financial constraints. Other Home Based Care Organizations are directed to Department of Social Development if they do not qualify on the Department of Health funding.</p> <p>d. The home based care does not differ from WBPHCOT. The Home Based Care organizations provide increase of access to Primary Health Care Services as a voluntary service before it was normalized to Ward Based Primary Health Care Outreach Services which are now led by an Outreach Team Leader. The WBPHCOT gets the Community Health Workers/ Care givers from the Home Based Care Organizations.</p>

PROGRAMME 1

RESPONSES TO ORAL QUESTIONS RAISED TO THE DEPARTMENT OF HEALTH ON THE QUESTIONS EMANATING FROM THE 2 ND QUARTER RESPONSES		
NO.	QUESTION	RESPONSES
i	Annexure E1 indicate that Mmamethlake Hospital has no CEO. Can the Accounting Officer indicate what happened to the CEO in that hospital.	The CEO of Mmamethlake Hospital retired from the Public Service at the end of October 2018. The post will be filled as from the 1 st of December 2018 i.e. through the transfer process.
ii	<ul style="list-style-type: none"> Hospitals with CEO which do not meet the minimum requirements as set out in the advert and the Policy on the Management of Public Hospitals Annexure E1 reflect that the CEO of Bethal Hospital has diplomas not a degree or advanced diploma as indicated in the Policy on the management of public hospital Annexure E1 reflect that CEO of Piet Retief has only a diploma in General Nursing and only six years experience in health as opposed to the seven years as per the advert. When the CEO was appointed, did s/he have the required five year experience? Annexure E1 further indicate that the CEO of Shongwe Hospital does not have a health related qualification and does not have the five year experience required. Annexure E1 further indicate that the CEO of Witbank Hospital does have a degree or advanced diploma in a health related field and does not have the 7 years' experience as in the advert or the 5 years' experience in the policy. 	<ul style="list-style-type: none"> The correct information regarding the CEO's is reflected on the attached copy of Annexure E. The Department acknowledges there were errors in the document and has since revised Annexure E1 as per attached Annexure E.
ii	<ul style="list-style-type: none"> What is happening with CEO of Witbank Hospital, is she suspended? 	The CEO was put on precautionary transfer to Gert Sibande District office based on the issues raised by the staff pending the outcome of the disciplinary process.
iv	<ul style="list-style-type: none"> Question 4.1.1 (ii) on page 8 is correctly answered. However, the MEC must respond to the following question: What are the qualification mix or skill mix that the MEC look for when appointing a Hospital Board? 	<p>According to the National Health Act, No. 61 of 2003, Section 41 (8), the Board may include not more than five persons with expertise in areas such as accounting, financial management, human resource management, information management and legal matters, guided by the above, the Department always states the requirement on the advertisement.</p> <p>Annexure F: Copy of an Advert for Hospital Boards</p>

RESPONSES TO ORAL QUESTIONS RAISED TO THE DEPARTMENT OF HEALTH ON THE QUESTIONS EMANATING FROM THE 2 ND QUARTER RESPONSES		
NO.	QUESTION	RESPONSES
v	<ul style="list-style-type: none"> What is a minimum number for board members and what should be the maximum number for board members in each hospital board 	<p>The minimum and maximum number for board members in each hospital board is clarified as follows:</p> <ul style="list-style-type: none"> Section 41 (7) (d) of the National Health Act, No. 61 of 2003, stipulates that the Board must be composed of not more than three representatives of the communities served by the hospital including special interest groups representing users. Section 41 (7) (e) of the National Health Act, No. 61 of 2003, stipulates that the Board must be composed of not more than five representatives of staff and management of the hospital but such representatives may not vote at a meeting of the Board. Section 41 (8) of the National Health Act, No. 61 of 2003, stipulates that the Board may include not more than five persons. Based on the above sections of the National Health Act, No. 61 of 2003 the minimum will be 3 (representatives of the communities) plus 5 (staff and management) members. Maximum will be 5 (representatives of the communities) plus 5 (staff and management) members of the hospital Board members.

RESPONSES TO ORAL QUESTIONS RAISED TO THE DEPARTMENT OF HEALTH ON THE QUESTIONS EMANATING FROM THE 2 ND QUARTER RESPONSES		
NO.	QUESTION	RESPONSES
vi	<p>Issues identified in Annexure F</p> <ul style="list-style-type: none"> Mapulaneng Hospital Board has only one female out of six board members. None of the members has a health related qualification . Tonga Hospital Board is an all-male board. Shongwe Hospital has one female member off six members. Lydenburg Hospital has three of the four member above 70 years. Ehlanzeni District has 43 male members of hospital board compared to 22 females which is 33% female. Bethal, Ermelo, Standerton and Majuba Hospital Boards are all males – member boards. Gert Sibande has 21 male hospital board members compared to 9 female hospital board members which represents 30% female representation . 	<ul style="list-style-type: none"> Section 41 (8) of the National Health Act, No. 61 of 2003, stipulates areas of expertise, such as accounting, financial management, human resource management, information management and legal matters. However an applicant with health related qualification is always considered. Appointments of Hospital Boards is done through recruitment processes that is, post are advertised and applicants apply. The MEC appoints the Board members after receiving applications from stakeholders. In several instances there are insufficient applicants hence the Department resorted to head hunting. However the Department without compromising on the required expertise always prioritise youth and females when appointing Hospital Board members. Appointments of Hospital Boards is done through recruitment processes that is, post are advertised and applicants apply. The MEC appoints the Board members after receiving applications from stakeholders. In several instances there were no adequate applicants hence the Department resorted to head hunting. However the Department without compromising on the required expertise always prioritise youth and females when appointing Hospital Board members. The Departmental Policy Guidelines for the Establishment and Functioning of Hospital Boards under section 11 (11.1) states that a person older than 18 years of age qualifies for appointment without look at the maximum age. However, the Department without compromising on the required expertise always prioritise youth and females when appointing Hospital Board members. Appointments of Hospital Boards is done through recruitment processes that is, post are advertised and applicants apply. The MEC appoints the Board members after receiving applications from stakeholders. In several instances there were no adequate applicants hence the Department resorted to head hunting. However the Department without compromising on the required expertise always prioritise youth and females when appointing Hospital Board members. Appointments of Hospital Boards is done through recruitment processes that is, post are advertised and applicants apply. The MEC appoints the Board members after receiving applications from stakeholders. In several instances there were no adequate applicants hence the Department resorted to head hunting. However the Department without compromising on the required expertise always prioritise youth and females when appointing Hospital Board members. Appointments of Hospital Boards is done through recruitment processes that is, post are advertised and applicants apply. The MEC appoints the Board members after receiving applications from stakeholders. In several instances there were no adequate applicants hence the Department resorted to head hunting. However, the Department without compromising on the required expertise always prioritise youth and females when appointing hospital Board members.

RESPONSES TO ORAL QUESTIONS RAISED TO THE DEPARTMENT OF HEALTH ON THE QUESTIONS EMANATING FROM THE 2 ND QUARTER RESPONSES		
NO.	QUESTION	RESPONSES
vii	<p>4.1.1 (iii) on page 8 is not sufficiently answered. The department cannot use the fact that the MEC is recently appointed, the question relate to MEC for Health which has been there since the term of office. These Councils are established by the Act, what is needed is for the MEC to implement.</p> <ul style="list-style-type: none"> Why did the department fail to implement the Act in establishing the various health council. In Health there is no MinMEC or MuniMEC but rather have the Councils. All is needed is for the department to implement the Councils not the MuniMec. What issues came from the two MuniMEC which were organised by the MEC? 	<p>The Department acknowledges failure to establish the Provincial Health Council and the District Health Councils as stipulated in the National Health Act, Act 61 of 2003, due to lack of provincial legislation that should guide the formulation of such Councils, however, the Department is developing guidelines to establish the Councils using the National Health Act in the absence of Provincial Legislation.</p> <ul style="list-style-type: none"> All MuniMEC meetings that were conducted as organised by the MEC were discussing issues that were relating to: Service delivery Human Resource Infrastructure Finance <p>Annexure G: Resolutions taken to address the identified challenges</p>
viii	<p>Shortage of specialist is a challenge which results in long queues.</p> <ul style="list-style-type: none"> What is the plan to enhance and speedup the process of having specialists? 	<p>The Department has put the following measures in place to enhance and speedup the process of having specialists:</p> <ul style="list-style-type: none"> Registrar programme to train doctors from the province as specialists Headhunting of specialists Appoint private specialists on sessional bases Appointment of foreign qualified specialists Appointment of retired , but not tired, specialists on contracts
PROGRAMME 2		
i	<p>Annexure G was supposed to be the actual complained as written by patients not a summary compiled by the department. We have to find the copies.</p>	<p>The actual complaints are attached as Annexure H.</p>
PROGRAMME 3		
i	<p>Question 4 .3.1 (i) on page 20 Is wrongly responded as it deals with the future while the question deal with the past. The question is "Can the Accounting Officer indicate serious steps taken in the past to improve the performance of this programme and indicate the progress recorded?"</p>	<p>The Accounting Officer can indicate serious steps taken in the past to improve the performance of this programme:</p> <ul style="list-style-type: none"> Procured 88/450 ambulances since 2014/15 to date to replace old fleet that contributes to delay in the response time, 17 ambulances are budgeted for during 2018/19 financial year. 346/4500 EMS personnel were appointed since 2014/15 to date 70% of vehicles were installed with a vehicle management system that ensures that vehicles are monitored at all times to increase availability. Progressively integrating PPTS into EMS to ensure that resources are rationalized and maximized when used to increase accessibility to EMS services.
PROGRAMME 7		
	<p>Question 4.3.1 (ii) on page 25 has been correctly answered but can the Accounting Officer provide proof of and response to their "Request approval for buy out where the suppliers are failing to deliver.</p>	<p>Annexure I: Approval to buy out where the suppliers are failing to deliver</p>
PROGRAMME 8		

RESPONSES TO ORAL QUESTIONS RAISED TO THE DEPARTMENT OF HEALTH ON THE QUESTIONS EMANATING FROM THE 2 ND QUARTER RESPONSES		
NO.	QUESTION	RESPONSES
	Question 4.8.1 (i) is not well answered in that it did not include the value of the contract and penalties in the question "Which contractors have been put on penalties in this quarter and what was the reason for those penalties and the value of those penalties?"	<p>The following Contractors were put on penalties and the reasons as well as costs are detailed below:</p> <p>The Value of Penalties is 0,05% of the contract value awarded per day and the value is determined by the Association of South African Quantity Surveyors (ASQSS) as per the Joint Building Condition of Contracts (JBCC).</p>

RESPONSES TO ORAL QUESTIONS RAISED DURING THE MEETING OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT, THURSDAY, 28 FEBRUARY 2019, COMMITTEE ROOM NO. 4/5, 08H00 – 11H00																		
NO.	ORAL QUESTIONS	DEPARTMENTAL RESPONSES																
	The issue around accruals, has been coming for too long. The budget of the Department is approved with no indication of accruals and it is not budgeted for. Does this mean its fruitless and wasteful expenditure?	<p>The Department acknowledges that the issue of accruals has been coming for far too long.</p> <p>As per definition of fruitless and wasteful expenditure per PFMA is expenditure which was made in vain and would have been avoided had reasonable care been exercised.</p> <p>The accruals relates to expenditure incurred and the Department has received value for money and correct procurement processes were followed. Therefore, the accruals could not be classified as fruitless and wasteful expenditure.</p> <p>The approved budget for the Department was not sufficient and budget pressure of R 851 229 000 was reported to the Portfolio on Office of the Premier, Finance and Economic Development during the 2018/19 FY Budget adjustment. The Portfolio has requested the Provincial Treasury to assist the Department.</p> <p>Accruals of R 851 071 000 which was not cash backed could have been unauthorized expenditure had the Department managed to process the invoices as at 31 March 2018.</p>																
	How much is the correct fruitless and wasteful and where was it incurred?	<p>The Department has incurred fruitless and wasteful expenditure of R 547 162 as at 30 September 2018 and during the third quarter of 2018/19, fruitless and wasteful expenditure incurred was at R 2 000. The expenditure for the R 547 162 is mainly due to late payments to service providers.</p> <table border="1"> <thead> <tr> <th>Service Providers</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Municipalities</td> <td>8 717</td> </tr> <tr> <td>Eskom</td> <td>10 489</td> </tr> <tr> <td>Government Pension fund</td> <td>72 108</td> </tr> <tr> <td>Mabuza Charmaine</td> <td>243 527</td> </tr> <tr> <td>NHLS</td> <td>208 905</td> </tr> <tr> <td>Telkom</td> <td>3 416</td> </tr> <tr> <td>Grand Total</td> <td>547 162</td> </tr> </tbody> </table>	Service Providers	Amount	Municipalities	8 717	Eskom	10 489	Government Pension fund	72 108	Mabuza Charmaine	243 527	NHLS	208 905	Telkom	3 416	Grand Total	547 162
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RESPONSES TO ORAL QUESTIONS RAISED DURING THE MEETING OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT, THURSDAY, 28 FEBRUARY 2019, COMMITTEE ROOM NO. 4/5, 08H00 – 11H00																							
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	<p>In the response of (c) on page 2 of 44 the department responded that " the department will not overspend, however accruals and payables are estimated above R1 billion</p> <p>The department must indicate:</p> <p>(i) Would the R1 billion accruals be within the budget of the department or will the department have the R1 Billion to settle these "accruals" and "Payable" at the end of the financial term, if yes how considering response 1 (a) and if no how can they be classified as accruals not unauthorised expenditure because the department has spent way above the voted funds.</p>	<p>The Department manages the budget and expenditure on monthly basis to avoid overspending at financial year end. The Department has the below projections for the accruals and payables as at 31st of March 2019.</p> <table border="1"> <thead> <tr> <th>No.</th> <th>Nature of the Budget Pressure- 2019/20 FY</th> <th>Amount R'000</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Payables: (Invoices received before 31 March 2019)- Key Accounts</td> <td>645 612</td> </tr> <tr> <td>2</td> <td>Accruals (Invoices not received before 31 March 2019)- Key Accounts)</td> <td>283 200</td> </tr> <tr> <td>3</td> <td>Infrastructure accruals</td> <td>25 000</td> </tr> <tr> <td>4</td> <td>Compensation of Employees (Overtime)</td> <td>20 000</td> </tr> <tr> <td>5</td> <td>Non-Key Accounts</td> <td>46 600</td> </tr> <tr> <td colspan="2">Total Estimated Accruals and Payables</td> <td>1 020 412</td> </tr> </tbody> </table> <p>The items that contributed to the accruals have been insufficiently budgeted for therefore the estimated accruals and payable above R1 billion is not cash backed.</p> <p>Unauthorized expenditure relates to overspending of a vote or a main division within a vote; or expenditure that was not made in accordance with the purpose of a vote or, in the case of a main division, not in accordance with the purpose of the main division. The accruals could not be classified as unauthorized expenditure as the invoices were not released for payment.</p>	No.	Nature of the Budget Pressure- 2019/20 FY	Amount R'000	1	Payables: (Invoices received before 31 March 2019)- Key Accounts	645 612	2	Accruals (Invoices not received before 31 March 2019)- Key Accounts)	283 200	3	Infrastructure accruals	25 000	4	Compensation of Employees (Overtime)	20 000	5	Non-Key Accounts	46 600	Total Estimated Accruals and Payables		1 020 412
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NO.	ORAL QUESTIONS	DEPARTMENTAL RESPONSES
	Medical negligence is a National issue, in the province where are the areas of big concerns except the lawyers and what are the reasonable steps to curb medical negligence?	<p>The areas of big concern in the province around medical negligence are:</p> <ul style="list-style-type: none"> • Obstetrics and Gynaecology: involving babies born with Celebral Palsy and maternal deaths due to complications during delivery • Orthopaedic patients who whilst waiting for operation experience deformities and/or complications related to delayed operations • • The Department has developed a litigation strategy to reduce the medical negligence cases which among others focuses on the following. • Orthopaedic patients – the department is continuing to headhunt and appoint Orthopaedic Specialist to reduce the waiting time, two additional specialists have been appointed during the 3rd quarter 2018/19 FY, one in Mapulaneng and one in Rob Ferreira. This is the first time that Mapulaneng has an Orthopaedic Specialists and he is also doing outreach services in Matikwane hospital. Rob Ferreira has now 3 full time specialists. • Obstetrics and Gynaecology – The Department has contracted the Obstetrics and Gynaecology Specialists to support KwaMhlanga and Mmamethlake where more Obstetrics and Gynecological mortalities are experienced. District Clinical Specialists are supporting all District hospitals to upscale skill capacity on management of Obstetric Emergencies. The quality Improvement Initiative project on reduction of Maternal and Child mortality is piloted in Themba hospital and its referring hospitals through the support of Medical Research Council (MRC) and CHAI (Clinton Health Foundation). • Furthermore, the strategy aims to reduce the cost of litigation through a mediation process. • A Medical specialist has been appointed to look into improving clinical management and assess current claims to determine validity of such claims. • A post for Director: Legal services will be advertised on the 10th of March 2019 and recruitment will be prioritised for 2019/20. • Additionally, the Department has put in place the following measures to minimize medical negligence: • Established Patient Safety Committee to monitor and manage incidences of patient safety. The committees are established at Provincial, District and hospital level • Monitoring implementation of guidelines and protocols • Conducting of Clinical Audits in all disciplines • Consequence management where there is a clear case of negligence by staff • Progressively improving on record management
	Provide progress on the breakdown cost of all new hospitals and the total budget and the expenditure.	The table below indicates a breakdown of budget and expenditure for all new hospital that are currently at different state of completion.

RESPONSES TO ORAL QUESTIONS RAISED DURING THE MEETING OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT, THURSDAY, 28 FEBRUARY 2019, COMMITTEE ROOM NO. 4/5, 08H00 – 11H00		
NO.	ORAL QUESTIONS	DEPARTMENTAL RESPONSES
	What is legality and validity of the contract for the medical warehouse?	The Department has appointed the service provider for “procurement, warehousing and distribution of pharmaceuticals”. The contract has effectively started from 01 st of May 2018 for a period of three (3) years. Office of Auditor General of South Africa has audited the procurement processes for the award and no findings have been identified. The contract for the medical warehouse is legal and valid for a period of three (3) years from date of appointment.
	An official unlawfully and intentionally shot a member of the public at Mapulaneng hospital who was standing at casualty and the court awarded R 140 000. Why is the Department only issuing a warning letter?	The official was subjected to a disciplinary hearing and meted with 2 months’ salary suspension without pay and a final written warning. This was a decision of an independent Presiding Officer.
	The issue of accruals is affecting the Department, is the strategy to address accruals working, If not what went wrong?	<p>The Department is currently in discussions with the Provincial Treasury on how to mitigate the increasing accruals and payables. Nevertheless, the Vote is implementing stringent austerity measures and has established efficiency projects to reduce health costs which will ultimately have positive impact on the reduction accruals and payables.</p> <p>The Department will need cash injection to normalize the accruals, normal accruals are estimated at R 600 million based on the month of March 2019 invoices that should be processed in April each financial year.</p>
	The Orthopaedic ward is a problem, it takes 4 – 7 days for patients to be attended and it’s mainly caused by the staff attitude and the name of the patient who sent a petition is not on the waiting list for operations.	<p>The department acknowledged the concern raised about the quality of care in the Orthopaedic wards and the staff attitude. The department received the petition as stated and the matter has already been referred to the Head of Orthopaedic in Rob Ferreira hospital and the department will prioritize the petition and include petitioner to the lists.</p> <p>The Department acknowledges the challenge of staff attitude and continuous Customer Care training is provided. The Quality Assurance unit in the hospitals investigate all complains and where the staff is found to be at fault corrective measures are taken. Patients are encouraged to report any untoward behavior by the staff for redress. During Open Days the community is informed of the Patients’ Rights and complaint mechanisms.</p>

RESPONSES TO ORAL QUESTIONS RAISED DURING THE MEETING OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT, THURSDAY, 28 FEBRUARY 2019, COMMITTEE ROOM NO. 4/5, 08H00 – 11H00		
NO.	ORAL QUESTIONS	DEPARTMENTAL RESPONSES
	How can the department avoid medical negligence that is increasing the accruals, can the department strengthen disciplinary measures ?	<p>The Department has put in place the following measures to minimize medical negligence:</p> <ul style="list-style-type: none"> • Established Patient Safety Committee to monitor and manage incidences of patient safety. The committees are established at Provincial, District and hospital level • Monitoring implementation of guidelines and protocols • Conducting of Clinical Audits in all disciplines • Consequence management where there is a clear case of negligence by staff • Progressively improving on record management • The Department is strengthening disciplinary measures as follows: • All cases of medical negligence must be referred to institutional adverse events committees if the recommendation of the latter is to the effect that there is gross negligence by an official of the Department and the state cover is lost, the official consent must be subjected to a disciplinary process and the findings be reported to the relevant statutory councils or bodies.
	What is the challenge with availability of medicines, is it at Depot or clinics?	The challenge with medicine availability is at the Depot due to failure of suppliers to deliver required quantities of stock to the depot. The suppliers are contracted by the NDOH, however, in cases where there is shortage of a particular drug the patients are given an alternative treatment.
	Has the Dental equipment in Rob Ferreira been fixed?	The autoclaves in the Dental department have not been repaired, however, an order has been printed to repair two Autoclaves out of the four, and follow ups are done with the service provider. The service provider anticipates to complete repairs by the 31 st of March 2019.
	There is no functional Dental lab at Rob hospital for four years, when will the Department fix the issue?	The hospital does not have a functional Dental Lab due to budget constraints although the department acknowledges that this is also a priority area, this is not planned for in the 2019/20 FY due to other competing priorities.
	Why is medicine expiring at the Depot when there are employees at the depot?	<p>The stock management system is outdated, this is the system that monitors that stock and make it easier for the monitoring of stock that is nearing expiration. National Department is rolling out stock management system in all Provinces. Mpumalanga is on the list of Provinces that will receive this stock management system.</p> <p>The department is currently using the RX Solution in all the hospital and the SVS is implemented in the PHC facilities to monitor stock movement.</p>

RESPONSES TO ORAL QUESTIONS RAISED DURING THE MEETING OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT, THURSDAY, 28 FEBRUARY 2019, COMMITTEE ROOM NO. 4/5, 08H00 – 11H00										
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	Posts are not filled due to budget constraints, the Department must revisit its planning on appointment of Staff to prioritize critical posts.	<p>The Department is in the process of prioritizing the critical posts to be filled and will finalize the process before end of the current financial year.</p> <p>However, due to the current economic climate in the country the Public Service needs to reduce its wage bill which has become unsustainable. Compensation of Employees (CoE) Budgets are not allowed to be increased above the inflation target set by National Treasury.</p> <p>The Department must reassign resources to improve efficiency and ensure critical vacancies are filled whilst remaining within its CoE budget ceiling.</p> <p>The Department has implemented a number of efficiency projects in order to improve efficiency ensuring improved service delivery such as:</p> <ul style="list-style-type: none"> Utilizing overtime funding to appoint staff where staff shortages results in overtime Reviewing of the staff establishment to ensure alignment with service delivery needs. Development of clear staffing norms in order to ensure that staffing is in line with service delivery needs and resources is diverted from non-critical posts to critical posts. 								
	PMDS must be implemented fully and equally to avoid picketing, e.g Tintswalo Hospital	The Department is developing guidelines on the implementation of PMDS. Training on the guidelines is planned for management in all facilities.								
	Department transferred a non-performing Dr to Tintswalo, and the same Dr is still not performing, why is the Dept transferring non-performing staff?	While the Doctor was at Shongwe Hospital he was charged with misconduct for violation of procurement processes, found guilty and sanctioned with a 2 months' salary suspension without pay. The transfer of the Doctor concerned was not informed by non-performance, instead he was transferred in compliance with section 14(3)(b) of the Public Services Act No. 30 of 1997 as amended wherein the Executive Authority is empowered to effect a transfer on the basis of public interest.								
	In Tintswalo a pharmacist assistant took more than 2 hours to dispense medication after the Dr had prescribed. The Department must address this matter as it has a potential of litigation?	The Department acknowledges the concern raised and the matter will be addressed. The pharmacy was flooded with water due to leaking roof and this also increased the patient waiting time.								
	What is actual progress of the new Mapulaneng hospital as there is nothing that is taking place at the hospital?	<p>The Accounting officer has noted concerns and the below progress can be reported:</p> <table border="1"> <thead> <tr> <th>Project Name</th> <th>Project cost (R'000)</th> <th>Exp. To date (R'000)</th> <th>Progress to date</th> </tr> </thead> <tbody> <tr> <td>New Mapulaneng Hospital</td> <td>R 2 364 321</td> <td>R 160 086</td> <td>Phase 1 – 91% Phase 2 – 100% Phase 3 – Not commenced.</td> </tr> </tbody> </table>	Project Name	Project cost (R'000)	Exp. To date (R'000)	Progress to date	New Mapulaneng Hospital	R 2 364 321	R 160 086	Phase 1 – 91% Phase 2 – 100% Phase 3 – Not commenced.
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NO.	ORAL QUESTIONS	DEPARTMENTAL RESPONSES
	<p>In the response</p> <p>(i) On page 1 of 44 the department indicate amongst other that will not be able to absorb 110 bursary holders because of the budget reduction.</p> <p>(ii) The department must indicate:</p> <p>(i) How will it treat the 110 bursary holders and whether there is no other way to absorbed them?</p> <p>(ii) What are the labour relations implication for the department's failure to translate nurses and settle grade progression for Nursing Staff.?</p>	<p>(i) The Department appointed the bursary holders in funded posts that were vacated throughout the year thus replacing staff who was included in the Cost per Head who terminated their services with the Department during the 2018/19 Financial Year. The remaining 65 bursary holders were appointed utilizing the Presidential Stimulus Package.</p> <p>(ii) Failure to translate nurses and non-implementation of grade progression for nursing staff will contribute to the number of avoidable and unnecessary grievances. The conduct of the department will constitute an act of unfair labour practice and gross violation of a potential of an employee's career pathing.</p>
	<p>Annexure A on Austerity Measures does not reflect the broad aspects of overspending of the department and the measures are not costed.</p> <p>The department must indicate:</p> <p>(i) What was the total savings that the HOD aimed to achieve through the austerity measures and to date how much has been saved and what is its impact on the rising accruals. ?</p> <p>(i) Why does the Austerity measure fail to deal with the cost drivers of accruals such as litigations, medical supplies, and medicine and laboratory services?</p>	<p>(ii) The Department has managed to save R 40 million on overtime which was reduced during the budget adjustment and R 4 million was saved on food project and has assisted hospital to stay within the budget on food in 2018/19 FY. The other projects are in progress because they are complex in nature.</p> <p>(iii) The Department austerity measure did not include litigations, medical supplies, and medicine and laboratory services; however, the Department has initiated efficiency projects. The efficiency projects included food, overtime, medicine, coals, medical implants and utilities.</p>
	<p>Annexure B is not a report of the Financial Misconduct Committee, but it is three letters written by CFO to SE Motau asking investigation and disciplinary steps against CEO of Standerton for R283.04. A letter from CEO to SE Motau for irregular expenditure of R 1 129 320 asking investigation and disciplinary steps against J Mothlamme. A letter written by CFO to the same CFO requesting the CFO to investigate and discipline Mr Mahlalela R 1 129 320.</p> <p>(i) Why did the Accounting Officer put an irrelevant annexure?</p> <p>(ii) Did Miss Motau and Mr Mamogale respond within the 30 days they were given on 7 January 2019, if yes what was the outcome, if no why not considering the letters written to them?</p> <p>(iii) The Accounting Officer provide the relevant annexure dealing with the R 547 162 wasteful and fruitless expenditure as asked in the question?</p>	<p>The Accounting Officer would like to acknowledge the oversight as Financial Misconduct Committee report was supposed to have been attached.</p> <p>Financial Misconduct Committee report dealing with R 547 162 has been attached as Annexure A.</p> <p>Miss Motau and Mr Mamogale are the DDGs responsible while actual investigations is conducted by the relevant managers and hospital CEOs. Investigations were not at all times concluded within 30 days but concluded within the quarter.</p>

RESPONSES TO ORAL QUESTIONS RAISED DURING THE MEETING OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT, THURSDAY, 28 FEBRUARY 2019, COMMITTEE ROOM NO. 4/5, 08H00 – 11H00		
NO.	ORAL QUESTIONS	DEPARTMENTAL RESPONSES
	<p>Annexure C does not comply with the PFMA and PFMA regulations on the reporting of irregular expenditure. The HOD should have written to the Provincial Treasury to report the irregular expenditure together with the register of Irregular expenditure?</p> <p>(i) Can the Accounting Officer explain how an irregular expenditure is reported in accordance to the PFMA and can she show proof of reporting it according to the PFMA because the proof submitted is not compliant with the PFMA?</p>	<p>The Accounting Officer has reported all the irregular expenditure incurred to Provincial Treasury as required by PFMA 38 (g).</p> <p>Annexure B: Proof of reporting the irregular expenditure</p>
	<p>Annexure F: Austerity measures on catering</p> <p>The Annexure reflect broad austerity measures not only catering:</p> <p>(i) Can the Accounting Officer indicate how much she intended to save on catering as per the austerity measure on catering and further indicate how much has she saved up to date and whether the austerity measures are effective or ineffective considering that by end of third quarter catering was already at 145%</p>	<p>The Department has not realized savings on catering however for fiscal control. Further and new savings could not be realized because the austerity measures have been in place for the past five financial years. However, the other projects are in progress because they are complex in nature. The 145% expenditure was due to the use of an incorrect account at the nursing college. This error was corrected in January 2019.</p>
	<p>In response xii (b) on page 13 of 44 the department is indicating that legal fees are as a result of the Office of the Premier contracting private attorneys to assist all departments including the department of health in defending the litigation cases.</p> <p>Can the Accounting officer indicate the following:</p> <p>(i) How much has the department of health paid towards the attorneys appointed by the Premier's Officer and whether does the PFMA allows such an arrangement where the Premier's Officer source services but are paid by the department of health? SCM to respond on this one.</p> <p>(ii) How many cases has the Accounting officer referred to the attorneys appointed by the Office of the Premier and what were the outcomes per case; considering the outcome per case and the amount paid by the department would the accounting officer indicate if value has been derived from contracting external Attorneys?</p>	<p>Yes, the Accounting Officer can indicate the amount paid and the number of cases referred to OTP as follows:</p> <p>(i) R 9 585 444.88 was paid to private attorneys for the 3rd quarter 2018/19. The Departments are allowed to participate in the contracts awarded by another government institutions. Currently in the province there are other contracts awarded by Provincial Treasury and other Departments are participating such as Traveling agencies, furthermore, Department of Public Works, Roads and Transport (DPWRT) awarded other contracts on behalf of other government institutions for construction and maintenance of buildings and other fixed structures.</p> <p>(ii) A list is attached marked Annexure C</p> <p>It is currently difficult to indicate the value derived from contracting the private attorneys as litigation in the high court may take more than five years and of which majority of cases have not been finalized. Those that have been finalized are the ones where plaintiff's withdraw on technicalities raised by our defense attorneys but not on merits.</p>
	<p>Annexure I1 and I2 are nor reader-friendly.</p> <p>(i) Can the accounting Officer submit reader-friendly editions of Annexure I1 and I2.</p>	<p>Annexure D1 and D2 has been attached.</p>
	<p>Response ii on page 19 of 44 does not make a firm statement for the MEC to prepare the legislation. In the second quarter, the department indicated that they will complete the process in the next financial period. So the MEC must establish the Act.</p>	<p>The Department is targeting to have the discussion document which will include both inputs from internal and external stakeholders by April 2019. The Bill will thereafter be submitted to the Executive Council for approval. Once the Executive process is finalized, the Bill will be introduced to the Provincial Legislature for processing and passing.</p>

RESPONSES TO ORAL QUESTIONS RAISED DURING THE MEETING OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT, THURSDAY, 28 FEBRUARY 2019, COMMITTEE ROOM NO. 4/5, 08H00 – 11H00		
NO.	ORAL QUESTIONS	DEPARTMENTAL RESPONSES
	Response (c) on Page 22 of 44 is vague. The MEC must provide a legislation not a policy. The MEC must answer the question on which prescripts did the MEC use to replace a legislation with a policy?	<p>The MEC did not replace a legislation with a policy, however, in the absence of Provincial Health Act, the MEC used the National Health Act as a guide and developed a guideline for the establishment of Governance structures in the province.</p> <p>The MEC has capacitated an official within Legal unit in the Department with legislation drafting and will commence with drafting the Provincial Health Act during the 2019/20 FY.</p>
	Mmamethlake hospital was advertised and withdrawn in order to transfer the CEO of Witbank TB	The post of CEO Witbank TB hospital will be advertised on 03 March 2019 and an appointment should be made during the first quarter of 2019/20 financial year. TB Specialized hospitals have been reclassified and will no longer require to have CEOs without a medical background and the advert will be for a CEO/ Clinical Manager. The Department is allowed to issue an erratum to either withdraw or correct an advert if the post is no longer required to be filled.
	What is the criteria set by the Department on the appointment of hospital boards?	<p>The Department is guided by the National Health Act 61 of 2003 in the setting of criteria for the appointment of Hospital Board members, Section 41 sub-section 8 indicates that the boards may include not more than five persons with expertise in areas such as accounting, financial management, human resources management, information management and legal matters.</p> <p>Sub-section 7(d) indicates that there must be not more than three representatives of the communities served by the hospital, including special interest groups representing users:</p> <p>Annexure E: List of Hospital Board members and their qualifications</p>
	If the Dept cannot appoint a Director for Legal and how will the issue of litigations going to be addressed.?	The post of Director: Legal Services will be advertised on the 10 th of March 2019 and recruitment will be prioritised for 2019/20 FY.

DEPARTMENTAL RESPONSES ON HOUSE RESOLUTIONS OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT FOR THE 4 TH QUARTER PERFORMANCE REPORT 2018/2019			
No.	COMMITTEE FINDINGS	COMMITTEE RECOMMENDATIONS	RESPONSES
a.	The department still has a challenge of accruals however, the department reportedly managed to reduce them, the recorded value of accruals by 31 March 2019 was R 581 336 000.00.	The department must submit a plan and an updated and detailed progress report on the settlement of accruals.	The Department has settled accruals and payables amounting to R569 million however, an amount of R5.4 million is still outstanding due to various challenges with invoices.
b.	The department recorded a total of R 10 091 billion on litigations and a total amount of R 25 111 861.83 has been paid to date.	The department must submit a plan and an updated and detailed progress report on the settlement of litigations.	Refer to Annexure A, Detailed Report on the settlement of Litigations.

DEPARTMENTAL RESPONSES ON HOUSE RESOLUTIONS OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT FOR THE 4 TH QUARTER PERFORMANCE REPORT 2018/2019																																				
No.	COMMITTEE FINDINGS	COMMITTEE RECOMMENDATIONS	RESPONSES																																	
c.	The department reported that there was a backlog of 6 703 patients waiting for cataract surgery.	The department must submit a detailed updated progress report on the performance of cataract surgeries in addressing the reported backlog.	<p>The contributory factor to the high numbers of backlog, is a lack of an Ophthalmologist to conduct cataract surgeries. Currently, the province is depending on one (1) Ophthalmologist based at Rob Ferreira Hospital and three (3) Medical Officers: two (2) in Gert Sibande (Ermelo and Bethal Hospitals) and one (1) at Themba Hospital in Ehlanzeni.</p> <p>The Department entered into a Memorandum of Agreement (MOA) with two (2) Non-Governmental Organisations, with the aim of addressing the backlog on cataract surgeries in the Province. The Bureau for the Prevention of Blindness, is operating in Nkangala and Ehlanzeni and Tshemba Foundation is operating at Tintswalo hospital.</p> <p>For the period of April to June 2019 the province managed to conduct a total of 133 cataract surgeries:</p> <p>1. Ehlanzeni District</p> <table border="1"> <thead> <tr> <th>Hospital</th> <th>Operator</th> <th>Nr of Surgeries conducted</th> </tr> </thead> <tbody> <tr> <td>Themba</td> <td>Medical Officer</td> <td>17</td> </tr> <tr> <td>Matibidi</td> <td>Bureau for Prevention of Blindness</td> <td>37</td> </tr> <tr> <td>Tintswalo</td> <td>Tshemba Foundation</td> <td>20</td> </tr> <tr> <td>TOTAL</td> <td></td> <td>74</td> </tr> </tbody> </table> <p>2. Gert Sibande District</p> <table border="1"> <thead> <tr> <th>Hospital</th> <th>Operator</th> <th>Nr of Surgeries conducted</th> </tr> </thead> <tbody> <tr> <td>Ermelo</td> <td>Medical Officers</td> <td>59</td> </tr> <tr> <td>Bethal</td> <td>Medical Officers</td> <td>0</td> </tr> <tr> <td>TOTAL</td> <td></td> <td>59</td> </tr> </tbody> </table> <p>3. Nkangala</p> <table border="1"> <thead> <tr> <th>Hospital</th> <th>Operator</th> <th>Nr of Surgeries conducted</th> </tr> </thead> <tbody> <tr> <td>None</td> <td>None</td> <td>0</td> </tr> </tbody> </table> <p>The Department is currently reviewing the Memorandum of Agreement (MOA) with the Bureau for the Prevention of Blindness in order to increase the number of surgeries conducted, whilst Tshemba Foundation has signed a MOA to conduct 1000 surgeries per quarter. The province has also advertised the vacant posts in June 2019 of Ophthalmologists to be able to address the backlog.</p>	Hospital	Operator	Nr of Surgeries conducted	Themba	Medical Officer	17	Matibidi	Bureau for Prevention of Blindness	37	Tintswalo	Tshemba Foundation	20	TOTAL		74	Hospital	Operator	Nr of Surgeries conducted	Ermelo	Medical Officers	59	Bethal	Medical Officers	0	TOTAL		59	Hospital	Operator	Nr of Surgeries conducted	None	None	0
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DEPARTMENTAL RESPONSES ON HOUSE RESOLUTIONS OF THE PORTFOLIO COMMITTEE ON HEALTH AND SOCIAL DEVELOPMENT FOR THE 4 TH QUARTER PERFORMANCE REPORT 2018/2019			
No.	COMMITTEE FINDINGS	COMMITTEE RECOMMENDATIONS	RESPONSES
d.	The department reportedly has 226 patients waiting for Orthopaedic Surgery.	The department must submit a detailed updated progress report on the performance of orthopaedic surgeries.	<ul style="list-style-type: none"> Orthopaedic Patient Waiting List attached as Annexure B1. Action Plan to address the orthopaedic backlog in Regional and Tertiary Hospitals, attached as Annexure B2
e.	The department is reportedly waiting for Mbombela Municipality to complete the platform and access road to the construction site of the new Kanyamazane CHC.	The department must submit a detailed progress report on the completion of the platform and access road to the construction site of the new Kanyamazane CHC by Mbombela Local Municipality	<p>The Accounting Officer noted the following progress:</p> <ol style="list-style-type: none"> Consultant's documentation is complete and ready for tender (excluding possible issues that might arise from the readiness of the works executed by Mbombela Municipality). The department wrote a letter (dated 07 August 2019) to Mbombela Local Municipality to request an update to the readiness of the site earthworks and associated services done by them, and to advise on a possible date of the site to be handed over to DOH. <p>Letter requesting information on KaNyamazane CHC site, attached as Annexure C.</p> <ol style="list-style-type: none"> The subdivision, consolidating and re-zoning of the property is still in progress being attended to by Department of Public Works, Roads and Transport.

8. SCOPA RESOLUTIONS

RESOLUTION NO.	SUBJECT	DETAILS	RESPONSE BY THE DEPARTMENT	RESOLVED (YES/NO)
5.1	CONTINGENT LIABILITY			
	The Auditor General found that contingent liabilities were overstated by R115 587 622 and was unable to obtain sufficient appropriate audit evidence for cases amounting to R 69 085 028. In addition, the Auditor General was unable to determine if any further adjustments were necessary to contingent liabilities state at R 7 888 073 000	(i) The Executive Authority must take disciplinary actions against the Accounting Officer for incurring contingent liabilities amounting to R115 587 622	<p>The Executive Authority has considered taking disciplinary actions against the Accounting Officer however the contingent liability was incurred mainly due to Medical Negligence by Health Professionals in different facilities.</p> <p>The Accounting Officer is currently in a process to finalize the litigations strategy for implementation.</p>	No
6.1	RESTATEMENT OF CORRESPONDING FIGURES			

RESOLUTION NO.	SUBJECT	DETAILS	RESPONSE BY THE DEPARTMENT	RESOLVED (YES/NO)
	The Auditor General has found that the corresponding figure for 31 March 2017 have been restated as a result of an error discovered during the year ended 31 March 2018 in the financial statements of the department	The Accounting Officer must take disciplinary actions against official(s) who could submit accurate information.	Accounting Officer did not take disciplinary actions against officials as the restatement of prior year was correction of prior year financial figures <ul style="list-style-type: none"> Irregular expenditure of R3.1 billion was incorrectly recorded in previous financial years. Immovable Tangible Capital Assets was valued with correction of Gross Building Area and subsequently surrendered to Department of Public Works Roads and Transport. Movable Tangible Capital Assets was corrected based on the results of physical verifications. The restatement of corresponding figures has assisted to Department to clear the previous qualification relating Immovable Tangible Capital Assets, Movable Tangible Capital Assets and Irregular Expenditure. 	No
7.1	ACCRUALS			
	The Auditor General found that the payables in the financial statements which exceed the payment term of 30 days amounted to R 181 671 000. This amount exceeded the voted funds surrendered of R 77 040 000 by R 104 631 000	(i) The Executive Authority must take disciplinary actions against the Accounting Officer for incurring accruals	Accruals and Payable not recognized of the Department of Health for the 2017/18 financial year was not cash-back. Section 29 (1) of the PFMA provides that If an annual budget is not passed before the start of the financial year, the Department may not spend the budget for that financial year exceeding 10%. The accruals and payable not recognized of the Department amounted to R851 million in 2017/18 financial year which represented 6.5% of the budget for 2018/19 financial year.	No
		(ii) The Accounting Officer must ensure that invoices are paid within 30 days as it is required by Treasury Regulations	The Accounting Officer has noted the recommendations and the following processes are put in place to ensure invoices are paid within 30 days <ul style="list-style-type: none"> Funds are released on weekly basis based on available cash. Standing orders are created on recurring services and infrastructure projects. 	No

RESOLUTION NO.	SUBJECT	DETAILS	RESPONSE BY THE DEPARTMENT	RESOLVED (YES/NO)								
		The Accounting Officer must develop a system that will ensure the department does not have accruals	<p>The Accounting Officer has developed strategy to reduce accruals over the Medium Term Expenditure Framework and Provincial Treasury is in process to implement an invoice tracking system which will assist with the management of invoices.</p> <p>Accruals are defined as transactions where a service was rendered or goods were delivered however the service provider or supplier has not billed the transaction before the end of the financial year.</p> <p>The Department will normally have accruals due to services or goods delivered in March which are billed in the following month (April). However, the Department has incurred payables amounting to R376.798 million in 2018/19 financial year as compared to R585.625 million in 2017/18 financial year. These payables were due to recurring payables from previous financial years and price escalations on non-negotiables and key accounts.</p>	No								
8.1	IRREGULAR EXPENDITURE											
	The Auditor General found that the department incurred irregular expenditure of R 309 920 000 for failure to follow proper tender processes.	(i) The Executive Authority must take disciplinary actions against the Accounting Officer for incurring irregular expenditure amounting R 309 920 000 in the 2017/2018 financial year	<p>The Executive Authority could not take disciplinary actions against the Accounting Officer as the irregular expenditure is incurred from the multi-year tenders awarded in previous financial years.</p> <p>The Accounting Officer has already investigated and took disciplinary steps on the irregular expenditure for the previous financial years.</p> <table border="1"> <thead> <tr> <th>Description of Services</th> <th>Amount R'000</th> </tr> </thead> <tbody> <tr> <td>Participating in contracts arranged by the Office of the Premier for legal services.</td> <td>13 577</td> </tr> <tr> <td>Perishable and non-perishable goods</td> <td>78 751</td> </tr> <tr> <td>Outsourcing of the Procurement, Warehousing and Distribution of Pharmaceutical and surgical sundries.</td> <td>213 546</td> </tr> </tbody> </table>	Description of Services	Amount R'000	Participating in contracts arranged by the Office of the Premier for legal services.	13 577	Perishable and non-perishable goods	78 751	Outsourcing of the Procurement, Warehousing and Distribution of Pharmaceutical and surgical sundries.	213 546	No
Description of Services	Amount R'000											
Participating in contracts arranged by the Office of the Premier for legal services.	13 577											
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Outsourcing of the Procurement, Warehousing and Distribution of Pharmaceutical and surgical sundries.	213 546											

RESOLUTION NO.	SUBJECT	DETAILS	RESPONSE BY THE DEPARTMENT	RESOLVED (YES/NO)
		(ii) The Accounting Officer must provide the progress report after the Financial Misconduct Committees concluded its investigations on the irregular expenditure.	The Accounting Officer can provide the progress report for other irregular expenditure amounting to R4 245 701.00.	Yes
		(iii) The Executive Authority must take disciplinary actions against Accounting Officer for failure to follow proper tender processes.	The Executive Authority could not take disciplinary actions against the Accounting Officer as the irregular expenditure is incurred from the multi-year tenders awarded in previous financial years.	No
9.1	PREDETERMINED OBJECTIVES			
	The Auditor General was unable to obtain the information and explanation considered necessary to ascertain reliability and validity of the reported performance information.	(i) The Accounting Officer must take disciplinary actions against official(s) who failed to ensure that Performance Information is reliable as required by the Auditor General.	The Accounting Officer could not take disciplinary actions against officials because this was a health system challenge. The Department of Health has piloted National Health Insurance in Gert Sibande District and will be rolled out to the other two districts. In the main, the reason for unreliability of performance information was due to patient records not kept in health facilities (Road to Health Cards and antenatal cards).	No

RESOLUTION NO.	SUBJECT	DETAILS	RESPONSE BY THE DEPARTMENT	RESOLVED (YES/NO)
		(ii) The Accounting Officer must strengthen the monitoring system and provide evidence to the Committee that the department had put measures and systems to ensure that reported performance is valid, accurate and complete.	<p>The Accounting Officer has put the following measures in place to strengthen the monitoring system:</p> <ul style="list-style-type: none"> • Lessons learned in the Gert Sibande NHI pilot district are being rolled out in all districts to improve validity, completeness and accuracy such as. • HPRS system has been installed in all PHC facilities and it will be integrated with the hospitals system will be installed in 2019/20. • To ensure functionality of the HPRS system, 140/287 are connected to broadband and 147/287 will be connected by September 2019. • To ensure availability of files, filling cabinets were procured and installed in Tintswalo, KwaMhlanga, Ermelo and Rob Ferreira and more will be installed over the next MTEF. • 18 sub-district Information Officers appointed in all sub-districts to ensure data verification is conducted prior to reporting and compliance with District Health Management Information System (DHMIS) policy. • Data quality cleanup was conducted for facilities prior to the finalization of the 2018/19 dataset. • The Department has developed a frontline service delivery monitoring plan to monitor performance of all facilities. 	No
10.1	PROCUREMENT AND CONTRACT MANAGEMENT			
	The Auditor General found that some bid documents for the procurement of commodities for local content and production did not meet the stipulated minimum threshold for local production and content as required by the 2017 Preferential Procurement Regulation 8 (2)	(i) The Executive Authority must take disciplinary actions against the Accounting Officer for contravening Treasury Regulation 16.A6.1	The Executive Authority could not take disciplinary actions against the Accounting Officer for contravening Treasury Regulation 16.A6.1 because the Accounting Officer is currently investigating the transgression in order to determine responsible officials. The investigation process will be finalized at the end of the second quarter 2019/20 financial year.	No

RESOLUTION NO.	SUBJECT	DETAILS	RESPONSE BY THE DEPARTMENT	RESOLVED (YES/NO)
		(ii) The Accounting Officer must take disciplinary measure against the officials for failure to adhere to SCM prescript.	The Accounting Officer is currently investigating the transgression in order to determine responsible officials. The investigation process will be finalized at the end of the second quarter 2019/20 financial year.	No
11.1	EXPENDITURE MANAGEMENT			
	The Auditor General has found that effective and appropriate steps were not taken to prevent unauthorized, irregular as well as fruitless and wasteful expenditure as required by section 38(1)(C) of the PFMA and Treasury Regulation 9.1.1	(i) The Executive Authority must take disciplinary actions against the Accounting Officer for incurring unauthorized expenditure amounting R33 million	The Department has finalized the investigation on the occurrence of the unauthorized expenditure through the internal audit office. The investigation report states that the Department could not avoid the expenditure by putting the lives of patients at risk.	No
		(ii) The Accounting Officer must take disciplinary actions against official(s) responsible for the unauthorized expenditure after the investigations have been concluded.	The Department has finalized the investigation on the occurrence of the unauthorized expenditure through the internal audit office. The investigation report states that the Department could not avoid the expenditure by putting the lives of patients at risk.	No
		(iii) The Accounting Officer must ensure that money is recovered from the official(s) responsible for the unauthorized expenditure.	The Department has finalized the investigation on the occurrence of the unauthorized expenditure through the internal audit office. The investigation report states that the Department could not avoid the expenditure by putting the lives of patients at risk.	No
12.1	REVENUE MANAGEMENT			

RESOLUTION NO.	SUBJECT	DETAILS	RESPONSE BY THE DEPARTMENT	RESOLVED (YES/NO)
	The Auditor General has found that effective and appropriate steps were not taken to collect all money due as required by Section 38 (1)(c)(i) of the PFMA and Treasury Regulations 11.4.1; 11.4.2; 11.5.1	(i) The Accounting Officer must take disciplinary measures against official(s) for not ensuring effective and appropriate steps to collect all money due as required by Section 38 (1)(c)(i) of the PFMA and Treasury Regulations 11.4.1	(i) The Department has established a Task Team to improve revenue collection which mainly focus on improving revenue in high impact hospitals. A debt collector was appointed towards the end of 2018/19 financial year for the collection of monies owed to the state amounting to over R200 million. The Department currently collaborates with the Provincial Treasury to improve revenue collection for the Department. A special budget for the procurement of computers, patient files and photocopier machines amounting to R10 million was allocated in 2019/20 financial year.	No
13.1	LEADERSHIP			
	The Auditor General found that the Accounting Officer did not exercise oversight responsibility regarding financial and performance reporting and compliance with legislation.	(i) The Executive Authority must take disciplinary actions against the Accounting Officer for failure to exercise oversight responsibility regarding financial and performance reporting and compliance with legislation in the department.	(i) The Executive Authority did not take disciplinary actions against the Accounting Officer due to the following measures put in place to mitigate the finding: <ul style="list-style-type: none"> • Establishment of the Departmental Budget Committee. • Financial Statements Review Teams including Internal Audit. • District and Provincial Review Sessions. • Provincial Finance and Information Support Teams. 	No

9. PRIOR MODIFICATIONS TO AUDIT REPORTS

Nature of qualification, disclaimer, adverse opinion and matters of non-compliance	Financial year in which it first arose	Progress made in clearing / resolving the matter
Contingent Liability	2015/2016	The Department is currently developing the standard operating procedures to clearly indicate the processes of recording, managing and reporting letters of demand and summons received. Electronic register has been established and two officials have been appointed during 2018/2019 financial year to improve reporting on contingent liabilities.

10. INTERNAL CONTROL UNIT

Objectives

The Internal Control Unit monitors and ensures orderly, efficient conduct of business, the safe guarding of assets, prevent and detect fraudulent activities, completeness, accuracy of accounting records and timely preparation of financial information.

Challenges

The unit still experiences human resources challenges to execute its mandate.

Achievements

- The unit reviewed financial policies and developed procedure manuals
- The unit rendered secretariat functions to the audit steering committee that deals with remedial action plan on AGSA audit findings for the 2017/2018 financial year and internal audit report
- The unit rendered secretariat functions to the Provincial Financial Misconduct Committee (PFMC) and District Financial Misconduct and Loss Control (DFMLC)
- The unit co-ordinated the Financial Management Capability Maturity Model (FMCMM)
- The unit co-ordinated Management Performance Assessment Tool (MPAT) that establish benchmark performance, baseline performance of institutions, track improvement against the baseline performance and provide managers with information to inform improvement

11. INTERNAL AUDIT AND AUDIT COMMITTEES

The Internal Audit conducts its activities as per the approved Internal Audit Plan that is based on the risk assessment and approved by the Audit Committee. The Internal Audit derives its mandate from the Internal Audit Charter.

The Internal Audit reports quarterly to the Audit Committee on the progress of work conducted in accordance with the approved Internal Audit Plan.

The following internal audit work was completed during the year under review:

- Supply Chain Management and Expenditure Management
- Annual Financial Statement Review
- Performance Information Review
- Control Environment
- MPAT
- Norms and Standards
- Asset Management
- Conditional Grant Received and Transferred
- Debt and Revenue Management
- Year End Pharmaceutical Stock Take
- Human Resource Management
- Contingent Liabilities

The Audit Committee fulfils a vital role in King IV Corporate Governance to ensure the integrity of integrated reporting and internal financial controls and the identification and management of risk. The Audit Committee assists management

in carrying out its responsibilities as they relate to the Department in terms of financial reporting, management and other reporting practices; internal controls and management of risks as well as the compliance with laws, regulations and ethics. The Audit Committee further fulfils its role by ensuring that the combined assurance model is applied to provide a coordinated approach to all assurance activities.

The table below discloses relevant information on the audit committee members:

Name	Qualifications	Internal or external	If internal, position in the department	Date appointed	Date Resigned	No. of Meetings attended
Mr Abel Mawela	<ul style="list-style-type: none"> Diploma in Commerce B. Comm B. Comm (Hons) Masters degree-Business Administration 	External	Not applicable	1 May 2015 The member was reappointed with effect from 1 December 2018	N/A	5
Mr Charles Motau	<ul style="list-style-type: none"> B Comm HDip Computer Auditing Masters -Business Leadership Masters degree -IT Certified in Execution Leadership Certified in Human Resource Management 	External	Not applicable	1 May 2015 The member was reappointed with effect from 1 December 2018	N/A	5
Mr Ayanda Wakaba	<ul style="list-style-type: none"> Bachelor of Commerce Honours: Bachelor of Commerce Masters of Business Management and Admin Advance Diploma in Accounting Science 	External	Not applicable	1 December 2018	N/A	1
Mr Kingsley Chisale	<ul style="list-style-type: none"> B.com (Accounting) ACCA CIA CFE 	External	Not applicable	1 May 2015	30 November 2018	4
Ms Sijabulile Makhathini	<ul style="list-style-type: none"> CA(SA) B. Comm (Hons) B. Comm Accounting Post Grad Diploma in Accounting Science 	External	Not applicable	1 May 2015	30 November 2018	1
Mr Roy Mnisi	<ul style="list-style-type: none"> Bachelor of Law/LLB Post Grad Certificate in Compliance Management 	External	Not applicable	1 May 2015	14 April 2018	0

12. AUDIT COMMITTEE REPORT

We are pleased to present our report for the financial year ended 31 March 2019.

Audit Committee Responsibility

The Audit Committee reports that it has complied with its responsibilities arising from Section 38 (1) (a) (ii) of the Public Finance Management Act and Treasury Regulation 3.1.13. The Audit Committee also reports that it has adopted appropriate formal terms of reference as its Audit Committee Charter, has regulated its affairs in compliance with this charter and has discharged all its responsibilities as contained therein.

The Effectiveness of Internal Control

The Department of Health has a system of internal control to provide cost effective assurance that the Department's goals and objectives will be economically, efficiently and effectively achieved. Our review of the findings of the Internal Audit work, which was based on the risk assessments conducted in the department revealed certain internal control weaknesses, which were then raised with the Department.

The following internal audit work was completed during the year under review:

- Supply Chain Management and Expenditure Management
- Annual Financial Statement Review
- Performance Information Review
- Control Environment
- MPAT
- Norms and Standards
- Asset Management
- Conditional Grant Received and Transferred
- Debt and Revenue Management
- Year End Pharmaceutical Stock Take
- Human Resource Management
- Contingent Liabilities
- The following were areas of concern:
 - Payments made without confirmation of receipt for goods and services performed.
 - Contract management not effectively exercised.
 - Irregular, Fruitless and Wasteful Expenditure.
 - Payments not made within 30 days from date of receipt of an invoice.
 - Inadequate implementation of quality improvement plans.
 - Insufficient physical security measures in critical areas.
 - Non availability of essential medical equipment.
 - Inadequate management of normal overtime.
 - Increasing medical claims
 - Commuted overtime contracts not reviewed annually.
 - Inadequate tools utilised for data collection.
 - Difference between District Health Information System (DHIS), input forms and registers
 - Failure to collect all money due by patients.

- Failure to collect revenue due from Road Accident Fund.

The Audit Committee will monitor progress made in implementing action plans developed and implemented by management.

In-Year Management and Monthly/Quarterly Report

The Audit Committee is satisfied with the content and quality of monthly and quarterly reports prepared and issued by the Department of Health as required by the PFMA.

Evaluation of Financial Statements

The Audit Committee has reviewed the financial statements prepared by the Department of Health.

Auditor General's Report

We have reviewed the Department of Health's implementation plan for audit issues raised in the previous year and we are satisfied that the matters have been adequately addressed.

The Audit Committee concurs and accepts the conclusion of the Auditor-General on the Annual Financial Statements and is of the opinion that the Audited Annual Financial Statements be accepted and read together with the report of the Auditor-General.

Independence of the Audit Committee

The Audit Committee is independent of management in the execution of its duties.

Internal Audit

The Audit Committee is satisfied that the internal audit function is operating effectively and that it has addressed the risks pertinent to the Department of Health in its audits.

Appreciation

The Audit Committee appreciates the assistance and cooperation of management in assisting in the discharge of its responsibilities.



Abel Mawela

Chairperson of the Audit Committee

Mpumalanga Department of Health

Date: 31/07/2019

PART D: HUMAN RESOURCE MANAGEMENT

1.



1. INTRODUCTION

Human resources is the cornerstone of any organisation since it ensures that the strategic objectives of the organisation are achieved. The role of the human resource section is the provision of the following services:

- Human resources practices
- Human resources organisational strategy and planning
- Performance management and development
- Human resources utilisation and capacity development
- Employee relations and people management (labour relations)
- Employee health and wellness
- Occupational health and safety

2. OVERVIEW OF HUMAN RESOURCES

The Department is currently operating with the 2010 approved Organisation Structure. Due to the implementation of Occupation Specific Dispensation (OSD), the Department currently is in the process of review the Organisational Structure in order to align with the current service delivery platforms and to ensure that it further address the ever growing needs of Human Resource for Health (HRH).

The Department operates with 22 338 active post and 20 412 warm bodies that present a vacancy rate of 8.6% within the benchmark rate. The Department has experienced a high labour turnover rate of 6.90% viewing the number of personnel that exited the system and the number of personnel appointed during the reporting year.

The Department during the year under review has prioritised the filling of key management post and the following post were appointed to improve leadership in Hospitals:

- Deputy Director General – Clinical Health Services
- Deputy Director General – Finance
- Chief Executive Officer – Tintswalo
- Chief Executive Officer – Lydenburg

The Department further noted challenges with the management of information and the inability to provide adequate reports about our client visits in various facilities thereof, the Department prioritised the appointment of 18 information officer at all sub-districts and during the year under review 08 were appointed.

The Department further appointed lower category support personnel within various facilities in order to improve the quality of health care and cleanliness. Further the department attracted and appointed 9 Medical Specialist to assist the province with the aim of enhancing life expectancy and reduction of mortality rate.

During the financial year 2018/19, about 7 680 personnel employees have signed their performance agreement and meet the criteria for payment of pay progression for the reporting year. The Department has conducted in-service training to empower programme managers in order to improve Employee Performance Management.

The Department during the reporting period has conducted debriefing session to support personnel undergoing traumatic experience at workplace. The Department through the Office of the MEC successfully conducted two dialogues that benefited both woman and men within the Province to be able to communicate about social problems.

The following are highlights of achievements and challenges faced by the department, as well as future human resource plans for Health.

- Training of 90 Nursing Student
- Training of Medical Student
- Appointment of 152 Cleaners



- Appointment of 72 Emergency Medical Personnel
- Appointment of key management posts personnel
- Payment of overtime accruals

Even though the Department was expected to appoint all employees as per planned target, however due to recruitment challenges the department failed to meet the planned targets for prioritised posts.



3. HUMAN RESOURCES OVERSIGHT STATISTICS

3.1. Personnel related expenditure

Table 3.1.1 Personnel expenditure by programme for the period 1 April 2018 and 31 March 2019

Programme	Total expenditure (R'000)	Personnel expenditure (R'000)	Training expenditure (R'000)	Professional and special services expenditure (R'000)	Personnel expenditure as a % of total expenditure	Average personnel cost per employee (R'000)
ADMINISTRATION	297 645.00	133 177.00	0.00	0.00	44.70	533.00
ASSETS & LIABILITIES	0.00	0.00	0.00	0.00	0.00	0.00
CENTRAL HOSPITAL SERVICES	1 227 191.00	823 261.00	0.00	0.00	67.10	424.00
DISTRICT HEALTH SERVICES	8 064 139.00	5 047 958.00	0.00	0.00	62.60	358.00
EMERGENCY MEDICAL SERVICES	363 504.00	291 865.00	0.00	0.00	80.30	312.00
HEALTH CARE SUPPORT SERVICES	153 623.00	118 772.00	0.00	0.00	77.30	429.00
HEALTH FACILITIES MANAGEMENT	1 255 709.00	18 845.00	0.00	0.00	1.50	509.00
HEALTH SCIENCE & TRAINING	367 570.00	235 120.00	0.00	0.00	64.00	236.00
PROVINCIAL HOSPITAL SERVICES	1 369 326.00	1 035 319.00	0.00	0.00	75.60	393.00
RECEIPTS OBJECTIVE	0.00	0.00	0.00	0.00	0.00	0.00
Total	13 098 707.00	7 704 318.00	0.00	0.00	58.80	364.00

Table 3.1.2 Personnel costs by salary band for the period 1 April 2018 and 31 March 2019

Salary band	Personnel expenditure (R'000)	% of total personnel cost	No. of employees	Average personnel cost per employee (R'000)
01 Lower skilled (Levels 1-2)	513 347.00	6.60	161 531.00	7 802 732.00
02 Skilled (Levels 3-5)	1 775 197.00	22.80	240 281.00	7 802 732.00
03 Highly skilled production (Levels 6-8)	1 985 676.00	25.40	391 729.00	7 802 732.00
04 Highly skilled supervision (Levels 9-12)	2 677 223.00	34.30	779 395.00	7 802 732.00
05 Senior management (Levels >= 13)	55 438.00	0.70	1 179 532.00	7 802 732.00
09 Other	127 191.00	1.60	426 815.00	7 802 732.00
10 Contract (Levels 1-2)	75.00	0.00	25 000.00	7 802 732.00
11 Contract (Levels 3-5)	25 435.00	0.30	249 363.00	7 802 732.00

Salary band	Personnel expenditure (R'000)	% of total personnel cost	No. of employees	Average personnel cost per employee (R'000)
12 Contract (Levels 6-8)	77 100.00	1.00	387 437.00	7 802 732.00
13 Contract (Levels 9-12)	462 680.00	5.90	948 115.00	7 802 732.00
14 Contract (Levels >= 13)	2 043.00	0.00	1 021 500.00	7 802 732.00
18 Contract Other	10 580.00	0.10	52 118.00	7 802 732.00
19 Periodical Remuneration	25 741.00	0.30	43 190.00	7 802 732.00
20 Abnormal Appointment	8 448.00	0.10	48 552.00	7 802 732.00
TOTAL	7 746 173.00	99.30	365 696.00	7 802 732.00

Table 3.1.3 Salaries, Overtime, Home Owners Allowance and Medical Aid by programme for the period 1 April 2018 and 31 March 2019

Programme	Salaries		Overtime		Home Owners Allowance		Medical Aid	
	Amount (R'000)	Salaries as a % of personnel costs	Amount (R'000)	Overtime as a % of personnel costs	Amount (R'000)	HOA as a % of personnel costs	Amount (R'000)	Medical aid as a % of personnel costs
ADMINISTRATION	110 762.00	78.30	193.00	0.10	3 388.00	2.40	5 737.00	4.10
CENTRAL HOSPITAL SERVICES	623 994.00	74.60	92 797.00	1.10	22 478.00	2.70	34 542.00	4.10
DISTRICT HEALTH SERVICES	4 061 298.00	79.20	172 498.00	3.40	181 015.00	3.50	244 089.00	4.80
EMERGENCY MEDICAL SERVICES	191 582.00	65.30	39 828.00	13.60	12 782.00	4.40	26 791.00	9.10
HEALTH CARE SUPPORT SERVICES	89 781.00	74.40	9 265.00	7.70	3 478.00	2.90	6 482.00	5.40
HEALTH FACILITIES MANAGEMENT	16 231.00	80.60	0.00	0.00	294.00	1.50	375.00	1.90
HEALTH SCIENCE & TRAINING	178 373.00	76.40	24 474.00	10.50	5 405.00	2.30	5 342.00	2.30
PROVINCIAL HOSPITAL SERVICES	799 781.00	77.60	69 760.00	6.80	32 257.00	3.10	43 959.00	4.30

Programme	Salaries		Overtime		Home Owners Allowance		Medical Aid	
	Amount (R'000)	Salaries as a % of personnel costs	Amount (R'000)	Overtime as a % of personnel costs	Amount (R'000)	HOA as a % of personnel costs	Amount (R'000)	Medical aid as a % of personnel costs
TOTAL	6 071 802.00	77.80	408 815.00	5.20	261 097.00	3.30	367 315.00	4.70

Table 3.1.4 Salaries, Overtime, Home Owners Allowance and Medical Aid by salary band for the period 1 April 2018 and 31 March 2019

Salary band	Salaries		Overtime		Home Owners Allowance		Medical Aid	
	Amount (R'000)	Salaries as a % of personnel costs	Amount (R'000)	Overtime as a % of personnel costs	Amount (R'000)	HOA as a % of personnel costs	Amount (R'000)	Medical aid as a % of personnel costs
01 Lower skilled (Levels 1-2)	368 270.00	71.70	11 323.00	2.20	44 277.00	8.60	43 457.00	8.50
02 Skilled (Levels 3-5)	1 297 128.00	72.70	71 009.00	4.00	104 759.00	5.90	144 364.00	8.10
03 Highly skilled production (Levels 6-8)	1 565 200.00	78.30	54 553.00	2.70	71 628.00	3.60	113 836.00	5.70
04 Highly skilled supervision (Levels 9-12)	2 163 305.00	80.00	166 889.00	6.20	38 909.00	1.40	64 825.00	2.40
05 Senior management (Levels >= 13)	48 581.00	80.80	0.00	0.00	1 292.00	2.10	617.00	1.00
09 Other	127 158.00	100.00	0.00	0.00	16.00	0.00	0.00	0.00
10 Contract (Levels 1-2)	66.00	88.00	0.00	0.00	0.00	0.00	0.00	0.00
11 Contract (Levels 3-5)	23 953.00	94.10	53.00	0.20	16.00	0.10	40.00	0.20
12 Contract (Levels 6-8)	75 523.00	97.60	1 110.00	1.40	37.00	0.00	130.00	0.20
13 Contract (Levels 9-12)	356 042.00	76.80	103 878.00	22.40	122.00	0.00	48.00	0.00
14 Contract (Levels >= 13)	1 821.00	81.40	0.00	0.00	41.00	1.80	0.00	0.00
18 Contract Other	10 564.00	94.30	0.00	0.00	0.00	0.00	0.00	0.00
19 Periodical Remuneration	25 741.00	99.60	0.00	0.00	0.00	0.00	0.00	0.00
20 Abnormal Appointment	8 448.00	95.60	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	6 071 802.00	77.80	408 815.00	5.20	261 097.00	3.30	367 315.00	4.70

3.2. Employment and Vacancies

Table 3.2.1 Employment and vacancies by programme as on 31 March 2019

Programme	Number of posts on approved establishment	Number of posts filled	Vacancy Rate	Number of employees additional to the establishment
ADMINISTRATION, Permanent	273.00	249.00	8.80	0.00
CENTRAL HOSPITAL SERVICES, Permanent	2 068.00	1 900.00	8.10	7.00
CENTRAL HOSPITAL SERVICES, Temporary	34.00	34.00	0.00	0.00
DISTRICT HEALTH SERVICES, Permanent	14 611.00	13 473.00	7.80	42.00
DISTRICT HEALTH SERVICES, Temporary	209.00	209.00	0.00	0.00

Programme	Number of posts on approved establishment	Number of posts filled	Vacancy Rate	Number of employees additional to the establishment
EMERGENCY MEDICAL SERVICES, Permanent	1 018.00	936.00	8.10	0.00
HEALTH CARE SUPPORT SERVICES, Permanent	278.00	271.00	2.50	0.00
HEALTH CARE SUPPORT SERVICES, Temporary	6.00	6.00	0.00	0.00
HEALTH FACILITIES MANAGEMENT, Permanent	70.00	37.00	47.10	1.00
HEALTH SCIENCE & TRAINING, Permanent	962.00	735.00	23.60	0.00
HEALTH SCIENCE & TRAINING, Temporary	1.00	1.00	0.00	0.00
PROVINCIAL HOSPITAL SERVICES, Permanent	2 746.00	2 499.00	9.00	3.00
PROVINCIAL HOSPITAL SERVICES, Temporary	62.00	62.00	0.00	0.00
TOTAL	22 338.00	20 412.00	8.60	53.00

Table 3.2.2 Employment and vacancies by salary band as on 31 March 2019

Salary band	Number of posts on approved establishment	Number of posts filled	Vacancy Rate	Number of employees additional to the establishment
01 Lower Skilled (Levels 1-2), Permanent	3 290.00	3 178.00	3.40	0.00
02 Skilled (Levels 3-5), Permanent	8 144.00	7 388.00	9.30	0.00
03 Highly Skilled Production (Levels 6-8), Permanent	5 627.00	5 067.00	10.00	0.00
03 Highly Skilled Production (Levels 6-8), Temporary	2.00	2.00	0.00	0.00
04 Highly Skilled Supervision (Levels 9-12), Permanent	3 895.00	3 415.00	12.30	2.00
04 Highly Skilled Supervision (Levels 9-12), Temporary	20.00	20.00	0.00	0.00
05 Senior Management (Levels >= 13), Permanent	65.00	47.00	27.70	0.00
09 Other, Permanent	211.00	211.00	0.00	0.00
09 Other, Temporary	290.00	290.00	0.00	0.00
10 Contract (Levels 1-2), Permanent	3.00	3.00	0.00	1.00
11 Contract (Levels 3-5), Permanent	102.00	102.00	0.00	0.00
12 Contract (Levels 6-8), Permanent	199.00	199.00	0.00	30.00
13 Contract (Levels 9-12), Permanent	488.00	488.00	0.00	20.00
14 Contract (Levels >= 13), Permanent	2.00	2.00	0.00	0.00
TOTAL	22 338.00	20 412.00	8.60	53.00

Table 3.2.3 Employment and vacancies by critical occupations as on 31 March 2019

Critical occupation	Number of posts on approved establishment	Number of posts filled	Vacancy Rate	Number of employees additional to the establishment
ADMINISTRATIVE RELATED, Permanent	365.00	326.00	10.70	2.00
ALL ARTISANS IN THE BUILDING METAL MACHINERY ETC Permanent	65.00	62.00	4.60	0.00
AMBULANCE AND RELATED WORKERS, Permanent	671.00	638.00	4.90	0.00
ARTISAN PROJECT AND RELATED SUPERINTENDENTS, Permanent	13.00	12.00	7.70	0.00
AUXILIARY AND RELATED WORKERS, Permanent	497.00	464.00	6.60	0.00
BASIC TRAINING, Permanent	1.00	0.00	100.00	0.00
BIOCHEMISTRY PHARMACOL. ZOOLOGY & LIFE SCIE.TECHNI, Permanent	11.00	10.00	9.10	0.00
BUILDING AND OTHER PROPERTY CARETAKERS, Permanent	276.00	263.00	4.70	0.00
BUS AND HEAVY VEHICLE DRIVERS, Permanent	20.00	17.00	15.00	0.00
CIVIL ENGINEERING TECHNICIANS, Permanent	2.00	1.00	50.00	0.00
CLEANERS IN OFFICES WORKSHOPS HOSPITALS ETC Permanent	2 757.00	2 649.00	3.90	1.00
CLIENT INFORM CLERKS(SWITCHB RECEPT INFORM CLERKS), Permanent	98.00	94.00	4.10	0.00
COMMUNICATION AND INFORMATION RELATED, Permanent	4.00	4.00	0.00	0.00
COMMUNITY DEVELOPMENT WORKERS, Permanent	54.00	53.00	1.90	0.00
COMPUTER PROGRAMMERS., Permanent	1.00	1.00	0.00	0.00
COMPUTER SYSTEM DESIGNERS AND ANALYSTS., Permanent	4.00	4.00	0.00	0.00
DENTAL PRACTITIONERS, Permanent	128.00	104.00	18.80	0.00
DENTAL PRACTITIONERS, Temporary	3.00	3.00	0.00	0.00
DENTAL SPECIALISTS, Permanent	1.00	1.00	0.00	0.00
DENTAL TECHNICIANS, Permanent	1.00	1.00	0.00	0.00
DENTAL THERAPY, Permanent	19.00	17.00	10.50	0.00
DIETICIANS AND NUTRITIONISTS, Permanent	158.00	134.00	15.20	0.00
DIETICIANS AND NUTRITIONISTS, Temporary	1.00	1.00	0.00	0.00
ELECTRICAL AND ELECTRONICS ENGINEERING TECHNICIANS, Permanent	30.00	29.00	3.30	0.00
EMERGENCY SERVICES RELATED, Permanent	335.00	286.00	14.60	0.00
ENGINEERING SCIENCES RELATED, Permanent	12.00	8.00	33.30	1.00
ENGINEERS AND RELATED PROFESSIONALS, Permanent	9.00	3.00	66.70	0.00
ENVIRONMENTAL HEALTH, Permanent	77.00	51.00	33.80	0.00
FARM HANDS AND LABOURERS, Permanent	1.00	1.00	0.00	0.00
FINANCE AND ECONOMICS RELATED, Permanent	19.00	17.00	10.50	0.00

Critical occupation	Number of posts on approved establishment	Number of posts filled	Vacancy Rate	Number of employees additional to the establishment
FINANCIAL AND RELATED PROFESSIONALS, Permanent	42.00	40.00	4.80	0.00
FINANCIAL CLERKS AND CREDIT CONTROLLERS, Permanent	223.00	208.00	6.70	0.00
FOOD SERVICES AIDS AND WAITERS, Permanent	441.00	412.00	6.60	0.00
FOOD SERVICES WORKERS, Permanent	20.00	18.00	10.00	0.00
FORESTRY LABOURERS, Permanent	1.00	1.00	0.00	0.00
HEAD OF DEPARTMENT/CHIEF EXECUTIVE OFFICER, Permanent	1.00	0.00	100.00	0.00
HEALTH SCIENCES RELATED, Permanent	24.00	18.00	25.00	0.00
HEALTH SCIENCES RELATED, Temporary	1.00	1.00	0.00	0.00
HORTICULTURISTS FORESTERS AGRICUL. & FORESTRY TECHN, Permanent	1.00	1.00	0.00	0.00
HOUSEHOLD AND LAUNDRY WORKERS, Permanent	342.00	318.00	7.00	0.00
HOUSEHOLD FOOD AND LAUNDRY SERVICES RELATED, Permanent	5.00	5.00	0.00	0.00
HOUSEKEEPERS LAUNDRY AND RELATED WORKERS, Permanent	8.00	8.00	0.00	0.00
HUMAN RESOURCES & ORGANISAT DEVELOPM & RELATE PROF, Permanent	19.00	15.00	21.10	0.00
HUMAN RESOURCES CLERKS, Permanent	138.00	127.00	8.00	0.00
HUMAN RESOURCES RELATED, Permanent	33.00	32.00	3.00	0.00
INFORMATION TECHNOLOGY RELATED, Permanent	1.00	1.00	0.00	0.00
INSPECTORS OF APPRENTICES WORKS AND VEHICLES, Permanent	1.00	1.00	0.00	0.00
INSTITUTION BASED PERSONAL CARE WORKERS, Permanent	7.00	7.00	0.00	0.00
LIBRARIANS AND RELATED PROFESSIONALS, Permanent	1.00	1.00	0.00	0.00
LIBRARY MAIL AND RELATED CLERKS, Permanent	31.00	30.00	3.20	0.00
LIGHT VEHICLE DRIVERS, Permanent	191.00	180.00	5.80	0.00
LOGISTICAL SUPPORT PERSONNEL, Permanent	24.00	23.00	4.20	0.00
MATERIAL-RECORDING AND TRANSPORT CLERKS, Permanent	84.00	83.00	1.20	0.00
MEDICAL EQUIPMENT OPERATORS, Permanent	2.00	2.00	0.00	0.00
MEDICAL PRACTITIONERS, Permanent	958.00	794.00	17.10	14.00
MEDICAL PRACTITIONERS, Temporary	288.00	288.00	0.00	0.00
MEDICAL RESEARCH AND RELATED PROFESSIONALS, Permanent	1.00	1.00	0.00	0.00
MEDICAL SPECIALISTS, Permanent	77.00	64.00	16.90	0.00
MEDICAL SPECIALISTS, Temporary	9.00	9.00	0.00	0.00

Critical occupation	Number of posts on approved establishment	Number of posts filled	Vacancy Rate	Number of employees additional to the establishment
MEDICAL TECHNICIANS/TECHNOLOGISTS, Permanent	9.00	8.00	11.10	0.00
MESSENGERS PORTERS AND DELIVERERS, Permanent	230.00	220.00	4.30	0.00
MOTOR VEHICLE DRIVERS, Permanent	25.00	20.00	20.00	0.00
NURSING ASSISTANTS, Permanent	1 565.00	1 465.00	6.40	0.00
OCCUPATIONAL THERAPY, Permanent	108.00	96.00	11.10	0.00
OPTOMETRISTS AND OPTICIANS, Permanent	6.00	6.00	0.00	0.00
OPTOMETRISTS AND OPTICIANS, Temporary	1.00	1.00	0.00	0.00
ORAL HYGIENE, Permanent	11.00	9.00	18.20	0.00
OTHER ADMINISTRAT & RELATED CLERKS AND ORGANISERS, Permanent	1 328.00	1 251.00	5.80	0.00
OTHER ADMINISTRATIVE POLICY AND RELATED OFFICERS, Permanent	131.00	125.00	4.60	0.00
OTHER INFORMATION TECHNOLOGY PERSONNEL., Permanent	5.00	5.00	0.00	0.00
OTHER OCCUPATIONS, Permanent	17.00	15.00	11.80	0.00
PHARMACEUTICAL ASSISTANTS, Permanent	180.00	176.00	2.20	0.00
PHARMACEUTICAL ASSISTANTS, Temporary	1.00	1.00	0.00	0.00
PHARMACISTS, Permanent	379.00	318.00	16.10	4.00
PHARMACISTS, Temporary	2.00	2.00	0.00	0.00
PHARMACOLOGISTS PATHOLOGISTS & RELATED PROFESSIONA, Permanent	6.00	6.00	0.00	0.00
PHYSICISTS, Permanent	1.00	1.00	0.00	0.00
PHYSICISTS, Temporary	1.00	1.00	0.00	0.00
PHYSIOTHERAPY, Permanent	124.00	106.00	14.50	0.00
PHYSIOTHERAPY, Temporary	1.00	1.00	0.00	0.00
PROFESSIONAL NURSE, Permanent	6 118.00	5 619.00	8.20	28.00
PSYCHOLOGISTS AND VOCATIONAL COUNSELLORS, Permanent	42.00	39.00	7.10	1.00
QUANTITY SURVEYORS & RELA PROF NOT CLASS ELSEWHERE, Permanent	2.00	2.00	0.00	0.00
RADIOGRAPHY, Permanent	168.00	137.00	18.50	0.00
RADIOGRAPHY, Temporary	2.00	2.00	0.00	0.00
RISK MANAGEMENT AND SECURITY SERVICES, Permanent	9.00	9.00	0.00	0.00
ROAD WORKERS, Permanent	1.00	1.00	0.00	0.00
SECRETARIES & OTHER KEYBOARD OPERATING CLERKS, Permanent	267.00	257.00	3.70	0.00
SECURITY OFFICERS, Permanent	1.00	1.00	0.00	0.00
SENIOR MANAGERS, Permanent	47.00	35.00	25.50	0.00
SOCIAL WORK AND RELATED PROFESSIONALS, Permanent	48.00	46.00	4.20	0.00
SPEECH THERAPY AND AUDIOLOGY, Permanent	98.00	68.00	30.60	2.00

Critical occupation	Number of posts on approved establishment	Number of posts filled	Vacancy Rate	Number of employees additional to the establishment
SPEECH THERAPY AND AUDIOLOGY, Temporary	2.00	2.00	0.00	0.00
STAFF NURSES AND PUPIL NURSES, Permanent	1 992.00	1 832.00	8.00	0.00
STUDENT NURSE, Permanent	794.00	579.00	27.10	0.00
SUPPLEMENTARY DIAGNOSTIC RADIOGRAPHERS, Permanent	6.00	6.00	0.00	0.00
TRADE LABOURERS, Permanent	3.00	2.00	33.30	0.00
TOTAL	22 338.00	20 412.00	8.60	53.00

3.3

Table 3.3.1 SMS post information as on 31 March 2019

SMS Level	Total number of funded SMS posts	Total number of SMS posts filled	% of SMS posts filled	Total number of SMS posts vacant	% of SMS posts vacant
Director-General/ Head of Department	1	1	100%	0	0%
Salary Level 16	1	1	100%	0	0%
Salary Level 15	2	2	100%	0	0%
Salary Level 14	9	9	100%	0	0%
Salary Level 13	43	37	86%	6	14%
Total	56	50	89.2%	6	10.8%

Table 3.3.2 SMS post information as on 30 September 2018

SMS Level	Total number of funded SMS posts	Total number of SMS posts filled	% of SMS posts filled	Total number of SMS posts vacant	% of SMS posts vacant
Director-General/ Head of Department	1	1	100%	0	0%
Salary Level 16	1	1	100%	0	0%
Salary Level 15	2	2	100%	0	0%
Salary Level 14	9	9	100%	0	0%
Salary Level 13	43	37	86%	6	14%
Total	56	50	89.2%	6	10.8%

Table 3.3.3 Advertising and filling of SMS posts for the period 1 April 2018 and 31 March 2019

SMS Level	Advertising	Filling of Posts	
	Number of vacancies per level advertised in 6 months of becoming vacant	Number of vacancies per level filled in 6 months of becoming vacant	Number of vacancies per level not filled in 6 months but filled in 12 months
Director-General/ Head of Department	0	0	0
Salary Level 16	0	0	0
Salary Level 15	0	0	0
Salary Level 14	0	0	0
Salary Level 13	6	0	4
Total	6	0	4

Table 3.3.4 Reasons for not having complied with the filling of funded vacant SMS - Advertised within 6 months and filled within 12 months after becoming vacant for the period 1 April 2018 and 31 March 2019

Reasons for vacancies not advertised within six months
None

Reasons for vacancies not filled within twelve months
Financial constraints

Table 3.3.5 Disciplinary steps taken for not complying with the prescribed timeframes for filling SMS posts within 12 months for the period 1 April 2018 and 31 March 2019

Reasons for vacancies not advertised within six months
None

Reasons for vacancies not filled within six months
None

3.4. Job Evaluation

Table 3.4.1 Job Evaluation by Salary band for the period 1 April 2018 and 31 March 2019

Salary band	Number of posts on approved establishment	Number of Jobs Evaluated	% of posts evaluated by salary bands	Posts Upgraded		Posts downgraded	
				Number	% of posts evaluated	Number	% of posts evaluated
01 Lower Skilled (Levels 1-2)	3 290.00	989.00	30.10	0.00	0.00	0.00	0.00
02 Skilled (Levels 3-5)	8 144.00	1 153.00	14.20	9.00	100.00	0.00	0.00
03 Highly Skilled Production (Levels 6-8)	5 629.00	1 518.00	27.00	14.00	100.00	0.00	0.00
04 Highly Skilled Supervision (Levels 9-12)	3 915.00	752.00	19.20	14.00	100.00	0.00	0.00
05 Senior Management Service Band A	46.00	11.00	23.90	0.00	0.00	0.00	0.00
06 Senior Management Service Band B	14.00	3.00	21.40	1.00	100.00	0.00	0.00
07 Senior Management Service Band C	2.00	0.00	0.00	0.00	0.00	0.00	0.00
08 Senior Management Service Band D	3.00	1.00	33.30	0.00	0.00	0.00	0.00
09 Other	501.00	10.00	2.00	1.00	100.00	0.00	0.00
10 Contract (Levels 1-2)	3.00	0.00	0.00	0.00	0.00	0.00	0.00
11 Contract (Levels 3-5)	102.00	0.00	0.00	0.00	0.00	0.00	0.00
12 Contract (Levels 6-8)	199.00	89.00	44.70	2.00	100.00	0.00	0.00
13 Contract (Levels 9-12)	488.00	165.00	33.80	10.00	100.00	0.00	0.00
14 Contract Band A	2.00	1.00	50.00	0.00	0.00	0.00	0.00
TOTAL	22 338.00	4 692.00	21.00	51.00	100.00	0.00	0.00

Table 3.4.2 Profile of employees whose positions were upgraded due to their posts being upgraded for the period 1 April 2018 and 31 March 2019

Gender	African	Asian	Coloured	White	Total
Female	61.00	0.00	0.00	0.00	61.00
Male	43.00	0.00	0.00	0.00	43.00
TOTAL	104.00	0.00	0.00	0.00	104.00

Employees with a disability	1.00
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Table 3.4.3 Employees with salary levels higher than those determined by job evaluation by occupation for the period 1 April 2018 and 31 March 2019

Occupation	Number of employees	Job evaluation level	Remuneration level	Reason for deviation
0.00	0.00	0.00	0.00	0.00
Total number of employees whose salaries exceeded the level determined by job evaluation				
Percentage of total employed				0%

Table 3.4.4 Profile of employees who have salary levels higher than those determined by job evaluation for the period 1 April 2018 and 31 March 2019

Gender	African	Asian	Coloured	White	Total
Female	0.00	0.00	0.00	0.00	0.00
Male	0.00	0.00	0.00	0.00	0.00
TOTAL	0.00	0.00	0.00	0.00	0.00

Employees with a disability	0.00	0.00	0.00	0.00	0.00
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3.4. If there were no cases where the salary levels were higher than those determined by job evaluation, keep the heading and replace the table with the following:

Total number of Employees whose salaries exceeded the grades determine by job evaluation	None
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3.5 Employment Changes

Table 3.5.1 Annual turnover rates by salary band for the period 1 April 2018 and 31 March 2019

Salary band	Number of employees at beginning of period-1 April 2018	Appointments and transfers into the department	Terminations and transfers out of the department	Turnover rate
01 Lower Skilled (Levels 1-2) Permanent	3 122.00	206.00	46.00	1.50
02 Skilled (Levels 3-5) Permanent	7 522.00	419.00	207.00	2.80
03 Highly Skilled Production (Levels 6-8) Permanent	4 969.00	101.00	202.00	4.10
03 Highly Skilled Production (Levels 6-8) Temporary	3.00	0.00	1.00	33.30
04 Highly Skilled Supervision (Levels 9-12) Permanent	3 344.00	122.00	199.00	6.00
04 Highly Skilled Supervision (Levels 9-12) Temporary	21.00	0.00	1.00	4.80
05 Senior Management Service Band A Permanent	35.00	0.00	2.00	5.70
06 Senior Management Service Band B Permanent	11.00	0.00	0.00	0.00
07 Senior Management Service Band C Permanent	1.00	0.00	0.00	0.00
08 Senior Management Service Band D Permanent	2.00	1.00	1.00	50.00
09 Other Permanent	226.00	0.00	20.00	8.80
09 Other Temporary	305.00	10.00	23.00	7.50
10 Contract (Levels 1-2) Permanent	3.00	5.00	0.00	0.00
11 Contract (Levels 3-5) Permanent	42.00	168.00	103.00	245.20
12 Contract (Levels 6-8) Permanent	248.00	194.00	240.00	96.80
13 Contract (Levels 9-12) Permanent	523.00	328.00	359.00	68.60
14 Contract Band A Permanent	2.00	1.00	1.00	50.00
TOTAL	20 379.00	1 555.00	1 405.00	6.90

Table 3.5.2 Annual turnover rates by critical occupation for the period 1 April 2018 and 31 March 2019

Critical occupation	Number of employees at beginning of period-April 2018	Appointments and transfers into the department	Terminations and transfers out of the department	Turnover rate
ADMINISTRATIVE RELATED Permanent	324.00	10.00	14.00	4.30
ALL ARTISANS IN THE BUILDING METAL MACHINERY ETC. Permanent	66.00	0.00	4.00	6.10
AMBULANCE AND RELATED WORKERS Permanent	632.00	25.00	9.00	1.40
ARTISAN PROJECT AND RELATED SUPERINTENDENTS Permanent	12.00	1.00	1.00	8.30
AUXILIARY AND RELATED WORKERS Permanent	476.00	20.00	20.00	4.20
BIOCHEMISTRY PHARMACOL. ZOOLOGY & LIFE SCIE. TECHNI Permanent	9.00	1.00	0.00	0.00
BUILDING AND OTHER PROPERTY CARETAKERS Permanent	275.00	7.00	10.00	3.60
BUS AND HEAVY VEHICLE DRIVERS Permanent	18.00	1.00	2.00	11.10
CIVIL ENGINEERING TECHNICIANS Permanent	1.00	0.00	0.00	0.00
CLEANERS IN OFFICES WORKSHOPS HOSPITALS ETC. Permanent	2 649.00	136.00	90.00	3.40
CLIENT INFORM CLERKS(SWITCHB RECEIPT INFORM CLERKS) Permanent	96.00	2.00	4.00	4.20

Critical occupation	Number of employees at beginning of period-April 2018	Appointments and transfers into the department	Terminations and transfers out of the department	Turnover rate
COMMUNICATION AND INFORMATION RELATED Permanent	4.00	0.00	0.00	0.00
COMMUNITY DEVELOPMENT WORKERS Permanent	54.00	0.00	1.00	1.90
COMPUTER PROGRAMMERS. Permanent	1.00	0.00	0.00	0.00
COMPUTER SYSTEM DESIGNERS AND ANALYSTS. Permanent	4.00	0.00	0.00	0.00
DENTAL PRACTITIONERS Permanent	123.00	10.00	28.00	22.80
DENTAL PRACTITIONERS Temporary	3.00	0.00	0.00	0.00
DENTAL SPECIALISTS Permanent	1.00	0.00	0.00	0.00
DENTAL TECHNICIANS Permanent	1.00	0.00	0.00	0.00
DENTAL THERAPY Permanent	12.00	5.00	0.00	0.00
DIETICIANS AND NUTRITIONISTS Permanent	144.00	27.00	37.00	25.70
DIETICIANS AND NUTRITIONISTS Temporary	1.00	0.00	0.00	0.00
ELECTRICAL AND ELECTRONICS ENGINEERING TECHNICIANS Permanent	29.00	0.00	0.00	0.00
EMERGENCY SERVICES RELATED Permanent	239.00	48.00	6.00	2.50
ENGINEERING SCIENCES RELATED Permanent	5.00	3.00	0.00	0.00

Critical occupation	Number of employees at beginning of period-April 2018	Appointments and transfers into the department	Terminations and transfers out of the department	Turnover rate
MEDICAL EQUIPMENT OPERATORS Permanent	2.00	0.00	0.00	0.00
MEDICAL PRACTITIONERS Permanent	785.00	325.00	302.00	38.50
MEDICAL PRACTITIONERS Temporary	303.00	9.00	22.00	7.30
MEDICAL RESEARCH AND RELATED PROFESSIONALS Permanent	1.00	0.00	0.00	0.00
MEDICAL SPECIALISTS Permanent	68.00	9.00	11.00	16.20
MEDICAL SPECIALISTS Temporary	10.00	1.00	2.00	20.00
MEDICAL TECHNICIANS/ TECHNOLOGISTS Permanent	7.00	1.00	0.00	0.00
MESSENGERS PORTERS AND DELIVERERS Permanent	213.00	19.00	9.00	4.20
MOTOR VEHICLE DRIVERS Permanent	20.00	2.00	3.00	15.00
NURSING ASSISTANTS Permanent	1 431.00	122.00	24.00	1.70
OCCUPATIONAL THERAPY Permanent	90.00	36.00	30.00	33.30
OPTOMETRISTS AND OPTICIANS Permanent	6.00	0.00	0.00	0.00
OPTOMETRISTS AND OPTICIANS Temporary	1.00	0.00	0.00	0.00
ORAL HYGIENE Permanent	10.00	0.00	1.00	10.00

Critical occupation	Number of employees at beginning of period-April 2018	Appointments and transfers into the department	Terminations and transfers out of the department	Turnover rate
OTHER ADMINISTRAT & RELATED CLERKS AND ORGANISERS Permanent	1 164.00	208.00	124.00	10.70
OTHER ADMINISTRATIVE POLICY AND RELATED OFFICERS Permanent	123.00	4.00	2.00	1.60
OTHER INFORMATION TECHNOLOGY PERSONNEL. Permanent	5.00	0.00	0.00	0.00
OTHER OCCUPATIONS Permanent	17.00	1.00	3.00	17.60
PHARMACEUTICAL ASSISTANTS Permanent	171.00	13.00	4.00	2.30
PHARMACEUTICAL ASSISTANTS Temporary	1.00	0.00	0.00	0.00
PHARMACISTS Permanent	319.00	96.00	91.00	28.50
PHARMACISTS Temporary	2.00	0.00	0.00	0.00
PHARMACOLOGISTS PATHOLOGISTS & RELATED PROFESSIONA Permanent	6.00	0.00	0.00	0.00
PHYSICISTS Permanent	1.00	0.00	0.00	0.00
PHYSICISTS Temporary	1.00	0.00	0.00	0.00
PHYSIOTHERAPY Permanent	96.00	51.00	42.00	43.80
PHYSIOTHERAPY Temporary	1.00	0.00	0.00	0.00
PROFESSIONAL NURSE Permanent	5 486.00	80.00	255.00	4.60

Critical occupation	Number of employees at beginning of period-April 2018	Appointments and transfers into the department	Terminations and transfers out of the department	Turnover rate
PSYCHOLOGISTS AND VOCATIONAL COUNSELLORS Permanent	38.00	4.00	2.00	5.30
RADIOGRAPHY Permanent	135.00	46.00	46.00	34.10
RADIOGRAPHY Temporary	3.00	0.00	1.00	33.30
RISK MANAGEMENT AND SECURITY SERVICES Permanent	8.00	3.00	0.00	0.00
ROAD WORKERS Permanent	1.00	0.00	0.00	0.00
SECRETARIES & OTHER KEYBOARD OPERATING CLERKS Permanent	263.00	4.00	8.00	3.00
SECURITY OFFICERS Permanent	1.00	0.00	0.00	0.00
SENIOR MANAGERS Permanent	37.00	0.00	1.00	2.70
SOCIAL WORK AND RELATED PROFESSIONALS Permanent	46.00	0.00	1.00	2.20
SPEECH THERAPY AND AUDIOLOGY Permanent	79.00	34.00	46.00	58.20
SPEECH THERAPY AND AUDIOLOGY Temporary	2.00	0.00	0.00	0.00
STAFF NURSES AND PUPIL NURSES Permanent	1 882.00	75.00	30.00	1.60
STUDENT NURSE Permanent	749.00	20.00	41.00	5.50

Critical occupation	Number of employees at beginning of period-April 2018	Appointments and transfers into the department	Terminations and transfers out of the department	Turnover rate
SUPPLEMENTARY DIAGNOSTIC RADIOGRAPHERS Permanent	6.00	1.00	1.00	16.70
TRADE LABOURERS Permanent	3.00	0.00	1.00	33.30
TOTAL	20 379.00	1 555.00	1 405.00	6.90

Table 3.5.3 Reasons why staff left the department for the period 1 April 2018 and 31 March 2019

Termination Type	Number	% of Total Resignations
01 Death, Permanent	90.00	6.40
02 Resignation, Permanent	332.00	23.60
02 Resignation, Temporary	22.00	1.60
03 Expiry of contract, Permanent	693.00	49.30
03 Expiry of contract, Temporary	1.00	0.10
06 Discharged due to ill health, Permanent	8.00	0.60
07 Dismissal-misconduct, Permanent	7.00	0.50
07 Dismissal-misconduct, Temporary	1.00	0.10
09 Retirement, Permanent	250.00	17.80
10 Other, Temporary	1.00	0.10
TOTAL	1 405.00	100.00

Table 3.5.4 Promotions by critical occupation for the period 1 April 2018 and 31 March 2019

Occupation	Employees 1 April 2018	Promotions to another salary level	Salary level promotions as a % of employees by occupation	Progressions to another notch within a salary level	Notch progression as a % of employees by occupation
ADMINISTRATIVE RELATED	324.00	6.00	1.90	247.00	76.20
ALL ARTISANS IN THE BUILDING METAL MACHINERY ETC.	66.00	0.00	0.00	55.00	83.30
AMBULANCE AND RELATED WORKERS	632.00	0.00	0.00	448.00	70.90
ARTISAN PROJECT AND RELATED SUPERINTENDENTS	12.00	0.00	0.00	11.00	91.70
AUXILIARY AND RELATED WORKERS	476.00	0.00	0.00	326.00	68.50
BIOCHEMISTRY PHARMACOL. ZOOLOGY & LIFE SCIE. TECHN	9.00	0.00	0.00	5.00	55.60
BUILDING AND OTHER PROPERTY CARETAKERS	275.00	1.00	0.40	235.00	85.50
BUS AND HEAVY VEHICLE DRIVERS	18.00	0.00	0.00	17.00	94.40
CIVIL ENGINEERING TECHNICIANS	1.00	0.00	0.00	0.00	0.00
CLEANERS IN OFFICES WORKSHOPS HOSPITALS ETC.	2 649.00	14.00	0.50	2 193.00	82.80
CLIENT INFORM CLERKS(SWITCHB RECEIPT INFORM CLERKS)	96.00	1.00	1.00	88.00	91.70
COMMUNICATION AND INFORMATION RELATED	4.00	0.00	0.00	4.00	100.00
COMMUNITY DEVELOPMENT WORKERS	54.00	0.00	0.00	45.00	83.30
COMPUTER PROGRAMMERS.	1.00	0.00	0.00	1.00	100.00
COMPUTER SYSTEM DESIGNERS AND ANALYSTS.	4.00	0.00	0.00	3.00	75.00
DENTAL PRACTITIONERS	126.00	0.00	0.00	79.00	62.70
DENTAL SPECIALISTS	1.00	0.00	0.00	0.00	0.00
DENTAL TECHNICIANS	1.00	0.00	0.00	1.00	100.00
DENTAL THERAPY	12.00	0.00	0.00	11.00	91.70
DIETICIANS AND NUTRITIONISTS	145.00	0.00	0.00	77.00	53.10
ELECTRICAL AND ELECTRONICS ENGINEERING TECHNICIANS	29.00	0.00	0.00	40.00	137.90
EMERGENCY SERVICES RELATED	239.00	1.00	0.40	197.00	82.40
ENGINEERING SCIENCES RELATED	5.00	0.00	0.00	6.00	120.00
ENGINEERS AND RELATED PROFESSIONALS	3.00	0.00	0.00	0.00	0.00
ENVIRONMENTAL HEALTH	68.00	2.00	2.90	33.00	48.50
FINANCE AND ECONOMICS RELATED	19.00	0.00	0.00	13.00	68.40

Occupation	Employees 1 April 2018	Promotions to another salary level	Salary level promotions as a % of employees by occupation	Progressions to another notch within a salary level	Notch progression as a % of employees by occupation
FINANCIAL AND RELATED PROFESSIONALS	38.00	0.00	0.00	30.00	78.90
FINANCIAL CLERKS AND CREDIT CONTROLLERS	201.00	2.00	1.00	165.00	82.10
FOOD SERVICES AIDS AND WAITERS	408.00	4.00	1.00	319.00	78.20
FOOD SERVICES WORKERS	18.00	0.00	0.00	16.00	88.90
FORESTRY LABOURERS	1.00	0.00	0.00	1.00	100.00
HEALTH SCIENCES RELATED	22.00	0.00	0.00	10.00	45.50
HORTICULTURISTS FORESTERS AGRICUL. & FORESTRY TECHN	1.00	0.00	0.00	1.00	100.00
HOUSEHOLD AND LAUNDRY WORKERS	310.00	2.00	0.60	248.00	80.00
HOUSEHOLD FOOD AND LAUNDRY SERVICES RELATED	5.00	0.00	0.00	2.00	40.00
HOUSEKEEPERS LAUNDRY AND RELATED WORKERS	8.00	0.00	0.00	8.00	100.00
HUMAN RESOURCES & ORGANISAT DEVELOPM & RELATE PROF	18.00	0.00	0.00	12.00	66.70
HUMAN RESOURCES CLERKS	127.00	2.00	1.60	96.00	75.60
HUMAN RESOURCES RELATED	32.00	1.00	3.10	25.00	78.10
INFORMATION TECHNOLOGY RELATED	1.00	0.00	0.00	1.00	100.00
INSPECTORS OF APPRENTICES WORKS AND VEHICLES	1.00	0.00	0.00	0.00	0.00
INSTITUTION BASED PERSONAL CARE WORKERS	8.00	0.00	0.00	1.00	12.50
LIBRARIANS AND RELATED PROFESSIONALS	1.00	0.00	0.00	1.00	100.00
LIBRARY MAIL AND RELATED CLERKS	30.00	0.00	0.00	28.00	93.30
LIGHT VEHICLE DRIVERS	183.00	1.00	0.50	149.00	81.40
LOGISTICAL SUPPORT PERSONNEL	23.00	1.00	4.30	17.00	73.90
MATERIAL-RECORDING AND TRANSPORT CLERKS	81.00	0.00	0.00	72.00	88.90
MEDICAL EQUIPMENT OPERATORS	2.00	0.00	0.00	0.00	0.00
MEDICAL PRACTITIONERS	1 088.00	2.00	0.20	230.00	21.10
MEDICAL RESEARCH AND RELATED PROFESSIONALS	1.00	0.00	0.00	0.00	0.00
MEDICAL SPECIALISTS	78.00	1.00	1.30	20.00	25.60
MEDICAL TECHNICIANS/ TECHNOLOGISTS	7.00	0.00	0.00	5.00	71.40
MESSENGERS PORTERS AND DELIVERERS	213.00	1.00	0.50	132.00	62.00
MOTOR VEHICLE DRIVERS	20.00	0.00	0.00	18.00	90.00
NURSING ASSISTANTS	1 431.00	0.00	0.00	395.00	27.60

Occupation	Employees 1 April 2018	Promotions to another salary level	Salary level promotions as a % of employees by occupation	Progressions to another notch within a salary level	Notch progression as a % of employees by occupation
OCCUPATIONAL THERAPY	90.00	0.00	0.00	49.00	54.40
OPTOMETRISTS AND OPTICIANS	7.00	0.00	0.00	7.00	100.00
ORAL HYGIENE	10.00	0.00	0.00	9.00	90.00
OTHER ADMINISTRAT & RELATED CLERKS AND ORGANISERS	1 164.00	23.00	2.00	1 033.00	88.70
OTHER ADMINISTRATIVE POLICY AND RELATED OFFICERS	123.00	1.00	0.80	90.00	73.20
OTHER INFORMATION TECHNOLOGY PERSONNEL.	5.00	0.00	0.00	3.00	60.00
OTHER OCCUPATIONS	17.00	0.00	0.00	13.00	76.50
PHARMACEUTICAL ASSISTANTS	172.00	0.00	0.00	77.00	44.80
PHARMACISTS	321.00	0.00	0.00	142.00	44.20
PHARMACOLOGISTS PATHOLOGISTS & RELATED PROFESSIONA	6.00	0.00	0.00	4.00	66.70
PHYSICISTS	2.00	0.00	0.00	0.00	0.00
PHYSIOTHERAPY	97.00	0.00	0.00	41.00	42.30
PROFESSIONAL NURSE	5 486.00	73.00	1.30	1 158.00	21.10
PSYCHOLOGISTS AND VOCATIONAL COUNSELLORS	38.00	0.00	0.00	25.00	65.80
RADIOGRAPHY	138.00	2.00	1.40	61.00	44.20
RISK MANAGEMENT AND SECURITY SERVICES	8.00	0.00	0.00	6.00	75.00
ROAD WORKERS	1.00	0.00	0.00	0.00	0.00
SECRETARIES & OTHER KEYBOARD OPERATING CLERKS	263.00	1.00	0.40	248.00	94.30
SECURITY OFFICERS	1.00	0.00	0.00	1.00	100.00
SENIOR MANAGERS	37.00	3.00	8.10	19.00	51.40
SOCIAL WORK AND RELATED PROFESSIONALS	46.00	0.00	0.00	23.00	50.00
SPEECH THERAPY AND AUDIOLOGY	81.00	0.00	0.00	26.00	32.10
STAFF NURSES AND PUPIL NURSES	1 882.00	1.00	0.10	467.00	24.80
STUDENT NURSE	749.00	0.00	0.00	0.00	0.00
SUPPLEMENTARY DIAGNOSTIC RADIOGRAPHERS	6.00	0.00	0.00	5.00	83.30
TRADE LABOURERS	3.00	0.00	0.00	3.00	100.00
UNKNOWN	0.00	0.00	0.00	1.00	0.00
TOTAL	20 379.00	146.00	0.70	9 648.00	47.30

Table 3.5.5 Promotions by salary band for the period 1 April 2018 and 31 March 2019

Salary Band	Employees 1 April 2018	Promotions to another salary level	Salary bands promotions as a % of employees by salary level	Progressions to another notch within a salary level	Notch progression as a % of employees by salary bands
01 Lower Skilled (Levels 1-2), Permanent	3 122.00	0.00	0.00	2 447.00	78.40
02 Skilled (Levels 3-5), Permanent	7 522.00	35.00	0.50	4 033.00	53.60
03 Highly Skilled Production (Levels 6-8), Permanent	4 969.00	62.00	1.20	1 920.00	38.60
03 Highly Skilled Production (Levels 6-8), Temporary	3.00	0.00	0.00	1.00	33.30
04 Highly Skilled Supervision (Levels 9-12), Permanent	3 344.00	44.00	1.30	1 126.00	33.70
04 Highly Skilled Supervision (Levels 9-12), Temporary	21.00	0.00	0.00	9.00	42.90
05 Senior Management (Levels >= 13), Permanent	49.00	3.00	6.10	24.00	49.00
09 Other, Permanent	226.00	0.00	0.00	0.00	0.00
09 Other, Temporary	305.00	0.00	0.00	20.00	6.60
10 Contract (Levels 1-2), Permanent	3.00	0.00	0.00	0.00	0.00
11 Contract (Levels 3-5), Permanent	42.00	0.00	0.00	0.00	0.00
12 Contract (Levels 6-8), Permanent	248.00	2.00	0.80	3.00	1.20
13 Contract (Levels 9-12), Permanent	523.00	0.00	0.00	65.00	12.40
14 Contract (Levels >= 13), Permanent	2.00	0.00	0.00	0.00	0.00
TOTAL	20 379.00	146.00	0.70	9 648.00	47.30

3.6. Employment Equity

Table 3.6.1 Total number of employees (including employees with disabilities) in each of the following occupational categories as on 31 March 2019

Occupational category	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
02 - PROFESSIONALS	798.00	9.00	40.00	847.00	138.00	802.00	13.00	31.00	846.00
03 - TECHNICIANS AND ASSOCIATE PROFESSIONALS	1 626.00	9.00	2.00	1 637.00	21.00	5 886.00	60.00	19.00	5 965.00
09 - LABOURERS AND RELATED WORKERS	1 179.00	6.00	0.00	1 185.00	3.00	2 658.00	20.00	1.00	2 679.00
08 - PLANT AND MACHINE OPERATORS AND ASSEMBLERS	207.00	0.00	0.00	207.00	1.00	9.00	0.00	0.00	9.00
UNKNOWN	1.00	0.00	1.00	2.00	0.00	5.00	0.00	0.00	5.00
05 - SERVICE SHOP AND MARKET SALES WORKERS	886.00	5.00	0.00	891.00	21.00	3 307.00	8.00	2.00	3 317.00
04 - CLERKS	667.00	2.00	1.00	670.00	6.00	1 315.00	7.00	5.00	1 327.00
01 - SENIOR OFFICIALS AND MANAGERS	16.00	0.00	0.00	16.00	0.00	17.00	1.00	1.00	19.00
07 - CRAFT AND RELATED TRADE WORKERS	64.00	0.00	0.00	64.00	2.00	9.00	0.00	0.00	9.00
TOTAL	5 444.00	31.00	44.00	5 519.00	192.00	14 008.00	109.00	59.00	14 176.00

Table 3.6.2 Total number of employees (including employees with disabilities) in each of the following occupational bands as on 31 March 2019

Occupational band	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
01 Top Management, Permanent	1.00	0.00	0.00	1.00	0.00	2.00	0.00	1.00	3.00
02 Senior Management, Permanent	23.00	0.00	0.00	23.00	0.00	18.00	1.00	0.00	19.00
03 Professionally qualified and experienced specialists and mid-management, Permanent	770.00	7.00	16.00	793.00	45.00	2 322.00	36.00	23.00	2 381.00

Occupational band	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
03 Professionally qualified and experienced specialists and mid-management, Temporary	6.00	0.00	1.00	7.00	3.00	2.00	0.00	1.00	3.00
04 Skilled technical and academically qualified workers, junior management, supervisors, foremen, Permanent	1 217.00	6.00	2.00	1 225.00	22.00	3 639.00	27.00	5.00	3 671.00
04 Skilled technical and academically qualified workers, junior management, supervisors, foremen, Temporary	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
05 Semi-skilled and discretionary decision making, Permanent	1 991.00	8.00	0.00	1 999.00	16.00	5 310.00	21.00	7.00	5 338.00
06 Unskilled and defined decision making, Permanent	983.00	5.00	0.00	988.00	1.00	2 169.00	17.00	1.00	2 187.00
07 Not Available, Permanent	60.00	1.00	1.00	62.00	0.00	149.00	0.00	0.00	149.00
07 Not Available, Temporary	194.00	0.00	9.00	203.00	48.00	37.00	0.00	0.00	37.00
09 Contract (Senior Management), Permanent	2.00	0.00	0.00	2.00	0.00	0.00	0.00	0.00	0.00
10 Contract (Professionally Qualified), Permanent	123.00	4.00	15.00	142.00	57.00	190.00	5.00	16.00	211.00

Occupational band	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
11 Contract (Skilled Technical), Permanent	39.00	0.00	0.00	39.00	0.00	100.00	2.00	5.00	107.00
12 Contract (Semi-Skilled), Permanent	34.00	0.00	0.00	34.00	0.00	68.00	0.00	0.00	68.00
13 Contract (Unskilled), Permanent	1.00	0.00	0.00	1.00	0.00	2.00	0.00	0.00	2.00
TOTAL	5 444.00	31.00	44.00	5 519.00	192.00	14 008.00	109.00	59.00	14 176.00

Table 3.6.3 Recruitment for the period 1 April 2018 and 31 March 2019

Occupational band	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
01 Top Management, Permanent	0.00	0.00	0.00	0.00	0.00	1.00	0.00	0.00	1.00
03 Professionally qualified and experienced specialists and mid-management, Permanent	62.00	0.00	3.00	65.00	2.00	50.00	1.00	0.00	51.00
04 Skilled technical and academically qualified workers, junior management, supervisors, foremen, Permanent	42.00	0.00	0.00	42.00	0.00	56.00	0.00	0.00	56.00
05 Semi-skilled and discretionary decision making, Permanent	101.00	0.00	0.00	101.00	0.00	315.00	2.00	1.00	318.00
06 Unskilled and defined decision making, Permanent	81.00	0.00	0.00	81.00	0.00	124.00	1.00	0.00	125.00
07 Not Available, Temporary	7.00	0.00	0.00	7.00	1.00	2.00	0.00	0.00	2.00
09 Contract (Senior Management), Permanent	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00
10 Contract (Professionally qualified), Permanent	72.00	2.00	12.00	86.00	34.00	135.00	4.00	14.00	153.00
11 Contract (Skilled technical), Permanent	38.00	0.00	0.00	38.00	0.00	96.00	2.00	5.00	103.00
12 Contract (Semi-skilled), Permanent	58.00	0.00	0.00	58.00	0.00	110.00	0.00	0.00	110.00
13 Contract (Unskilled), Permanent	1.00	0.00	0.00	1.00	0.00	4.00	0.00	0.00	4.00
TOTAL	463.00	2.00	15.00	480.00	37.00	893.00	10.00	20.00	923.00
Employees with disabilities	45.00	0.00	0.00	45.00	3.00	43.00	1.00	0.00	44.00

Table 3.6.4 Promotions for the period 1 April 2018 and 31 March 2019

Occupational band	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
01 Top Management, Permanent	1.00	0.00	0.00	1.00	0.00	1.00	0.00	0.00	1.00
02 Senior Management, Permanent	11.00	0.00	0.00	11.00	0.00	12.00	1.00	0.00	13.00
03 Professionally qualified and experienced specialists and mid-management, Permanent	342.00	4.00	11.00	357.00	29.00	664.00	10.00	17.00	691.00
03 Professionally qualified and experienced specialists and mid-management, Temporary	2.00	0.00	0.00	2.00	0.00	1.00	0.00	1.00	2.00
04 Skilled technical and academically qualified workers, junior management, supervisors, foremen, Permanent	598.00	3.00	1.00	602.00	16.00	1 261.00	12.00	5.00	1 278.00
04 Skilled technical and academically qualified workers, junior management, supervisors, foremen, Temporary	0.00	0.00	0.00	0.00	0.00	1.00	0.00	0.00	1.00
05 Semi-skilled and discretionary decision making, Permanent	1 418.00	4.00	0.00	1 422.00	10.00	2 591.00	16.00	6.00	2 613.00
06 Unskilled and defined decision making, Permanent	718.00	4.00	0.00	722.00	1.00	1 712.00	9.00	1.00	1 722.00
07 Not Available, Temporary	16.00	0.00	0.00	16.00	3.00	1.00	0.00	0.00	1.00
10 Contract (Professionally qualified), Permanent	11.00	1.00	5.00	17.00	13.00	19.00	0.00	2.00	21.00
11 Contract (Skilled technical), Permanent	2.00	0.00	0.00	2.00	0.00	3.00	0.00	0.00	3.00
TOTAL	3 119.00	16.00	17.00	3 152.00	72.00	6 266.00	48.00	32.00	6 346.00
Employees with disabilities	45.00	0.00	0.00	45.00	3.00	43.00	1.00	0.00	44.00

Table 3.6.5 Terminations for the period 1 April 2018 and 31 March 2019

Occupational band	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
01 Top Management, Permanent	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00
02 Senior Management, Permanent	1.00	0.00	0.00	1.00	0.00	1.00	0.00	0.00	1.00
03 Professionally qualified and experienced specialists and mid-management, Permanent	35.00	0.00	3.00	38.00	5.00	131.00	1.00	3.00	135.00
03 Professionally qualified and experienced specialists and mid-management, Temporary	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00
04 Skilled technical and academically qualified workers, junior management, supervisors, foremen, Permanent	56.00	0.00	0.00	56.00	2.00	122.00	2.00	0.00	124.00
04 Skilled technical and academically qualified workers, junior management, supervisors, foremen, Temporary	0.00	0.00	0.00	0.00	0.00	1.00	0.00	0.00	1.00
05 Semi-skilled and discretionary decision making, Permanent	78.00	0.00	0.00	78.00	1.00	121.00	2.00	0.00	123.00
06 Unskilled and defined decision making, Permanent	20.00	0.00	0.00	20.00	0.00	26.00	0.00	0.00	26.00
07 Not Available, Permanent	9.00	0.00	0.00	9.00	0.00	11.00	0.00	0.00	11.00
07 Not Available, Temporary	11.00	0.00	0.00	11.00	6.00	4.00	0.00	0.00	4.00
09 Contract (Senior Management), Permanent	1.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00
10 Contract (Professionally qualified), Permanent	99.00	3.00	16.00	118.00	48.00	106.00	6.00	17.00	129.00
11 Contract (Skilled technical), Permanent	54.00	1.00	0.00	55.00	3.00	122.00	6.00	5.00	133.00
12 Contract (Semi-skilled), Permanent	31.00	0.00	0.00	31.00	0.00	71.00	0.00	1.00	72.00
TOTAL	397.00	4.00	19.00	420.00	65.00	716.00	17.00	26.00	759.00
Employees with disabilities	2.00	0.00	0.00	2.00	0.00	3.00	0.00	0.00	3.00

Table 3.6.6 Disciplinary action for the period 1 April 2018 and 31 March 2019

Disciplinary action	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
FINAL WRITTEN WARNING	1.00	0.00	0.00	1.00	0.00	2.00	0.00	0.00	2.00
NO OUTCOME	0.00	0.00	0.00	0.00	0.00	3.00	0.00	0.00	3.00
SUSPENDED WITHOUT PAYMENT	0.00	0.00	0.00	0.00	0.00	2.00	0.00	0.00	2.00
TOTAL	1.00	0.00	0.00	1.00	0.00	7.00	0.00	0.00	7.00

Table 3.6.7 Skills development for the period 1 April 2018 and 31 March 2019

Occupational category	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
Legislators, senior officials and managers	87	0	0	2	271	7	2	5	374
Professionals	1282	45	35	85	4843	78	41	163	6572
Technicians and associate professionals	234	5	2	9	796	7	3	10	1066
Clerks	153	0	0	3	397	0	1	19	573
Service and sales workers	137	0	0	2	531	8	4	7	689
Skilled agriculture and fishery workers	0	0	0	0	0	0	0	0	0
Craft and related trades workers	0	0	0	0	0	0	0	0	0
Plant and machine operators and assemblers	0	0	0	0	0	0	0	0	0
Elementary occupations	212	3	0	0	273	6	1	0	495
Total	2105	53	37	101	7111	106	52	204	9769
Employees with disabilities	0	0	0	0	0	0	0	0	0

3.7. Signing of Performance Agreements by SMS Members

Table 3.7.1 Signing of Performance Agreements by SMS members as on 31 May 2019

SMS Level	Total number of funded SMS posts	Total number of SMS members	Total number of signed performance agreements	Signed performance agreements as % of total number of SMS members
Director-General/ Head of Department	1	1	1	100%
Salary Level 16	1	1	1	100%
Salary Level 15	2	2	2	100%
Salary Level 14	9	9	8	88%
Salary Level 13	43	37	31	83%
Total	56	50	42	92,75%

Table 3.7.2 Reasons for not having concluded Performance agreements for all SMS members as on 31 March 2019

Reasons
None

Table 3.7.3 Disciplinary steps taken against SMS members for not having concluded Performance agreements as on 31 March 2019

Reasons
No Disciplinary steps taken

3.8. Performance Rewards

Table 3.8.1 Performance Rewards by race, gender and disability for the period 1 April 2018 and 31 March 2019

Race and Gender	Beneficiary Profile			Cost	
	Number of beneficiaries	Number of employees	% of total within group	Cost (R'000)	Average cost per employee
African, Female	5 298.00	13 941.00	38.00	80 720.00	15 236.00
African, Male	2 020.00	5 392.00	37.50	28 673.71	14 195.00
Asian, Female	16.00	59.00	27.10	519.86	32 491.00
Asian, Male	6.00	44.00	13.60	287.62	47 937.00
Coloured, Female	45.00	107.00	42.10	972.85	21 619.00
Coloured, Male	6.00	31.00	19.40	87.39	14 565.00
Total Blacks, Female	5 359.00	14 107.00	38.00	82 212.70	15 341.00
Total Blacks, Male	2 032.00	5 467.00	37.20	29 048.72	14 296.00
White, Female	194.00	522.00	37.20	4 707.19	24 264.00
White, Male	39.00	188.00	20.70	1 813.16	46 491.00
Employees with a disability	56.00	128.00	43.80	803.02	14 340.00
TOTAL	7 680.00	20 412.00	37.60	118 584.80	15 441.00

Table 3.8.2 Performance Rewards by salary band for personnel below Senior Management Service for the period 1 April 2018 and 31 March 2019

Salary band	Beneficiary Profile			Cost	
	Number of beneficiaries	Number of employees	% of total within salary bands	Total Cost (R'000)	Average cost per employee
01 Lower Skilled (Levels 1-2)	1 606.00	3 178.00	50.50	10 741.82	6 689.00
02 Skilled (Levels 3-5)	2 839.00	7 388.00	38.40	28 193.07	9 931.00
03 Highly Skilled Production (Levels 6-8)	1 780.00	5 069.00	35.10	30 691.45	17 242.00
04 Highly Skilled Supervision (Levels 9-12)	1 420.00	3 435.00	41.30	47 189.74	33 232.00
09 Other	0.00	501.00	0.00	0.00	0.00
10 Contract (Levels 1-2)	0.00	3.00	0.00	0.00	0.00
11 Contract (Levels 3-5)	3.00	102.00	2.90	26.60	8 867.00
12 Contract (Levels 6-8)	3.00	199.00	1.50	58.38	19 460.00
13 Contract (Levels 9-12)	29.00	488.00	5.90	1 683.74	58 060.00
TOTAL	7 680.00	20 363.00	37.70	118 584.80	15 441.00

Table 3.8.3 Performance Rewards by critical occupation for the period 1 April 2018 and 31 March 2019

Critical occupation	Beneficiary Profile			Cost	
	Number of beneficiaries	Number of employees	% of total within occupation	Total Cost (R'000)	Average cost per employee
ADMINISTRATIVE RELATED	179.00	326.00	54.90	4 383.01	24 486.00
ALL ARTISANS IN THE BUILDING METAL MACHINERY ETC.	40.00	62.00	64.50	589.08	14 727.00
AMBULANCE AND RELATED WORKERS	167.00	638.00	26.20	1 967.32	11 780.00
ARTISAN PROJECT AND RELATED SUPERINTENDENTS	7.00	12.00	58.30	84.17	12 024.00
AUXILIARY AND RELATED WORKERS	280.00	464.00	60.30	3 181.72	11 363.00
BIOCHEMISTRY PHARMACOL. ZOOLOGY & LIFE SCIE. TECHNI	6.00	10.00	60.00	231.94	38 657.00
BUILDING AND OTHER PROPERTY CARETAKERS	124.00	263.00	47.10	857.85	6 918.00
BUS AND HEAVY VEHICLE DRIVERS	12.00	17.00	70.60	117.28	9 773.00
CIVIL ENGINEERING TECHNICIANS	0.00	1.00	0.00	0.00	0.00
CLEANERS IN OFFICES WORKSHOPS HOSPITALS ETC.	1 387.00	2 649.00	52.40	9 662.81	6 967.00
CLIENT INFORM CLERKS(SWITCHB RECEIPT INFORM CLERKS)	57.00	94.00	60.60	604.91	10 612.00
COMMUNICATION AND INFORMATION RELATED	3.00	4.00	75.00	48.79	16 262.00
COMMUNITY DEVELOPMENT WORKERS	16.00	53.00	30.20	252.61	15 788.00
COMPUTER PROGRAMMERS.	0.00	1.00	0.00	0.00	0.00
COMPUTER SYSTEM DESIGNERS AND ANALYSTS.	2.00	4.00	50.00	50.81	25 406.00
DENTAL PRACTITIONERS	19.00	107.00	17.80	1 107.86	58 309.00
DENTAL SPECIALISTS	0.00	1.00	0.00	0.00	0.00
DENTAL TECHNICIANS	1.00	1.00	100.00	21.20	21 202.00
DENTAL THERAPY	6.00	17.00	35.30	178.71	29 786.00
DIETICIANS AND NUTRITIONISTS	47.00	135.00	34.80	1 124.54	23 926.00
ELECTRICAL AND ELECTRONICS ENGINEERING TECHNICIANS	10.00	29.00	34.50	200.63	20 063.00
EMERGENCY SERVICES RELATED	83.00	286.00	29.00	911.03	10 976.00
ENGINEERING SCIENCES RELATED	2.00	8.00	25.00	33.11	16 553.00
ENGINEERS AND RELATED PROFESSIONALS	0.00	3.00	0.00	0.00	0.00

Critical occupation	Beneficiary Profile			Cost	
	Number of beneficiaries	Number of employees	% of total within occupation	Total Cost (R'000)	Average cost per employee
ENVIRONMENTAL HEALTH	20.00	51.00	39.20	484.42	24 221.00
FARM HANDS AND LABOURERS	0.00	1.00	0.00	0.00	0.00
FINANCE AND ECONOMICS RELATED	5.00	17.00	29.40	105.08	21 016.00
FINANCIAL AND RELATED PROFESSIONALS	27.00	40.00	67.50	507.82	18 808.00
FINANCIAL CLERKS AND CREDIT CONTROLLERS	135.00	208.00	64.90	2 008.64	14 879.00
FOOD SERVICES AIDS AND WAITERS	220.00	412.00	53.40	1 692.44	7 693.00
FOOD SERVICES WORKERS	12.00	18.00	66.70	172.29	14 357.00
FORESTRY LABOURERS	1.00	1.00	100.00	7.78	7 781.00
HEALTH SCIENCES RELATED	5.00	19.00	26.30	83.13	16 626.00
HORTICULTURISTS FORESTERS AGRICUL. & FORESTRY TECHN	1.00	1.00	100.00	14.05	14 050.00
HOUSEHOLD AND LAUNDRY WORKERS	197.00	318.00	61.90	1 521.80	7 725.00
HOUSEHOLD FOOD AND LAUNDRY SERVICES RELATED	1.00	5.00	20.00	16.10	16 101.00
HOUSEKEEPERS LAUNDRY AND RELATED WORKERS	6.00	8.00	75.00	60.04	10 007.00
HUMAN RESOURCES & ORGANISAT DEVELOPM & RELATE PROF	15.00	15.00	100.00	375.38	25 026.00
HUMAN RESOURCES CLERKS	99.00	127.00	78.00	1 602.51	16 187.00
HUMAN RESOURCES RELATED	23.00	32.00	71.90	533.48	23 195.00
INFORMATION TECHNOLOGY RELATED	1.00	1.00	100.00	24.13	24 125.00
INSPECTORS OF APPRENTICES WORKS AND VEHICLES	0.00	1.00	0.00	0.00	0.00
INSTITUTION BASED PERSONAL CARE WORKERS	6.00	7.00	85.70	39.44	6 573.00
LIBRARIANS AND RELATED PROFESSIONALS	1.00	1.00	100.00	15.86	15 863.00
LIBRARY MAIL AND RELATED CLERKS	18.00	30.00	60.00	230.76	12 820.00
LIGHT VEHICLE DRIVERS	99.00	180.00	55.00	986.90	9 969.00
LOGISTICAL SUPPORT PERSONNEL	15.00	23.00	65.20	286.75	19 117.00
MATERIAL-RECORDING AND TRANSPORT CLERKS	45.00	83.00	54.20	522.84	11 619.00
MEDICAL EQUIPMENT OPERATORS	0.00	2.00	0.00	0.00	0.00

Critical occupation	Beneficiary Profile			Cost	
	Number of beneficiaries	Number of employees	% of total within occupation	Total Cost (R'000)	Average cost per employee
MEDICAL PRACTITIONERS	60.00	1 082.00	5.50	3 477.08	57 951.00
MEDICAL RESEARCH AND RELATED PROFESSIONALS	0.00	1.00	0.00	0.00	0.00
MEDICAL SPECIALISTS	11.00	73.00	15.10	1 078.77	98 070.00
MEDICAL TECHNICIANS/ TECHNOLOGISTS	5.00	8.00	62.50	117.85	23 569.00
MESSENGERS PORTERS AND DELIVERERS	131.00	220.00	59.50	1 034.89	7 900.00
MOTOR VEHICLE DRIVERS	12.00	20.00	60.00	123.80	10 317.00
NURSING ASSISTANTS	574.00	1 465.00	39.20	5 087.01	8 862.00
OCCUPATIONAL THERAPY	36.00	96.00	37.50	861.45	23 929.00
OPTOMETRISTS AND OPTICIANS	6.00	7.00	85.70	146.39	24 398.00
ORAL HYGIENE	4.00	9.00	44.40	100.26	25 066.00
OTHER ADMINISTRAT & RELATED CLERKS AND ORGANISERS	604.00	1 251.00	48.30	7 524.75	12 458.00
OTHER ADMINISTRATIVE POLICY AND RELATED OFFICERS	75.00	125.00	60.00	1 435.45	19 139.00
OTHER INFORMATION TECHNOLOGY PERSONNEL.	4.00	5.00	80.00	109.69	27 423.00
OTHER OCCUPATIONS	8.00	15.00	53.30	94.13	11 766.00
PHARMACEUTICAL ASSISTANTS	78.00	177.00	44.10	1 083.84	13 895.00
PHARMACISTS	59.00	320.00	18.40	2 585.14	43 816.00
PHARMACOLOGISTS PATHOLOGISTS & RELATED PROFESSIONA	2.00	6.00	33.30	22.35	11 177.00
PHYSICISTS	0.00	2.00	0.00	0.00	0.00
PHYSIOTHERAPY	31.00	107.00	29.00	692.24	22 330.00
PROFESSIONAL NURSE	1 917.00	5 619.00	34.10	47 279.31	24 663.00
PSYCHOLOGISTS AND VOCATIONAL COUNSELLORS	10.00	39.00	25.60	487.95	48 795.00
QUANTITY SURVEYORS & RELA PROF NOT CLASS ELSEWHERE	0.00	2.00	0.00	0.00	0.00
RADIOGRAPHY	45.00	139.00	32.40	1 040.84	23 130.00
RISK MANAGEMENT AND SECURITY SERVICES	2.00	9.00	22.20	22.21	11 107.00

Critical occupation	Beneficiary Profile			Cost	
	Number of beneficiaries	Number of employees	% of total within occupation	Total Cost (R'000)	Average cost per employee
ROAD WORKERS	1.00	1.00	100.00	7.44	7 440.00
SECRETARIES & OTHER KEYBOARD OPERATING CLERKS	126.00	257.00	49.00	1 505.36	11 947.00
SECURITY OFFICERS	1.00	1.00	100.00	11.36	11 357.00
SENIOR MANAGERS	0.00	35.00	0.00	0.00	0.00
SOCIAL WORK AND RELATED PROFESSIONALS	27.00	46.00	58.70	594.45	22 017.00
SPEECH THERAPY AND AUDIOLOGY	19.00	70.00	27.10	427.64	22 508.00
STAFF NURSES AND PUPIL NURSES	426.00	1 832.00	23.30	4 658.99	10 937.00
STUDENT NURSE	0.00	579.00	0.00	0.00	0.00
SUPPLEMENTARY DIAGNOSTIC RADIOGRAPHERS	3.00	6.00	50.00	48.19	16 062.00
TRADE LABOURERS	3.00	2.00	150.00	24.93	8 309.00
TOTAL	7 680.00	20 412.00	37.60	118 584.80	15 441.00

Table 3.8.4 Performance related rewards (cash bonus), by salary band for Senior Management Service for the period 1 April 2018 and 31 March 2019

Salary band	Beneficiary Profile			Cost		Total cost as a % of the total personnel expenditure
	Number of beneficiaries	Number of employees	% of total within salary bands	Total Cost (R'000)	Average cost per employee	
Band A	0.00	36.00	0.0	0.00	0.00	0.00
Band B	0.00	9.00	0.00	0.00	0.00	0.00
Band C	0.00	2.00	0.00	0.00	0.00	0.00
Band D	0.00	2.00	0.00	0.00	0.00	0.00
TOTAL	0.00	49.00	0.00	0.00	0.00	0.00

3.9. Foreign Workers

Table 3.9.1 Foreign workers by salary band for the period 1 April 2018 and 31 March 2019

Salary band	01 April 2018		31 March 2019		Change	
	Number	% of total	Number	% of total	Number	% Change
Highly skilled production (Levels 6-8)	16.00	5.50	12.00	4.40	- 4.00	17.40
Highly skilled supervision (Levels 9-12)	259.00	88.40	240.00	88.90	- 19.00	82.60
Lower skilled (Levels 1-2)	1.00	0.30	1.00	0.40	0.00	0.00
Other	12.00	4.10	13.00	4.80	1.00	- 4.30
Senior management (Levels 13-16)	1.00	0.30	1.00	0.40	0.00	0.00
Skilled (Levels 3-5)	4.00	1.40	3.00	1.10	- 1.00	4.30
TOTAL	293.00	100.00	270.00	100.00	- 23.00	100.00

Table 3.9.2 Foreign workers by major occupation for the period 1 April 2018 and 31 March 2019

Major occupation	01 April 2018		31 March 2019		Change	
	Number	% of total	Number	% of total	Number	% Change
Administrative office workers	0.00	0.00	1.00	0.40	1.00	- 4.30
Elementary occupations	1.00	0.30	1.00	0.40	0.00	0.00
Professionals and managers	284.00	96.90	261.00	96.70	- 23.00	100.00
Social natural technical and medical sciences+sup	4.00	1.40	3.00	1.10	- 1.00	4.30
Technicians and associated professionals	4.00	1.40	4.00	1.50	0.00	0.00
TOTAL	293.00	100.00	270.00	100.00	- 23.00	100.00

3.10. Leave utilisation

Table 3.10.1 Sick leave for the period 1 January 2018 to 31 December 2018

Salary band	Total days	% Days with Medical certification	Number of Employees using sick leave	% of total employees using sick leave	Average days per employee	Estimated Cost (R'000)
Contract (Levels 3-5)	153.00	85.60	40.00	0.30	4.00	123.00
Contract (Levels 6-8)	940.00	75.30	186.00	1.50	5.00	1 048.00
Contract (Levels 9-12)	1 277.00	72.20	277.00	2.30	5.00	3 013.00
Contract Other	164.00	86.00	55.00	0.50	3.00	34.00
Highly skilled production (Levels 6-8)	22 104.00	93.20	3 314.00	27.50	7.00	29 080.00
Highly skilled supervision (Levels 9-12)	14 870.00	91.30	2 124.00	17.60	7.00	38 059.00
Lower skilled (Levels 1-2)	10 222.00	94.80	1 657.00	13.80	6.00	5 295.00
Other	16.00	100.00	1.00	0.00	16.00	11.00
Senior management (Levels 13-16)	145.00	86.20	26.00	0.20	6.00	570.00
Skilled (Levels 3-5)	29 040.00	95.00	4 360.00	36.20	7.00	22 854.00
TOTAL	78 931.00	93.10	12 040.00	100.00	7.00	100 088.00

Table 3.10.2 Disability leave (temporary and permanent) for the period 1 January 2018 to 31 December 2018

Salary band	Total days	% Days with Medical certification	Number of Employees using disability leave	% of total employees using disability leave	Average days per employee	Estimated Cost (R'000)
Contract (Levels 3-5)	4.00	100.00	1.00	0.20	4.00	3.00
Contract (Levels 6-8)	25.00	100.00	1.00	0.20	25.00	29.00
Contract (Levels 9-12)	21.00	100.00	4.00	0.90	5.00	46.00
Highly skilled production (Levels 6-8)	2 623.00	100.00	119.00	26.10	22.00	3 442.00
Highly skilled supervision (Levels 9-12)	2 265.00	100.00	101.00	22.10	22.00	5 507.00
Lower skilled (Levels 1-2)	1 713.00	99.90	76.00	16.70	23.00	904.00
Skilled (Levels 3-5)	4 372.00	99.90	154.00	33.80	28.00	3 383.00
TOTAL	11 023.00	100.00	456.00	100.00	24.00	13 314.00

Table 3.10.3 Annual Leave for the period 1 January 2018 to 31 December 2018

Salary band	Total days taken	Number of Employees using annual leave	Average per employee
Contract (Levels 13-16)	16.00	16.00	1.00
Contract (Levels 3-5)	934.00	11.00	83.00
Contract (Levels 6-8)	4 506.00	18.00	249.00
Contract (Levels 9-12)	8 985.92	16.00	566.00
Contract Other	1 165.00	14.00	84.00
Highly skilled production (Levels 6-8)	115 970.70	23.00	5 077.00
Highly skilled supervision (Levels 9-12)	83 804.75	24.00	3 427.00
Lower skilled (Levels 1-2)	66 070.35	22.00	3 022.00
Other	24.00	24.00	1.00
Senior management (Levels 13-16)	1 118.00	23.00	48.00
Skilled (Levels 3-5)	164 939.94	22.00	7 349.00
TOTAL	447 534.66	22.00	19 907.00

Table 3.10.4 Capped leave for the period 1 January 2018 to 31 December 2018

Salary band	Total days of capped leave taken	Number of Employees using capped leave	Average number of days taken per employee	Average capped leave per employee as on 31 March 2019
Contract (Levels 13-16)	0.00	0.00	0.00	0.00
Contract (Levels 3-5)	0.00	0.00	0.00	0.00
Contract (Levels 6-8)	0.00	0.00	0.00	0.00
Contract (Levels 9-12)	0.00	0.00	33.00	0.00
Contract Other	0.00	0.00	0.00	0.00
Highly skilled production (Levels 6-8)	160.36	4.00	43.00	41.00
Highly skilled supervision (Levels 9-12)	358.00	5.00	57.00	69.00
Lower skilled (Levels 1-2)	1.00	1.00	18.00	1.00
Other	0.00	0.00	1.00	0.00
Senior management (Levels 13-16)	0.00	0.00	65.00	0.00
Skilled (Levels 3-5)	117.00	3.00	38.00	34.00
TOTAL	636.36	4.00	47.00	145.00

Table 3.10.5 Leave payouts for the period 1 April 2018 and 31 March 2019

Reason	Total amount (R'000)	Number of employees	Average per employee (R'000)
ANNUAL - DISCOUNTING WITH RESIGNATION (WORK DAYS)	5 023.00	257.00	19 545.00
ANNUAL - DISCOUNTING: UNUSED VAC CREDITS (SUSPENSION)	10.00	1.00	10 000.00
ANNUAL - DISCOUNTING: UNUSED VACATION CREDITS (WORK DAYS)	71.00	3.00	23 667.00
ANNUAL - GRATUITY: DEATH/RETIREMENT/ MEDICAL RETIREMENT(WORK	7 641.00	292.00	26 168.00
CAPPED - GRATUITY: DEATH/RETIREMENT/ MEDICAL RETIREMENT(WORK	18 331.00	205.00	89 420.00
TOTAL	31 075.00		

3.11. HIV/AIDS & Health Promotion Programmes

Table 3.11.1 Steps taken to reduce the risk of occupational exposure

Units/categories of employees identified to be at high risk of contracting HIV & related diseases (if any)	Key steps taken to reduce the risk
All healthcare workers are at risk of contracting HIV and Hepatitis through contaminated needles and exposure to body fluids	Post Exposure Prophylaxis (PEP) in all health establishments and a policy on management of occupational exposures and PEP is available to all health care workers Hepatitis immunisation programme is in place in health establishments
All healthcare workers are at risk of contracting TB in the workplace	HCWs are provided with personal protective equipment and clothing. N95 fit test is being carried to health care workers by suppliers. Medical surveillance and biological monitoring is carried out to HCWs. Health risk assessments are carried out and Occupational Hygienist and Epidemiologists from National Institute for Occupational Health jointly with Provincial OHS Team conducted a workplace TB Infection Prevention and Control risk assessment which included air quality monitoring to measure the effectiveness and efficiency of IPC measures that are in place

Table 3.11.2 Details of Health Promotion and HIV/AIDS Programmes (tick the applicable boxes and provide the required information)

Question	Yes	No	Details, if yes
1. Has the department designated a member of the SMS to implement the provisions contained in Part VI E of Chapter 1 of the Public Service Regulations, 2001? If so, provide her/his name and position.	Yes		Mr. James Khalishwayo
2. Does the department have a dedicated unit or has it designated specific staff members to promote the health and well-being of your employees? If so, indicate the number of employees who are involved in this task and the annual budget that is available for this purpose.	Yes		The Department has Employee Health and Wellness program which has (2 Deputy Director Employee Health Wellness Coordinator and Occupational Health. The Department has 33 functional Employee Health and Wellness offices (Occupational Health Clinics including three practitioners R 1,371.000 (R 959.000 Compensation of employees and R 410,000 Goods and Services)
3. Has the department introduced an Employee Assistance or Health Promotion Programme for your employees? If so, indicate the key elements/services of this Programme.	Yes		<ol style="list-style-type: none"> 1. Develop, Review interpret and ensure correct implementation of EH&WP strategies and policies. 2. Manage the EH&WP four PILLIR and coordinate activities related to the PILLIRS. (HIV/AID) 3. S and TB Management in the workplace, Health and productivity Management, Occupational Health and Safety in the workplace and Safety, Health, Environment and quality) 4. Health screenings and health awareness as per health calendar.
4. Has the department established (a) committee(s) as contemplated in Part VI E.5 (e) of Chapter 1 of the Public Service Regulations, 2001? If so, please provide the names of the members of the committee and the stakeholder(s) that they represent.	Yes		The Department has the Employee Health and Wellness Programme committees in all the Hospital.
5. Has the department reviewed its employment policies and practices to ensure that these do not unfairly discriminate against employees on the basis of their HIV status? If so, list the employment policies/practices so reviewed.	Yes		The Department as not review its policies, however, a draft policies are in place for approval.
6. Has the department introduced measures to protect HIV-positive employees or those perceived to be HIV-positive from discrimination? If so, list the key elements of these measures.	Yes		The department had partnered with GEMS for health screening include the HIV testing to promote the confidentiality of the employees.
7. Does the department encourage its employees to undergo Voluntary Counselling and Testing? If so, list the results that you have you achieved.	Yes		The results showed that the majority of people who test are females with 25% and with less numbers for males
8. Has the department developed measures/ indicators to monitor & evaluate the impact of its health promotion programme? If so, list these measures/indicators.	Yes		Reports and statistics for Health screenings form GEMS

3.12. Labour Relations

Table 3.12.1 Collective agreements for the period 1 April 2018 and 31 March 2019

Subject matter	Date
	0
	0
Total number of Collective agreements	None

Table 3.12.2 Misconduct and disciplinary hearings finalised for the period 1 April 2018 and 31 March 2019

Outcomes of disciplinary hearings	Number	% of total
Correctional counselling	2	2%
Verbal warning	5	5%
Written warning	6	7%
Final written warning	36	34%
Suspended without pay	19	18%
Fine	0	0
Demotion	0	0
Dismissal	7	6%
Not guilty	17	16%
Case withdrawn	12	11%
Total	105	100%
Total number of Disciplinary hearings finalised	None	

Table 3.12.3 Types of misconduct addressed at disciplinary hearings for the period 1 April 2018 and 31 March 2019

Type of misconduct	Number	% of total
FINAL WRITTEN WARNING	3.00	37.50
NO OUTCOME	3.00	37.50
SUSPENDED WITHOUT PAYMENT	2.00	25.00
TOTAL	8.00	100.00

Table 3.12.4 Grievances logged for the period 1 April 2018 and 31 March 2019

Grievances	Number	% of Total
Number of grievances resolved	316	93%
Number of grievances not resolved	25	7%
Total number of grievances lodged	341	100%

Table 3.12.5 Disputes logged with Councils for the period 1 April 2018 and 31 March 2019

Disputes	Number	% of Total
Number of disputes upheld	27	73%
Number of disputes dismissed	10	27%
Total number of disputes lodged	37	100%

Table 3.12.6 Strike actions for the period 1 April 2018 and 31 March 2019

Total number of persons working days lost	Sabie, Mapulaneng, Rob Ferreira hospitals and Ehlanzeni District
Total costs working days lost	Sabie hospital 1 day Mapulaneng hospital 1 day Rob Ferreira hospital 1 day Ehlanzeni District 1 day
Amount recovered as a result of no work no pay (R'000)	No work no pay was not implemented

Table 3.12.7 Precautionary suspensions for the period 1 April 2018 and 31 March 2019

Number of people suspended	18
Number of people who's suspension exceeded 30 days	9
Average number of days suspended	201 days
Cost of suspension(R'000)	R8 516 236.20

3.13. Skills development

This section highlights the efforts of the department with regard to skills development.

Table 3.13.1 Training needs identified for the period 1 April 2018 and 31 March 2019

Occupational category	Gender	Number of employees as at 1 April 2018	Training needs identified at start of the reporting period			
			Learnerships	Skills Programmes & other short courses	Other forms of training	Total
Legislators, senior officials and managers	Female	300	0	285	0	285
	Male	214	0	89	0	89
Professionals	Female	1244	0	5125	0	5125
	Male	791	0	1447	0	1447
Technicians and associate professionals	Female	5216	83	816	0	899
	Male	1467	4	250	0	254
Clerks	Female	5519	0	417	0	417
	Male	2138	0	156	0	156
Service and sales workers	Female	271	0	550	0	550
	Male	201	0	139	0	139
Skilled agriculture and fishery workers	Female	0	0	0	0	0
	Male	0	0	0	0	0

Occupational category	Gender	Number of employees as at 1 April 2018	Training needs identified at start of the reporting period			
			Learnerships	Skills Programmes & other short courses	Other forms of training	Total
Craft and related trades workers	Female	0	0	0	0	0
	Male	0	0	0	0	0
Plant and machine operators and assemblers	Female	0	0	0	0	0
	Male	0	0	0	0	0
Elementary occupations	Female	2142	0	280	0	280
	Male	944	0	215	0	215
Sub Total	Female	14692	0	7473	0	7195
	Male	5755	0	2296	0	2300
Total		20447	87	9769	0	9856

Table 3.13.2 Training provided for the period 1 April 2018 and 31 March 2019

Occupational category	Gender	Number of employees as at 1 April 2018	Training provided within the reporting period			
			Learnerships	Skills Programmes & other short courses	Other forms of training	Total
Legislators, senior officials and managers	Female	300	0	285	0	285
	Male	214	0	89	0	89
Professionals	Female	1244	0	5125	0	5125
	Male	791	0	1447	0	1447
Technicians and associate professionals	Female	5216	83	816	0	899
	Male	1467	4	250	0	254
Clerks	Female	5519	0	417	0	417
	Male	2138	0	156	0	156
Service and sales workers	Female	271	0	550	0	550
	Male	201	0	139	0	139
Skilled agriculture and fishery workers	Female	0	0	0	0	0
	Male	0	0	0	0	0
Craft and related trades workers	Female	0	0	0	0	0
	Male	0	0	0	0	0
Plant and machine operators and assemblers	Female	0	0	0	0	0
	Male	0	0	0	0	0
Elementary occupations	Female	2142	0	280	0	280
	Male	944	0	215	0	215
Sub Total	Female	14692	0	7473	0	7195
	Male	5755	0	2296	0	2300
Total		20447	87	9769	0	9856

3.14. Injury on duty

Table 3.14.1 Injury on duty for the period 1 April 2018 and 31 March 2019

Nature of injury on duty	Number	% of total
Required basic medical attention only	410	58.24%
Temporary Total Disablement	292	41.48%
Permanent Disablement	0	0
Fatal	2	0.28%
Total	704	100%

3.15. Utilisation of Consultants

Table 3.15.1 Report on consultant appointments using appropriated funds for the period 1 April 2018 and 31 March 2019

Project title	Total number of consultants that worked on project	Duration (work days)	Contract value in Rand
None	None	None	None

Table 3.15.2 Analysis of consultant appointments using appropriated funds, in terms of Historically Disadvantaged Individuals (HDIs) for the period 1 April 2018 and 31 March 2019

Project title	Percentage ownership by HDI groups	Percentage management by HDI groups	Number of consultants from HDI groups that work on the project
None	None	None	None

Table 3.15.3 Report on consultant appointments using Donor funds for the period 1 April 2018 and 31 March 2019

Project title	Total Number of consultants that worked on project	Duration (Work days)	Donor and contract value in Rand
None	None	None	None

Table 3.15.4 Analysis of consultant appointments using Donor funds, in terms of Historically Disadvantaged Individuals (HDIs) for the period 1 April 2018 and 31 March 2019

Project title	Percentage ownership by HDI groups	Percentage management by HDI groups	Number of consultants from HDI groups that work on the project
None	None	None	None

3.16. Severance Packages

Table 3.16.1 Granting of employee initiated severance packages for the period 1 April 2018 and 31 March 2019

Salary band	Number of applications received	Number of applications referred to the MPSA	Number of applications supported by MPSA	Number of packages approved by department
Lower skilled (Levels 1-2)	None	None	None	None
Skilled Levels 3-5)	None	None	None	None
Highly skilled production (Levels 6-8)	None	None	None	None
Highly skilled supervision(Levels 9-12)	None	None	None	None
Senior management (Levels 13-16)	None	None	None	None
Total	None	None	None	None



PART E:

FINANCIAL INFORMATION

ANNUAL FINANCIAL STATEMENTS FOR MPUMALANGA DEPARTMENT OF HEALTH VOTE 10

For the year ended
31 March 2019



Report of the auditor-general to the Mpumalanga Provincial Legislature on vote no. 10: Department of Health

Report on the audit of the financial statements

Qualified opinion

1. I have audited the financial statements of the Department of Health set out on pages 174 to 351 which comprise the appropriation statement, the statement of financial position as at 31 March 2019, the statement of financial performance, statement of changes in net assets and cash flow statement, as well as the notes to the financial statements, including a summary of significant accounting policies.
2. In my opinion, except for the effects of the matter described in the basis for qualified opinion section of this auditor's report, the financial statements present fairly, in all material respects, the financial position of the Department of Health as at 31 March 2019, and its financial performance and cash flows for the year then ended in accordance with the Modified Cash Standard (MCS) prescribed by the National Treasury and the requirements of the Public Finance Management Act of South Africa, 1999 (Act No. 1 of 1999) (PFMA) and the Division of Revenue Act of South Africa, 2018 (Act No. 1 of 2018) (Dora).

Basis for qualified opinion

Contingent liabilities

3. The department did not recognise claims against the state in accordance with MCS chapter 14, *Provisions and contingent liabilities*, as some claims were recorded at the incorrect amounts, resulting in contingent liabilities being overstated by R759 770 356 (2017-18: R166 836 031) as disclosed in note 16.1 to the financial statements.

Context for the opinion

4. I conducted my audit in accordance with the International Standards on Auditing (ISAs). My responsibilities under those standards are further described in the auditor-general's responsibilities for the audit of the financial statements section of this auditor's report.
5. I am independent of the department in accordance with sections 290 and 291 of the International Ethics Standards Board for Accountants' *Code of ethics for professional accountants* and parts 1 and 3 of the International Ethics Standards Board for Accountants' *International code of ethics for professional accountants (including International Independence Standards)* (IESBA codes) as well as the ethical requirements that are relevant to my audit in South Africa. I have fulfilled my other ethical responsibilities in accordance with these requirements and the IESBA codes.



6. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my qualified opinion.

Emphasis of matters

7. I draw attention to the matters below. My opinion is not modified in respect of these matters.

Restatement of corresponding figures

8. As disclosed in note 31 to the financial statements, the corresponding figures for 31 March 2018 have been restated as a result of an error in the financial statements of the department for the year ended 31 March 2019.

Irregular expenditure

9. As disclosed in note 22 to the financial statements, irregular expenditure of R138 899 000 was incurred, as the required supply chain management processes had not been followed, including those relating to local content for designated commodities.

Accruals and payables not recognised

10. As disclosed in note 18.2 to the financial statements, payables of R128 181 000 exceeded the payment term of 30 days, as required by treasury regulation 8.2.3. This amount, in turn, exceeded the R63 648 000 of voted funds to be surrendered by R64 533 000 as per the statement of financial performance. The amount of R64 533 000 would therefore have constituted unauthorised expenditure had the amounts due been paid in time.

Responsibilities of the accounting officer for the financial statements

11. The accounting officer is responsible for the preparation and fair presentation of the financial statements in accordance with the MCS and the requirements of the PFMA and Dora, and for such internal control as the accounting officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.
12. In preparing the financial statements, the accounting officer is responsible for assessing the department's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless the appropriate governance structure either intends to liquidate the department or to cease operations, or has no realistic alternative but to do so.



Auditor-general's responsibilities for the audit of the financial statements

13. My objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the ISAs will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.
14. A further description of my responsibilities for the audit of the financial statements is included in the annexure to this auditor's report.

Report on the audit of the annual performance report

Introduction and scope

15. In accordance with the Public Audit Act of South Africa, 2004 (Act No. 25 of 2004) (PAA) and the general notice issued in terms thereof, I have a responsibility to report material findings on the reported performance information against predetermined objectives for selected programmes presented in the annual performance report. I performed procedures to identify findings but not to gather evidence to express assurance.
16. My procedures address the reported performance information, which must be based on the approved performance planning documents of the department. I have not evaluated the completeness and appropriateness of the performance indicators included in the planning documents. My procedures also did not extend to any disclosures or assertions relating to planned performance strategies and information in respect of future periods that may be included as part of the reported performance information. Accordingly, my findings do not extend to these matters.
17. I evaluated the usefulness and reliability of the reported performance information in accordance with the criteria developed from the performance management and reporting framework, as defined in the general notice, for the following selected programmes presented in the annual performance report of the department for the year ended 31 March 2019:

Programmes	Pages in the annual performance report
Programme 2 – district health services	33 – 45
Programme 5 – tertiary hospital services	53 – 55

18. I performed procedures to determine whether the reported performance information was properly presented and whether performance was consistent with the approved performance planning documents. I performed further procedures to determine whether the indicators and related targets were measurable and relevant, and assessed the reliability of the reported performance information to determine whether it was valid, accurate and complete.

19. The material findings in respect of the usefulness and reliability of the selected programmes are as follows:

Programme 2 – district health services

Various indicators

20. The reported achievement in the annual performance report did not agree to the supporting evidence provided for the indicators listed below. The supporting evidence provided indicated that the achievements of these indicators were as follows:

Indicator description	Reported achievement	Audited value
TB MDR treatment success rate	54,2%	67%
Mother postnatal visit within 6 days' rate	67,7%	92%
Immunisation under 1-year coverage	97,1%	86%
Diarrhoea case fatality under 5 years' rate	2,3%	2,7%
Cervical cancer screening coverage 30 years and older	89,9%	81%

21. The department did not have an adequate record keeping system to enable reliable reporting on the achievement of the indicators listed below. As a result, I was unable to obtain sufficient appropriate audit evidence in some instances, while in other cases the supporting evidence provided did not agree to the reported achievements. Based on the supporting evidence that was provided, the achievement of these indicators was different from the reported achievement in the annual performance report. I was also unable to confirm the reported achievements by alternative means. Consequently, I was unable to determine whether any further adjustments were required to the reported achievements of the indicators listed below.

Indicator description	Reported achievement	Audited value
HIV test done – total	1 080 154	1 233 124
TB client treatment success rate	84,9%	77%
Infant 1st PCR test positive around 10 weeks' rate	0,9%	0,63%
Child under 5 years' severe acute malnutrition case fatality rate	9,1%	13%
School Grade 1 - learners screened	35 040	32 448
Malaria case fatality rate	0,6%	0,3%

Medical male circumcision performed – total

22. I was unable to obtain sufficient appropriate audit evidence for the reported achievement of this indicator. This was due to limitations placed on the scope of my work, and I was unable to confirm the reported achievement by alternative means. Consequently, I was unable to determine whether any adjustments were required to the achievement of 81 049 as reported in the annual performance report.

HPV 2nd dose

23. The reported achievement of 22 907 for the target of 77 350 was not reliable, as the department did not have an adequate performance management system to maintain records to enable reliable reporting on the achievement of targets. As a result, I was unable to obtain sufficient appropriate audit evidence in some instances, while in other cases the supporting evidence provided did not agree to the reported achievement. Based on the supporting evidence that was provided, the achievement was 32 215, but I was unable to confirm the reported achievement by alternative means. Consequently, I was unable to determine whether any further adjustments were required to the reported achievement.

24. I did not raise any material findings on the usefulness and reliability of the reported performance information for this programme:

- Programme 5 – tertiary hospital services

Other matters

25. I draw attention to the matters below.

Achievement of planned targets

26. Refer to the annual performance report on pages 22 to 78 for information on the achievement of planned targets for the year and explanations provided for the under- or overachievement of a significant number of targets. This information should be considered in the context of the material findings on the usefulness and reliability of the reported performance information in paragraphs 20 to 23 of this report.

Adjustment of material misstatements

27. I identified material misstatements in the annual performance report submitted for auditing. These material misstatements were on the reported performance information of district health services. As management subsequently corrected only some of the misstatements, I raised material findings on the usefulness and reliability of the reported performance information. Those that were not corrected are reported above.

Report on the audit of compliance with legislation

Introduction and scope

28. In accordance with the PAA and the general notice issued in terms thereof, I have a responsibility to report material findings on the compliance of the department with specific matters in key legislation. I performed procedures to identify findings but not to gather evidence to express assurance.
29. The material findings on compliance with specific matters in key legislation are as follows:

Financial statements, performance report and annual report

30. The financial statements submitted for auditing were not prepared in accordance with the prescribed financial reporting framework and were not supported by full and proper records, as required by section 40(1)(a) and (b) of the PFMA. Material misstatements relating to the contingent liabilities disclosure identified by the auditors in the submitted financial statements were not adequately corrected, which resulted in the financial statements receiving a qualified opinion.

Procurement and contract management

31. Quotations were awarded to bidders based on preference points that were not allocated and calculated in accordance with the requirements of the Preferential Procurement Policy Framework Act of South Africa, 2000 (Act No. 5 of 2000) (PPPFA) and its regulations.
32. Some of the bid documentation for the procurement of commodities designated for local content and production did not stipulate the minimum threshold for local production and content, as required by preferential procurement regulation 8(2) of 2017. Similar non-compliance was also reported in the prior year.

Expenditure management

33. Effective and appropriate steps were not taken to prevent irregular expenditure amounting to R138 899 000, as disclosed in note 22 to the financial statements, as required by section 38(1)(c)(ii) of the PFMA and treasury regulation 9.1.1. Most of the irregular expenditure was the result of non-compliance with the PPPFA and its regulations.
34. Payments were not made within 30 days or an agreed period after receipt of an invoice, as required by treasury regulation 8.2.3.

Strategic planning and performance

35. Specific information systems were not implemented to enable the monitoring of progress made towards achieving targets, core objectives and service delivery, as required by public service regulation 25(1)(e)(i) and (iii).

Other information

36. The accounting officer is responsible for the other information. The other information comprises the information included in the annual report. The other information does not include the financial statements, the auditor's report and those selected programmes presented in the annual performance report that have been specifically reported in this auditor's report.
37. My opinion on the financial statements and findings on the reported performance information and compliance with legislation do not cover the other information and I do not express an audit opinion or any form of assurance conclusion thereon.
38. In connection with my audit, my responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements and the selected programmes presented in the annual performance report, or my knowledge obtained in the audit, or otherwise appears to be materially misstated.
39. If based on the work I have performed, I conclude that there is a material misstatement in this other information, I am required to report that fact.
40. I have nothing to report in this regard.

Internal control deficiencies

41. I considered internal control relevant to my audit of the financial statements, reported performance information and compliance with applicable legislation; however, my objective was not to express any form of assurance on it. The matters reported below are limited to the significant internal control deficiencies that resulted in the basis for the qualified opinion, the findings on the annual performance report and the findings on compliance with legislation included in this report.

42. The accounting officer did not exercise oversight responsibility regarding financial and performance reporting, compliance with legislation as well as related internal controls.
43. The accounting officer did not communicate policies and procedures to enable and support the understanding and execution of internal control objectives, processes and responsibilities.
44. Management did not review and monitor compliance with applicable laws and regulations.
45. Management did not prepare regular, accurate and complete financial and performance reports that were supported and evidenced by reliable information.

Auditor-General

Mbombela

1 August 2019



AUDITOR - GENERAL
SOUTH AFRICA

Auditing to build public confidence

Annexure – Auditor-general’s responsibility for the audit

1. As part of an audit in accordance with the ISAs, I exercise professional judgement and maintain professional scepticism throughout my audit of the financial statements, and the procedures performed on reported performance information for selected programmes and on the department’s compliance with respect to the selected subject matters.

Financial statements

2. In addition to my responsibility for the audit of the financial statements as described in this auditor’s report, I also:
 - identify and assess the risks of material misstatement of the financial statements whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control
 - obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the department’s internal control
 - evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the accounting officer
 - conclude on the appropriateness of the accounting officer’s use of the going concern basis of accounting in the preparation of the financial statements. I also conclude, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the department’s ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my auditor’s report to the related disclosures in the financial statements about the material uncertainty or, if such disclosures are inadequate, to modify the opinion on the financial statements. My conclusions are based on the information available to me at the date of this auditor’s report. However, future events or conditions may cause a department to cease continuing as a going concern
 - evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation

Communication with those charged with governance

3. I communicate with the accounting officer regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.
4. I also confirm to the accounting officer that I have complied with relevant ethical requirements regarding independence, and communicate all relationships and other matters that may reasonably be thought to have a bearing on my independence and, where applicable, related safeguards.



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APPROPRIATION STATEMENT for the year ended 31 March 2019

Appropriation per programme										
2018/19										2017/18
Programme	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual Expenditure	R'000
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000
1. Administration	268 369	-	21 240	289 609	289 363	246	99.9%	342 113	342 113	342 113
2. District Health Services	8 007 074	-	24 647	8 031 721	8 031 679	42	100.0%	7 182 004	7 182 004	7 182 004
3. Emergency Medical Service	364 097	-	(675)	363 422	363 412	10	100.0%	371 519	371 519	371 519
4. Provincial Hospital Service	1 362 723	-	6 050	1 368 773	1 368 773	-	100.0%	1 302 741	1 302 741	1 302 741
5. Central Hospital Service	1 228 932	-	(4 480)	1 224 452	1 222 888	1 564	99.9%	1 120 507	1 120 507	1 154 506
6. Health Sciences and Training	375 435	-	(9 596)	365 839	365 838	1	100.0%	375 526	367 797	367 797
7. Health Care Support Service	155 080	-	2 848	157 928	157 928	-	100.0%	200 304	177 021	177 021

Appropriation per programme		2018/19					2017/18		
8. Health Facilities Management	1 357 881	-	(40 034)	1 317 847	1 256 062	61 785	95.3%	1 265 339	1 185 312
Subtotal	13 119 591	-	-	13 119 591	13 055 943	63 648	99.5%	12 160 053	12 083 013
TOTAL	13 119 591	-	-	13 119 591	13 055 943	63 648	99.5%	12 160 053	12 083 013

	2018/19		2017/18	
	Final Appropriation	Actual Expenditure	Final Appropriation	Actual Expenditure
TOTAL (brought forward) Reconciliation with statement of financial performance				
ADD				
Actual amounts per statement of financial performance (total revenue)	13 119 591		12 160 053	
Actual amounts per statement of financial performance (total expenditure)		13 055 943		12 083 013

Appropriation per economic classification											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Current payments	11 576 519	-	(5 178)	11 571 341	11 577 331	(5 990)	100.1%	10 643 281	10 657 396		
Compensation of employees	7 708 843	-	(45 890)	7 662 953	7 662 953	-	100.0%	7 245 617	7 217 105		
Salaries and wages	6 732 959	(5 459)	(43 679)	6 683 821	6 706 068	(22 247)	100.3%	6 333 617	6 339 940		
Social contributions	975 884	5 459	(2 211)	979 132	956 885	22 247	97.7%	912 000	877 165		
Goods and services	3 867 676	-	40 712	3 908 388	3 913 891	(5 503)	100.1%	3 397 664	3 439 974		
Administrative fees	206 689	(18 955)	-	187 734	200 566	(12 832)	106.8%	242 558	216 139		
Advertising	6 668	(381)	-	6 287	5 776	511	91.9%	6 111	5 031		
Minor assets	17 721	(5 690)	(1 906)	10 125	4 170	5 955	41.2%	12 632	4 939		
Audit costs: External	17 194	-	-	17 194	18 859	(1 665)	109.7%	14 594	18 820		
Bursaries: Employees	-	-	-	-	-	-	-	1 211	1 057		
Catering: Departmental activities	3 540	(91)	-	3 449	3 391	58	98.3%	1 948	2 708		

Appropriation per economic classification												
	2018/19						2017/18					
Communication	36 553	(700)	-	35 853	38 914	(3 061)	108.5%	34 312	37 048			
Computer services	33 977	(402)	-	33 575	24 515	9 060	73.0%	40 615	38 649			
Consultants: Business and advisory services	5 180	(91)	-	5 089	4 413	676	86.7%	6 593	5 594			
Laboratory services	501 456	(373)	-	501 083	495 105	5 978	98.8%	440 156	411 385			
Legal services	22 182	2 719	7 304	32 205	35 631	(3 426)	110.6%	35 184	28 640			
Contractors	131 417	(18 971)	(5 394)	107 052	102 012	5 040	95.3%	109 828	113 767			
Agency and support / outsourced services	91 011	12 945	(384)	103 572	113 936	(10 364)	110.0%	83 533	73 931			
Fleet services	97 678	5 780	-	103 458	114 691	(11 233)	110.9%	91 946	107 886			
Inventory: Clothing material and supplies	1 277	(1 075)	-	202	-	202	-	1 486	1 650			
Inventory: Farming supplies	7 956	1 630	-	9 586	-	9 586	-	8 539	4 048			
Inventory: Food and food supplies	88 808	(810)	-	87 998	79 159	8 839	90.0%	77 029	87 220			
Inventory: Fuel, oil and gas	1 284	4 785	(4 074)	1 995	-	1 995	-	3 832	7 021			
Inventory: Materials and supplies	13 093	(93)	-	13 000	-	13 000	-	-	-			

Appropriation per economic classification		2018/19										2017/18						
		380 321	16 581	15 042	411 944	434 707	(22 763)	105.5%	342 097	363 126	1 551 800	(9 629)	54 750	1 596 921	1 616 131	(19 210)	101.2%	1 306 074
Inventory: Medical supplies	380 321	16 581	15 042	411 944	434 707	(22 763)	105.5%	342 097	363 126	Inventory: Medicine	1 551 800	(9 629)	1 596 921	1 616 131	(19 210)	101.2%	1 306 074	1 399 628
Inventory: Other supplies	10 264	1 366	-	11 630	-	11 630	-	11 869	12 138	Inventory: Other supplies	10 264	1 366	11 630	-	11 630	-	11 869	12 138
Consumable supplies	89 132	18 643	(13 875)	93 900	118 661	(24 761)	126.4%	83 091	92 517	Consumable supplies	89 132	18 643	93 900	118 661	(24 761)	126.4%	83 091	92 517
Consumable: Stationery, printing and office supplies	20 320	(119)	(486)	19 716	17 871	1 845	90.6%	16 923	16 257	Consumable: Stationery, printing and office supplies	20 320	(119)	19 716	17 871	1 845	90.6%	16 923	16 257
Operating leases	55 705	2 569	(1 190)	57 084	50 690	6 394	88.8%	44 415	44 526	Operating leases	55 705	2 569	57 084	50 690	6 394	88.8%	44 415	44 526
Property payments	399 353	(13 610)	(9 075)	376 668	358 588	18 080	95.2%	308 585	274 759	Property payments	399 353	(13 610)	376 668	358 588	18 080	95.2%	308 585	274 759
Transport provided: Departmental activity	494	43	-	537	399	138	74.3%	563	280	Transport provided: Departmental activity	494	43	537	399	138	74.3%	563	280
Travel and subsistence	65 470	5 669	-	71 139	66 803	4 336	93.9%	55 311	60 403	Travel and subsistence	65 470	5 669	71 139	66 803	4 336	93.9%	55 311	60 403
Training and development	6 035	(744)	-	5 291	4 713	578	89.1%	10 359	5 310	Training and development	6 035	(744)	5 291	4 713	578	89.1%	10 359	5 310
Operating payments	3 126	(869)	-	2 257	2 562	(305)	113.5%	4 944	4 147	Operating payments	3 126	(869)	2 257	2 562	(305)	113.5%	4 944	4 147
Venues and facilities	1 001	65	-	1 066	665	401	62.4%	1 199	1 290	Venues and facilities	1 001	65	1 066	665	401	62.4%	1 199	1 290
Rental and hiring	971	(192)	-	779	963	(184)	123.6%	127	60	Rental and hiring	971	(192)	779	963	(184)	123.6%	127	60

Appropriation per economic classification		2018/19							2017/18	
Interest and rent on land	-	-	-	487	(487)	-	-	-	317	-
Interest	-	-	487	(487)	-	-	-	-	317	-
Transfers and subsidies	444 796	5 178	449 974	449 900	74	100.0%	349 614	368 261		
Provinces and municipalities	1 083	-	1 083	2 326	(1 243)	214.8%	576	519		
Provinces	1 083	-	1 083	2 326	(1 243)	214.8%	558	519		
Provincial Revenue Funds	1 083	-	1 083	2 326	(1 243)	214.8%	558	519		
Municipalities	-	-	-	-	-	-	18	-		
Municipal bank accounts	-	-	-	-	-	-	18	-		
Departmental agencies and accounts	14 359	-	14 359	14 185	174	98.8%	7 031	6 925		
Departmental agencies and accounts	14 359	-	14 359	14 185	174	98.8%	7 031	6 925		
Non-profit institutions	326 364	-	326 364	308 946	17 418	94.7%	195 565	194 987		
Households	102 990	5 178	108 168	124 443	(16 275)	115.0%	146 442	165 830		

Appropriation per economic classification		2018/19								2017/18	
		11 887	-	5 178	17 065	32 258	(15 193)	189.0%	15 062	34 574	
Social benefits	11 887	-	5 178	17 065	32 258	(15 193)	189.0%	15 062	34 574		
Other transfers to households	91 103	-	-	91 103	92 185	(1 082)	101.2%	131 380	131 256		
Payments for capital assets	1 098 276	-	-	1 098 276	1 028 712	69 564	93.7%	1 167 158	1 057 356		
Buildings and other fixed structures	988 978	-	(4 034)	984 944	896 065	88 879	91.0%	969 695	936 812		
Buildings	988 978	-	(4 034)	984 944	896 065	88 879	91.0%	969 695	936 812		
Machinery and equipment	109 298	-	4 034	113 332	132 647	(19 315)	117.0%	197 463	120 544		
Transport equipment	22 248	(447)	-	21 801	21 364	437	98.0%	24 033	24 299		
Other machinery and equipment	87 050	447	4 034	91 531	111 283	(19 752)	121.6%	173 430	96 245		
Payments for financial assets	-	-	-	-	-	-	-	-	-		

Programme 1: ADMINISTRATION											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Sub programme											
1. Office of the MEC	8 628	-	-	8 628	7 899	729	91.6%	8 306	7 140		
2. Management	259 741	-	21 240	280 981	281 464	(483)	100.2%	333 807	334 973		
Total for sub programmes	268 369	-	21 240	289 609	289 363	246	99.9%	342 113	342 113		
Economic classification											
Current payments	240 147	-	8 580	248 727	247 249	1 478	99.4%	261 718	265 063		
Compensation of employees	132 020	-	1 276	133 296	133 309	(13)	100.0%	135 244	135 808		
Salaries and wages	114 879	-	1 276	116 155	115 370	785	99.3%	118 878	119 424		
Social contributions	17 141	-	-	17 141	17 939	(798)	104.7%	16 366	16 384		
Goods and services	108 127	-	7 304	115 431	113 829	1 602	98.6%	126 474	129 216		
Administrative fees	1 542	(631)	-	911	803	108	88.1%	1 759	875		
Advertising	2 591	(221)	-	2 370	2 156	214	91.0%	4 097	3 826		
Minor assets	160	(54)	-	106	104	2	98.1%	111	84		
Audit costs: External	17 194	-	-	17 194	18 859	(1 665)	109.7%	14 594	18 820		
Catering: Departmental activities	547	(109)	-	438	625	(187)	142.7%	373	399		
Communication	5 221	288	-	5 509	5 715	(206)	103.7%	3 830	4 991		
Computer services	29 661	(347)	-	29 314	24 005	5 309	81.9%	30 324	30 940		

Programme 1: ADMINISTRATION											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Consultants: Business and advisory services	4 076	483	-	4 559	4 413	146	96.8%	5 415	5 337		
Laboratory services	-	-	-	-	-	-	-	-	2		
Legal services	22 182	(4)	7 304	29 482	32 907	(3 425)	111.6%	35 184	28 640		
Contractors	3	-	-	3	2	1	66.7%	75	43		
Agency and support / outsourced services	400	(57)	-	343	156	187	45.5%	2 569	1 876		
Fleet services	1 390	5	-	1 395	2 731	(1 336)	195.8%	4 010	9 884		
Inventory: Clothing material and supplies	-	-	-	-	-	-	-	-	49		
Inventory: Food and food supplies	42	(2)	-	40	33	7	82.5%	-	-		
Inventory: Medical supplies	-	-	-	-	-	-	-	6	-		
Inventory: Other supplies	120	(20)	-	100	-	100	-	81	59		
Consumable supplies	224	16	-	240	203	37	84.6%	488	693		
Consumable: Stationery, printing and office supplies	3 378	(396)	-	2 982	2 982	-	100.0%	2 224	2 219		
Operating leases	2 824	-	-	2 824	2 427	397	85.9%	2 838	3 498		
Property payments	4 365	(200)	-	4 165	4 060	105	97.5%	5 812	4 517		
Travel and subsistence	10 372	1 840	-	12 212	10 122	2 090	82.9%	11 202	11 189		
Training and development	508	(200)	-	308	236	72	76.6%	378	239		
Operating payments	662	(144)	-	518	774	(256)	149.4%	951	826		
Venues and facilities	471	(53)	-	418	332	86	79.4%	153	210		
Rental and hiring	194	(194)	-	-	184	(184)	-	-	-		

Programme 1: ADMINISTRATION										
2018/19										
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	2017/18
Interest and rent on land	-	-	-	-	111	(111)	-	-	-	39
Interest	-	-	-	-	111	(111)	-	-	-	39
Transfers and subsidies	25 458	-	12 260	37 718	38 977	(1 259)	103.3%	68 494	69 025	
Provinces and municipalities	1 083	-	-	1 083	1 292	(209)	119.3%	456	519	
Provinces	1 083	-	-	1 083	1 292	(209)	119.3%	456	519	
Provincial Revenue Funds	1 083	-	-	1 083	1 292	(209)	119.3%	456	519	
Households	24 375	-	12 260	36 635	37 685	(1 050)	102.9%	68 038	68 506	
Social benefits	1 260	-	-	1 260	1 423	(163)	112.9%	138	724	
Other transfers to households	23 115	-	12 260	35 375	36 262	(887)	102.5%	67 900	67 782	
Payments for capital assets	2 764	-	400	3 164	3 137	27	99.1%	11 901	8 025	
Machinery and equipment	2 764	-	400	3 164	3 137	27	99.1%	11 901	8 025	
Transport equipment	1 384	-	-	1 384	1 384	-	100.0%	-	363	
Other machinery and equipment	1 380	-	400	1 780	1 753	27	98.5%	11 901	7 662	

1.1 OFFICE OF THE MEC											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Current payments	8 628	-	-	8 628	7 898	730	91.5%	8 306	7 140		
Compensation of employees	5 904	-	-	5 904	5 593	311	94.7%	5 739	5 194		
Goods and services	2 724	-	-	2 724	2 305	419	84.6%	2 567	1 946		
Transfers and subsidies	-	-	-	-	1	(1)	-	-	-		
Provinces and municipalities	-	-	-	-	1	(1)	-	-	-		

1.2 MANAGEMENT										
Economic classification	2018/19						2017/18			
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	R'000
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000
Current payments	231 519	-	8 580	240 099	239 351	748	99.7%	253 412	257 923	
Compensation of employees	126 116	-	1 276	127 392	127 716	(324)	100.3%	129 505	130 614	
Goods and services	105 403	-	7 304	112 707	111 524	1 183	99.0%	123 907	127 270	
Interest and rent on land	-	-	-	-	111	(111)	-	-	39	
Transfers and subsidies	25 458	-	12 260	37 718	38 976	(1 258)	103.3%	68 494	69 025	
Provinces and municipalities	1 083	-	-	1 083	1 291	(208)	119.2%	456	519	
Households	24 375	-	12 260	36 635	37 685	(1 050)	102.9%	68 038	68 506	
Payments for capital assets	2 764	-	400	3 164	3 137	27	99.1%	11 901	8 025	
Machinery and equipment	2 764	-	400	3 164	3 137	27	99.1%	11 901	8 025	

Programme 2: DISTRICT HEALTH SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Sub programme											
• District Management	399 704	-	(19 207)	380 497	380 496	1	100.0%	345 577	331 895		
• Community Health clinics	1 431 686	-	22 863	1 454 549	1 443 409	11 140	99.2%	1 298 031	1 302 677		
• Community Health centres	918 220	-	25 378	943 598	952 990	(9 392)	101.0%	864 206	895 515		
• Community-based Services	19 076	-	-	19 076	18 317	759	96.0%	137 781	136 745		
• HIV/Aids	1 898 883	-	-	1 898 883	1 888 810	10 073	99.5%	1 401 468	1 420 824		
• Nutrition	10 832	-	-	10 832	10 012	820	92.4%	14 209	16 838		
• District Hospitals	3 328 673	-	(4 387)	3 324 286	3 337 645	(13 359)	100.4%	3 120 732	3 077 510		
Total for sub programmes	8 007 074	-	24 647	8 031 721	8 031 679	42	100.0%	7 182 004	7 182 004		

Programme 2: DISTRICT HEALTH SERVICES											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Current payments	7 652 914	-	24 647	7 677 561	7 679 413	(1 852)	100.0%	6 954 588	6 955 798		
Compensation of employees	5 035 880	-	(23 594)	5 012 286	5 011 573	713	100.0%	4 658 279	4 616 513		
Salaries and wages	4 372 574	487	(23 104)	4 349 957	4 367 394	(17 437)	100.4%	4 052 367	4 031 856		
Social contributions	663 306	(487)	(490)	662 329	644 179	18 150	97.3%	605 912	584 657		
Goods and services	2 617 034	-	48 241	2 665 275	2 667 633	(2 358)	100.1%	2 296 309	2 339 010		
Administrative fees	186 233	(20 327)	-	165 906	178 169	(12 263)	107.4%	194 496	185 969		
Advertising	4 077	(160)	-	3 917	3 620	297	92.4%	1 910	1 205		
Minor assets	11 191	(3 778)	(1 717)	5 696	1 975	3 721	34.7%	8 409	3 430		
Catering: Departmental activities	2 739	(5)	-	2 734	2 615	119	95.6%	1 415	2 268		
Communication	21 578	164	-	21 742	24 560	(2 818)	113.0%	21 262	22 568		
Computer services	4 061	-	-	4 061	377	3 684	9.3%	10 020	6 973		

Programme 2: DISTRICT HEALTH SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Consultants: Business and advisory services	-	-	-	-	-	-	-	699	-		-
Laboratory services	412 661	(8 655)	-	404 006	398 242	5 764	98.6%	365 193	334 797		
Legal services	-	2 723	-	2 723	2 724	(1)	100.0%	-	-		
Contractors	8 540	(4 352)	-	4 188	4 553	(365)	108.7%	17 509	13 508		
Agency and support / outsourced services	40 561	11 443	-	52 004	58 558	(6 554)	112.6%	33 279	30 916		
Fleet services	40 664	4 081	-	44 745	53 683	(8 938)	120.0%	32 495	43 486		
Inventory: Clothing material and supplies	72	(70)	-	2	-	2	-	443	559		
Inventory: Farming supplies	7 929	1 638	-	9 567	-	9 567	-	8 450	3 977		
Inventory: Food and food supplies	53 298	(2 151)	-	51 147	46 519	4 628	91.0%	48 278	51 963		
Inventory: Fuel, oil and gas	613	(51)	-	562	-	562	-	217	495		
Inventory: Materials and supplies	3	(3)	-	-	-	-	-	-	-		

Programme 2: DISTRICT HEALTH SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Inventory: Medical supplies	213 513	7 802	1 717	223 032	221 275	1 757	99.2%	203 516	191 454		
Inventory: Medicine	1 425 479	1 522	48 241	1 475 242	1 487 923	(12 681)	100.9%	1 185 018	1 278 336		
Inventory: Other supplies	5 135	957	-	6 092	-	6 092	-	5 076	4 811		
Consumable supplies	26 963	5 425	-	32 388	45 414	(13 026)	140.2%	33 330	35 769		
Consumable: Stationery, printing and office supplies	10 931	717	-	11 648	10 323	1 325	88.6%	9 937	8 748		
Operating leases	23 465	1 683	-	25 148	20 008	5 140	79.6%	19 756	17 273		
Property payments	89 985	1 706	-	91 691	82 342	9 349	89.8%	71 148	76 057		
Transport provided: Departmental activity	243	(15)	-	228	184	44	80.7%	209	159		
Travel and subsistence	23 684	354	-	24 038	21 795	2 243	90.7%	17 704	19 662		
Training and development	765	(243)	-	522	490	32	93.9%	3 252	697		
Operating payments	1 725	(554)	-	1 171	1 367	(196)	116.7%	2 306	2 955		
Venues and facilities	149	148	-	297	138	159	46.5%	855	915		

Programme 2: DISTRICT HEALTH SERVICES												
2018/19											2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure			
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000	
Rental and hiring	777	2	-	779	779	-	100.0%	127	60			
Interest and rent on land	-	-	-	-	207	(207)	-	-	275			
Interest	-	-	-	-	207	(207)	-	-	275			
Transfers and subsidies	333 581	-	-	333 581	333 295	286	99.9%	208 664	219 509			
Provinces and municipalities	-	-	-	-	-	-	-	-	-			
Provinces	-	-	-	-	-	-	-	-	-			
Provincial Revenue Funds	-	-	-	-	-	-	-	-	-			
Municipalities	-	-	-	-	-	-	-	-	-			
Municipal bank accounts	-	-	-	-	-	-	-	18	-			
Departmental agencies and accounts	204	-	-	204	156	48	76.5%	101	105			
Departmental agencies	204	-	-	204	156	48	76.5%	101	105			

Programme 2: DISTRICT HEALTH SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Non-profit institutions	326 364	-	-	326 364	308 946	17 418	94.7%	195 565	194 987		
Households	7 013	-	-	7 013	24 193	(17 180)	345.0%	12 878	24 417		
Social benefits	7 013	-	-	7 013	21 187	(14 174)	302.1%	12 878	24 307		
Other transfers to households	-	-	-	-	3 006	(3 006)	-	-	110		
Payments for capital assets	20 579	-	-	20 579	18 971	1 608	92.2%	18 752	6 697		
Machinery and equipment	20 579	-	-	20 579	18 971	1 608	92.2%	18 752	6 697		
Transport equipment	8 729	(507)	-	8 222	8 942	(720)	108.8%	3 662	3 031		
Other machinery and equipment	11 850	507	-	12 357	10 029	2 328	81.2%	15 090	3 666		
Total	8 007 074	-	24 647	8 031 721	8 031 679	42	100.0%	7 182 004	7 182 004		

2.1 DISTRICT MANAGEMENT											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Current payments	391 001	-	(19 207)	371 794	369 649	2 145	99.4%	339 402	323 203		
Compensation of employees	328 179	-	(17 490)	310 689	310 654	35	100.0%	301 486	284 675		
Goods and services	62 822	-	(1 717)	61 105	58 988	2 117	96.5%	37 916	38 505		
Interest and rent on land	-	-	-	-	7	(7)	-	-	23		
Transfers and subsidies	3 818	-	-	3 818	6 071	(2 253)	159.0%	5 820	8 386		
Departmental agencies and accounts	1	-	-	1	-	1	-	1	-		
Non-profit institutions	2 124	-	-	2 124	2 124	-	100.0%	4 220	4 220		
Households	1 693	-	-	1 693	3 947	(2 254)	233.1%	1 599	4 166		
Payments for capital assets	4 885	-	-	4 885	4 776	109	97.8%	355	306		
Machinery and equipment	4 885	-	-	4 885	4 776	109	97.8%	355	306		

2.2 COMMUNITY HEALTH CLINICS											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	R'000	R'000
Current payments	1 422 443	-	22 863	1 445 306	1 432 813	12 493	99.1%	1 287 556	1 290 989		
Compensation of employees	1 068 025	-	-	1 068 025	1 049 070	18 955	98.2%	944 312	939 705		
Goods and services	354 418	-	22 863	377 281	383 727	(6 446)	101.7%	343 244	351 275		
Interest and rent on land	-	-	-	-	16	(16)	-	-	9		
Transfers and subsidies	2 572	-	-	2 572	4 590	(2 018)	178.5%	2 449	6 829		
Provinces and municipalities	-	-	-	-	-	-	-	18	-		
Households	2 572	-	-	2 572	4 590	(2 018)	178.5%	2 431	6 829		
Payments for capital assets	6 671	-	-	6 671	6 006	665	90.0%	8 026	4 859		
Machinery and equipment	6 671	-	-	6 671	6 006	665	90.0%	8 026	4 859		

2.3 COMMUNITY HEALTH CENTERS	2018/19						2017/18	
	917 622	25 378	943 000	948 789	(5 789)	100.6%	863 641	891 246
Current payments								
Compensation of employees	750 468	-	750 468	756 269	(5 801)	100.8%	707 066	706 443
Goods and services	167 154	25 378	192 532	192 511	21	100.0%	156 575	184 791
Interest and rent on land	-	-	-	9	(9)	-	-	12
Transfers and subsidies	598	-	598	4 153	(3 555)	694.5%	565	4 269
Households	598	-	598	4 153	(3 555)	694.5%	565	4 269
Payments for capital assets	-	-	-	48	(48)	-	-	-
Machinery and equipment	-	-	-	48	(48)	-	-	-

2.4 COMMUNITY-BASE SERVICES		2018/19							2017/18	
		Adjusted Appropriation R'000	Shifting of Funds R'000	Virement R'000	Final Appropriation R'000	Actual Expenditure R'000	Variance R'000	Expenditure as % of final appropriation %	Final Appropriation R'000	Actual expenditure R'000
Economic classification										
Current payments	6 060	-	-	6 060	5 301	759	87.5%	7 470	7 121	
Compensation of employees	5 477	-	-	5 477	4 720	757	86.2%	3 863	4 584	
Goods and services	583	-	-	583	581	2	99.7%	3 607	2 537	
Transfers and subsidies	13 016	-	-	13 016	13 016	-	100.0%	129 291	128 932	
Non-profit institutions	13 016	-	-	13 016	13 016	-	100.0%	129 291	128 932	
Payments for capital assets	-	-	-	-	-	-	-	1 020	692	
Machinery and equipment	-	-	-	-	-	-	-	1 020	692	

2.5 HIV/AIDS		2018/19							2017/18	
		Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000
Current payments	1 582 177	-	-	-	1 582 177	1 590 243	100.5%	1 338 202	1 358 333	
Compensation of employees	186 633	-	-	186 633	205 037	(18 404)	109.9%	218 166	177 889	
Goods and services	1 395 544	-	-	1 395 544	1 385 176	10 368	99.3%	1 120 036	1 180 267	
Interest and rent on land	-	-	-	-	30	(30)	-	-	177	
Transfers and subsidies	311 595	-	-	311 595	294 286	17 309	94.4%	62 054	62 159	
Departmental agencies and accounts	9	-	-	9	9	-	100.0%	-	-	
Non-profit institutions	311 224	-	-	311 224	293 806	17 418	94.4%	62 054	61 835	
Households	362	-	-	362	471	(109)	130.1%	-	324	
Payments for capital assets	5 111	-	-	5 111	4 281	830	83.8%	1 212	332	
Machinery and equipment	5 111	-	-	5 111	4 281	830	83.8%	1 212	332	

2.6 NUTRITION	2018/19						2017/18		
	Adjusted Appropriation R'000	Shifting of Funds R'000	Virement R'000	Final Appropriation R'000	Actual Expenditure R'000	Variance R'000	Expenditure as % of final appropriation %	Final Appropriation R'000	Actual expenditure R'000
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000
Current payments	10 832	-	-	10 832	9 965	867	92.0%	14 209	16 752
Compensation of employees	1 477	-	-	1 477	1 219	258	82.5%	1 405	4 275
Goods and services	9 355	-	-	9 355	8 746	609	93.5%	12 804	12 477
Transfers and subsidies	-	-	-	-	47	(47)	-	-	86
Households	-	-	-	-	47	(47)	-	-	86

2.7 DISTRICT HOSPITALS	2018/19						2017/18		
	Adjusted Appropriation R'000	Shifting of Funds R'000	Virement R'000	Final Appropriation R'000	Actual Expenditure R'000	Variance R'000	Expenditure as % of final appropriation %	Final Appropriation R'000	Actual expenditure R'000
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000
Current payments	3 322 779	-	(4 387)	3 318 392	3 322 653	(4 261)	100.1%	3 104 108	3 068 154
Compensation of employees	2 695 621	-	(6 104)	2 689 517	2 684 604	4 913	99.8%	2 481 981	2 498 942
Goods and services	627 158	-	1 717	628 875	637 904	(9 029)	101.4%	622 127	569 158
Interest and rent on land	-	-	-	-	145	(145)	-	-	54
Transfers and subsidies	1 982	-	-	1 982	11 132	(9 150)	561.7%	8 485	8 848
Provinces and municipalities	-	-	-	-	-	-	-	102	-
Departmental agencies and accounts	194	-	-	194	147	47	75.8%	100	105
Households	1 788	-	-	1 788	10 985	(9 197)	614.4%	8 283	8 743
Payments for capital assets	3 912	-	-	3 912	3 860	52	98.7%	8 139	508
Machinery and equipment	3 912	-	-	3 912	3 860	52	98.7%	8 139	508

Programme 3: EMERGENCY MEDICAL SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Sub programme											
Emergency Transport	356 895	-	(675)	356 220	357 395	(1 175)	100.3%	357 123	357 188		
Planned Patient Transport	7 202	-	-	7 202	6 017	1 185	83.5%	14 396	14 331		
Total for sub programmes	364 097	-	(675)	363 422	363 412	10	100.0%	371 519	371 519		
Economic classification											
Current payments	352 321	-	(675)	351 646	351 809	(163)	100.0%	350 549	350 037		
Compensation of employees	291 058	-	-	291 058	291 774	(716)	100.2%	292 079	291 567		
Salaries and wages	245 399	-	-	245 399	243 946	1 453	99.4%	253 136	248 952		
Social contributions	45 659	-	-	45 659	47 828	(2 169)	104.8%	38 943	42 615		
Goods and services	61 263	-	(675)	60 588	60 035	553	99.1%	58 470	58 470		
Administrative fees	15	(5)	-	10	6	4	60.0%	11	7		
Minor assets	1 500	(892)	(189)	419	-	419	-	-	-		
Catering: Departmental activities	-	-	-	-	-	-	-	52	24		
Communication	1 588	(521)	-	1 067	1 308	(241)	122.6%	1 468	1 496		
Fleet services	37 955	1 858	-	39 813	39 764	49	99.9%	39 446	36 498		
Inventory: Clothing material and supplies	1 000	(1 000)	-	-	-	-	-	1 035	1 026		
Inventory: Fuel, oil and gas	-	-	-	-	-	-	-	-	1		

Programme 3: EMERGENCY MEDICAL SERVICES											
	2018/19						2017/18				
	Adjusted Appropriation R'000	Shifting of Funds R'000	Virement R'000	Final Appropriation R'000	Actual Expenditure R'000	Variance R'000	Expenditure as % of final appropriation %	Final Appropriation R'000	Actual expenditure R'000		
Inventory: Medical supplies	182	(81)	-	101	94	7	93.1%	212	95		
Inventory: Other supplies	-	25	-	25	-	25	-	-	-		
Consumable supplies	20	(2)	-	18	31	(13)	172.2%	454	209		
Consumable: Stationery, printing and office supplies	1 130	3	(486)	647	697	(50)	107.7%	967	1 304		
Operating leases	17 355	573	-	17 928	17 672	256	98.6%	14 050	13 311		
Property payments	319	(20)	-	299	241	58	80.6%	328	4 269		
Travel and subsistence	199	62	-	261	222	39	85.1%	287	209		
Operating payments	-	-	-	-	-	-	-	160	21		
Transfers and subsidies	-	-	-	-	1 165	(1 165)	-	-	483		
Provinces and municipalities	-	-	-	-	1 034	(1 034)	-	-	-		
Provinces	-	-	-	-	1 034	(1 034)	-	-	-		
Provincial Revenue Funds	-	-	-	-	1 034	(1 034)	-	-	-		
Households	-	-	-	-	131	(131)	-	-	483		
Social benefits	-	-	-	-	131	(131)	-	-	483		
Payments for capital assets	11 776	-	-	11 776	10 438	1 338	88.6%	20 970	20 999		
Machinery and equipment	11 776	-	-	11 776	10 438	1 338	88.6%	20 970	20 999		
Transport equipment	11 177	-	-	11 177	10 028	1 149	89.7%	20 371	20 905		
Other machinery and equipment	599	-	-	599	410	189	68.4%	599	94		
Total	364 097	-	(675)	363 422	363 412	10	100.0%	371 519	371 519		

3.1 EMERGENCY TRANSPORT	2018/19							2017/18		
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	
Economic classification										
Current payments	352 321	-	(675)	351 646	351 809	(163)	100.0%	350 549	350 037	
Compensation of Employees	291 058	-	-	291 058	291 774	(716)	100.2%	292 079	291 567	
Goods and services	61 263	-	(675)	60 588	60 035	553	99.1%	58 470	58 470	
Transfers and subsidies	-	-	-	-	1 165	(1 165)	-	-	483	
Provinces and municipalities	-	-	-	-	1 034	(1 034)	-	-	-	
Households	-	-	-	-	131	(131)	-	-	483	
Payments for capital assets	4 574	-	-	4 574	4 421	153	96.7%	6 574	6 668	
Machinery and equipment	4 574	-	-	4 574	4 421	153	96.7%	6 574	6 668	

3.2 PLANNED PATIENT TRANSPORT	2018/19							2017/18		
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	
Economic classification										
Payments for capital assets	7 202	-	-	7 202	6 017	1 185	83.5%	14 396	14 331	
Machinery and equipment	7 202	-	-	7 202	6 017	1 185	83.5%	14 396	14 331	

Programme 4: PROVINCIAL HOSPITAL SERVICES										
2018/19							2017/18			
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000
Sub programme										
1. General (Regional) Hospitals	1 119 852	-	8 050	1 127 902	1 142 554	(14 652)	101.3%	1 066 516	1 084 521	
2. Tuberculosis Hospitals	198 817	-	(2 000)	196 817	182 362	14 455	92.7%	194 586	176 879	
3. Psychiatric Mental Hospitals	44 054	-	-	44 054	43 857	197	99.6%	41 639	41 341	
Total for sub programmes	1 362 723	-	6 050	1 368 773	1 368 773	-	100.0%	1 302 741	1 302 741	

Programme 4: PROVINCIAL HOSPITAL SERVICES											
2018/19										2017/18	
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Current payments	1 360 305	-	2 240	1 362 545	1 362 563	(18)	100.0%	1 300 556	1 295 426		
Compensation of employees	1 043 486	-	(7 997)	1 035 489	1 035 490	(1)	100.0%	1 005 567	1 003 800		
Salaries and wages	923 953	(1 182)	(7 293)	915 478	916 819	(1 341)	100.1%	895 141	893 302		
Social contributions	119 533	1 182	(704)	120 011	118 671	1 340	98.9%	110 426	110 498		
Goods and services	316 819	-	10 237	327 056	327 032	24	100.0%	294 989	291 623		
Administrative fees	9 420	1 107	-	10 527	9 686	841	92.0%	30 492	14 093		
Minor assets	540	(407)	-	133	57	76	42.9%	692	29		
Catering: Departmental activities	16	(1)	-	15	9	6	60.0%	6	7		

Programme 4: PROVINCIAL HOSPITAL SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Communication	3 598	(478)	-	3 120	2 874	246	92.1%	3 294	3 255		
Computer services	-	-	-	-	-	-	-	40	39		
Laboratory services	42 963	(2 823)	-	40 140	39 463	677	98.3%	29 690	31 003		
Contractors	44 361	(63)	-	44 298	44 059	239	99.5%	42 032	41 557		
Agency and support / outsourced services	14 773	2 144	-	16 917	17 634	(717)	104.2%	6 886	6 348		
Fleet services	8 728	(594)	-	8 134	8 296	(162)	102.0%	7 905	8 665		
Inventory: Clothing material and supplies	10	(5)	-	5	-	5	-	8	8		
Inventory: Farming supplies	27	(8)	-	19	-	19	-	89	71		
Inventory: Food and food supplies	22 282	152	-	22 434	18 890	3 544	84.2%	16 112	21 467		

Programme 4: PROVINCIAL HOSPITAL SERVICES											
2018/19										2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Inventory: Fuel, oil and gas	430	698	-	1 128	-	1 128	-	43	3 844		
Inventory: Medical supplies	65 772	(770)	10 213	75 215	80 429	(5 214)	106.9%	55 723	59 110		
Inventory: Medicine	65 897	(1 880)	24	64 041	66 478	(2 437)	103.8%	63 009	62 391		
Inventory: Other supplies	1 014	46	-	1 060	-	1 060	-	1 681	2 033		
Consumable supplies	3 670	1 947	-	5 617	7 740	(2 123)	137.8%	6 397	6 947		
Consumable: Stationery, printing and office supplies	1 335	148	-	1 483	1 238	245	83.5%	2 155	2 007		
Operating leases	5 481	318	-	5 799	4 982	817	85.9%	4 314	5 305		
Property payments	22 221	117	-	22 338	20 437	1 901	91.5%	20 087	18 840		

Programme 4: PROVINCIAL HOSPITAL SERVICES											
2018/19										2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Transport provided: Departmental activity	129	(25)	-	104	69	35	66.3%	104	56		
Travel and subsistence	1 974	354	-	2 328	2 516	(188)	108.1%	2 032	2 172		
Training and development	2 115	5	-	2 120	2 074	46	97.8%	2 023	2 286		
Operating payments	63	18	-	81	101	(20)	124.7%	175	90		
Interest and rent on land	-	-	-	-	41	(41)	-	-	3		
Interest	-	-	-	-	41	(41)	-	-	3		
Transfers and subsidies	2 418	-	3 810	6 228	6 200	28	99.6%	1 095	6 327		
Departmental agencies and accounts	107	-	-	107	20	87	18.7%	101	25		

Programme 4: PROVINCIAL HOSPITAL SERVICES											
2018/19										2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Departmental agencies	107	-	-	107	20	87	18.7%	101	25		
Households	2 311	-	3 810	6 121	6 180	(59)	101.0%	994	6 302		
Social benefits	2 311	-	3 810	6 121	6 180	(59)	101.0%	994	6 302		
Payments for capital assets	-	-	-	-	10	(10)	-	1 090	988		
Machinery and equipment	-	-	-	-	10	(10)	-	1 090	988		
Other machinery and equipment	-	-	-	-	10	(10)	-	1 090	988		

Programme 4: PROVINCIAL HOSPITAL SERVICES									
2018/19					2017/18				
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure
Total	1 362 723	-	6 050	1 368 773	1 368 773	-	100.0%	1 302 741	1 302 741

4.1 General (Regional) Hospital									
2018/19					2017/18				
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000
Current payments	1 117 918	-	4 240	1 122 158	1 136 956	(14 798)	101.3%	1 065 558	1 078 613
Compensation of employees	906 854	-	(5 997)	900 857	901 141	(284)	100.0%	873 270	875 410
Goods and services	211 064	-	10 237	221 301	235 774	(14 473)	106.5%	192 288	203 203
Interest and rent on land	-	-	-	-	41	(41)	-	-	-
Transfers and subsidies	1 934	-	3 810	5 744	5 598	146	97.5%	524	5 475
Departmental agencies and accounts	71	-	-	71	12	59	16.9%	67	12
Households	1 863	-	3 810	5 673	5 586	87	98.5%	457	5 463
Payments for capital assets	-	-	-	-	-	-	-	434	433
Machinery and equipment	-	-	-	-	-	-	-	434	433

4.2 TUBERCULOSIS HOSPITALS													
Economic classification	2018/19						2017/18						
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	%	R'000	R'000
Current payments	198 333	-	(2 000)	196 333	181 750	14 583	92.6%	193 359	175 472	14 583	92.6%	193 359	175 472
Compensation of employees	136 632	-	(2 000)	134 632	134 349	283	99.8%	132 297	128 390	283	99.8%	132 297	128 390
Goods and services	61 701	-	-	61 701	47 401	14 300	76.8%	61 062	47 079	14 300	76.8%	61 062	47 079
Interest and rent on land	-	-	-	-	-	-	-	-	3	-	-	-	3
Transfers and subsidies	484	-	-	484	602	(118)	124.4%	571	852	(118)	124.4%	571	852
Departmental agencies and accounts	36	-	-	36	8	28	22.2%	34	13	28	22.2%	34	13
Households	448	-	-	448	594	(146)	132.6%	537	839	(146)	132.6%	537	839
Payments for capital assets	-	-	-	-	10	(10)	-	656	555	(10)	-	656	555
Machinery and equipment	-	-	-	-	10	(10)	-	656	555	(10)	-	656	555

4.3 PSYCHIATRIC / MENTAL HOSPITALS													
Economic classification	2018/19						2017/18						
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	%	R'000	R'000
Current payments	44 054	-	-	44 054	43 857	197	99.6%	41 639	41 341	197	99.6%	41 639	41 341
Goods and services	44 054	-	-	44 054	43 857	197	99.6%	41 639	41 341	197	99.6%	41 639	41 341

Programme 5: CENTRAL HOSPITAL SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Sub programme											
1. Provincial Tertiary Hospital services	1 228 932	-	(4 480)	1 224 452	1 222 888	1 564	99.9%	1 120 507	1 154 506		
Total for sub programmes	1 228 932	-	(4 480)	1 224 452	1 222 888	1 564	99.9%	1 120 507	1 154 506		
Economic classification											
Current payments	1 195 755	-	(5 832)	1 189 923	1 189 766	157	100.0%	1 088 933	1 128 763		
Compensation of employees	834 771	-	(15 429)	819 342	819 077	265	100.0%	789 252	803 214		
Salaries and wages	748 486	(5 355)	(15 429)	727 702	729 473	(1 771)	100.2%	697 794	719 081		

Programme 5: CENTRAL HOSPITAL SERVICES												
2018/19											2017/18	
Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual Expenditure	Final Appropriation	Actual expenditure		
R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000	R'000	
86 285	5 355	-	91 640	89 604	2 036	97.8%	91 640	89 604	91 458	84 133		
360 984	-	9 597	370 581	370 561	20	100.0%	370 581	370 561	299 681	325 549		
8 466	1 155	-	9 621	11 622	(2 001)	120.8%	9 621	11 622	15 461	14 248		
282	(56)	-	226	130	96	57.5%	226	130	410	67		
10	-	-	10	6	4	60.0%	10	6	12	10		
3 425	(272)	-	3 153	3 014	139	95.6%	3 153	3 014	3 238	3 145		
55	(55)	-	-	-	-	-	-	-	22	1		
45 832	11 105	-	56 937	57 400	(463)	100.8%	56 937	57 400	45 273	45 583		

Programme 5: CENTRAL HOSPITAL SERVICES												
2018/19											2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure			
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000	
Contractors	57 540	(12 695)	-	44 845	40 008	4 837	89.2%	24 836	33 725		24 836	
Agency and support / outsourced services	15 262	1 653	-	16 915	18 103	(1 188)	107.0%	13 891	13 234		13 891	
Fleet services	4 176	-	-	4 176	3 303	873	79.1%	3 962	3 263		3 962	
Inventory: Clothing material and supplies	-	-	-	-	-	-	-	-	3		-	
Inventory: Food and food supplies	13 186	1 191	-	14 377	13 717	660	95.4%	12 639	13 790		12 639	
Inventory: Fuel, oil and gas	9	64	-	73	-	73	-	171	71		171	
Inventory: Materials and supplies	13 000	-	-	13 000	-	13 000	-	-	-		-	
Inventory: Medical supplies	94 534	9 443	3 112	107 089	121 001	(13 912)	113.0%	77 856	96 357		77 856	

Programme 5: CENTRAL HOSPITAL SERVICES												
2018/19											2017/18	
Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual Expenditure	Final Appropriation	Actual expenditure		
R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000	R'000	
60 424	(9 271)	6 485	57 638	61 730	(4 092)	107.1%	58 047	58 901	58 047	58 901		
Inventory: Medicine												
1 050	369	-	1 419	-	1 419	-	2 366	2 450	2 366	2 450		
Inventory: Other supplies												
4 369	(370)	-	3 999	4 897	(898)	122.5%	5 762	4 687	5 762	4 687		
Consumable supplies												
1 483	186	-	1 669	1 401	268	83.9%	1 337	1 347	1 337	1 347		
Consumable: Stationery, printing and office supplies												
1 235	(28)	-	1 207	742	465	61.5%	1 172	1 035	1 172	1 035		
Operating leases												
35 987	(2 585)	-	33 402	32 813	589	98.2%	32 249	32 643	32 249	32 643		
Property payments												
42	8	-	50	46	4	92.0%	63	-	63	-		
Transport provided: Departmental activity												
449	159	-	608	531	77	87.3%	827	914	827	914		
Travel and subsistence												

Programme 5: CENTRAL HOSPITAL SERVICES												
2018/19											2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure			
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000	
Training and development	-	-	-	-	-	-	-	-	-	4	3	
Operating payments	168	(1)	-	167	97	70	58.1%	83	72			
Interest and rent on land	-	-	-	-	128	(128)	-	-	-			
Interest	-	-	-	-	128	(128)	-	-	-			
Transfers and subsidies	1 132	-	1 352	2 484	2 484	-	100.0%	881	2 438			
Departmental agencies and accounts	47	-	-	47	8	39	17.0%	44	10			
Departmental agencies	47	-	-	47	8	39	17.0%	44	10			

Programme 5: CENTRAL HOSPITAL SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Households	1 085	-	1 352	2 437	2 476	(39)	101.6%	837	2 428		
Social benefits	1 025	-	1 352	2 377	2 416	(39)	101.6%	837	2 368		
Other transfers to households	60	-	-	60	60	-	100.0%	-	60		
Payments for capital assets	32 045	-	-	32 045	30 638	1 407	95.6%	30 693	23 305		
Machinery and equipment	32 045	-	-	32 045	30 638	1 407	95.6%	30 693	23 305		
Other machinery and equipment	32 045	-	-	32 045	30 638	1 407	95.6%	30 693	23 305		
Total	1 228 932	-	(4 480)	1 224 452	1 222 888	1 564	99.9%	1 120 507	1 154 506		

5.1 PROVINCIAL TERTIARY HOSPITAL SERVICES											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Current payments	1 195 755	-	(5 832)	1 189 923	1 189 766	157	100.0%	1 088 933	1 128 763		1 088 933
Compensation of Employees	834 771	-	(15 429)	819 342	819 077	265	100.0%	789 252	803 214		789 252
Goods and services	360 984	-	9 597	370 581	370 561	20	100.0%	299 681	325 549		299 681
Interest and rent on land	-	-	-	-	128	(128)	-	-	-		-
Transfers and subsidies	1 132	-	1 352	2 484	2 484	-	100.0%	881	2 438		881
Departmental agencies and accounts	47	-	-	47	8	39	17.0%	44	10		44
Households	1 085	-	1 352	2 437	2 476	(39)	101.6%	837	2 428		837
Payments for capital assets	32 045	-	-	32 045	30 638	1 407	95.6%	30 693	23 305		30 693
Machinery and equipment	32 045	-	-	32 045	30 638	1 407	95.6%	30 693	23 305		30 693

Programme 6: HEALTH SCIENCES AND TRAINING												
2018/19											2017/18	
Sub programme	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure			
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000	
1. Nurse Training Colleges	146 612	-	2 664	149 276	151 241	(1 965)	101.3%	164 944	169 789			
2. EMS Training College	4 559	-	-	4 559	4 287	272	94.0%	4 841	4 578			
3. Bursaries	73 945	-	(12 260)	61 685	60 397	1 288	97.9%	72 813	73 111			
4. Primary Health Care Training	5 374	-	-	5 374	5 376	(2)	100.0%	6 451	4 776			
5. Training Other	144 945	-	-	144 945	144 537	408	99.7%	126 477	115 543			
Total for sub programmes	375 435	-	(9 596)	365 839	365 838	1	100.0%	375 526	367 797			

Programme 6: HEALTH SCIENCES AND TRAINING												
2018/19											2017/18	
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure			
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000	
Current payments	283 716	-	2 664	286 380	288 557	(2 177)	100.8%	289 853	289 852			
Compensation of employees	231 913	-	2 074	233 987	234 047	(60)	100.0%	242 094	241 162			
Salaries and wages	209 116	334	2 074	211 524	212 967	(1 443)	100.7%	210 029	217 950			
Social contributions	22 797	(334)	-	22 463	21 080	1 383	93.8%	32 065	23 212			
Goods and services	51 803	-	590	52 393	54 510	(2 117)	104.0%	47 759	48 690			
Administrative fees	585	(131)	-	454	113	341	24.9%	163	822			
Minor assets	1 205	(510)	-	695	586	109	84.3%	10	-			
Bursaries: Employees	-	-	-	-	-	-	-	1 211	1 057			
Catering: Departmental activities	178	15	-	193	91	102	47.2%	84	-			
Communication	190	25	-	215	230	(15)	107.0%	246	217			

Programme 6: HEALTH SCIENCES AND TRAINING												
2018/19											2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual Expenditure			
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000	
Computer services	200	-	-	200	133	67	66.5%	209	201			
Consultants: Business and advisory services	104	(104)	-	-	-	-	-	122	-			
Contractors	32	-	-	32	32	-	100.0%	-	-			
Agency and support / outsourced services	18 916	(2 262)	590	17 244	19 337	(2 093)	112.1%	19 494	17 495			
Fleet services	706	510	-	1 216	1 219	(3)	100.2%	750	1 273			
Inventory: Clothing material and supplies	195	-	-	195	-	195	-	-	5			
Inventory: Fuel, oil and gas	30	-	-	30	-	30	-	-	11			
Inventory: Medical supplies	27	-	-	27	134	(107)	496.3%	-	470			
Inventory: Other supplies	100	-	-	100	-	100	-	-	21			
Consumable supplies	1 351	1 239	-	2 590	2 829	(239)	109.2%	1 725	1 809			
Consumable: Stationery, printing and office supplies	1 757	(695)	-	1 062	815	247	76.7%	144	354			
Operating leases	175	50	-	225	191	34	84.9%	106	102			

Programme 6: HEALTH SCIENCES AND TRAINING												
2018/19											2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure			
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000	
Property payments	550	(121)	-	429	274	155	63.9%	306	388			
Travel and subsistence	23 121	2 245	-	25 366	26 759	(1 393)	105.5%	20 691	22 427			
Training and development	2 002	(301)	-	1 701	1 475	226	86.7%	2 382	1 973			
Operating payments	238	40	-	278	213	65	76.6%	116	65			
Venues and facilities	141	-	-	141	79	62	56.0%	-	-			
Transfers and subsidies	81 953	-	(12 260)	69 693	67 649	2 044	97.1%	70 288	70 288			
Departmental agencies and accounts	14 001	-	-	14 001	14 001	-	100.0%	6 785	6 785			
Departmental agencies	14 001	-	-	14 001	14 001	-	100.0%	6 785	6 785			
Households	67 952	-	(12 260)	55 692	53 648	2 044	96.3%	63 503	63 503			
Social benefits	24	-	-	24	791	(767)	3295.8%	23	199			

Programme 6: HEALTH SCIENCES AND TRAINING												
2018/19											2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure			
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000	
Other transfers to households	67 928	-	(12 260)	55 668	52 857	2 811	95.0%	63 480	63 304			
Payments for capital assets	9 766	-	-	9 766	9 632	134	98.6%	15 385	7 657			
Machinery and equipment	9 766	-	-	9 766	9 632	134	98.6%	15 385	7 657			
Transport equipment	958	60	-	1 018	1 010	8	99.2%	-	-			
Other machinery and equipment	8 808	(60)	-	8 748	8 622	126	98.6%	15 385	7 657			
Total	375 435	-	(9 596)	365 839	365 838	1	100.0%	375 526	367 797			

6.1 NURSE TRAINING COLLEGES									
2018/19					2017/18				
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000
Current payments	145 076	-	2 664	147 740	149 574	(1 834)	101.2%	164 849	169 515
Compensation of Employees	111 650	-	2 074	113 724	113 349	375	99.7%	135 792	139 424
Goods and services	33 426	-	590	34 016	36 225	(2 209)	106.5%	29 057	30 091
Transfers and subsidies	24	-	-	24	108	(84)	450.0%	23	128
Households	24	-	-	24	108	(84)	450.0%	23	128
Payments for capital assets	1 512	-	-	1 512	1 559	(47)	103.1%	72	146
Machinery and equipment	1 512	-	-	1 512	1 559	(47)	103.1%	72	146

6.2 EMS TRAINING COLLEGE											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Current payments	4 559	-	-	4 559	4 254	305	93.3%	4 841	4 569		
Compensation of employees	4 336	-	-	4 336	4 137	199	95.4%	4 698	4 507		
Goods and services	223	-	-	223	117	106	52.5%	143	62		
Transfers and subsidies	-	-	-	-	33	(33)	-	-	9		
Households	-	-	-	-	33	(33)	-	-	9		

6.3 BURSARIES		2018/19								2017/18	
		Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	
Current payments	6 017	-	-	6 017	7 540	(1 523)	125.3%	9 333	9 807		
Compensation of employees	1 458	-	-	1 458	1 443	15	99.0%	1 410	1 418		
Goods and services	4 559	-	-	4 559	6 097	(1 538)	133.7%	7 923	8 389		
Transfers and subsidies	67 928	-	(12 260)	55 668	52 857	2 811	95.0%	63 480	63 304		
Households	67 928	-	(12 260)	55 668	52 857	2 811	95.0%	63 480	63 304		

6.4 PRIMARY HEALTH CARE TRAINING											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Current payments	5 374	-	-	5 374	5 340	34	99.4%	6 451	4 727		
Compensation of employees	4 408	-	-	4 408	4 506	(98)	102.2%	4 956	3 498		
Goods and services	966	-	-	966	834	132	86.3%	1 495	1 229		
Transfers and subsidies	-	-	-	-	36	(36)	-	-	49		
Households	-	-	-	-	36	(36)	-	-	49		

6.5 TRAINING OTHER		2018/19										2017/18	
		Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	R'000	R'000	
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000
Current payments	122 690	-	-	122 690	121 849	841	99.3%	104 379	101 234				
Compensation of employees	110 061	-	-	110 061	110 612	(551)	100.5%	95 238	92 315				
Goods and services	12 629	-	-	12 629	11 237	1 392	89.0%	9 141	8 919				
Transfers and subsidies	14 001	-	-	14 001	14 615	(614)	104.4%	6 785	6 798				
Departmental agencies and accounts	14 001	-	-	14 001	14 001	-	100.0%	6 785	6 785				
Households	-	-	-	-	614	(614)	-	-	13				
Payments for capital assets	8 254	-	-	8 254	8 073	181	97.8%	15 313	7 511				
Machinery and equipment	8 254	-	-	8 254	8 073	181	97.8%	15 313	7 511				

Programme 7: HEALTH CARE SUPPORT SERVICES										
2018/19										2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000
Sub programme										
1. Laundries	29 672	-	1 356	31 028	30 878	150	99.5%	27 485	25 113	
2. Engineering	22 249	-	1 086	23 335	18 477	4 858	79.2%	83 709	63 159	
3. Forensic Services	84 597	-	-	84 597	86 450	(1 853)	102.2%	71 559	71 996	
4. Orthotic and Prosthetic Services	4 500	-	-	4 500	4 191	309	93.1%	3 994	4 042	
5. Medicine Trading Account	14 062	-	406	14 468	17 932	(3 464)	123.9%	13 557	12 711	
Total for sub programmes	155 080	-	2 848	157 928	157 928	-	100.0%	200 304	177 021	
Economic classification										

Programme 7: HEALTH CARE SUPPORT SERVICES										
2018/19							2017/18			
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
Current payments	151 870	-	(786)	151 084	155 390	(4 306)	102.9%	143 910	149 180	
Compensation of employees	117 792	-	-	117 792	118 871	(1 079)	100.9%	106 791	109 032	
Salaries and wages	102 160	257	-	102 417	103 377	(960)	100.9%	93 668	95 207	
Social contributions	15 632	(257)	-	15 375	15 494	(119)	100.8%	13 123	13 825	
Goods and services	34 078	-	(786)	33 292	36 519	(3 227)	109.7%	37 119	40 148	
Administrative fees	339	(153)	-	186	103	83	55.4%	163	118	
Minor assets	363	-	-	363	-	363	-	-	69	
Catering: Departmental activities	-	9	-	9	-	9	-	2	-	
Communication	801	107	-	908	1 083	(175)	119.3%	955	1 253	

Programme 7: HEALTH CARE SUPPORT SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Consultants: Business and advisory services	-	-	-	-	-	-	-	257	257		
Contractors	5 629	(91)	-	5 538	1 887	3 651	34.1%	15 416	9 422		
Agency and support / outsourced services	125	24	-	149	148	1	99.3%	-	-		
Fleet services	4 059	(80)	-	3 979	5 695	(1 716)	143.1%	3 378	4 817		
Inventory: Fuel, oil and gas	202	-	-	202	-	202	-	-	203		
Inventory: Materials and supplies	90	(90)	-	-	-	-	-	-	-		
Inventory: Medical supplies	6 293	187	-	6 480	10 838	(4 358)	167.3%	4 784	11 151		
Inventory: Other supplies	2 845	(61)	-	2 784	-	2 784	-	2 665	2 764		
Consumable supplies	7 335	92	(786)	6 641	10 252	(3 611)	154.4%	5 407	5 666		
Consumable: Stationery, printing and office supplies	277	(146)	-	131	73	58	55.7%	137	117		

Programme 7: HEALTH CARE SUPPORT SERVICES										
2018/19										
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	2017/18
Operating leases	1 412	(27)	-	1 385	2 101	(716)	151.7%	552	530	
Property payments	602	-	-	602	1 258	(656)	209.0%	587	621	
Transport provided: Departmental activity	80	75	-	155	100	55	64.5%	187	65	
Travel and subsistence	3 331	217	-	3 548	2 858	690	80.6%	2 308	2 829	
Training and development	5	(5)	-	-	-	-	-	-	-	
Operating payments	50	(28)	-	22	7	15	31.8%	130	101	
Venues and facilities	240	(30)	-	210	116	94	55.2%	191	165	

Programme 7: HEALTH CARE SUPPORT SERVICES											
2018/19										2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Transfers and subsidies	254	-	-	254	115	139	45.3%	92	91		
Households	254	-	-	254	115	139	45.3%	92	91		
Social benefits	254	-	-	254	115	139	45.3%	92	91		
Payments for capital assets	2 956	-	3 634	6 590	2 423	4 167	36.8%	56 302	27 750		

Programme 7: HEALTH CARE SUPPORT SERVICES										
2018/19							2017/18			
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
Machinery and equipment	2 956	-	3 634	6 590	2 423	4 167	36.8%	56 302	27 750	
Other machinery and equipment	2 956	-	3 634	6 590	2 423	4 167	36.8%	56 302	27 750	
Total	155 080	-	2 848	157 928	157 928	-	100.0%	200 304	177 021	

7.1 LAUNDRIES										
2018/19							2017/18			
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	
Current payments	27 646	-	-	27 646	27 635	11	100.0%	25 791	23 448	

Programme 7: HEALTH CARE SUPPORT SERVICES										
2018/19										
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	2017/18
Compensation of Employees	17 281	-	-	17 281	17 888	(607)	103.5%	17 388	15 238	
Goods and services	10 365	-	-	10 365	9 747	618	94.0%	8 403	8 210	
Transfers and subsidies	195	-	-	195	57	138	29.2%	36	11	
Households	195	-	-	195	57	138	29.2%	36	11	
Payments for capital assets	1 831	-	1 356	3 187	3 186	1	100.0%	1 658	1 654	
Machinery and equipment	1 831	-	1 356	3 187	3 186	1	100.0%	1 658	1 654	

7.2 ENGINEERING											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Current pay-ments	22 249	-	(1 192)	21 057	20 370	687	96.7%	30 465	37 009		
Compensation of employees	13 966	-	-	13 966	14 069	(103)	100.7%	13 187	19 785		
Goods and ser-vices	8 283	-	(1 192)	7 091	6 301	790	88.9%	17 278	17 224		
Transfers and subsidies	-	-	-	-	-	-	-	-	54		
Households	-	-	-	-	-	-	-	-	54		
Payments for capital assets	-	-	2 278	2 278	(1 893)	4 171	(83.1%)	53 244	26 096		
Machinery and equipment	-	-	2 278	2 278	(1 893)	4 171	(83.1%)	53 244	26 096		

7.3 FORENSIC SERVICES											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Current payments	83 413	-	-	83 413	85 262	(1 849)	102.2%	70 103	71 970		
Compensation of employees	72 577	-	-	72 577	73 036	(459)	100.6%	62 933	61 559		
Goods and services	10 836	-	-	10 836	12 226	(1 390)	112.8%	7 170	10 411		
Transfers and subsidies	59	-	-	59	58	1	98.3%	56	26		
Households	59	-	-	59	58	1	98.3%	56	26		
Payments for capital assets	1 125	-	-	1 125	1 130	(5)	100.4%	1 400	-		
Machinery and equipment	1 125	-	-	1 125	1 130	(5)	100.4%	1 400	-		

7.4 ORTHOTIC AND PROSTHETIC SERVICES											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Current payments	4 500	-	-	4 500	4 191	309	93.1%	3 994	3 994		4 042
Compensation of employees	1 005	-	-	1 005	1 020	(15)	101.5%	878	878		948
Goods and services	3 495	-	-	3 495	3 171	324	90.7%	3 116	3 116		3 094

7.4 Medicine Trading Account											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Current payments	14 062	-	406	14 468	17 932	(3 464)	123.9%	13 557	13 557		12 711
Compensation of employees	12 963	-	-	12 963	12 858	105	99.2%	12 405	12 405		11 502
Goods and services	1 099	-	406	1 505	5 074	(3 569)	337.1%	1 152	1 152		1 209

Programme 8: Health Facilities Management											
2018/19										2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000		R'000
Sub programme											
1. Community Health Facilities	993 342	-	(40 034)	953 308	887 194	66 114	93.1%	939 352	925 027		
2. District Hospital Services	97 387	-	-	97 387	106 098	(8 711)	108.9%	59 860	57 751		
3. Provincial Hospital Services	267 152	-	-	267 152	262 770	4 382	98.4%	266 127	202 534		
Total for sub programmes	1 357 881	-	(40 034)	1 317 847	1 256 062	61 785	95.3%	1 265 339	1 185 312		
Economic classification											
Current payments	339 491	-	(36 016)	303 475	302 584	891	99.7%	253 174	223 277		
Compensation of employees	21 923	-	(2 220)	19 703	18 812	891	95.5%	16 311	16 009		

Programme 8: Health Facilities Management										
2018/19										2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	
Salaries and wages	16 392	-	(1 203)	15 189	16 722	(1 533)	110.1%	12 604	14 168	
Social contributions	5 531	-	(1 017)	4 514	2 090	2 424	46.3%	3 707	1 841	
Goods and services	317 568	-	(33 796)	283 772	283 772	-	100.0%	236 863	207 268	
Administrative fees	89	30	-	119	64	55	53.8%	13	7	
Advertising	-	-	-	-	-	-	-	104	-	
Minor assets	2 480	7	-	2 487	1 318	1 169	53.0%	3 000	1 260	
Catering: Departmental activities	50	-	-	50	45	5	90.0%	4	-	
Communication	152	(13)	-	139	130	9	93.5%	19	123	
Computer services	-	-	-	-	-	-	-	-	495	

Programme 8: Health Facilities Management											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Consultants: Business and advisory services	1 000	(470)	-	530	-	530	-	100	-		
Contractors	15 312	(1 770)	(5 394)	8 148	11 471	(3 323)	140.8%	9 960	15 512		
Agency and support / outsourced services	974	-	(974)	-	-	-	-	7 414	4 062		
Inventory: Fuel, oil and gas	-	4 074	(4 074)	-	-	-	-	3 401	2 396		
Inventory: Medical supplies	-	-	-	-	936	(936)	-	-	4 489		
Inventory: Other supplies	-	50	-	50	-	50	-	-	-		
Consumable supplies	45 200	10 296	(13 089)	42 407	47 295	(4 888)	111.5%	29 528	36 737		
Consumable: Stationery, printing and office supplies	29	65	-	94	342	(248)	363.8%	22	161		
Operating leases	3 758	-	(1 190)	2 568	2 567	1	100.0%	1 627	3 472		

Programme 8: Health Facilities Management									
2018/19					2017/18				
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure
Property payments	245 324	(12 507)	(9 075)	223 742	217 163	6 579	97.1%	178 068	137 424
Travel and subsistence	2 340	438	-	2 778	2 000	778	72.0%	260	1 001
Training and development	640	-	-	640	438	202	68.4%	2 320	112
Operating payments	220	(200)	-	20	3	17	15.0%	1 023	17
Transfers and subsidies	-	-	16	16	15	1	93.8%	100	100
Households	-	-	16	16	15	1	93.8%	100	100
Social benefits	-	-	16	16	15	1	93.8%	100	100
Payments for capital assets	1 018 390	-	(4 034)	1 014 356	953 463	60 893	94.0%	1 012 065	961 935

Programme 8: Health Facilities Management											
2018/19											2017/18
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
Buildings and other fixed structures	988 978	-	(4 034)	984 944	896 065	88 879	91.0%	969 695	936 812		
Buildings	988 978	-	(4 034)	984 944	896 065	88 879	91.0%	969 695	936 812		
Machinery and equipment	29 412	-	-	29 412	57 398	(27 986)	195.2%	42 370	25 123		
Other machinery and equipment	29 412	-	-	29 412	57 398	(27 986)	195.2%	42 370	25 123		
Total	1 357 881	-	(40 034)	1 317 847	1 256 062	61 785	95.3%	1 265 339	1 185 312		

8.1 COMMUNITY HEALTH FACILITIES	2018/19								2017/18	
	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	R'000
Economic classification	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000
Current payments	164 888	-	(36 000)	128 888	131 276	(2 388)	101.9%	136 035	140 036	
Compensation of employees	7 900	-	(2 204)	5 696	5 232	464	91.9%	5 311	6 340	
Goods and services	156 988	-	(33 796)	123 192	126 044	(2 852)	102.3%	130 724	133 696	
Transfers and subsidies	-	-	-	-	-	-	-	100	100	
Households	-	-	-	-	-	-	-	100	100	
Payments for capital assets	828 454	-	(4 034)	824 420	755 918	68 502	91.7%	803 217	784 891	
Buildings and other fixed structures	828 454	-	(4 034)	824 420	755 291	69 129	91.6%	803 217	784 891	
Machinery and equipment	-	-	-	-	627	(627)	-	-	-	

8.2 DISTRICT HOSPITAL SERVICES											
2018/19										2017/18	
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure	R'000	
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	
Current payments	-	-	-	-	130	(130)	-	-	-	-	
Goods and services	-	-	-	-	130	(130)	-	-	-	-	
Payments for capital assets	97 387	-	-	97 387	105 968	(8 581)	108.8%	59 860	57 751	57 751	
Buildings and other fixed structures	97 387	-	-	97 387	105 968	(8 581)	108.8%	59 860	57 751	57 751	

8.3 PROVINCIAL HOSPITAL SERVICES											
2018/19											2017/18
Economic classification	Adjusted Appropriation	Shifting of Funds	Virement	Final Appropriation	Actual Expenditure	Variance	Expenditure as % of final appropriation	Final Appropriation	Actual expenditure		
	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000	R'000	R'000
Current payments	174 603	-	(16)	174 587	171 178	3 409	98.0%	117 139	83 241		
Compensation of employees	14 023	-	(16)	14 007	13 580	427	97.0%	11 000	9 669		
Goods and services	160 580	-	-	160 580	157 598	2 982	98.1%	106 139	73 572		
Transfers and subsidies	-	-	16	16	15	1	93.8%	-	-		
Households	-	-	16	16	15	1	93.8%	-	-		
Payments for capital assets	92 549	-	-	92 549	91 577	972	98.9%	148 988	119 293		
Buildings and other fixed structures	63 137	-	-	63 137	34 806	28 331	55.1%	106 618	94 170		
Machinery and equipment	29 412	-	-	29 412	56 771	(27 359)	193.0%	42 370	25 123		

NOTES TO THE APPROPRIATION STATEMENTS for the year ended 31 March 2019

1. Detail of transfers and subsidies as per Appropriation Act (after Virement):

Detail of these transactions can be viewed in the note on Transfers and subsidies, disclosure notes and Annexure 1 (A-H) to the Annual Financial Statements.

2. Detail of specifically and exclusively appropriated amounts voted (after Virement):

Detail of these transactions can be viewed in note 1 (Annual Appropriation) to the Annual Financial Statements.

3. Detail on payments for financial assets

Detail of these transactions per programme can be viewed in the note on Payments for financial assets to the Annual Financial Statements.

4. Explanations of material variances from Amounts Voted (after Virement):

4.1	Per programme	Final Appropriation	Actual Expenditure	Variance R'000	Variance as a % of Final Appropriation
	Administration	289 609	289 363	246	0.08%
	District Health Services	8 031 721	8 031 679	42	0.00%
	Emergency Medical Services	363 422	363 412	10	0.00%
	Provincial Hospital Services	1 368 773	1 368 773	-	0.00%
	Central Hospital Services	1 224 452	1 222 888	1 564	0.13%
	Health Sciences and Training	365 839	365 838	1	0.00%
	Health Care Support Services	157 928	157 928	-	0.00%
	Health Facilities Management	1 317 847	1 256 062	61 785	4.69%

The underspending was due to delayed kick-start of infrastructure projects for Programme eight (8). A rollover has been requested for unspent amount.

4.2 Per economic classification	Final Appropriation R'000	Actual Expenditure R'000	Variance R'000	Variance as a % of Final Appropriation R'000
Current payments				
Compensation of employees	7 662 953	7 662 953	-	0.00%
Goods and services	3 908 388	3 913 891	(5 503)	-0.14%
Interest and rent on land	-	487	(487)	0.00%
Transfers and subsidies				
Provinces and municipalities	1 083	2 326	(1 243)	-114.77%
Departmental agencies and accounts	14 359	14 185	174	1.21%
Higher education institutions	-	-	-	0.00%
Public corporations and private enterprises	-	-	-	0.00%
Foreign governments and international organisations	-	-	-	0.00%
Non-profit institutions	326 364	308 946	17 418	5.34%
Households	108 168	124 443	(16 275)	-15.05%

4.2 Per economic classification	Final Appropriation R'000	Actual Expenditure R'000	Variance R'000	Variance as a % of Final Appropriation R'000
Payments for capital assets				
Buildings and other fixed structures	984 944	896 065	88 879	9.02%
Machinery and equipment	113 332	132 647	(19 315)	-17.04%
Heritage assets	-	-	-	0.00%
Specialised military assets	-	-	-	0.00%
Biological assets	-	-	-	0.00%
Land and subsoil assets	-	-	-	0.00%
Intangible assets	-	-	-	0.00%
Payments for financial assets	-	-	-	0.00%

The underspending was due to delayed kick-start of infrastructure projects for Programme eight (8). A rollover has been requested for unspent amount.

4.3 Per conditional grant	Final Appropriation R'000	Actual Expenditure R'000	Variance R'000	Variance as a % of Final Appropriation R'000
Comprehensive HIV and AIDS Grant	1 744 627	1 744 102	525	0.03%
Health Facility Revitalisation Grant	364 539	364 538	1	0.00%
Health Professions Training and Development Grant	121 653	121 297	356	0.29%
Human Papillomavirus Vaccine Grant	17 665	14 413	3 252	18.41%
National Tertiary Services Grant	123 341	121 944	1 397	1.13%
Expanded Public Works Programme Integrated Grant for Provinces- Health Social Sector Expanded Public Works Programme Incentive Grant for Provinces- Health	2 322	2 320	2	0.09%
	15 021	14 653	368	2.45%

The underspending was due to delays in delivery of committed services. The Department has submitted a rollover request.

STATEMENT OF FINANCIAL PERFORMANCE for the year ended 31 March 2019

	<i>Note</i>	2018/19	2017/18
		R'000	R'000
REVENUE			
Annual appropriation	<u>1</u>	13 119 591	12 160 053
Statutory appropriation	-	-	-
Departmental revenue	2	-	-
NRF Receipts		-	-
Aid assistance	-	-	-
TOTAL REVENUE		13 119 591	12 160 053

EXPENDITURE

Current expenditure

Compensation of employees	3	7 662 953	7 217 105
Goods and services	4	3 913 891	3 439 974
Interest and rent on land	5	487	317
Aid assistance	-	-	-
Total current expenditure		11 577 331	10 657 396

	<i>Note</i>	2018/19	2017/18
		R'000	R'000
Transfers and subsidies			
Transfers and subsidies	6	449 900	368 261
Aid assistance	-	-	-
Total transfers and subsidies		449 900	368 261
Expenditure for capital assets			
Tangible assets	7	1 028 712	1 057 356
Intangible assets	7	-	-
Total expenditure for capital assets		1 028 712	1 057 356
Unauthorised expenditure approved without funding	8	-	-
Payments for financial assets	-	-	-
TOTAL EXPENDITURE		13 055 943	12 083 013
SURPLUS/(DEFICIT) FOR THE YEAR		63 648	77 040

STATEMENT OF FINANCIAL PERFORMANCE for the year ended 31 March 2019

Reconciliation of Net Surplus/(Deficit) for the year			
Voted funds		63 648	77 040
Annual appropriation		57 747	4 759
Conditional grants		5 901	72 281
Departmental revenue and NRF Receipts	12	-	-
Aid assistance	-	-	-
SURPLUS/(DEFICIT) FOR THE YEAR		63 648	77 040

STATEMENT OF FINANCIAL POSITION as at 31 March 2019

	Note	2018/19	2017/18
		R'000	R'000
ASSETS			
Current assets		335 352	344 410
Unauthorised expenditure	8	234 705	234 705
Cash and cash equivalents	9	73 155	88 152
Other financial assets	-	-	-
Prepayments and advances	-	-	-
Receivables	10	27 492	21 553
Loans	-	-	-
Aid assistance prepayments	-	-	-
Aid assistance receivable	-	-	-
Non-current assets		-	-

	Note	2018/19	2017/18
		R'000	R'000
Investments	-	-	-
Receivables	10	-	-
Loans	-	-	-
Other financial assets	-	-	-
TOTAL ASSETS		335 352	344 410
LIABILITIES			
Current liabilities		332 639	343 144
Voted funds to be surrendered to the Revenue Fund	11	319 755	333 147
Departmental revenue and NRF Receipts to be surrendered to the Revenue Fund	12	8 061	6 393
Bank overdraft	-	-	-
Payables	13	4 823	3 604
Aid assistance repayable	-	-	-
Aid assistance unutilised	-	-	-
Non-current liabilities			
Payables	-	-	-
TOTAL LIABILITIES		332 639	343 144
NET ASSETS		2 713	1 266

STATEMENT OF FINANCIAL POSITION as at 31 March 2019

	Note	2018/19	2017/18
		R'000	R'000
Represented by:			
Capitalisation reserve		-	-
Recoverable revenue		2 713	1 266
Retained funds		-	-
Revaluation reserves		-	-
TOTAL		2 713	1 266

STATEMENT OF CHANGES IN NET ASSETS for the year ended 31 March 2019

	Note	2018/19	2017/18
		R'000	R'000
Capitalisation Reserves			
Opening balance		-	-
Transfers:		-	-
Movement in Equity		-	-
Movement in Operational Funds		-	-
Other movements		-	-
Closing balance		-	-
Recoverable revenue			
Opening balance		1 266	1 448
Transfers:		1 447	(182)
Irrecoverable amounts written off	-	-	-

Note	2018/19	2017/18
	R'000	R'000
Debts revised	-	-
Debts recovered (included in departmental receipts)	2 713	1 266
Debts raised	-1 266	-1 448
Closing balance	2 713	1 266
Retained funds		
Opening balance	-	-
Transfer from voted funds to be surrendered (Parliament/ Legislatures ONLY)	-	-
Utilised during the year	-	-
Other transfers	-	-
Closing balance	-	-
Revaluation Reserve		
Opening balance	-	-
Revaluation adjustment (Housing departments)	-	-
Transfers	-	-
Other	-	-
Closing balance	-	-
TOTAL	2 713	1 266

CASH FLOW STATEMENT for the year ended 31 March 2019

	<i>Note</i>	2018/19	2017/18
		R'000	R'000
CASH FLOWS FROM OPERATING ACTIVITIES			
Receipts		13 194 198	12 243 315
Annual appropriated funds received	1.1	13 119 591	12 160 053
Statutory appropriated funds received	-	-	-
Departmental revenue received	2	68 092	79 252
Interest received	2.2	6 515	4 010
NRF Receipts		-	-
Aid assistance received	-	-	-
Net (increase)/decrease in working capital		(4 720)	(32 969)
Surrendered to Revenue Fund		(154 117)	(117 613)
Surrendered to RDP Fund/Donor		-	-
Current payments		(11 576 844)	(10 623 080)
Interest paid	5	(487)	(317)
Payments for financial assets		-	-
Transfers and subsidies paid		(449 900)	(368 261)
Net cash flow available from operating activities	14	1 008 130	1 101 075

	Note	2018/19	2017/18
		R'000	R'000
CASH FLOWS FROM INVESTING ACTIVITIES			
Distribution/dividend received		-	-
Payments for capital assets	7	(1 028 712)	(1 057 356)
Proceeds from sale of capital assets	<u>2.3</u>	4 138	4 565
(Increase)/decrease in loans		-	-
(Increase)/decrease in investments		-	-
(Increase)/decrease in other financial assets		-	-
Net cash flows from investing activities		(1 024 574)	(1 052 791)
CASH FLOWS FROM FINANCING ACTIVITIES			
Increase/(decrease) in net assets		1 447	(182)
Increase/(decrease) in non-current payables		-	-
Net cash flows from financing activities		1 447	(182)
Net increase/(decrease) in cash and cash equivalents		(14 997)	48 102
Unrealised gains and losses within cash and cash equivalents		-	-
Cash and cash equivalents at end of period	15	73 155	88 152

NOTES TO THE ANNUAL FINANCIAL STATEMENTS for the year ended 31 March 2019

<p>Summary of significant accounting policies</p> <p>The financial statements have been prepared in accordance with the following policies, which have been applied consistently in all material aspects, unless otherwise indicated. Management has concluded that the financial statements present fairly the department's primary and secondary information.</p> <p>The historical cost convention has been used, except where otherwise indicated. Management has used assessments and estimates in preparing the annual financial statements. These are based on the best information available at the time of preparation.</p> <p>Where appropriate and meaningful, additional information has been disclosed to enhance the usefulness of the financial statements and to comply with the statutory requirements of the Public Finance Management Act (PFMA), Act 1 of 1999 (as amended by Act 29 of 1999), and the Treasury Regulations issued in terms of the PFMA and the annual Division of Revenue Act.</p>	
1	<p>Basis of preparation</p> <p>The financial statements have been prepared in accordance with the Modified Cash Standard.</p>
2	<p>Going concern</p> <p>The financial statements have been prepared on a going concern basis.</p>
3	<p>Presentation currency</p> <p>Amounts have been presented in the currency of the South African Rand (R) which is also the functional currency of the department.</p>
4	<p>Rounding</p> <p>Unless otherwise stated financial figures have been rounded to the nearest one thousand Rand (R'000).</p>
5	<p>Foreign currency translation</p> <p>Cash flows arising from foreign currency transactions are translated into South African Rands using the spot exchange rates prevailing at the date of payment / receipt.</p>
6	<p>Comparative information</p>
6.1	<p>Prior period comparative information</p> <p>Prior period comparative information has been presented in the current year's financial statements. Where necessary figures included in the prior period financial statements have been reclassified to ensure that the format in which the information is presented is consistent with the format of the current year's financial statements.</p>

6.2	<p>Current year comparison with budget A comparison between the approved, final budget and actual amounts for each programme and economic classification is included in the appropriation statement.</p>
7	<p>Revenue</p>
7.1	<p>Appropriated funds Appropriated funds comprises of departmental allocations as well as direct charges against the revenue fund (i.e. statutory appropriation). Appropriated funds are recognised in the statement of financial performance on the date the appropriation becomes effective. Adjustments made in terms of the adjustments budget process are recognised in the statement of financial performance on the date the adjustments become effective. The net amount of any appropriated funds due to / from the relevant revenue fund at the reporting date is recognised as a payable / receivable in the statement of financial position.</p>
7.2	<p>Departmental revenue Departmental revenue is recognised in the statement of financial performance when received and is subsequently paid into the relevant revenue fund, unless stated otherwise. Any amount owing to the relevant revenue fund at the reporting date is recognised as a payable in the statement of financial position.</p>
7.3	<p>Accrued departmental revenue Accruals in respect of departmental revenue (excluding tax revenue) are recorded in the notes to the financial statements when: <input type="checkbox"/> it is probable that the economic benefits or service potential associated with the transaction will flow to the department; and <input type="checkbox"/> the amount of revenue can be measured reliably. The accrued revenue is measured at the fair value of the consideration receivable. Accrued tax revenue (and related interest and / penalties) is measured at amounts receivable from collecting agents. Write-offs are made according to the department's debt write-off policy</p>
8	<p>Expenditure</p>
8.1	<p>Compensation of employees</p>
8.1.1	<p>Salaries and wages Salaries and wages are recognised in the statement of financial performance on the date of payment.</p>

<p>8.1.2</p>	<p>Social contributions Social contributions made by the department in respect of current employees are recognised in the statement of financial performance on the date of payment. Social contributions made by the department in respect of ex-employees are classified as transfers to households in the statement of financial performance on the date of payment.</p>
<p>8.2</p>	<p>Other expenditure Other expenditure (such as goods and services, transfers and subsidies and payments for capital assets) is recognised in the statement of financial performance on the date of payment. The expense is classified as a capital expense if the total consideration paid is more than the capitalisation threshold.</p>
<p>8.3</p>	<p>Accruals and payables not recognised Accruals and payables not recognised are recorded in the notes to the financial statements at cost at the reporting date.</p>
<p>8.4</p>	<p>Leases</p>
<p>8.4.1</p>	<p>Operating leases Operating lease payments made during the reporting period are recognised as current expenditure in the statement of financial performance on the date of payment. The operating lease commitments are recorded in the notes to the financial statements.</p>
<p>8.4.2</p>	<p>Finance leases Finance lease payments made during the reporting period are recognised as capital expenditure in the statement of financial performance on the date of payment. The finance lease commitments are recorded in the notes to the financial statements and are not apportioned between the capital and interest portions. Finance lease assets acquired at the end of the lease term are recorded and measured at the lower of:</p> <ul style="list-style-type: none"> • cost, being the fair value of the asset; or • the sum of the minimum lease payments made, including any payments made to acquire ownership at the end of the lease term, excluding interest.
<p>9</p>	<p>Aid Assistance</p>

<p>9.1</p>	<p>Aid assistance received Aid assistance received in cash is recognised in the statement of financial performance when received. In-kind aid assistance is recorded in the notes to the financial statements on the date of receipt and is measured at fair value. Aid assistance not spent for the intended purpose and any unutilised funds from aid assistance that are required to be refunded to the donor are recognised as a payable in the statement of financial position.</p>
<p>9.2</p>	<p>Aid assistance paid Aid assistance paid is recognised in the statement of financial performance on the date of payment. Aid assistance payments made prior to the receipt of funds are recognised as a receivable in the statement of financial position.</p>
<p>10</p>	<p>Cash and cash equivalents Cash and cash equivalents are stated at cost in the statement of financial position. Bank overdrafts are shown separately on the face of the statement of financial position as a current liability. For the purposes of the cash flow statement, cash and cash equivalents comprise cash on hand, deposits held, other short-term highly liquid investments and bank overdrafts.</p>
<p>11</p>	<p>Prepayments and advances Prepayments and advances are recognised in the statement of financial position when the department receives or disburses the cash. Prepayments and advances are initially and subsequently measured at cost. <Indicate when prepayments are expensed and under what circumstances.></p>
<p>12</p>	<p>Loans and receivables Loans and receivables are recognised in the statement of financial position at cost plus accrued interest, where interest is charged, less amounts already settled or written-off. Write-offs are made according to the department's write-off policy.</p>
<p>13</p>	<p>Investments Investments are recognised in the statement of financial position at cost.</p>
<p>14</p>	<p>Financial assets</p>

14.1	<p>Financial assets (not covered elsewhere) A financial asset is recognised initially at its cost plus transaction costs that are directly attributable to the acquisition or issue of the financial asset. At the reporting date, a department shall measure its financial assets at cost, less amounts already settled or written-off, except for recognised loans and receivables, which are measured at cost plus accrued interest, where interest is charged, less amounts already settled or written-off.</p>
14.2	<p>Impairment of financial assets Where there is an indication of impairment of a financial asset, an estimation of the reduction in the recorded carrying value, to reflect the best estimate of the amount of the future economic benefits expected to be received from that asset, is recorded in the notes to the financial statements.</p>
15	<p>Payables Payables recognised in the statement of financial position are recognised at cost.</p>
16	<p>Capital Assets</p>
16.1	<p>Immovable capital assets Immovable assets reflected in the asset register of the department are recorded in the notes to the financial statements at cost or fair value where the cost cannot be determined reliably. Immovable assets acquired in a non-exchange transaction are recorded at fair value at the date of acquisition. Immovable assets are subsequently carried in the asset register at cost and are not currently subject to depreciation or impairment. Subsequent expenditure of a capital nature forms part of the cost of the existing asset when ready for use. Additional information on immovable assets not reflected in the assets register is provided in the notes to financial statements.</p>
16.2	<p>Movable capital assets Movable capital assets are initially recorded in the notes to the financial statements at cost. Movable capital assets acquired through a non-exchange transaction is measured at fair value as at the date of acquisition. Where the cost of movable capital assets cannot be determined reliably, the movable capital assets are measured at fair value and where fair value cannot be determined; the movable assets are measured at R1. All assets acquired prior to 1 April 2002 (or a later date as approved by the OAG) may be recorded at R1. Movable capital assets are subsequently carried at cost and are not subject to depreciation or impairment. Biological assets are subsequently carried at fair value. Subsequent expenditure that is of a capital nature forms part of the cost of the existing asset when ready for use.</p>

<p>16.3</p>	<p>Intangible assets Intangible assets are initially recorded in the notes to the financial statements at cost. Intangible assets acquired through a non-exchange transaction are measured at fair value as at the date of acquisition. Internally generated intangible assets are recorded in the notes to the financial statements when the department commences the development phase of the project. Where the cost of intangible assets cannot be determined reliably, the intangible capital assets are measured at fair value and where fair value cannot be determined; the intangible assets are measured at R1. All assets acquired prior to 1 April 2002 (or a later date as approved by the OAG) may be recorded at R1. Intangible assets are subsequently carried at cost and are not subject to depreciation or impairment. Subsequent expenditure of a capital nature forms part of the cost of the existing asset when ready for use.</p>
<p>16.4</p>	<p>Project Costs: Work-in-progress Expenditure of a capital nature is initially recognised in the statement of financial performance at cost when paid. Amounts paid towards capital projects are separated from the amounts recognised and accumulated in work-in-progress until the underlying asset is ready for use. Once ready for use, the total accumulated payments are recorded in an asset register. Subsequent payments to complete the project are added to the capital asset in the asset register. Where the department is not the custodian of the completed project asset, the asset is transferred to the custodian subsequent to completion.</p>
<p>17</p>	<p>Provisions and Contingents</p>
<p>17.1</p>	<p>Provisions Provisions are recorded in the notes to the financial statements when there is a present legal or constructive obligation to forfeit economic benefits as a result of events in the past and it is probable that an outflow of resources embodying economic benefits or service potential will be required to settle the obligation and a reliable estimate of the obligation can be made. The provision is measured as the best estimate of the funds required to settle the present obligation at the reporting date.</p>
<p>17.2</p>	<p>Contingent liabilities Contingent liabilities are recorded in the notes to the financial statements when there is a possible obligation that arises from past events, and whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not within the control of the department or when there is a present obligation that is not recognised because it is not probable that an outflow of resources will be required to settle the obligation or the amount of the obligation cannot be measured reliably.</p>

<p>17.3</p>	<p>Contingent assets Contingent assets are recorded in the notes to the financial statements when a possible asset arises from past events, and whose existence will be confirmed by the occurrence or non-occurrence of one or more uncertain future events not within the control of the department.</p>
<p>17.4</p>	<p>Commitments Commitments (other than for transfers and subsidies) are recorded at cost in the notes to the financial statements when there is a contractual arrangement or an approval by management in a manner that raises a valid expectation that the department will discharge its responsibilities thereby incurring future expenditure that will result in the outflow of cash.</p>
<p>18</p>	<p>Unauthorised expenditure Unauthorised expenditure is recognised in the statement of financial position until such time as the expenditure is either:</p> <ul style="list-style-type: none"> • approved by Parliament or the Provincial Legislature with funding and the related funds are received; or • approved by Parliament or the Provincial Legislature without funding and is written off against the appropriation in the statement of financial performance; or • transferred to receivables for recovery. <p>Unauthorised expenditure is measured at the amount of the confirmed unauthorised expenditure.</p>
<p>19</p>	<p>Fruitless and wasteful expenditure Fruitless and wasteful expenditure is recorded in the notes to the financial statements when confirmed. The amount recorded is equal to the total value of the fruitless and or wasteful expenditure incurred. Fruitless and wasteful expenditure is removed from the notes to the financial statements when it is resolved or transferred to receivables for recovery. Fruitless and wasteful expenditure receivables are measured at the amount that is expected to be recoverable and are de-recognised when settled or subsequently written-off as irrecoverable.</p>

<p>Irregular expenditure Irregular expenditure is recorded in the notes to the financial statements when confirmed. The amount recorded is equal to the value of the irregular expenditure incurred unless it is impracticable to determine, in which case reasons therefor are provided in the note. Irregular expenditure is removed from the note when it is either condoned by the relevant authority, transferred to receivables for recovery or not condoned and is not recoverable. Irregular expenditure receivables are measured at the amount that is expected to be recoverable and are de-recognised when settled or subsequently written-off as irrecoverable.</p>	<p>20</p>
<p>Changes in accounting policies, accounting estimates and errors Changes in accounting policies that are effected by management have been applied retrospectively in accordance with MCS requirements, except to the extent that it is impracticable to determine the period-specific effects or the cumulative effect of the change in policy. In such instances the department shall restate the opening balances of assets, liabilities and net assets for the earliest period for which retrospective restatement is practicable. Changes in accounting estimates are applied prospectively in accordance with MCS requirements. Correction of errors is applied retrospectively in the period in which the error has occurred in accordance with MCS requirements, except to the extent that it is impracticable to determine the period-specific effects or the cumulative effect of the error. In such cases the department shall restate the opening balances of assets, liabilities and net assets for the earliest period for which retrospective restatement is practicable.</p>	<p>21</p>
<p>Events after the reporting date Events after the reporting date that are classified as adjusting events have been accounted for in the financial statements. The events after the reporting date that are classified as non-adjusting events after the reporting date have been disclosed in the notes to the financial statements.</p>	<p>22</p>
<p>Principal-Agent arrangements The department is party to a principal-agent arrangement for the management of the procurement, warehousing, distribution and information management for pharmaceuticals and surgical sundries. In terms of the arrangement the department is the principal and is responsible for requisitioning supplies through the agent. All related revenues, expenditures, assets and liabilities have been recognised or recorded in terms of the relevant policies listed herein. Additional disclosures have been provided in the notes to the financial statements where appropriate.</p>	<p>23</p>
<p>Departures from the MCS requirements Management has not departed from MCS requirements</p>	<p>24</p>

25	<p>Capitalisation reserve</p> <p>The capitalisation reserve comprises of financial assets and/or liabilities originating in a prior reporting period but which are recognised in the statement of financial position for the first time in the current reporting period. Amounts are recognised in the capitalisation reserves when identified in the current period and are transferred to the National/Provincial Revenue Fund when the underlying asset is disposed and the related funds are received.</p>
26	<p>Recoverable revenue</p> <p>Amounts are recognised as recoverable revenue when a payment made in a previous financial year becomes recoverable from a debtor in the current financial year. Amounts are either transferred to the National/Provincial Revenue Fund when recovered or are transferred to the statement of financial performance when written-off.</p>
27	<p>Related party transactions</p> <p>A related party transaction is a transfer of resources, services or obligations between the reporting entity and a related party. Related party transactions within the Minister/MEC's portfolio are recorded in the notes to the financial statements when the transaction is not at arm's length. Key management personnel are those persons having the authority and responsibility for planning, directing and controlling the activities of the department. The number of individuals and their full compensation is recorded in the notes to the financial statements.</p>
28	<p>Inventories (Effective from date determined in a Treasury Instruction)</p> <p>At the date of acquisition, inventories are recognised at cost in the statement of financial performance.</p> <p>Where inventories are acquired as part of a non-exchange transaction, the inventories are measured at fair value as at the date of acquisition. Inventories are subsequently measured at the lower of cost and net realisable value or where intended for distribution (or consumed in the production of goods for distribution) at no or a nominal charge, the lower of cost and current replacement value.</p> <p>The cost of inventories is assigned by using the weighted average cost basis.</p>
29	<p>Public-Private Partnerships</p> <p>Public Private Partnerships are accounted for based on the nature and or the substance of the partnership. The transaction is accounted for in accordance with the relevant accounting policies.</p> <p>A summary of the significant terms of the PPP agreement, the parties to the agreement, and the date of commencement thereof together with the description and nature of the concession fees received, the unitary fees paid, rights and obligations of the department are recorded in the notes to the financial statements.</p>
30	<p>Employee benefits</p> <p>The value of each major class of employee benefit obligation (accruals, payables not recognised and provisions) is disclosed in the Employee benefits note.</p>

1. Annual Appropriation

1.1 Annual Appropriation

Included are funds appropriated in terms of the Appropriation Act (and the Adjustments Appropriation Act) for National Departments (Voted funds) and Provincial Departments:

	2018/19		2017/18	
	Final Appropriation R'000	Actual Funds Received R'000	Funds not requested/not received R'000	Final Appropriation Appropriation received R'000
Administration	289 609	289 609	-	342 113
District Health Services	8 031 721	8 031 721	-	7 182 004
Emergency Medical Services	363 422	363 422	-	371 519
Provincial Hospital Services	1 368 773	1 368 773	-	1 302 741
Central Hospital Services	1 224 452	1 224 452	-	1 120 507
Health Sciences and Training	365 839	365 839	-	375 526
Health Care Support Services	157 928	157 928	-	200 304
Health Facilities Management	1 317 847	1 317 847	-	1 265 339
Total	13 119 591	13 119 591	-	12 160 053

1.2 Conditional grants

	Note	2018/19	2017/18
		R'000	R'000
Total grants received	32	2 389 168	1 791 711
Provincial grants included in Total Grants received		-	-

2. Departmental revenue

	Note	2018/19	2017/18
		R'000	R'000
Tax revenue		-	-
Sales of goods and services other than capital assets	2.1	63 828	75 640
Fines, penalties and forfeits		-	-
Interest, dividends and rent on land	2.2	6 515	4 010
Sales of capital assets	2.3	4 138	4 565
Transactions in financial assets and liabilities	2.4	4 264	3 612
Transfer received		-	-
Total revenue collected		78 745	87 827
Less: Own revenue included in appropriation	12	78 745	87 827
Departmental revenue collected		-	-

2.1 Sales of goods and services other than capital assets

	Note	2018/19	2017/18
	2	R'000	R'000
Sales of goods and services produced by the department		63 242	75 356
Sales by market establishment		12 184	15 078
Administrative fees		-	-
Other sales		51 058	60 278
Sales of scrap, waste and other used current goods		586	284
Total		63 828	75 640

Other sales include Private healthcare licence applications, duplicate certificates, medical reports, boarding services, commission on insurance and garnishee, course fees, day care fees, immunisation fees, patient fees, private patient fees, patient transport, special events, cremation/ mortuary fees and photocopies and fax fees.

2.2 Interest, dividends and rent on land

	Note	2018/19	2017/18
	2	R'000	R'000
Interest		6 515	4 010
Dividends		-	-
Rent on land		-	-
Total		6 515	4 010

2.3 Sale of capital assets

	Note	2018/19 R'000	2017/18 R'000
Tangible assets	2	4 138	4 565
Buildings and other fixed structures	28	-	-
Machinery and equipment	27	4 138	4 565
Specialised military assets	-	-	-
Land and subsoil assets	-	-	-
Biological assets	-	-	-
Intangible assets		-	-
Software	-	-	-
Mastheads and publishing titles	-	-	-
Patents, licences, copyright, brand names, trademarks	-	-	-
Recipes, formulae, prototypes, designs, models	-	-	-
Services and operating rights	-	-	-
Total		4 138	4 565

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2.4 Transactions in financial assets and liabilities

	Note	2018/19	2017/18
	2	R'000	R'000
Loans and advances		-	-
Receivables ¹		-	-
Forex gain		-	-
Stale cheques written back		-	-
Other Receipts including Recoverable Revenue		4 264	3 612
Gains on GFECRA		-	-
Total		4 264	3 612

Other receipts include recovery of previous departmental debt, domestic services, staff debt, cash surpluses, previous year's expenditure and stale cheques.

3. Compensation of employees

3.1 Salaries and Wages

	Note	2018/19 R'000	2017/18 R'000
Basic salary		4 937 202	4 595 682
Performance award		120 078	107 823
Service Based		5 866	7 080
Compensative/circumstantial		749 628	790 949
Periodic payments		20 520	20 603
Other non-pensionable allowances		872 774	817 803
Total		6 706 068	6 339 940

Other Non - pensionable allowances include Capital remuneration, Housing allowances, Non - pensionable allowances not separately provided for and Service bonus.

3.2 Social contributions

<i>Note</i>	2018/19	2017/18
	R'000	R'000
Employer contributions		
Pension	588 064	545 828
Medical	366 868	329 804
UIF	-	-
Bargaining council	1 953	1 533
Official unions and associations	-	-
Insurance	-	-
Total	956 885	877 165
Total compensation of employees	7 662 953	7 217 105
Average number of employees	20 859	20 555

The Department had 19094 permanent employees, 998 contracted employees, 375 periodical appointments, 289 sessional appointments, 166 abnormal appointments, 1 temporary and 1 political appointments at the end of March on the establishment. The 20859 displays the average number of employees for the year under review.

4. Goods and services

	Note	2018/19 R'000	2017/18 R'000
Administrative fees		200 566	216 139
Advertising		5 776	5 030
Minor assets	4.1	4 171	4 940
Bursaries (employees)		-	1 057
Catering		3 391	2 708
Communication		38 913	37 051
Computer services	4.2	24 515	38 647
Consultants: Business and advisory services		4 413	5 594
Infrastructure and planning services		-	-
Laboratory services		495 105	411 385
Scientific and technological services		-	-
Legal services		35 632	28 640
Contractors		102 012	113 767
Agency and support / outsourced services		113 934	73 932
Entertainment		-	-
Audit cost – external	4.3	18 859	18 820
Fleet services		114 692	107 886
Inventory	4.4	2 129 996	1 849 972
Consumables	4.5	136 533	133 630
Housing		-	-
Operating leases		50 690	44 526
Property payments	4.6	358 587	274 758
Rental and hiring		963	60
Transport provided as part of the departmental activities		399	280
Travel and subsistence	4.7	66 803	60 404
Venues and facilities		665	1 290
Training and development		4 713	5 310
Other operating expenditure	4.8	2 563	4 148
Total		3 913 891	3 439 974

Other operating expenditure includes Couriers and delivery services, Non-life insurance and Printing and publication cost.

4.1 Minor assets

	Note	2018/19	2017/18
	4	R'000	R'000
Tangible assets		4 171	4 940
Buildings and other fixed structures		-	-
Biological assets		-	-
Heritage assets		-	-
Machinery and equipment		4 171	4 940
Transport assets		-	-
Specialised military assets		-	-
Intangible assets		-	-
Software		-	-
Mastheads and publishing titles		-	-
Patents, licences, copyright, brand names, trademarks		-	-
Recipes, formulae, prototypes, designs, models		-	-
Services and operating rights		-	-
Total		4 171	4 940



4.2 Computer services

	Note	2018/19	2017/18
	4	R'000	R'000
SITA computer services		5 634	11 133
External computer service providers		18 881	27 514
Total		24 515	38 647

4.3 Audit cost – External

	Note	2018/19	2017/18
	4	R'000	R'000
Regularity audits		18 859	18 820
Performance audits		-	-
Investigations		-	-
Environmental audits		-	-
Computer audits		-	-
Total		18 859	18 820

4.4 Inventory

	Note	2018/19 R'000	2017/18 R'000
Clothing material and accessories	4	-	-
Farming supplies		-	-
Food and food supplies		79 158	87 219
Fuel, oil and gas		-	-
Learning, teaching and support material		-	-
Materials and supplies		-	-
Medical supplies		434 708	363 125
Medicine		1 616 130	1 399 628
Medsas inventory interface		-	-
Other supplies	4.4.1	-	-
Total		2 129 996	1 849 972

Inventory items (Clothing materials, Farming supplies, Fuel oil and gas and Materials and supplies) disclosed in previous financial year related to non-core services which was not available on financial system during that year. These items has been reclassified and form part of consumables disclosure.

4.5 Consumables

	Note	2018/19	2017/18
	4	R'000	R'000
Consumable supplies		118 662	117 374
Uniform and clothing		29 879	28 114
Household supplies		72 184	60 245
Building material and supplies		-	-
Communication accessories		-	-
IT consumables		229	253
Other consumables		16 370	28 762
Stationery, printing and office supplies		17 871	16 256
Total		136 533	133 630

Other includes Gifts and awards, Fuel supplies, Building supplies, Notice Boards, Hardware, Laboratory consumables and Bags and accessories

4.6 Property payments

	Note	2018/19	2017/18
	4	R'000	R'000
Municipal services		130 882	134 781
Property management fees		-	-
Property maintenance and repairs		220 344	137 549
Other		7 361	2 428
Total		358 587	274 758

Other includes Gardening services, Cleaning services. Fire fighting, Pest control, Laundry services and Safety and Security.

4.7 Travel and subsistence

	Note	2018/19	2017/18
	4	R'000	R'000
Local		61 636	53 680
Foreign		5 167	6 724
Total		66 803	60 404

4.8 Other operating expenditure

	<i>Note</i>	2018/19	2017/18
	4	R'000	R'000
Professional bodies, membership and subscription fees		501	288
Resettlement costs		780	808
Other		1 282	3 052
Total		2 563	4 148

Other includes Couriers and delivery cost, Nonlife insurance and Printing and publications.

5. Interest and rent on land

	<i>Note</i>	2018/19	2017/18
		R'000	R'000
Interest paid		487	317
Rent on land		-	-
Total		487	317

6. Transfers and subsidies

		2018/19	2017/18
	<i>Note</i>	R'000	R'000
Provinces and municipalities	33	2 326	519
Departmental agencies and accounts	<i>Annex 1B</i>	14 185	6 926
Higher education institutions		-	-
Foreign governments and international organisations		-	-
Public corporations and private enterprises		-	-
Non-profit institutions	<i>Annex 1F</i>	308 946	194 987
Households	<i>Annex 1G</i>	124 443	165 829
Total		449 900	368 261

7. Expenditure for capital assets

	Note	2018/19 R'000	2017/18 R'000
Tangible assets		1 028 712	1 057 356
Buildings and other fixed structures	29	896 065	936 813
Heritage assets	-	-	-
Machinery and equipment	27	132 647	120 543
Specialised military assets	-	-	-
Land and subsoil assets	-	-	-
Biological assets	-	-	-
Intangible assets		-	-
Software	-	-	-
Mastheads and publishing titles	-	-	-
Patents, licences, copyright, brand names, trademarks	-	-	-
Recipes, formulae, prototypes, designs, models	-	-	-
Services and operating rights	-	-	-
Total		1 028 712	1 057 356

7.1 Analysis of funds utilised to acquire capital assets – 2018/19

	Voted funds R'000	Aid assistance R'000	Total R'000
Tangible assets	1 028 712		1 028 712
Buildings and other fixed structures	896 065	-	896 065
Heritage assets	-	-	-
Machinery and equipment	132 647	-	132 647
Specialised military assets	-	-	-
Land and subsoil assets	-	-	-
Biological assets	-	-	-
Intangible assets			
Software	-	-	-
Mastheads and publishing titles	-	-	-
Patents, licences, copyright, brand names, trademarks	-	-	-
Recipes, formulae, prototypes, designs, models	-	-	-
Services and operating rights	-	-	-
Total	1 028 712		1 028 712



7.2 Analysis of funds utilised to acquire capital assets – 2017/18

	Voted funds R'000	Aid assistance R'000	Total R'000
Tangible assets	1 057 356	-	1 057 356
Buildings and other fixed structures	936 813	-	936 813
Heritage assets	-	-	-
Machinery and equipment	120 543	-	120 543
Specialised military assets	-	-	-
Land and subsoil assets	-	-	-
Biological assets	-	-	-
Intangible assets	-	-	-
Software	-	-	-
Mastheads and publishing titles	-	-	-
Patents, licences, copyright, brand names, trademarks	-	-	-
Recipes, formulae, prototypes, designs, models	-	-	-
Services and operating rights	-	-	-
Total	1 057 356	-	1 057 356



8. Unauthorised expenditure
8.1 Reconciliation of unauthorised expenditure

Note	2018/19 R'000	2017/18 R'000
Opening balance	234 705	200 706
Prior period error	-	-
As restated	234 705	200 706
Unauthorised expenditure – discovered in current year (as restated)	-	33 999
Less: Amounts approved by Parliament/ Legislature with funding	-	-
Less: Amounts approved by Parliament/ Legislature without funding	-	-
Capital	-	-
Current	-	-
Transfers and subsidies	-	-
Less: Amounts transferred to receivables for recovery	-	-
Closing balance	234 705	234 705
Analysis of closing balance		
Unauthorised expenditure awaiting authorisation	147 423	147 423
Unauthorised expenditure approved without funding and not derecognised	87 282	87 282
Total	234 705	234 705

The Department has R 87 282 million approved without funding and it will be written off with future savings.

8.2 Analysis of unauthorised expenditure awaiting authorisation per economic classification

	2018/19 R'000	2017/18 R'000
Capital	121 982	121 982
Current	-	-
Transfers and subsidies	25 441	25 441
Total	147 423	147 423

8.3 Analysis of unauthorised expenditure awaiting authorisation per type

	2018/19 R'000	2017/18 R'000
Unauthorised expenditure relating to overspending of the vote or a main division within a vote	118 574	118 574
Unauthorised expenditure incurred not in accordance with the purpose of the vote or main division	28 849	28 849
Total	147 423	147 423

8.4 Prior period error

Nature of prior period error	Note	2017/18 R'000
Relating to 2017/18		87 282
Restatement of comparative unauthorised expenditure for 2-17/18 fin year.		87 282
		-
Total prior period errors		87 282

Comparative amount of R 87 282 277 was not included in previous year in Note 11 analysis of closing balance regarding the condoned unauthorised expenditure without funding of which was approved in 2013.

9. Cash and cash equivalents

Nature	2018/19 R'000	2017/18 R'000
Consolidated Paymaster General Account	75 273	91 058
Cash receipts	-	(3)
Disbursements	(2 126)	(2 907)
Cash on hand	8	4
Investments (Domestic)	-	-
Investments (Foreign)	-	-
Total	73 155	88 152

10. Receivables

	Note	2018/19			2017/18		
		Current	Non-current	Total	Current	Non-current	Total
		R'000	R'000	R'000	R'000	R'000	R'000
Claims recoverable	-	-	-	-	-	-	
Trade receivables	-	-	-	-	-	-	
Recoverable expenditure	-	-	-	-	-	-	
Staff debt	10.1	19 044	-	19 044	15 645	-	15 645
Fruitless and wasteful expenditure	10.3	5 476	-	5 476	5 476	-	5 476
Other debtors	10.2	2 972	-	2 972	432	-	432
Total		27 492	-	27 492	21 553	-	21 553

The Other Debtors includes: Department of Health Gauteng, Eastern Cape and Department of Correctional Services.

10.1 Staff debt

Note	2018/19	2017/18
10	R'000	R'000
Ex-Employees	16 021	13 328
Employees	2 708	2 045
GG Accident	315	272
Total	19 044	15 645

10.1 Other debtors

Note	2018/19	2017/18
10	R'000	R'000
Inter-Departmental Claims	1 224	432
Suppliers	1 748	-
Total	2 972	432

The Other Debtors includes: Department of Health Gauteng, Eastern Cape and Department of Correctional Services.

10.2 Fruitless and wasteful expenditure

	Note	2018/19	2017/18
	10	R'000	R'000
Opening balance		5 476	5 476
Less amounts recovered		-	-
Less amounts written off		-	-
Transfers from note 32 Fruitless and Wasteful Expenditure		-	-
Interest		-	-
Total		5 476	5 476

10.3 Impairment of receivables

	Note	2018/19	2017/18
		R'000	R'000
Estimate of impairment of receivables		10 717	8 132
Total		10 717	8 132

11. Voted funds to be surrendered to the Revenue Fund

	Note	2018/19	2017/18
		R'000	R'000
Opening balance		333 147	248 556
Prior period error			
As restated		333 147	248 556
Transfer from statement of financial performance (as restated)		63 648	77 040
Add: Unauthorised expenditure for current year	8	-	33 999
Voted funds not requested/not received	1.1	-	-
Transferred to retained revenue to defray excess expenditure (PARLIAMENT/ LEGISLATURES ONLY)		-	-
Paid during the year		(77 040)	(26 448)
Closing balance		319 755	333 147

12. Departmental revenue and NRF Receipts to be surrendered to the Revenue Fund

Note	2018/19 R'000	2017/18 R'000
Opening balance	6 393	9 731
Prior period error		-
As restated	6 393	9 731
Transfer from Statement of Financial Performance (as restated)	-	-
Own revenue included in appropriation	78 745	87 827
Transfer from aid assistance	-	-
Transfer to voted funds to defray expenditure (Parliament/Legislatures ONLY)	-	-
Paid during the year	(77 077)	(91 165)
Closing balance	8 061	6 393

13. Payables – current

Note	2018/19 R'000	2017/18 R'000
Amounts owing to other entities	-	-
Advances received	-	-
Clearing accounts	4 823	3 604
Other payables	-	-
Total	4 823	3 604

13.1 Clearing accounts

Note	2018/19 R'000	2017/18 R'000
13	R'000	R'000
Description		
SAL: Pension Debt	1 339	892
SAL:ACB Recalls	65	406
SAL: Pension Fund	71	60
SAL: Tax Debt	683	854
SAL: Reversal Control	(469)	(457)
SAL: Garnishee Order	129	140
SAL: Bargaining Councils	1	2
SAL: Income Tax	2 986	1 691
SAL: Medical Aid	18	16
Total	4 823	3 604

14. Net cash flow available from operating activities

	2018/19 R'000	2017/18 R'000
Net surplus/(deficit) as per Statement of Financial Performance	63 648	77 040
Add back non cash/cash movements not deemed operating activities	944 482	1 024 035
(Increase)/decrease in receivables	(5 939)	(1 544)
(Increase)/decrease in prepayments and advances	-	-
(Increase)/decrease in other current assets	-	-
Increase/(decrease) in payables – current	1 219	2 574
Proceeds from sale of capital assets	(4 138)	(4 565)
Proceeds from sale of investments	-	-
(Increase)/decrease in other financial assets	-	-
Expenditure on capital assets	1 028 712	1 057 356
Surrenders to Revenue Fund	(154 117)	(117 613)
Surrenders to RDP Fund/Donor	-	-
Voted funds not requested/not received	-	-
Own revenue included in appropriation	78 745	87 827
Other non-cash items	-	-
Net cash flow generated by operating activities	1 008 130	1 101 075

15. Reconciliation of cash and cash equivalents for cash flow purposes

<i>Note</i>	2018/19	2017/18
	R'000	R'000
Consolidated Paymaster General account	75 273	91 058
Fund requisition account	-	-
Cash receipts	-	(3)
Disbursements	(2 126)	(2 907)
Cash on hand	8	4
Cash with commercial banks (Local)	-	-
Cash with commercial banks (Foreign)	-	-
Total	73 155	88 152

16. Contingent liabilities and contingent assets

16.1 Contingent liabilities

<i>Note</i>	2018/19	2017/18
	R'000	R'000
Liable to		
Nature		
Motor vehicle guarantees Employees	-	-
Housing loan guarantees Employees <i>Annex 3A</i>	157	157
Other guarantees	-	-
Claims against the department <i>Annex 3B</i>	10 091 249	7 786 893
Intergovernmental payables (unconfirmed balances) <i>Annex 5</i>	19 410	27 106
Environmental rehabilitation liability	-	-
Other	-	-
Total	10 110 816	7 814 156

R 71.013 million was a correction of a prior year closing balance affecting the opening balance for the 2018-19 financial year. However, there are two files to the value of R 108 500 under investigation.

16.2 Contingent assets

<i>Note</i>	2018/19	2017/18
	R'000	R'000
Nature of contingent asset		
OSD Overpayments	20 122	20 122
Total	20 122	20 122

17. Commitments

	Note	2018/19 R'000	2017/18 R'000
Current expenditure			
Approved and contracted		85 181	27 715
Approved but not yet contracted		-	-
		85 181	27 715
Capital expenditure			
Approved and contracted		1 327 363	1 335 937
Approved but not yet contracted		-	-
		1 327 363	1 335 937
		1 412 544	1 363 652

R1.3 billion commitments relates to contracts on infrastructure projects longer than one year.

18. Accruals and payables not recognised

18.1 Accruals

	2018/19		2017/18	
	R'000		R'000	
	30 Days	30+ Days	Total	Total
Listed by economic classification				
Goods and services	173 676	-	173 676	221 139
Interest and rent on land	-	-	-	-
Transfers and subsidies	-	-	-	2 457
Capital assets	30 862	-	30 862	19 841
Other	-	-	-	22 009
Total	204 538	-	204 538	265 446

	2018/19 R'000	2017/18 R'000
Listed by programme level		
PR1: Administration Services	34 106	33 267
PR2: District Health Services	113 919	153 299
PR3: Emergency Medical Services	-	20 431
PR4: Provincial Hospital Services	7 933	13 949
PR5: Central Hospital Services	13 838	8 122
PR6: Health Sciences & Training Services	1 438	15 836
PR7: Health Care Support Services	32 373	644
PR8: Health Facility Management Services	931	19 898
Total	204 538	265 446



18.2 Payables not recognised

Listed by economic classification	2018/19			Total
	30 Days	30+ Days	Total	
Goods and services	207 166	128 155	335 321	460 730
Interest and rent on land	-	-	-	-
Transfers and subsidies	200	8	208	6 340
Capital assets	1 865	18	1 883	118 555
Other	32 514	-	32 514	-
Total	241 745	128 181	369 926	585 625

The Other relates to compensation of employees.

Listed by programme level	2018/19		2017/18
	Note	R'000	
PR1: Administration Services		28 290	17 623
PR2: District Health Services		199 576	357 181
PR3: Emergency Medical Services		13 602	65

	Note	2018/19 R'000	2017/18 R'000
PR4: Provincial Hospital Services		35 770	28 836
PR5: Central Hospital Services		28 739	61 897
PR6: Health Sciences & Training Services		23 827	4 998
PR7: Health Care Support Services		1 010	13 000
PR8: Health Facility Management Services		6 598	102 025
Other- Compensation of Employees		32 514	-
Total		369 926	585 625
<i>Included in the above totals are the following:</i>			
Confirmed balances with other departments	Note	24 641	3 105
Confirmed balances with other government entities	Annex 5	-	-
Total		24 641	3 105

19. Employee benefits

	Note	2018/19 R'000	2017/18 R'000
Leave entitlement		344 775	297 353
Service bonus		200 798	185 358
Performance awards		115 633	109 937
Capped leave commitments		227 962	232 879
Other		6 586	7 244
Total		895 754	832 771

Other is for the long services awards for the next twelve months. Included in leave entitlements are negative leave entitlements amount to R5.3 million.

20. Lease commitments

20.1 Operating leases

2018/19	Specialised military equipment R'000	Land R'000	Buildings and other fixed structures R'000	Machinery and equipment R'000	Total R'000
Not later than 1 year	-	-	4 019	16 657	20 676
Later than 1 year and not later than 5 years	-	-	6 321	9 006	15 327
Later than five years	-	-	-	-	-
Total lease commitments	-	-	10 340	25 663	36 003

2018/19	Specialised military equipment R'000	Land R'000	Buildings and other fixed structures R'000	Machinery and equipment R'000	Total R'000
2017/18	Specialised military equipment R'000	Land R'000	Buildings and other fixed structures R'000	Machinery and equipment R'000	Total R'000
Not later than 1 year	-	-	11 422	14 006	25 428
Later than 1 year and not later than 5 years	-	-	13 190	5 532	18 722
Later than five years	-	-	2 587	-	2 587
Total lease commitments	-	-	27 199	19 538	46 737

21. Accrued departmental revenue

	Note	2018/19	2017/18
		R'000	R'000
Tax revenue		-	-
Sales of goods and services other than capital assets		215 466	155 872
Fines, penalties and forfeits		-	-
Interest, dividends and rent on land		-	-
Sales of capital assets		-	-
Transactions in financial assets and liabilities		-	-
Transfers received		-	-
Other		-	-
Total		215 466	155 872

The receivables in respect of goods and services represent debt on patient fees. There were no write offs during the year in respect of patient fees. An impairment of R 82 994 million has been raised.

21.1 Analysis of accrued departmental revenue

Note	2018/19 R'000	2017/18 R'000
Opening balance	155 872	277 193
Less: amounts received	32 590	29 973
Add: amounts recorded	92 184	67 548
Less: amounts written-off/reversed as irrecoverable	-	158 896
Less: amounts transferred to receivables for recovery	-	-
Closing balance	215 466	155 872

21.2 Accrued department revenue written off

Nature of losses	Note	2018/19 R'000	2017/18 R'000
Write Off RAF (Road Accident Fund)		-	-
Patient Fees written off on the stand alone system		-	158 896
Total		-	158 896

21.3 Impairment of accrued departmental revenue

Nature of losses	Note	2018/19 R'000	2017/18 R'000
Estimate of impairment of accrued departmental revenue		189 002	140 456
Total		189 002	140 456

The R 189 002 million is an estimate off unrecoverable based on non-payment for more than 6 months.

22. Irregular expenditure
22.1 Reconciliation of irregular expenditure

	Note	2018/19	2017/18
		R'000	R'000
Opening balance		3 666 829	6 464 630
Prior period error			(3 107 721)
As restated		3 666 829	3 356 909
Add: Irregular expenditure – relating to prior year		-	-
Add: Irregular expenditure – relating to current year		138 899	309 920
Less: Prior year amounts condoned		-	-
Less: Current year amounts condoned		-	-
Less: Amounts not condoned and recoverable		-	-

	Note	2018/19 R'000	2017/18 R'000
Less: Amounts not condoned and not recoverable		-	-
Closing balance		3 805 728	3 666 829
Analysis of awaiting condonation per age classification			
Current year		138 899	309 920
Prior years		3 666 829	3 356 909
Total		3 805 728	3 666 829
<p>It was impractical for the Department to review all payment vouchers due to volume of transactions to certify completeness of irregular expenditure as identified by AGSA.</p>			

22.2 Details of irregular expenditure – added current year (relating to current and prior years)

Incident	Disciplinary steps taken/criminal proceedings	2018/19 R'000
Non Compliance of SCM Processes	Under Investigation	138 899
Total		138 899

22.3 Prior period error

Nature of prior period error	2017/18 R'000
Relating to 2018/19 [affecting the opening balance]	(3 107 721)
Relating to 2017/18 (affecting the opening balance)	(3 107 721)
Relating to 2017/18	-
	-
Total prior period errors	(3 107 721)

23. Fruitless and wasteful expenditure
23.1 Reconciliation of fruitless and wasteful expenditure

	Note	2018/19 R'000	2017/18 R'000
Opening balance		16 557	16 240
Prior period error			-
As restated		16 557	16 240
Fruitless and wasteful expenditure – relating to prior year		-	-
Fruitless and wasteful expenditure – relating to current year		487	317
Less: Amounts resolved		(13 934)	-
Less: Amounts transferred to receivables for recovery	10.3	(244)	-
Closing balance		2 866	16 557

23.2 Analysis of awaiting resolution per economic classification

	2018/19 R'000	2017/18 R'000
Current	487	317
Capital	-	-
Transfers and subsidies	-	-
Total	487	317



23.3 Analysis of Current year's (relating to current and prior years) fruitless and wasteful expenditure

Incident	2018/19 R'000
Disciplinary steps taken/criminal proceedings	
Late Payment to Service Providers	487
Still under investigation	
Total	487

24. Related party transactions

Note	2018/19 R'000
In kind goods and services provided/received	

In kind goods and services provided/received

Department of Public Works provides offices at Government Complex at no cost	-
Provincial Treasury Provides Financial Systems	-
Provincial Treasury provides Interns and pay on behalf of the Department	-
National Health Department pay services rendered by (SAICA) South African Institute for Chartered Accountants	-
Total	-

The R 1, 879 disclosed under Goods and services in 2017/18 has been adjusted.



25. Key management personnel

	No. of Individuals	2018/19 R'000	2017/18 R'000
Political office bearers (provide detail below)	2	1 870	1 903
Officials:			
Level 15 to 16	3	4 920	6 008
Level 14	13	13 701	12 524
Family members of key management personnel	6	3 870	3 257
Total		24 361	23 692

The disclosure is based on the top management structure.

26. Provisions

	Note	2018/19 R'000	2017/18 R'000
Please specify			
1. Grading for level 9 and 11 to 10 and 12 respectively		26 592	15 571
2. OSD Under Payment		651	640
3. Provision for Retention		47 545	37 885
4. Provision for Litigation		36 600	37 425
Total		111 388	91 521

26.1 Reconciliation of movement in provisions – 2018/19

	Grading R'000	OSD R'000	Retention R'000	Litigation R'000	Total provisions R'000
Opening balance	15 571	640	37 885	37 425	91 521
Increase in provision	11 021	11	9 660	19 100	39 792
Settlement of provision	-	-	-	(7 742)	(7 742)
Unused amount reversed	-	-	-	-	-
Reimbursement expected from third party	-	-	-	-	-
Change in provision due to change in estimation of inputs	-	-	-	(12 183)	(12 183)
Closing balance	26 592	651	47 545	36 600	111 388

Reconciliation of movement in provisions – 2017/18

	Grading R'000	OSD R'000	Retention R'000	Litigation R'000	Total provisions R'000
Opening balance	10 259	9 196	5 097	-	24 552
Increase in provision	5 312	-	32 788	37 425	75 525
Settlement of provision	-	(8 556)	-	-	(8 556)
Unused amount reversed	-	-	-	-	-
Reimbursement expected from third party	-	-	-	-	-
Change in provision due to change in estimation of inputs	-	-	-	-	-
Closing balance	15 571	640	37 885	37 425	91 521

27. Movable Tangible Capital Assets

MOVEMENT IN MOVABLE TANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2019						
	Opening balance	Value adjustments	Additions	Disposals	Closing Balance	
	R'000	R'000	R'000	R'000	R'000	R'000
HERITAGE ASSETS						
Heritage assets	-	-	-	-	-	-
MACHINERY AND EQUIPMENT	1 371 396	-	139 195	49 149	1 461 442	
Transport assets	359 062	-	25 098	23 901	360 259	
Computer equipment	82 135	-	11 292	408	93 019	
Furniture and office equipment	65 157	-	1 601	385	66 373	
Other machinery and equipment	865 042	-	101 204	24 455	941 791	
SPECIALISED MILITARY ASSETS						
Specialised military assets	-	-	-	-	-	-
BIOLOGICAL ASSETS						
Biological assets	-	-	-	-	-	-
TOTAL MOVABLE TANGIBLE CAPITAL ASSETS	1 371 396	-	139 195	49 149	1 461 442	

27.1 Additions

Cash	Non-cash	Progress current costs and finance lease payments	Received current, not paid (Paid current year, received prior year)	Total
R'000	R'000	R'000	R'000	R'000

ADDITIONS TO MOVABLE TANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2019

HERITAGE ASSETS

Heritage assets	-	-	-	-
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MACHINERY AND EQUIPMENT

Transport assets	21 364	3 734	-	25 098
Computer equipment	4 175	7 117	-	11 292
Furniture and office equipment	1 552	81	(32)	1 601
	132 646	10 977	(4 428)	139 195

	Cash R'000	Non-cash R'000	(Capital Work in Progress current costs and finance lease payments) R'000	Received current, not paid (Paid current year, received prior year) R'000	Total R'000
Other machinery and equipment	105 555	45	-	(4 396)	101 204
SPECIALISED MILITARY ASSETS	-	-	-	-	-
Specialised military assets	-	-	-	-	-
BIOLOGICAL ASSETS	-	-	-	-	-
Biological assets	-	-	-	-	-
TOTAL ADDITIONS TO MOVABLE TANGIBLE CAPITAL ASSETS	132 646	10 977	-	(4 428)	139 195

27.2 Disposals

DISPOSALS OF MOVABLE TANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2019

	Sold for cash	Non-cash disposal	Total disposals	Cash Received Actual
	R'000	R'000	R'000	R'000
HERITAGE ASSETS	-	-	-	-
Heritage assets	-	-	-	-
MACHINERY AND EQUIPMENT	49 149	-	49 149	4 138
Transport assets	23 901	-	23 901	4 138
Computer equipment	408	-	408	-
Furniture and office equipment	385	-	385	-
Other machinery and equipment	24 455	-	24 455	-
SPECIALISED MILITARY ASSETS	-	-	-	-
Specialised military assets	-	-	-	-
BIOLOGICAL ASSETS	-	-	-	-
Biological assets	-	-	-	-
TOTAL DISPOSAL OF MOVABLE TANGIBLE CAPITAL ASSETS	49 149	-	49 149	4 138

309

27.3 Movement for 2017/18

MOVEMENT IN TANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2018

	Opening balance R'000	Prior period error R'000	Additions R'000	Disposals R'000	Closing Balance R'000
HERITAGE ASSETS	-	-	-	-	-
Heritage assets	-	-	-	-	-
MACHINERY AND EQUIPMENT	1 242 327	44 866	121 013	36 810	1 371 396
Transport assets	356 112	2 371	24 299	23 720	359 062
Computer equipment	75 756	4 297	4 228	2 146	82 135
Furniture and office equipment	63 172	1 254	2 410	1 679	65 157
Other machinery and equipment	747 287	36 944	90 076	9 265	865 042
SPECIALISED MILITARY ASSETS	-	-	-	-	-
Specialised military assets	-	-	-	-	-
BIOLOGICAL ASSETS	-	-	-	-	-
Biological assets	-	-	-	-	-
TOTAL MOVABLE TANGIBLE CAPITAL ASSETS	1 242 327	44 866	121 013	36 810	1 371 396



27.3.1	Prior period error	Note	2018/19	R'000
[Redacted content]				

Nature of prior period error

Relating to 2018/19 [affecting the opening balance]

Relating to the Opening Balance

Relating to 2017/18

Total prior period errors

44 866

44 866	-
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-	-
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44 866



27.4 Minor assets

MOVEMENT IN MINOR ASSETS PER THE ASSET REGISTER FOR THE YEAR ENDED AS AT 31 MARCH 2019

	Specialised military assets R'000	Intangible assets R'000	Heritage assets R'000	Machinery and equipment R'000	Biological assets R'000	Total R'000
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Opening balance	-	-	-	253 440	-	253 440
Value adjustments	-	-	-	-	-	-
Additions	-	-	-	5 475	-	5 475
Disposals	-	-	-	1 961	-	1 961

TOTAL MINOR ASSETS

	-	-	-	256 954	-	256 954
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	Specialised military as- sets	Intangible assets	Heritage as- sets	Machinery and equip- ment	Biological assets	Total
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Number of R1 minor assets	-	-	-	-	-	-
Number of minor assets at cost	-	-	-	150 861	-	150 861

TOTAL NUMBER OF MINOR ASSETS

	-	-	-	150 861	-	150 861
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MOVEMENT IN MINOR ASSETS PER THE ASSET REGISTER FOR THE YEAR ENDED AS AT 31 MARCH 2018

	Specialised military assets R'000	Intangible assets R'000	Heritage assets R'000	Machinery and equipment R'000	Biological assets R'000	Total R'000
Opening balance	-	-	-	257 490	-	257 490
Prior period error	-	-	-	9 012	-	9 012
Additions	-	-	-	5 101	-	5 101
Disposals	-	-	-	18 163	-	18 163
TOTAL MINOR ASSETS	-	-	-	253 440	-	253 440

	Specialised military assets	Intangible assets	Heritage assets	Machinery and equipment	Biological assets	Total
Number of R1 minor assets	-	-	-	-	-	-
Number of minor assets at cost	-	-	-	128 548	-	128 548
TOTAL NUMBER OF MINOR ASSETS	-	-	-	128 548	-	128 548

27.4.1 Prior period error

<i>Note</i>	2018/19
	R'000
Nature of prior period error	
Relating to 2018/19 [affecting the opening balance]	9 012
Relating to 2017/18 affecting opening balance	9 012
	-
Relating to 2017/18	-
	-
	-
Total prior period errors	9 012

28. Intangible Capital Assets

MOVEMENT IN INTANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2019

	Opening balance	Value adjustments	Additions	Disposals	Closing Balance
	R'000	R'000	R'000	R'000	R'000
SOFTWARE					
MASTHEADS AND PUBLISHING TITLES	-	-	-	-	-
PATENTS, LICENCES, COPYRIGHT, BRAND NAMES, TRADEMARKS	-	-	-	-	-
RECIPES, FORMULAE, PROTOTYPES, DESIGNS, MODELS	4 388	-	-	-	4 388
SERVICES AND OPERATING RIGHTS	-	-	-	-	-
TOTAL INTANGIBLE CAPITAL ASSETS	4 388	-	-	-	4 388

28.1 Movement for 2017/18

MOVEMENT IN INTANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2019

	Opening balance	Prior period error	Additions	Disposals	Closing Balance
	R'000	R'000	R'000	R'000	R'000
SOFTWARE	-	-	-	-	-
MASTHEADS AND PUBLISHING TITLES	-	-	-	-	-
PATENTS, LICENCES, COPYRIGHT, BRAND NAMES, TRADEMARKS	-	-	-	-	-
SERVICES AND OPERATING RIGHTS	-	-	-	-	-
TOTAL IMMOVABLE TANGIBLE CAPITAL ASSETS	128 983	-	899 712	161 420	867 276

29. Immovable Tangible Capital Assets

MOVEMENT IN IMMOVABLE TANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2019

	Opening balance	Value adjustments	Additions	Disposals	Closing Balance
	R'000		R'000	R'000	R'000
BUILDINGS AND OTHER FIXED STRUCTURES	128 983	-	899 712	161 420	867 276
Dwellings	8 042	-	-	8 042	-
Non-residential buildings	80 405	-	625 592	103 313	602 683
Other fixed structures	40 536	-	274 120	50 065	264 592
HERITAGE ASSETS	-	-	-	-	-
Heritage assets	-	-	-	-	-
LAND AND SUBSOIL ASSETS	-	-	-	-	-
Land	-	-	-	-	-
Mineral and similar non-regenerative resources	-	-	-	-	-
TOTAL IMMOVABLE TANGIBLE CAPITAL ASSETS	128 983	-	899 712	161 420	867 276

29.1 Additions

ADDITIONS TO IMMOVABLE TANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2019

	Cash	Non-cash	(Capital Work in Progress current costs and finance lease payments)	Received current, not paid (Paid current year, received prior year)	Total
	R'000	R'000	R'000	R'000	R'000
BUILDING AND OTHER FIXED STRUCTURES	896 065	598 162	(594 515)	-	899 712
Dwellings	-	-	-	-	-
Non-residential buildings	765 061	444 210	(583 678)	-	625 592
Other fixed structures	131 005	153 952	(10 837)	-	274 120
HERITAGE ASSETS	-	-	-	-	-
Heritage assets	-	-	-	-	-
LAND AND SUBSOIL ASSETS	-	-	-	-	-
Land	-	-	-	-	-
Mineral and similar non-regenerative resources	-	-	-	-	-
TOTAL ADDITIONS TO IMMOVABLE TANGIBLE CAPITAL ASSETS	896 065	598 162	(594 515)	-	899 712

29.2 Disposals

DISPOSALS OF IMMOVABLE TANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2019

	Sold for cash	Non-cash disposal	Total disposals	Cash Received Actual
	R'000	R'000	R'000	R'000
BUILDINGS AND OTHER FIXED STRUCTURES	-	161 420	161 420	-
Dwellings	-	8 042	8 042	-
Non-residential buildings	-	103 313	103 313	-
Other fixed structures	-	50 065	50 065	-
HERITAGE ASSETS	-	-	-	-
Heritage assets	-	-	-	-
LAND AND SUBSOIL ASSETS	-	-	-	-
Land	-	-	-	-
Mineral and similar non-regenerative resources	-	-	-	-
TOTAL DISPOSALS OF IMMOVABLE TANGIBLE CAPITAL ASSETS	-	161 420	161 420	-

29.3 Movement for 2017/18

MOVEMENT IN IMMOVABLE TANGIBLE CAPITAL ASSETS PER ASSET REGISTER FOR THE YEAR ENDED 31 MARCH 2018

	Opening balance	Prior period error	Additions	Disposals	Closing Balance
	R'000	R'000	R'000	R'000	R'000
BUILDINGS AND OTHER FIXED STRUCTURES	1 724 432	-	198 447	1 793 896	128 983
Dwellings	167 076	-	8 043	167 076	8 042
Non-residential buildings	1 244 357	-	131 362	1 295 314	80 405
Other fixed structures	313 000	-	59 042	331 505	40 536
HERITAGE ASSETS	-	-	-	-	-
Heritage assets	-	-	-	-	-
LAND AND SUBSOIL ASSETS	-	-	-	-	-
Land	-	-	-	-	-
Mineral and similar non-regenerative resources	-	-	-	-	-
TOTAL IMMOVABLE TANGIBLE CAPITAL ASSETS	1 724 432	-	198 447	1 793 896	128 983

29.4 Capital Work-in-progress

CAPITAL WORK-IN-PROGRESS AS AT 31 MARCH 2019				
Note	Opening balance 1 April 2018	Current Year WIP	Ready for use (Assets to the AR) / Contracts terminated	Closing balance 31 March 2019
<i>Annexure 7</i>	R'000	R'000	R'000	R'000
Heritage assets	-	-	-	-
Buildings and other fixed structures	1 200 365	856 728	849 385	1 207 709
Machinery and equipment	-	-	-	-
Intangible assets	-	-	-	-
TOTAL	1 200 365	856 728	849 385	1 207 709

Age analysis on ongoing projects	Number of projects		2018/19
	Planned, Construction not started	Planned, Construction started	Total R'000
0 to 1 Year	2	3	11 509
1 to 3 Years	5	10	1 195 443
3 to 5 Years	-	1	757
Longer than 5 Years	-	-	-
Total	7	14	1 207 709

Accruals and payables not recognised relating to Capital WIP	Note	2018/19	2017/18
		R'000	R'000
Accruals		30 862	19 764
Payables		1 299	100 951
Total		32 161	120 715

CAPITAL WORK-IN-PROGRESS AS AT 31 MARCH 2018

	Note	Opening balance 1 April 2017	Prior period error	Current Year WIP	Ready for use (Assets to the AR) / Contracts terminated	Closing balance 31 March 2018
	<i>Annexure 7</i>	R'000	R'000	R'000	R'000	R'000
Heritage assets		-	-	-	-	-
Buildings and other fixed structures		476 796	-	863 476	139 907	1 200 365
Machinery and equipment		-	-	-	-	-
Intangible assets		-	-	-	-	-
TOTAL		476 796	-	863 476	139 907	1 200 365

Age analysis on ongoing projects	Number of projects		2017/18
	Planned, Construction not started	Planned, Construction started	Total R'000
0 to 1 Year	-	-	-
1 to 3 Years	9	17	1 200 365
3 to 5 Years	-	-	-
Longer than 5 Years	-	-	-
Total	9	17	1 200 365

Assets to be transferred in terms of S42 of the PFMA – 2017/18

	Number of assets	Value of assets R'000
BUILDINGS AND OTHER FIXED STRUCTURES	-	-
Dwellings	-	-
Non-residential buildings	-	-
Other fixed structures	-	-
HERITAGE ASSETS	-	-
Heritage assets	-	-
LAND AND SUBSOIL ASSETS	-	-
Land	-	-
Mineral and similar non- regenerative resources	-	-
TOTAL	-	-

30. Principal-agent arrangements

30.1 Department acting as the principal

	2018/19 R'000	2017/18 R'000
Safarmex Management Fees	198 704	213 454
Total	198 704	213 454

The Department has entered into a Service Level Agreement with Safarmex for the management of the procurement, warehousing, distribution and information management for pharmaceuticals and surgical sundries.

31. Prior period errors

31.1 Correction of prior period errors

	Note	Amount bef error correction	Prior period error	Restated Amount
		2018/19	2017/18	2018/19
		R'000	R'000	R'000

Expenditure:

Adjustment due to reclassification 2017/18	Note 24	1 879	(1 879)	-
Adjustment due to reclassification 2017/18	Note 4.4	1 650	(1 650)	-
Adjustment due to reclassification 2017/18	Note 4.4	4 048	(4 048)	-
Adjustment due to reclassification 2017/18	Note 4.4	7 021	(7 021)	-
Adjustment due to reclassification 2017/18	Note 4.4	12 138	(12 138)	-
Net effect		26 736	(26 736)	-

	Note	Amount bef error correction	Prior period error	Restated Amount
		2018/19	2017/18	2018/19
		R'000	R'000	R'000

Assets:

Relating to 2017/18 (affecting the opening balance)	Note 27.3	1 242 327	44 866	1 287 193
Relating to 2017/18 (affecting the opening balance)	Note 27.4	257 490	9 012	266 502
Net effect		1 499 817	53 878	1 553 695

	Note	Amount bef error correction	Prior period error	Restated Amount
		2018/19	2017/18	2018/19
		R'000	R'000	R'000

Liabilities:

Relating to 2017/18 Closing balance	Note 16.1	7 888 073	(101 180)	7 786 893
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Net effect		7 888 073	(101 180)	7 786 893
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	Note	Amount bef error correction	Prior period error	Restated Amount
		2018/19	2017/18	2018/19
		R'000	R'000	R'000

Other:

Relating to 2017/18 Opening balance	Note 22	6 464 630	(3 107 721)	3 356 909
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Restatement of comparative unauthorised expenditure for 2-17/18 fin year.	Note 8.1, 8.2, 8.3	209 264	(87 282)	121 982
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Net effect		6 673 894	(3 195 003)	3 478 891
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32. STATEMENT OF CONDITIONAL GRANTS RECEIVED

NAME OF GRANT	GRANT ALLOCATION					SPENT				2017/18	
	Division of Revenue Act/ Provincial Grants	Roll Overs	DORA Adjustments	Other Adjustments	Total Available	Amount received by department	Amount spent by department	Under / (Overspending)	% of available funds spent by department	Division of Revenue Act	Amount spent by department
	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000
Comprehensive HIV and AIDS Grant	1 744 627	-	-	-	1 744 627	1 744 627	1 744 102	525	100%	1 196 105	1 196 069
Health Facility Revitalisation Grant	333 935	30 604	-	-	364 539	364 539	364 538	1	100%	325 987	270 099
Health Professions Training and Development Grant	114 279	7 374	-	-	121 653	121 653	121 297	356	100%	108 014	99 962
National Health Insurance Grant	-	-	-	-	-	-	-	-	-	-	699
Human Papillomavirus Vaccine Grant	17 665	-	-	-	17 665	17 665	14 413	3 252	82%	-	-
National Tertiary Services Grant	116 489	6 852	-	-	123 341	123 341	121 944	1 397	99%	116 755	109 839

NAME OF GRANT	GRANT ALLOCATION					SPENT				2017/18	
	Division of Revenue Act/ Provincial Grants	Roll Overs	DORA Adjustments	Other Adjustments	Total Available	Amount received by department	Amount spent by department	Under / (Overspending)	% of available funds spent by department	Division of Revenue Act	Amount spent by department
	R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000	%	R'000	R'000
Expanded Public Works Programme	2 322	-	-	-	2 322	2 322	2 320	2	100%	3 653	3 308
Integrated Grant for Provinces-Health											
Social Sector Expanded Public Works Programme	15 021	-	-	-	15 021	15 021	14 653	368	98%	40 498	39 455
Incentive Grant for Provinces-Health											
	2 344 338	44	-	-	2 389 168	2 389 168	2 383 267	5 901		1 791 012	1 719 431
	830				168						

33. STATEMENT OF CONDITIONAL GRANTS AND OTHER TRANSFERS PAID TO MUNICIPALITIES

NAME OF MUNICIPALITY	GRANT ALLOCATION				TRANSFER			Re-allocations by National Treasury or National Department %
	DoRA and other transfers R'000	Roll Overs R'000	Adjustments R'000	Total Available R'000	Actual Transfer R'000	Funds Withheld R'000		
Department of Safety, Security, Community Liason	1 083	-	-	1 083	2 326	-	-	
TOTAL	1 083	-	-	1 083	2 326	-	-	

34. Unaudited schedules

The following Annexure 1B until Annexure 7 have schedules supporting some of the disclosures which have not been audited.

ANNEXURE TO THE ANNUAL FINANCIAL STATEMENT for the year ended 31 March 2019 ANNEXURE 1B STATEMENT OF TRANSFERS TO DEPARTMENTAL AGENCIES AND ACCOUNTS

DEPARTMENTAL AGENCY/ ACCOUNT	TRANSFER ALLOCATION				TRANSFER		2017/18
	Adjusted Appropriation	Roll Overs	Adjustments	Total Available	Actual Transfer	% of Available funds Transferred	
	R'000	R'000	R'000	R'000	R'000	%	R'000
SKILLS DEVELOPMENT LEVY	14 001	-	-	14 001	14 001	100%	6 785
COM: LICENCES	358	-	-	358	184	51%	141
TOTAL	14 359	-	-	14 359	14 185		6 926

**ANNEXURE 1F
STATEMENT OF TRANSFERS TO NON-PROFIT INSTITUTIONS**

NON-PROFIT INSTITUTIONS	TRANSFER ALLOCATION				EXPENDITURE		2017/18	
	Adjusted Appropriation Act	Roll overs	Adjust-ments	Total Available	Actual Transfer	Available funds transferred	Final Appropriation	
	R'000	R'000	R'000	R'000	R'000	%	R'000	
Transfers								
NPI: Home Base Care Services	248 874	-	-	248 874	246 883	99%	128 932	
NPI: District Health Services	77 490	-	-	77 490	62 063	80%	66 055	
NPI: Psychiatric Step-down Services	-	-	-	-	-	-	-	
	326 364	-	-	326 364	308 946		194 987	
Subsidies								
	-	-	-	-	-	-	-	
	326 364	-	-	326 364	308 946		194 987	

**ANNEXURE 1G
STATEMENT OF TRANSFERS TO HOUSEHOLDS**

HOUSEHOLDS	TRANSFER ALLOCATION				EXPENDITURE		2017/18
	Adjusted Appropriation Act	Roll Overs	Adjustments	Total Available	Actual Transfer	% of Available funds Transferred	Final Appropriation
	R'000	R'000	R'000	R'000	R'000	%	R'000
Transfers							
H/H EMPL S/BEN:INJURY ON DUTY	2 383	-	-	2 383	1 064	45%	165
H/H EMPL S/BEN:LEAVE GRATUITY	9 504	-	-	9 504	31 194	328%	34 408
H/H:CLAIMS AGAINST STATE(CASH)	23 115	-	-	23 115	39 268	170%	67 782
H/H:BURSARIES(NON-EMPLOYEE)	67 928	-	-	67 928	52 857	78%	63 304
H/H:DONATIONS&GIFTS(CASH)	60	-	-	60	60	100%	170
	102 990	-	-	102 990	124 443		165 829
Subsidies							
TOTAL	102 990	-	-	102 990	124 443		165 829

ANNEXURE 1H STATEMENT OF GIFTS, DONATIONS AND SPONSORSHIPS RECEIVED

NAME OF ORGANISATION	NATURE OF GIFT, DONATION OR SPONSORSHIP	2018/19	2017/18
		R'000	R'000
Received in cash			
SOPA AWARDS	Donation	-	10
Subtotal		-	10
Received in kind			
DR Stapelberg	Dental Chair	-	5
Right to Care	Electronic Body Scale	-	32
Sanlam	Spectacles	-	7
	Transport	-	1
Gert en Thea Middlelans	Chelsea Chairs	-	1
	90CM Square Plastic Table	-	-
	32" Sansui Television	-	2
	Video Telefunken	-	-
	Six- Seater Wooden Bench Tables	-	4
	3M Aluminium	-	1
Novasun Products (PTY)LTD	Wheel Chairs	-	86
Sponsored Vaccinology Scientific Congress	Air Ticket	-	19
	Accommodation	-	32
Africa Foundation	Gutters Materials	-	38
	Water Tanks	-	18
	Labour for gutters tanks, and plumbing installations	-	16
	Borehole repairs	-	8
Roche Diabetes	Accu-check Blood Glucose	-	5
Life Cosmos Hospital	Beds	-	1
	Food trolley	-	3
	Filing Cabinets	-	1
	Mattresses	-	1
	Cot bed with 1 mattress	-	1
	Emergency trolley	-	1
	Notice Board	-	-
	Recliners (leather)	-	-
	Recliners (orange)	-	-
	Red Sofa	-	-
	Navy Sofa	-	-
	Desks	-	-
Majuba Power Station	Wheel Chairs	-	100
Anglo American Mine	Water Cooler	-	3
	Table Boardroom	-	4
	High Back Chair	-	7
	Visitor Chair	-	5
	Steel Beach	-	53
Impulse Sourcing	Digital Thermometer	-	-
	Stethoscope Littman	-	2
	Neurological Reflex Hammers	-	-
	Laryngoscope Holder	-	-
	Pen Light	-	-
	Brose Low reference tape	-	1

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NAME OF ORGANISATION	NATURE OF GIFT, DONATION OR SPONSORSHIP	2018/19	2017/18
		R'000	R'000
	ENT Set Welchallyn	-	11
	BP Machine Portable	-	1
	Accu-Check Glucometer	-	1
	HB Meter	-	1
	Defibrillator	-	27
	Tray Dressing	-	-
	Stainless Steel Bowl	-	-
	Towel Dispenser	-	-
	Ear Thermometer	-	1
	Rescue Scissor	-	-
	Pen Light	-	-
	Artery - Forceps curved	-	-
	Needle Holder (14cm)	-	-
	Needle Holder (18cm)	-	-
	Dissecting Forceps -toothed	-	-
	Dressing Trolley Large	-	2
	Dressing Trolley Medium	-	1
	Chair Dental Assistant	-	1
	Stethoscope Littman	-	2
	Space Blanket Adult	-	-
	Liquid soap Dispenser	-	1
	Accu-Check Glucometer	-	1
	Tuning Fork c256	-	1
	Ear Thermometer	-	-
	ENT Set Welchallyn	-	11
	BP Machine Portable	-	1
	Folded towel Dispenser	-	1
	Stainless Steel Bowl	-	-
	Rescue Scissor	-	-
	Brose Low reference tape	-	-
	Anti-forces small	-	-
	Needle holder (14cm)	-	-
	Needle holder (18cm)	-	-
	Dycing Forceps Toothed	-	-
	Dycing Forceps non- Toothed	-	-
	Pen Light	-	-
	Digital Thermometer	-	-
	Neurological Reflex Hammers	-	-
	Pen Light	-	-
	HB Meter	-	1
	Laryngoscope Holder	-	-
	Trolley Kick about	-	1
	Dressing Trolley Small	-	1
	Dressing Trolley Medium	-	1
	Chair Dental Assistant	-	1
	Thermometer	-	-
	Neurological Reflex Hammers	-	-
	Accu-Check Glucometer	-	1
	ENT Set Welchallyn	-	11
	BP Machine Portable	-	1
	HB Meter	-	1
	Pulse Oximeter	-	3
	Stethoscope Littman	-	2
	Ear Thermometer infra-red	-	-

NAME OF ORGANISATION	NATURE OF GIFT, DONATION OR SPONSORSHIP	2018/19	2017/18
		R'000	R'000
	Brose Low reference tape	-	1
	Tray Dressing Small	-	-
	Laryngoscope Holder	-	-
	Digital Thermometer	-	-
	Stethoscope Littman	-	2
	Brose Low reference tape	-	1
	Liquid soap Dispenser	-	3
	Pin-Light	-	-
	HB Meter	-	1
	Laryngoscope Holder	-	-
	Accu-Check Glucometer	-	1
	Pen Light	-	-
	Stainless Steel Bowl	-	-
	ENT Set Welchallyn	-	11
	BP Machine Portable	-	1
	Tuning Fork c256	-	-
	Artery - Forceps	-	-
	Dycing Forceps	-	-
	Rescue Scissor	-	-
	Needle Holder (14cm)	-	-
	Needle Holder (14cm)	-	-
	Anti-forces Curved	-	-
	Space Blanket Adult	-	-
	Folded towel Dispenser	-	-
	Tuning Fork c512	-	-
	Dressing Trolley Large	-	3
	Trolley	-	1
	Chair Dental Assistant	-	1
	Pulse Oximeter	-	3
	HB Meter	-	1
	Chair Dental Assistant	-	1
	BP Machine Portable	-	1
	Dressing Trolley Small	-	2
	Dressing Trolley	-	3
	Pulse Oximeter	-	3
	BP Machine Portable	-	1
	HB Meter	-	1
	Stethoscope Littman	-	2
	Dressing Trolley Small	-	1
	Dressing Trolley Large	-	2
	Dressing Trolley Medium	-	1
	HB Meter	-	1
	Chair Dental Assistant	-	1
	Trolley Kick about	-	1
	Dressing Trolley Small	-	1
	Dressing Trolley Medium	-	1
	Dressing Trolley Small	-	1
	BP Machine Portable	-	1
	Chair Dental Assistant	-	1
	EAD	-	24
	CTG Machines	-	18
	Chair Dental Assistant	-	1
	Dressing Trolley Small	-	1
	Dressing Trolley Large	-	2

NAME OF ORGANISATION	NATURE OF GIFT, DONATION OR SPONSORSHIP	2018/19	2017/18
		R'000	R'000
	HB Meter	-	2
	ENT Set Welchallyn	-	22
	HB Meter	-	1
	BP Monitor	-	1
	Chair Dental Assistant	-	1
	Dressing Trolley Small	-	2
	Dressing Trolley Medium	-	1
	Chair Dental Assistant	-	1
	BP Monitor	-	1
	Stethoscope Littman	-	2
	Tray Dressing	-	-
	Needle holder (18cm)	-	-
	Space Blanket Adult	-	-
	Folded towel Dispenser	-	-
	Liquid soap Dispenser	-	1
	Folded towel Dispenser	-	-
	Rescue Scissor	-	-
	Tuning Fork c256	-	-
	Digital Thermometer	-	-
	Tuning Fork c256	-	-
	Tuning Fork c256	-	-
	Folded towel Dispenser White	-	-
	Stethoscope Littman	-	2
	trolley Kick about	-	1
	Pen Light	-	-
	Digital Thermometer	-	-
	Folded Towel Dispenser	-	-
	Dycing Forceps	-	-
	Dressing Trolley Medium	-	1
	Space Blanket Adult	-	-
	Chair Dental Assistant	-	1
	Accu- Check Glucometer	-	2
	Digital Thermometer	-	-
	EAD	-	24
	Dressing Trolley Small	-	1
	Dressing Trolley Large	-	1
	Chair Dental Assistant	-	1
	Trolley Kick about	-	1
	Dressing Trolley medium	-	1
	Dressing Trolley Small	-	1
	Trolley Kick about	-	1
	BP Monitor	-	1
	Chair Dental Assistant	-	1
	Accu- Check Glucometer	-	-
	Dressing Trolley Large	-	2
	Chair Dental Assistant	-	1
	Chair Dental Assistant	-	1
	BP Monitor	-	1
	Chair Dental Assistant	-	1
	ENT Set Welchallyn	-	11
	BP Monitor	-	1
	BP Monitor	-	1
	Chair Dental Assistant	-	1
	ENT Set Welchallyn	-	11

NAME OF ORGANISATION	NATURE OF GIFT, DONATION OR SPONSORSHIP	2018/19	2017/18
		R'000	R'000
ICAP GLOBAL	Chair Dental Assistant	-	1
	Trolley Kick about	-	1
	Dressing Trolley Small	-	1
	Liquid soap Dispenser	-	3
	Towel Dispenser	-	-
	Chair Dental Assistant	-	1
	Chair Dental Assistant	-	1
	Digital Thermometer	-	-
	Dressing Trolley medium	-	1
	Laryngoscope Holder	-	1
	FULLY ELECTRIC BEDS-4 SECTION WITH COMPLETE EITH 3/4 SAFETY SIDES	-	80
	VIDA HOSPITAAL BEDS	-	62
	HOSPITAL WARD BEDS	-	20
	NURSING KELLY ADVANCED WITH SIMPAD IN BROWN (MANIKIN)	-	253
	NURSING ANN ADVANCED WITH SIMPAD IN BROWN (MANIKIN)	-	253
	NURSING BABY ADVANCED WITH SIMPAD IN BROWN (MANIKINS)	-	188
	SIM MON SYSTEM (MANIKIN)	-	1 035
	MEGACODE KELLY ADVANCED WITH SIMPAD IN BROWN (MANIKINS)	-	344
	COMPUTER SKILLS SIMULATOR	-	173
	THINKPAD LAPTOP FOR SIM MOM	-	10
	LCD MONITOR WITH NBUILT IN CAMERA FOR SIM MOM	-	29
	WIFI ROUTER FOR SIM MOM	-	2
	DRIP HOLDERS STANDS	-	2
	RESCUSCINATION SET (INFANT AND ADULTS)	-	29
	WHEELCHAIR RAINBOW 18" REM WITH ARM AND FOOT SET	-	5
	RI-FORMER WALL DIAGNOSTIC STATION 2 HANDLES (EYE & EARS)	-	12
	AEROSOL DELIVERY SYSTEM	-	-
	DOMINO DIGITAL SPHYGMOMANOMETER	-	-
	BIG BEN ROUND WALL ADULT SIZE VELCRO CUFF	-	4
	VITAL SIGN MONITOR	-	41
	LIBRARY ASSETS- TOTAL AMOUNT TO R318,842.11 FOR ALL LIBRARY ASSETS	-	-
	LIBRARY BOOKS MANAGEMENT	-	363
	MAGAZINE STAND WITH 4 LIFTUP SHELVES	-	-
	NEWSPAPER STAND WITH 12 HOLDERS-SLOPPING	-	-
	BOOK TROLLEY WITH 4 SLOP SHELVES	-	-
	KICKSTEP (ROUNDSTEEL)	-	-
	TRAPEZOIDAL TABLES	-	-
	STEEL SHELVING (Racks)	-	-
	LOCKABLE GLASS DOOR CABINETS	-	-
	STUDY DESKS	-	-
COMPUTER DESKS	-	-	
CHAIRS (ORNGE)	-	4	
AIR CONDITIONERS	-	13	
M10.3" COLOR LCD VITAL SIGN MONITOR	-	23	
SP02,TEMPERATURE WITH TROLLEY	-	-	
CURTAIN RAILS	-	-	
CURTAINS	-	-	

NAME OF ORGANISATION	NATURE OF GIFT, DONATION OR SPONSORSHIP	2018/19	2017/18
		R'000	R'000
	PATIENTS FILES TABLES	-	7
	PATIENT 2 STEP LADDER	-	6
	AIR CONDITIONERS	-	8
	RESEARCH COMMON ASSETS INVENTORY LIST	-	-
	COMPUTERS	-	116
	WIRELESS ROUTER	-	2
	CHAIRS	-	10
	AIR CONDITIONER	-	17
Capitec Bank	Lex mark Printer	1	-
Standard bank	List blue with oak chairs	1	-
	Bar Fridge	1	-
	Blue Maroon Chairs	2	-
	Orange Chairs	-	-
	Drawer Set	2	-
	Filling Cabinet steel	-	-
	Filling Cabinet wood	-	-
	Desk table	1	-
Sasol Mine	Toyota Hino Cab Truck	1 500	-
Old Mutual OMF	Table with Cabinet Drawers	6	-
Sanlam	Spectacles	19	-
University of Pretoria	Hearing AIDS	57	-
university of Witwatersrand	Computer	3	-
Ndlovu Care Group	Motor Vehicle Isuzu	234	-
	Motor Vehicle Ford	277	-
	Motor Vehicle Nissan	141	-
Life Cosmos Hospital	Beds	10	-
Barberton Mines Bee company	Drawer Filling Cabinet	9	-
	Litter Pedal Bin	3	-
	Notice Boards Standards 1000mmx 1200mm	9	-
	Chrome de lux 3 seater	64	-
	Chrome de lux 5 seater	45	-
	Allegro Desk	16	-
	Office Operator Chair	5	-
	Boardroom Table	7	-
	Visitor (Boardroom) Char	15	-
	Bassinets Complete with Crib	5	-
	34L Microwave Metallic (Defy)	2	-
	Double door Fridge D320 Metallic (Deft)	6	-
	Combi C 300 Eco W/M Fridge and Freezer (Defy)	4	-
	Defy Bar Fridge 120l White	2	-
	Steel angle units (2. 1M high with 5x305M	39	-
	Mel chip white linear (1. 8M High with 5x305M	34	-
	Accu-Check Instan Kit (Glucose Meter)	1	-
	Accu-Check Instan STR	1	-
	Blood pressure Mon. Arm (Medium Cuff)	6	-
	Blood pressure Mon. CF D 2SNG (Large Cuffs)	1	-
	Thermometer	-	-
	Step Double FM0052	5	-
	Trolley Anae FM088 2 Drawers	15	-
	Suction pump askir 230 35x21x18CM	5	-
	Stretch 4 fold	3	-
	Drip Stand	1	-
	Digital Baby Scale	1	-

NAME OF ORGANISATION	NATURE OF GIFT, DONATION OR SPONSORSHIP	2018/19	2017/18
		R'000	R'000
USAID	HB Meter	1	-
	W/A Junior pocket 95001 diag 1	12	-
	Scale bremed/digital 7780 SM27-200KG	1	-
	Wheelchair deluxe	4	-
	Patella Strap neoprene MX Universal	-	-
	Nebulizer easy breathe MX	1	-
	Visitor Chair	50	-
	Laminating Machine	2	-
	Ring binding Machine	3	-
	Water Cooler	2	-
	Book shelve 5 tier	2	-
	Book shelve 5 tier	3	-
	Credenza	2	-
	Desk 1600x750	7	-
	Round Table1200	3	-
	Stationery Cabinet	4	-
	Table with steel pole	25	-
	Stationery Cabinet	2	-
	Tea trolley krost	2	-
	Urn salton 20l	1	-
	Microwave LG	1	-
	Fridge defy	4	-
	Reception unit	9	-
	laptop Lenovo	101	-
	laptop Lenovo T50	9	-
	laptop unit trolley	11	-
	Project screen - computer lab 2	2	-
	PA-System-computer	1	-
	White Board-Computer	1	-
	12M Container classrooms - Computer	500	-
	Kearneys Payicader	141	-
	M/Benz 309 CDI Sprinter	110	-
Right to care	Baby scale	2	-
	Adult scale	16	-
	Baumanometers	4	-
	Wall room thermometers	5	-
	Bar Fridge	3	-
	Credenza	4	-
	Desk office	12	-
	Chair visitor	20	-
	Plastic chair	2	-
	Foot stool	4	-
	Notice Boards	7	-
	Examination Couch	12	-
	Hospital bed	38	-
	Pedal Bins	3	-
Subtotal		3 708	3 872
TOTAL		3 708	3 872

**ANNEXURE 1J
STATEMENT OF GIFTS, DONATIONS AND SPONSORSHIPS MADE**

NATURE OF GIFT, DONATION OR SPONSORSHIP (Group major categories but list material items including name of organisation)	2018/19	2017/18
	R'000	R'000
Made in kind		
S H Khosa	-	60
E X Mabaso	-	50
Mlotshwa	-	60
Ms E N Makhukhula	60	-
TOTAL	60	170

**ANNEXURE 3A
STATEMENT OF FINANCIAL GUARANTEES ISSUED AS AT 31 MARCH 2019 – LOCAL**

Guarantor institution	Guarantee in respect of	Original guaranteed capital amount	Opening balance 1 April 2018	Guarantees draw downs during the year	Guarantees repayments/ cancelled/ reduced during the year	Revaluation due to foreign currency movements	Closing balance 31 March 2019	Revaluations due to inflation rate movements	Accrued guaranteed interest for year ended 31 March 2019
		R'000	R'000	R'000	R'000	R'000	R'000	R'000	R'000
	Motor vehicles	-	-	-	-	-	-	-	-
	Subtotal	-	-	-	-	-	-	-	-
	Housing								
0017 ABSA 0152		-	56	-	-	-	56	-	-
Mpumalanga Housing Board		-	101	-	-	-	101	-	-
	Subtotal	-	157	-	-	-	157	-	-
	Other								
	Subtotal	-	-	-	-	-	-	-	-
	TOTAL	-	157	-	-	-	157	-	-

**ANNEXURE 3B
STATEMENT OF CONTINGENT LIABILITIES AS AT 31 MARCH 2019**

Nature of Liability	Opening Balance 1 April 2018 R'000	Liabilities incurred during the year R'000	Liabilities paid/ cancelled/reduced during the year R'000	Liabilities recoverable (Provide details hereunder) R'000	Closing Balance 31 March 2019 R'000
Claims against the department					
Medical Negligence	7 638 618	2 782 297	477 596	-	9 943 319
Motor Vehicle Accident	5 375	5 880	453	-	10 802
Unpaid Services	119 822	3 768	19 582	-	104 008
Other	23 078	11 729	1 687	-	33 120
Subtotal	7 786 893	2 803 674	499 318	-	10 091 249
Environmental Liability					
Subtotal	-	-	-	-	-
Other					
Subtotal	-	-	-	-	-
TOTAL	7 786 893	2 803 674	499 318	-	10 091 249

The other refers to labour and contract disputes.

**ANNEXURE 4
CLAIMS RECOVERABLE**

Government Entity	Confirmed balance outstanding		Unconfirmed balance outstanding		Total		Cash in transit at year end 2018/19 *	
	31/03/2019	31/03/2018	31/03/2019	31/03/2018	31/03/2019	31/03/2018	Receipt date up to six (6) working days after year end	Amount
	R'000	R'000	R'000	R'000	R'000	R'000		R'000
Department								
Gauteng Health	-	-	-	313	-	313	-	-
Limpopo Social Development	-	-	-	5	-	5	-	-
Limpopo Health	-	-	-	-	-	-	-	-
Kwa Zulu Natal Health	-	-	-	150	-	150	-	-
Free State Health	-	-	-	-	-	-	-	-
Correctional Services	-	-	-	-	-	-	-	-
Office of the Premier	-	-	-	13	-	13	-	-
Department of Safety, Security, Community and Liason	-	51	-	-	-	51	-	-
Western Cape Health Department	-	-	-	-	-	-	-	-
Limpopo Agriculture Department	-	-	-	-	-	-	-	-
Eastern Cape Health Department	-	-	-	55	-	55	-	-
National Department of Health	-	-	-	197	-	197	-	-
Health Northern Cape	-	-	-	92	-	92	-	-
Department Of Labour	-	-	-	20	-	20	-	-
Department Of Public Works Mpumalanga	-	-	-	1 949	-	1 949	-	-
	-	51	-	2 794	-	2 845	-	-
Other Government Entities								
	-	-	-	-	-	-	-	-
TOTAL	-	51	-	2 794	-	2 845	-	-

**ANNEXURE 5
INTER-GOVERNMENT PAYABLES**

GOVERNMENT ENTITY	Confirmed balance outstanding		Unconfirmed balance outstanding		TOTAL		Cash in transit at year end 2018/19 *	
	31/03/2019	31/03/2018	31/03/2019	31/03/2018	31/03/2019	31/03/2018	Payment date up to six (6) working days before year end	Amount
	R'000	R'000	R'000	R'000	R'000	R'000		R'000
DEPARTMENTS								
Current								
Department of Health North West	-	-	-	-	-	-	-	-
Department of Public Works Roads and Transport Mpumalanga	3 013	991	-	1 103	3 013	2 094	-	-
Office of the Premier Mpumalanga	-	-	-	-	-	-	-	-
Department of Education Mpumalanga	640	-	-	68	640	68	-	-
Department of Health Eastern Cape	-	-	-	19	-	19	-	-
Department of Health Limpopo	-	-	64	26	64	26	-	-
Department of Health Gauteng	1 549	1 542	19 346	19 320	20 895	20 862	-	-
Department of Justice	18 732	-	-	6 144	20 176	6 144	-	-
Department of Community Safety and Security	388	572	-	-	388	572	-	-
Department of Health KwaZulu - Natal	-	-	-	426	-	426	-	-

GOVERNMENT ENTITY	Confirmed balance outstanding		Unconfirmed balance outstanding		TOTAL		Cash in transit at year end 2018/19 *	
	31/03/2019	31/03/2018	31/03/2019	31/03/2018	31/03/2019	31/03/2018	Payment date up to six (6) working days before year end	Amount
	R'000	R'000	R'000	R'000	R'000	R'000		R'000
Department of Labour	319	-	-	-	319	-	-	-
Subtotal	24 641	3 105	19 410	27 106	44 051	30 211	-	-
Non-current								
Subtotal	-	-	-	-	-	-	-	-
TOTAL	24 641	3 105	19 410	27 106	44 051	30 211	-	-
OTHER GOVERNMENT ENTITY								
Current								
Subtotal	-	-	-	-	-	-	-	-
Non-current								
Subtotal	-	-	-	-	-	-	-	-
TOTAL	24 641	3 105	19 410	27 106	44 051	30 211	-	-

**ANNEXURE 6
INVENTORIES**

Inventories	Note	2018/19		2017/18	
		Quantity	R'000	Quantity	R'000
Opening balance		92 903	5 998	60 530	4 665
Add/(Less): Adjustments to prior year balance		(27)	(158)	4	8
Add: Additions/Purchases – Cash		1 595 073	152 917	1 572 801	162 232
Add: Additions - Non-cash		-	623	29 621	4 274
(Less): Disposals		(26 688)	671	-	-
(Less): Issues		(1 568 720)	(197 526)	(1 595 784)	(167 406)
Add/(Less): Received current, not paid (Paid current year, received prior year)		-	-	-	730 586
Add/(Less): Adjustments: Balance before WAP (Calculation)		109 906	9	92 903	5 895
Add/(Less): Adjustments		-	(1)	-	103
Closing balance		109 906	8 667	92 903	5 998

Inventories PHARMACEUTICALS	Note	Quantity	2018/19	Quantity	2017/18
			R'000		R'000
Opening balance		104 253 018	412 590	104 253 018	327 098
Add/(Less): Adjustments to prior year balance			(117 750)		2 738
Add: Additions/ Purchases – Cash			1 658 917		1 408 825
Add: Additions - Non- cash			4 601		15 808
(Less): Disposals			(6 913)		-
(Less): Issues			(1 634 221)		(1 340 650)
Add/(Less): Adjustments			(10 635)		(1 229)
Closing balance		104 253 018	306 589	104 253 018	412 590

**ANNEXURE 7
MOVEMENT IN CAPITAL WORK IN PROGRESS**

MOVEMENT IN CAPITAL WORK IN PROGRESS FOR THE YEAR ENDED 31 MARCH 2019				
	Opening balance	Current Year Capital WIP	Ready for use (Asset register) / Contract terminated	Closing balance
	R'000	R'000	R'000	R'000

HERITAGE ASSETS

- - - -

Heritage assets	-	-	-	-
-----------------	---	---	---	---

MACHINERY AND EQUIPMENT

- - - -

Transport assets	-	-	-	-
Computer equipment	-	-	-	-
Furniture and office equipment	-	-	-	-
Other machinery and equipment	-	-	-	-

SPECIALISED MILITARY ASSETS

- - - -

Specialised military assets	-	-	-	-
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MOVEMENT IN CAPITAL WORK IN PROGRESS FOR THE YEAR ENDED 31 MARCH 2019				
	Opening balance	Current Year Capital WIP	Ready for use (Asset register) / Contract terminated	Closing balance
	R'000	R'000	R'000	R'000

BIOLOGICAL ASSETS

- - - -

Biological assets	-	-	-	-
-------------------	---	---	---	---

BUILDINGS AND OTHER FIXED STRUCTURES

1 200 365 856 728 (849 385) 1 207 709

Dwellings	-	-	-	-
Non-residential buildings	1 111 327	661 528	(584 793)	1 188 062
Other fixed structures	89 038	195 200	(264 591)	19 647

LAND AND SUBSOIL ASSETS

- - - -

Land	-	-	-	-
Mineral and similar non-regenerative resources	-	-	-	-

MOVEMENT IN CAPITAL WORK IN PROGRESS FOR THE YEAR ENDED 31 MARCH 2019				
	Opening balance	Current Year Capital WIP	Ready for use (Asset register) / Contract terminated	Closing balance
	R'000	R'000	R'000	R'000

SOFTWARE

- - - -

Software

-	-	-	-
---	---	---	---

MASTHEADS AND PUBLISHING TITLES

- - - -

Mastheads and publishing titles

-	-	-	-
---	---	---	---

PATENTS, LICENCES, COPYRIGHT, BRAND NAMES, TRADEMARKS

- - - -

Patents, licences, copyright, brand names and trademarks

-	-	-	-
---	---	---	---

MOVEMENT IN CAPITAL WORK IN PROGRESS FOR THE YEAR ENDED 31 MARCH 2019				
	Opening balance	Current Year Capital WIP	Ready for use (Asset register) / Contract terminated	Closing balance
	R'000	R'000	R'000	R'000
RECIPES, FORMULAE, PROTOTYPES, DESIGNS, MODELS	-	-	-	-
Recipes, formulae, prototypes, designs, models	-	-	-	-
SERVICES AND OPERATING RIGHTS	-	-	-	-
Services and operating rights	-	-	-	-
TOTAL	1 200 365	856 728	(849 385)	1 207 709

	Opening balance	Prior period error	Current Year Capital WIP	Ready for use (Asset register) / Contract terminated	Closing balance
	R'000	R'000	R'000	R'000	R'000

MOVEMENT IN CAPITAL WORK IN PROGRESS FOR THE YEAR ENDED 31 MARCH 2018

HERITAGE ASSETS

	-	-	-	-	-
Heritage assets	-	-	-	-	-

MACHINERY AND EQUIPMENT

	-	-	-	-	-
Transport assets	-	-	-	-	-
Computer equipment	-	-	-	-	-
Furniture and office equipment	-	-	-	-	-
Other machinery and equipment	-	-	-	-	-

SPECIALISED MILITARY ASSETS

	-	-	-	-	-
Specialised military assets	-	-	-	-	-

BIOLOGICAL ASSETS

	-	-	-	-	-
Biological assets	-	-	-	-	-

BUILDINGS AND OTHER FIXED STRUCTURES

	476 796	-	863 476	(139 907)	1 200 365
Dwellings	5 251	-	1 556	(6 807)	-
Non-residential buildings	413 068	-	802 066	(103 807)	1 111 327
Other fixed structures	58 477	-	59 854	(29 293)	89 038

LAND AND SUBSOIL ASSETS

	-	-	-	-	-
Land	-	-	-	-	-

	Opening balance	Prior period error	Current Year Capital WIP	Ready for use (Asset register) / Contract terminated	Closing balance
	R'000	R'000	R'000	R'000	R'000
Mineral and similar non-regenerative resources	-	-	-	-	-
SOFTWARE	-	-	-	-	-
Software	-	-	-	-	-
MASTHEADS AND PUBLISHING TITLES	-	-	-	-	-
Mastheads and publishing titles	-	-	-	-	-
PATENTS, LICENCES, COPYRIGHT, BRAND NAMES, TRADEMARKS	-	-	-	-	-
Patents, licences, copyright, brand names and trademarks	-	-	-	-	-
RECIPES, FORMULAE, PROTOTYPES, DESIGNS, MODELS	-	-	-	-	-
Recipes, formulae, prototypes, designs, models	-	-	-	-	-
SERVICES AND OPERATING RIGHTS	-	-	-	-	-
Services and operating rights	-	-	-	-	-
TOTAL	476 796	-	863 476	(139 907)	1 200 365



INDWE (BUILDING NO.3)
NO. 7 GOVERNMENT BOULEVARD
RIVERSIDE PARK EXTENSION 2
NELSPRUIT
1200

PRIVATE BAG X 11285
NELSPRUIT
1200

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Annual Report for 2018/19 Financial Year
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