

Wednesday, 20 May 2026]

No 45 - 2026] THIRD SESSION, SEVENTH PARLIAMENT

PARLIAMENT OF THE PROVINCE OF THE WESTERN CAPE

ANNOUNCEMENTS, TABLINGS AND COMMITTEE REPORTS

WEDNESDAY, 20 MAY 2026

COMMITTEE REPORTS

- 1. Annual Committee Report of the Standing Committee on Mobility for the 2025/26 financial year, dated 14 April 2026, as follows:**

Members

The Committee comprised of the following members:

Mbombo, N (DA)(Chairperson)
Adams, B (PA) (from 9 March 2026)
Bryant, D (DA) (until 10 July 2025)
Constable, N (PA) (until 5 March 2026)
Herron, B (GOOD)
Johnson, P (DA) (until 18 August 2025)
Masipa, N (DA)
Ngqentsu, B (ANC)
Van Wyk, L (DA) (from 18 August 2025)
Wessels, D (DA) (from 10 July 2025)

Alternate members

Bosman, G (DA)
Bryant, D (DA) (from 10 July 2025)
Johnson, P (DA) (from 18 August 2025)
Lekker, P (ANC)
Stephens, D (PA) (from 9 March 2026)
Van Minnen, B (DA)
Walters, T (DA)

1. Introduction

The mandate of the Committee was to:

- 1.1 Maintain oversight over the executive members and the Departments concerning the way in which they perform their responsibilities, including the implementation of legislation and to hold them accountable; and
- 1.2 Consider and report on legislation, other matters and the annual reports referred to it by the Speaker.

In fulfillment of its mandate the Committee:

- 1.2.1 Facilitated public participation and involvement in the legislative and other processes of the Committee.
- 1.2.2 Conducted its business in a fair, open and transparent manner.
- 1.2.3 Promoted cooperative governance.
- 1.2.4 Reported regularly to the House.

With reference to the Strategic Objectives of the WCPP linked to the Speakers' Priorities to the end of the 6th Term, the outcome of this report is linked to:

Priority 1: Building a credible WCPP; and
Priority 3: Strengthening the core business.

2. Reporting departments and entities

- 2.1 Western Cape Mobility Department
- 2.2 Government Motor Transport

3. Overview of Committee's activities

Number of Committee Meetings	12
Number of Public Hearings	3
Number of International Study Tours	0
Number of Oversight Visits	1
Number of Provincial Bills considered	0
Number of NCOP Bills considered	0
Workshops/conferences attended	0

4. Oversight activities

The Standing Committee on Mobility (the Committee) conducted its oversight responsibilities and held a total of 12 meetings and three public hearings during the 2025/26 financial year. Some of the Committee members also attended the Southern African Transport Conference in Pretoria from 6 to 10 July 2026.

4.1 Legislation

During the 2025/26 financial year, the Committee considered Vote 8: Mobility in the Schedule to the Western Cape Appropriation Bill [B 4-2025] in June 2025. The Committee considered Vote 8: Mobility in the Schedule to the Western Cape Adjustments Appropriation Bill [B 5-2025] in December 2025. The Committee also considered Vote 8: Mobility in the Schedule to the Western Cape Appropriation Bill [B 1-2026] during March 2026.

4.2 Committee meetings

During the 2025/26 financial year, the Committee met with the various role players within the rail, e-hailing and bus industry.

The 2025/26 financial year commenced with a briefing from the Passenger Rail Agency of South Africa (PRASA) on the Service Level Plan for the Western Cape and the strategies to improve services and rail efficiencies in all the districts across the province. This meeting was also attended by the City of Cape Town and the Western Cape Mobility Department.

The Committee also met with the Golden Arrow Bus Service on its expansion of fleets to address the population increase in the Western Cape, innovation in response to climate change and carbon emissions, safety challenges, and its working relationship with other role players in the transport industry.

Thereafter, the Committee met with representatives within the e-hailing industry (Western Cape E-hailing Association and ECabs) on the readiness of the e-hailing and metered taxi industry in the Western Cape to implement the new laws emanating from the National Land Transport Amendment Act, 2023 (Act 23 of 2023). The Committee also discussed commuter safety in respect of e-hailing and metered taxis, and the assistance from the Western Cape Government.

The Committee also executed its oversight duties in respect of the Department, where various engagements were held to discuss their quarterly performance reports, the Jobseeker Travel Voucher programme, the Annual Reports (including GMT), the current state of vehicle operating licenses and the extent of illegal mobility-related operations in the Western Cape, and matters related to the festive season road safety plan. The Committee also accompanied the Minister to two Go-George related launches in Pacaltsdorp and Thembalethu as part of the Service Delivery Cluster Visit Week, which took place between 22 and 24 February 2026.

5. Legislation

In the 2025/26 financial year, the Committee did not deal with any provincial and national bills.

6. Facilitation of public involvement and participation

In line with its mandate to facilitate public participation as part of the legislative process, the Committee held public hearings on all the Annual Reports and Budget Votes. To give effect to this, the relevant committees advertised the Annual Report, the Western Cape Appropriation Bill and the Western Cape Adjustment Appropriation Bill in mainstream and community newspapers across the Western Cape, informing and inviting stakeholders to participate in the public participation processes.

7. Financial particulars

The budget for the 2025/26 financial year was R186 111, and the Committee incurred actual expenditure of R157 663, resulting in an under-expenditure of R28 448.

2. Annual Committee Activity Report of the Standing Committee on Agriculture, Economic Development and Tourism for the 2025/26 financial year as follows:

Members

The Committee comprised of the following members:

Adams, BM (PA) from 9 March 2026

Brinkhuis, G (Al Jama-ah)

Bryant, DW (DA)
 Constable, N (PA) until 28 February 2026
 Masipa, NP (DA) (Chairperson)
 Mbombo, N (DA)
 Nkondlo, ND (ANC)
 Wessels, DJ (DA)

Alternate Members

Booyesen, M (DA)
 Bosman, G (DA)
 Kaizer-Philander, WF (DA)
 Stephens DR (PA) from 9 March 2026
 Stoffels, BN (ANC)
 Van Wyk, LD (DA)
 Walters, TCR (DA)

1. Introduction

The mandate of the Committee was to -

- 1.1 maintain oversight over the Executive Members and the Departments and its Entities, of the way in which they perform their responsibilities including the implementation of legislation and to hold them accountable to the Western Cape Provincial Parliament; and
- 1.2 consider and report on legislation, other matters and the Annual Reports referred to it by the Speaker.

In fulfillment of its mandate the Committee -

- 1.3 facilitated public participation and involvement in the legislative and other processes of the Committee;
- 1.4 conducted its business in a fair, open and transparent manner;
- 1.5 promoted co-operative governance; and
- 1.6 reported regularly to the House.

2. Reporting department(s) and entities

- 2.1 Department of Agriculture
- 2.2 Department of Economic Development and Tourism
- 2.3 Cape Agency for Sustainable Integrated Development (Casidra)
- 2.4 Atlantis Special Economic Zone (ASEZ)
- 2.5 Freeport Saldanha Industrial Development Zone Licencing Company (FSIDZ)
- 2.6 Western Cape Destination Marketing, Investment and Trade Promotion Agency (WESGRO)

3. Overview of Committee's activities

No of Committee Meetings	20
No of Public Hearings	9
No of Oversight Visits	2
No of Cluster Visit Weeks	1

4. Oversight activities

- 4.1 The 2025/26 year was considered a productive year in which interactions with the Departments and Entities and the many stakeholders consulted were both cordial and beneficial and ensured that Committee members could approach their oversight function with objectivity and insight.

The financial year was a challenging year that was exacerbated by limited fiscal resources. The Committee continued with its mandate and embarked on several initiatives having resulted in follow-up activities and meetings. The Committee focused on Money Bills, current and regulatory matters as well as overseeing the implementation of policies and programmes related to the Department of Agriculture, the Department of Economic Development and Tourism and its Entities. The following is a summary of the Committee's activities during the 2025/26 financial year.

- 4.2 In terms of Money Bills, the Committee considered Vote 11: Agriculture and Vote 12: Economic Development and Tourism, in the Schedule to the Western Cape Adjustments Appropriation Bill [B 5–2025]. Similarly, the main appropriated budget for the 2026/27 financial year for Vote 11: Agriculture and Vote 12: Economic Development and Tourism, in the Schedule to the Western Cape Appropriation Bill [B 1–2026] was also considered.
- 4.3 The Committee conducted two oversight visits, namely to the Constantia Wine Region and Waaikraal Farm.

The purpose of the visit to the Constantia Wine Region was to understand its significance in the broader context of wine production in the Western Cape and to gain insight into the historical significance of the region. Current challenges and concerns facing the local wine industry were also discussed.

There were many discussions in committee meetings regarding the Amalienstein and Waaikraal farms and the Committee compiled resolutions in this regard that were communicated to the Ministry of Agriculture, Economic Development and Tourism, the Department of Agriculture and to Casidra. One of the resolutions was for the Committee to undertake an oversight visit to these farms. The farms were state-owned agricultural farms managed on behalf of the Western Cape Government through Casidra as the implementing agency. The focus of the visit was on operational status and productivity; financial sustainability and funding; staffing and labour conditions; community engagement and land reform; risk management and challenges; infrastructure and capital investment; role in food security and community development; plans and exit strategy partnerships; funding models; and impact assessments or audits for the farms.

- 4.3 The Committee, as part of the Service Delivery Cluster of committees, participated in a Pre-State of the Province Visit to George and Mossel Bay to consult and interact with private stakeholders and provincial and local government projects and programmes in the area as part of its oversight mandate. The Committee met with the Garden Route District Municipality in George following a briefing by Wesgro on provincial district-level tourism activities. The visit assessed the district's tourism strategies, integration into municipal planning, and alignment with Wesgro's provincial tourism framework. The Committee engaged with the Department of Economic Development and Tourism, Wesgro, the Garden Route District Municipality, and with municipalities within the district.

- 4.4 The Committee prioritised a full day engagement with the agricultural industry in Paarl. The Agricultural Business Chamber of South Africa, Agri-Western Cape, the Citrus Growers' Association, Summer Fruit South Africa, Hortgro, SA Wine, the National Wool Growers' Association, the Milk Producers' Organisation, the South African Pork Producers' Organisation, the Red Meat Producers' Association, Wesgro, the Department of Agriculture and the Department of Economic Development and Tourism were in attendance.

The Agricultural Business Chamber provided an overview of economic conditions affecting the sector, including regulatory and policy constraints, as well as positive developments.

Industry associations, including major commodity and value-chain bodies, outlined the structure and contribution of the provincial agricultural economy to national development. They highlighted sector-specific challenges affecting productivity, growth, and market access, while also identifying opportunities for innovation, investment, and expansion across agricultural value chains.

- 4.5 Other meetings that were held during the financial year included a series of briefings that was received by the Committee from key provincial and national stakeholders on economic development, agriculture, tourism, and labour market trends in the Western Cape.

The Department of Economic Development and Tourism presented on the Red Tape Reduction Unit, focusing on regulatory reform, by-law challenges affecting informal trading, and efforts to improve municipal systems, processes, and intergovernmental coordination. The Department of Agriculture reported on land use management, agricultural land preservation risks, and readiness for implementation of the Preservation and Development of Agricultural Land Act, 2024 (Act 39 of 1024).

Wesgro briefed the Committee on district-level initiatives supporting municipalities, while SALGA presented on the Karoo Small-Town Regeneration Programme, including its implementation model, funding, and policy implications. The Atlantis Special Economic Zone provided an update on investment, funding mechanisms, skills development alignment, and SEZ establishment processes. The Department of Agriculture also briefed the Committee on the ideal budget required to fulfil its mandate with specific reference to the implications of the budgetary shortfall or deficit, and any additional funding currently being sourced. In addition, the Department of Agriculture briefed the Committee on the FMD situation, reporting new outbreaks in several areas of the Western Cape and confirming that affected dairy herds had been prioritised for vaccination.

The Committee also convened a meeting with Tourism Stakeholders where it received input on the province's readiness for the 2025/26 tourism season, focusing on coordination, infrastructure, safety, and visitor experience, as well as a briefing from Statistics South Africa on employment trends in the Western Cape, including sectoral, geographic, and demographic breakdowns.

- 4.6 The Committee also received regular updates, in writing and in-person, from the Department of Agriculture, the Department of Economic Development and Tourism and its respective Entities on its quarterly performance where financial and non-financial performance targets were evaluated and where performance indicators that were not achieved and/or partly achieved were highlighted.

- 4.7 Annual reports were the key instruments for departments to report on performance measured against their performance targets and budgets as outlined in their Strategic Plans and Annual Performance Plans. To this end, the Committee deliberated on the Annual Reports of the Department of Agriculture and the Department of Economic Development and Tourism as well as their respective entities for the 2024/25 financial year.

5. Legislation

In the 2025/26 Financial Year, the Committee dealt with the following items of legislation:

5.1 Provincial bills

- 5.1.1 Western Cape Adjustments Appropriation Bill [B 5—2025]: Vote 11 - Agriculture
 5.1.2 Western Cape Adjustments Appropriation Bill [B 5—2025]: Vote 12 - Economic Development and Tourism
 5.1.3 Western Cape Appropriation Bill [B 1—2026]: Vote 11 - Agriculture
 5.1.4 Western Cape Appropriation Bill [B 1—2026]: Vote 12 - Economic Development and Tourism

5.2 NCOP bills (Section 76)

There were no NCOP Bills referred to the Committee.

6. Facilitation of public involvement and participation

In line with its mandate to facilitate public participation as part of the legislative process, the Committee created awareness and opportunity for the public to participate in the legislative process by advertising in print media, using social media such as Facebook, Twitter and Instagram.

7. Financial particulars

The Committee's actual expenditure for the 2025/26 financial year, as at 31 March 2026, amounted to R172 740.92 against an adjusted budget allocation of R99 188.00, resulting in an over expenditure of R73 552.92. This over expenditure will be offset through savings and underspending by other committees during the financial year, in line with standard budget reprioritisation and internal offsetting arrangements.

3. Report of the Standing Committee on Health and Wellness on its follow-up oversight visit to the Grabouw Community Day Centre (CDC) on Wednesday, 11 March 2026,

The Standing Committee on Health and Wellness, having conducted a follow-up oversight visit to the Grabouw CDC on 11 March 2026, reports as follows:

Delegation

The delegation consisted of the following Members:

Democratic Alliance

Booyesen, M (Chairperson)

African National Congress

Windvogel, R

Patriotic Alliance

Stephens, D R

The National Coloured Congress

Michels, J R

Apologies

Kaiser-Philander, WF (DA)

Van Minnen, BM (DA)

Walters, TCR (DA)

1. Introduction

The Standing Committee on Health and Wellness undertook a follow-up oversight visit to the Grabouw Community Day Centre (CDC) on Wednesday, 11 March 2026. This visit formed part of the Committee's constitutional mandate to ensure accountability and effective service delivery within the Western Cape Department of Health and Wellness. Guided by the Western Cape Provincial Parliament's 2024/25 Strategic Objectives, particularly the commitments to building a credible legislature and strengthening its core oversight functions, the Committee visit to the Grabouw CDC sought to evaluate progress made since its unannounced visit to the facility in May 2025. The earlier visit was prompted by community complaints regarding deteriorating service quality, prolonged waiting times, inadequate infrastructure, and staff shortages. During that oversight visit, the Committee identified serious service-delivery challenges and issued recommendations for urgent departmental intervention. Consequently, the primary purpose of the 2026 visit was to assess the extent to which those recommendations were implemented, to determine whether measurable improvements had been achieved, and to gain first-hand insight into the current operational environment of the facility.

The Committee was welcomed by Dr Pillay, the Manager of Medical Services in Theewaterskloof Sub district, along with senior management personnel who provided the Committee with an on-site walkabout and a detailed briefing on the turnaround strategy.

2. Overview and Brief Background

The Grabouw CDC is a major primary healthcare facility serving an estimated population of between 40,000 and 50,000 residents in Grabouw and surrounding farming communities. The catchment population has experienced rapid growth in recent years, resulting in substantial pressure on the health system. The facility manages an average of 8,000 patients per month, and this number continues to increase steadily as the local population expands. The CDC offers a broad range of services, including general outpatient care, maternal and child health services, chronic disease management, HIV and TB programme support, emergency care, dental services, and X-ray services. It is also accredited as an ART and TB treatment site, with a dedicated antiretroviral unit established through a R12-million donation from the French government. Over time, the facility has undergone several expansions and service enhancements, including the introduction of 24-hour emergency care to alleviate pressure on routine services and improve response times for urgent cases. The Department of Health and Wellness has also extended weekday operating hours to 19:00 and introduced Saturday services to increase accessibility for working community members.

Notwithstanding these improvements, the CDC continues to face operational pressures arising from increased patient volumes, high disease burden, complex mental health needs, and infrastructural limitations. To address these challenges, the Department has initiated phased renovations aimed at improving patient flow, reorganising reception areas, and expanding waiting space. The facility is further supported by extensive community-based outreach and public-private partnerships, especially through collaboration with local farms, enabling health workers to reach farmworkers and rural households that often face barriers to accessing facility-based care. These services are strengthened by mobile health units and NPO partnerships, such as Right to Care, which contribute significantly to community wellness, HIV prevention, chronic disease support, and household health screening. The 2026 oversight visit provided the Committee with an opportunity to assess these developments comprehensively and to observe the day-to-day functioning of this vital primary healthcare hub.

3. Key Findings

The Committee's engagements revealed that the Theewaterskloof Sub-district remains under immense pressure due to its population size, with more than one-third of the Overberg District's residents living within its borders. Consequently, service utilisation across all facilities is exceptionally high. Grabouw CDC, in particular, continues to record some of the highest emergency centre headcounts in the region, contributing significantly to overcrowding and prolonged waiting times. However, the Committee noted that community-based services play an increasingly critical role in alleviating pressure on the facility. In 2025 alone, outreach teams recorded more than 60,000 community contacts and over 33,000 household visits, demonstrating the value of decentralised healthcare delivery in extending access and reducing facility congestion.

The disease burden in the area remains complex, with fluctuating but consistently high HIV testing and treatment initiation rates, steady TB case detection, and rising mental health admissions linked to schizophrenia, mood disorders, and substance-related conditions. The Committee expressed concern about chronic disease outcomes, particularly diabetes management, where only a small percentage of patients achieved controlled HbA1c levels while a large proportion remained uncontrolled. Human resource challenges persist despite progress in filling vacant posts, largely due to rural placement disadvantages, staff turnover, high commuting costs, and limited accommodation within the area. Although rural allowances and employee wellness programmes provide some relief, staffing remains a key vulnerability.

The Department of Health and Wellness delivers adolescent mental health services in the Theewaterskloof Local Municipality through an integrated primary healthcare model aligned with national and provincial frameworks. The programme adopts a comprehensive, multi-layered approach to preventing, identifying, and responding to mental health challenges among young people. It places strong emphasis on suicide prevention, with interventions ranging from early assessment to stabilisation, therapeutic support, and follow-up care. Multidisciplinary teams, including mental health practitioners, counsellors, psychologists, and emergency staff, provide both immediate crisis response and ongoing support. Family involvement is central to the care pathway, ensuring sustained emotional and psychosocial support beyond clinical settings.

The programme further promotes holistic adolescent development through integrated educational, psychosocial, and preventative interventions. It is strengthened by partnerships with key stakeholders such as the South African Police Service, child protection services, the Department of Education, and community-based organisations. These collaborations address critical issues, including pregnancy prevention, sexual

offence awareness, peer pressure, self-esteem, decision-making, and general health promotion. Structured programmes, motivational initiatives, and experiential opportunities contribute to building resilience and improving access to support services.

A key component of the programme is its community-based prevention strategy, which targets major risk factors such as substance abuse, behavioural challenges, suicidal behaviour, gender-based violence, and mental health disorders. Through coordinated outreach, services are delivered directly within communities, enabling early intervention, screening, and support for at-risk adolescents before conditions escalate into clinical emergencies.

The programme also prioritises gender-based violence through a coordinated, multidisciplinary response involving health professionals, law enforcement, justice services, and community organisations. It further promotes family strengthening through targeted campaigns and initiatives aimed at supporting vulnerable households, including teenage parents, and addressing underlying social risk factors. In addition, the programme incorporates health system improvements to better support adolescents with chronic or high-risk conditions. These include multi-month medication dispensing, improved treatment adherence strategies, decentralised service delivery, and enhanced integration of clinical and psychosocial care. Overall, the programme emphasises coordinated, community-based service delivery, ensuring accessible, responsive, and sustainable mental health support for adolescents.

Pharmacy services in the Theewaterskloof region are mainly provided through public-sector health facilities such as Grabouw CDC, smaller community clinics like Villiersdorp Clinic, and outreach points across the Overberg District. Grabouw CDC functions as a key service hub, operating 24 hours and offering a comprehensive range of care, including medication dispensing and support for chronic medicines for nearby rural and farming communities. Public-sector pharmacy services also rely on provincial initiatives aimed at increasing patient access, such as decentralised medicine distribution and enhanced chronic-care systems. These services are supported by the wider Western Cape pharmacy provider network, which includes contracted pharmacies and dispensing points throughout the district.

Despite these efforts, health facilities in the Theewaterskloof region continue to encounter several ongoing challenges that impact pharmacy services. Rural clinics, including those serving communities like Villiersdorp Clinic, operate in a system plagued by staff shortages, overcrowding, and limited space, leading to delays in service delivery and long waiting times for patients needing medication. These systemic issues affect medication dispensing workflows and contribute to inefficiencies in stock management and patient follow-up. Additionally, transportation challenges are forcing patients from remote areas to travel longer distances to collect chronic medication, thereby further straining Grabouw CDC and other key facilities.

Infrastructure remains another constraint. The Committee noted that despite ongoing renovations, the current layout is no longer suitable for the high patient volumes. Waiting areas, reception flow, and patient movement remain compromised, though the Committee acknowledged clear improvements compared to the conditions observed in 2025. The Committee also received detailed briefings on EMS operations, which continue to be affected by long travel distances, the absence of EMS bases in several rural towns, and high inter-facility transfer volumes that limit ambulance availability for emergencies. Unnecessary bookings of HealthNet escorts further reduce EMS capacity, while the communication centre continues to operate under severe strain with limited dispatch staff.

Finally, the Committee received a detailed presentation on the role of the Right to Care programme in Grabouw. The programme provides wide-ranging community and facility-based services, including HIV testing, PrEP initiation, counselling, household visits, and mobile health operations. With more than 8,000 clients reached monthly through community health workers and significant demand for counselling and wellness services, the programme plays a crucial role in strengthening the local health system. However, the Committee noted concerns regarding high caseloads, burnout risk, psychosocial demands placed on counsellors, operational limitations of mobile units, and the need for sustained employer engagement for workplace interventions.

The Chairperson of the Grabouw CDC Clinic Committee provided input during the meeting. He reported that there are plans to upgrade the reception area and other sections of the Grabouw CDC to improve patient flow. However, the timelines for the project remain unclear. Community members frequently request information on when the project will commence and be completed, and due to the lack of confirmed timeframes, the Clinic Committee is often unable to provide clear and accurate feedback. He emphasised the urgent need for the upgrade and extension of the facility due to high demand as a result of increasing population growth.

4. Turnaround Strategies

The Committee noted that several turnaround strategies have been implemented since the 2025 oversight visit, many of which are beginning to yield visible improvements. A central element of the turnaround plan is the strengthening of community-based healthcare through the COPC model, which aims to reduce pressure on the CDC by bringing prevention, screening, chronic support, and adherence services directly into homes and farming communities. Outreach teams, farm-based service points, and Wellness Hubs have been expanded to bring care closer to communities and to ensure continuity of services for farmworkers, adolescents, and individuals with chronic conditions.

Human resource strategies have prioritised the filling of critical vacancies. To date, 14 nursing posts have been advertised, of which six remain vacant. Of the nine Clinical Nurse Practitioner posts, two have been filled, with the remaining posts re-advertised following applicants declining the offers.

In addition, the Department has implemented measures to improve staff retention, including the provision of rural allowances, expanded employee wellness support, and initiatives to secure accommodation for staff in Grabouw to reduce commuting pressures. While these interventions have not fully resolved staffing challenges, they have contributed to stabilising several clinical teams and improving continuity of care.

Infrastructure upgrades also remain a key priority. Ongoing renovations are focused on enhancing reception areas, increasing waiting capacity, and improving patient flow. The Department has further initiated long-term planning processes to support future expansion and respond to growing service demand.

In terms of EMS improvements, the Department is reviewing HealthNet escort protocols to ensure that ambulances are reserved for cases that genuinely require emergency transportation. Options for establishing satellite EMS points in underserved areas are also being explored to improve response times and reduce reliance on distant dispatching. Clinical service improvements form another pillar of the turnaround strategy and include scaling up differentiated HIV care models, strengthening diabetes management

programmes, enhancing mental health referral pathways, and improving adolescent mental wellness services through integrated primary healthcare approaches. Collectively, these turnaround strategies demonstrate a sustained effort by the Department to respond to operational challenges and improve health outcomes within the sub-district.

5. Challenges

During the follow-up visit to the Grabouw CDC, the Committee observed notable improvements in addressing the challenges identified during the 2025 visit. However, several concerns remain.

These include challenges with the filing system and inadequate security during the night shift. Although the Grabouw CDC operates as a 24-hour facility, there is currently no security personnel on duty at night. This places staff, particularly female officials, at risk, as they are required to access patient files stored in the garage area during these hours. In addition, while infrastructure upgrades are planned for the facility, it was reported that the IBR roofing is leaking, and repairs to address this issue have not been included in the current infrastructure budget.

6. Request for Information

The Committee requested the Department of Health and Wellness to submit by Monday, April 6, 2026, detailed information on the number of patients transported and transferred from Grabouw CDC to Caledon Hospital, Helderberg Hospital in Somerset, and Worcester Hospital during the 2025/26 financial year.

7. Acknowledgement

The Standing Committee on Health and Wellness expresses sincere appreciation to Dr Pillay and the management teams of the Theewaterskloof Health Sub-district and Grabouw CDC for their cooperation, transparency, and hospitality during the oversight visit. The Committee also notes and commends the measurable improvements observed since the previous visit, including progress in staffing, infrastructure upgrades, outreach expansion, and enhanced clinical management systems. The Committee acknowledges the dedication of all healthcare workers, community health partners, and NPO collaborators who continue to play a critical role in delivering essential services under challenging circumstances. The Committee concluded the visit, encouraged by the improvements made and will continue to provide oversight to ensure the sustained strengthening of healthcare services in the area.

The Committee successfully concluded its visit.