

## **Health department on the right course**

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The national Department of Health has obtained yet another unqualified audit opinion by the auditor-general of South Africa. This is the fifth consecutive year since 2012 that the department has received an unqualified audit opinion.

Reacting to the audit report, Health Minister Aaron Motsoaledi said: “This is a significant achievement taking into account the success in three central functions of public health which include assessing health needs and problems, developing policies designed to address priority health issues and ensuring the programmes to reach our strategic health goals.”

Recent estimates show progress on health in line with the National Development Programme (NDP) 2030 targets. Data from Stats SA point toward increasing life expectancy rates in South Africa. Life expectancy increased from 61.0 years in 2013 to 62.4 in 2016 (Stats SA). This is attributable to our massive rollout of antiretroviral drugs.

Mortality rates have declined as reported by the South African Medical Research Council: under-five mortality declined from 41% per 1000 live births in 2013 to 39% deaths per 1000 live births in 2014. The infant mortality rate declined from 29 deaths per 1000 live births in 2013 to 28 deaths per 1 000 live births in 2014.

The neonatal mortality rate remained stable at 11 deaths per 1000 live births; and the maternal mortality ratio (pregnant women dying while giving birth or soon thereafter) decreased from an estimate of 166 deaths per 100000 live births in 2012 to 155 deaths per 100000 in 2014. Another notable achievement was the release of the White Paper on National Health Insurance (NHI), which is an important step in realising the NHI. The minister also established six NHI work streams staffed by departmental and external technical experts to support the work on the phased implementation of NHI. Ultimately the NHI aims to bring affordable and quality healthcare within the reach of all South Africans.

Every person, rich or poor, should have access to the healthcare they need. The escalating costs of private healthcare, and a growing unwillingness of the sector to reduce costs, have severely restricted access to healthcare for the poor, the aged and those with catastrophic health problems. The profit

motive in healthcare is of grave concern to the government. The private health sector is unaffordable, inequitable and unsustainable. The public sector needs to strengthen quality of care.

In the past financial year the department has enrolled a total of 396 567 patients onto the Central Chronic Medicine Dispensing and Distribution (CCMDD) programme. This has significantly reduced the need for patients to wait in long queues in health facilities for the collection of their chronic medicines. The implementation of Electronic Stock Management System (ESMS) for early detection of medicines stock-out increased from 39 hospitals in 2014-15 to 52 hospitals in 2015-16. We are also pleased that the Health Patient Registration System (HPRS) is on track. The system provides a patient registry and master patient index using the South African identification number and other forms of legal identification such as passports.

The HPRS is a critical building block towards the implementation of NHI because it recognises the importance of improved administration in enhancing patient care at health facilities. At the other end of the spectrum, we have ramped up our training and support of medical graduates. The National Health Scholars Programme (NHSP) aims to provide masters and doctoral scholarships to develop a new cadre of young health researchers in South Africa. Since the launch of the NHSP in 2013 by the minister, a total of 72 students have been enrolled. In this reporting period, 17 new students were enrolled in the NHSP and six NHSP students graduated (four with PhDs and two with masters degrees).

We are pleased that our interventions throughout the system are making real changes in the lives of ordinary people. Our fight against HIV continues and prevention remains the mainstay of efforts to combat HIV-Aids. Since the HIV counselling and testing (HCT) campaign was introduced in 2010, more than 44 million people have been tested, and where necessary placed on treatment. At the end of March 2015, there were more than 3 million persons on antiretroviral therapy (ART).

We have not neglected primary healthcare which is an essential building block in ensuring a health population. The Ideal Clinic (IC) initiative was started in July 2013 as a way of systematically reducing the deficiencies in primary health care facilities in the public sector. The clinic is about improving the quality of care at the first point of contact with public health system to enhance the ability of the system to detect health conditions early for their effective management and cure. At the end of March, there was a cumulative total of 322 facilities qualifying as ideal clinics.

These are some of the achievements contained in the audit report. They demonstrate the accountability and responsiveness of the public health sector to the needs of the public.

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