

PARLIAMENT OF THE PROVINCE OF THE WESTERN CAPE

ANNOUNCEMENTS, TABLINGS AND COMMITTEE REPORTS

TUESDAY, 24 NOVEMBER 2020

COMMITTEE REPORTS

1. **Report of the Standing Committee on Health on the oversight visits to the Gouda Clinic in Drakenstein and Worcester Emergency Medical Services (EMS) Station in Worcester conducted on 2 September 2020 reports as follows:**

The Delegation

The delegation of the Standing Committee on Health included the following Members:

Philander, WF (DA) (Chairperson and leader of the delegation)
Allen R (DA)
Botha, LJ (DA)
Makamba-Botya, (EFF)
Windvogel, R (ANC)

Additional Members

Bans, AP (ANC)
Bakubaku-Vos, NG (ANC)

Apology

Xego, M (EFF)

The following parliamentary official accompanied the delegation:

Ms N Jamce

Background

The Standing Committee on Health conducted unannounced oversight visits to the Gouda Clinic in Drakenstein and Worcester EMS station in Worcester. The visits aimed to assess services offered by the two facilities to their communities. The Committee resolved to visit the Gouda Clinic due to the challenge of lack of space that was reported. Also, the Committee decided to visit the EMS Station in Worcester to assess the service pressure that the station experienced.

1. Visit to the Gouda Clinic in Drakenstein

Sister Johannes, the Operations Manager at the Gouda Clinic welcomed the standing committee and gave a brief summary of the services offered by the facility, the service pressure, the challenges and the successes of the Gouda Clinic.

1.1 Tour of the facilities

The Committee conducted a brief tour of the facility. The areas visited included the waiting room outside the facility, the waiting room in the prefab structure, two consultation rooms and the pharmacy. The Committee also engaged with Mr Rens, a Councilor from the Drakenstein Municipality and Mr Roger, a community leader.

1.2. Salient points that emanated from the unannounced visit to the Gouda Clinic

- 1.2.1 The Gouda Clinic (Clinic) is a Primary Health Care facility that offers services such as mother and child health, chronic diseases care, women's' health, HIV and TB care, men's health and acute services.
- 1.2.2 It was reported that the Clinic attends to about 50 patients per day. Patients who do not present serious illness are seen outside the facility or are given an appointment date. The Clinic also refers patients to the Porterville and Paarl Hospitals depending on the seriousness of the illness.
- 1.2.3 The Clinic operates from a four room structure that is owned by the Drakenstein Municipality.
- 1.2.4 The Department of Health approved the project for the building of the new clinic four years ago, the land for the new site was identified, however, there has been delays in commencing with the building of the new clinic.
- 1.2.5 The Committee noted that office space was a major challenge at the Clinic, it was reported that patients queue outside the premises even during the winter season.
- 1.2.6 During the peak of the COVID-19 pandemic, the screening of patients was conducted outside the facility due to the lack of testing and isolation rooms for patients that showed the COVID-19 symptoms.
- 1.2.7 Sister Johannes reported that the Clinic had a total of 41 COVID-19 positive cases, 40 have recovered and 1 positive case was still active.
- 1.2.8 Due to the COVID-19 pandemic, the Clinic introduced an appointment system with only critical patients allowed to visit the clinic without an appointment.
- 1.2.9 The clinic has a triage system for chronic patients, the unstable patients are seen by a doctor, and the other patients only visit the clinic by appointment to avoid the unnecessary exposure of staff and patients to the COVID-19.

1.3 Challenges

Councillor Rens and Mr Roger, a community leader highlighted the following challenges which were also noted by the Committee during the visit:

- 1.3.1 Space was noted as a major challenge at the Clinic. Patients queue outside the premises even in cold weather. This also poses a danger to women and children who have to queue outside the facility in the early hours of the morning.
- 1.3.2 A concern was raised that the Department of Health was not communicating with community members regarding the delays in building the new Gouda Clinic.
- 1.3.3 There was a shortage of staff in the facility, it has two nurses who rotate between the mobile clinic which serves the surrounding farms and the Gouda Clinic resulting in one sister on duty at the clinic. It was reported that in terms of the staffing plan, the clinic still needs three more nurses.
- 1.3.4 The ablution facility was reported as inadequate and a challenge at the clinic. There were two toilets in the facility, one for officials and the other one for patients. It was mentioned that both male and female staff share one toilet and the other toilet was utilised by both female and male patients.
- 1.3.5 It was reported that there was no ambulance service in Gouda. Patients with serious illnesses are referred to the Paarl and Porterville Hospitals. Patients have to wait outside the Gouda Clinic for the taxi service contracted by the Department of Health. The taxi service is responsible for transporting patients to and from the referral hospitals.

1.4 Recommendation

The Committee recommended that the Department should ensure that women and children that queue outside the facility in the early hours of the morning are safe.

1.5 Request for Information

The Committee requested the Department of Health to submit the following information by Friday 30 October 2020:

- 1.5.1 A progress report on the building of the new Gouda Clinic, the reasons for the delay of the project and timeframes for the building of the new Clinic.
- 1.5.2 A detailed information on the number of ambulances in the Drakenstein area, this information should clearly outline the areas that these ambulances are allocated to.

2. Visit to the Worcester EMS Station in Worcester

Mr. van Wyk, the EMS Station Manager, and Ms. Diaz, the Communication's Manager at the Worcester EMS welcomed the Committee and accompanied the delegation during the walkabout of the facility.

2.1 Salient points that emanated from the unannounced visit to the EMS Worcester Station

- 2.1.1 The Committee noted that the reception area of the EMS Worcester Station still displayed a picture frame of the former Premier of the Western Cape, Ms H Zille.
- 2.1.2 The delegation first visited the call centre section where emergency calls from various communities in the rural areas are received resulting in ambulances dispatched.
- 2.1.3 The Committee was informed that the EMS officials were sometimes attacked by criminals when responding to calls in various communities.
- 2.1.4 It was reported that the criminals in rural communities were targeting the new paperless tablet system that was installed in ambulances to capture patient's information before they arrive at hospital.
- 2.1.5 The Evian Park, Chicago, Zwelethemba, and Nduli townships were identified as the red zone areas. The EMS personnel are escorted by police when responding to calls from these areas.
- 2.1.6 The delegation was informed that the Department of Health has put measures in place to protect the EMS officials from the attacks, these include two panic buttons in the ambulance. If the officials press the panic button it reflects a call in distress in the call centre screen and police are informed immediately.
- 2.1.7 It was reported that the EMS officials are psychologically supported by the Department through an Employee Assistance Programme (EAP) and debriefing sessions. The EAP is managed by an independent service provider.
- 2.1.8 It was reported that the EMS Worcester Station was servicing the entire Cape Winelands District and the performance of EMS officials in Worcester was measured by their response times to the incoming calls, the dispatch time, and the time the ambulance arrives at the scene.
- 2.1.9 The Committee was informed that the Department has a contract with private taxis to transport the COVID-19 patients to and from the isolation sites.
- 2.1.10 During the visit, the Committee was informed that a new EMS Station in De Doorns will be opened soon, this would ease the workload of the Worcester EMS station.
- 2.1.11 It was reported that the EMS Worcester Station lost one official due to the COVID-19.
- 2.1.12 The successes of the EMS Worcester station was reported to be due to the staff commitment who were working regardless of the COVID-19 pandemic and the continuous attack of the EMS personnel by criminals in red zone areas. Management of the station also gives support to all its personnel.

2.2 Committee Resolutions

The Committee resolved to:

- 2.2.1 Table a motion to commend the officials of the Worcester EMS Station, and to pass the Committee's condolences to the family of the EMS staff member who passed away due to the COVID-19.
- 2.2.2 Conduct an oversight visit to the EMS Station in De Doorns.
- 2.2.3 Conduct an oversight visit to the Khayelitsha District Hospital.

2.3 Recommendation

The Committee recommended that the station removes the picture of former Premier, Ms H Zille and replace it with the incumbent Premier of the Province, Mr A Winde.

2.4 Request for Information

The Committee requests the Department of Health to submit a detailed report on the arrangement it has with private taxis. This information should include the Standard Operating Procedures and the Memorandum of Understanding (MOU) on the taxi mode of transport by Friday 30 October 2020.

2. Report of the Standing Committee on Agriculture, Environmental Affairs and Development Planning on its oversight visit to the Overstrand Region on 1 and 2 September 2020, as follows:

Delegation

The delegation consisted of the following members:

America, D (DA)
 Herron, BN (GOOD)
 Marais, PJ (FF Plus)
 Marran, P (ANC)
 Maseko, LM (DA)
 Van Der Westhuizen, AP (DA: Chairperson and leader of the delegation)

1. Introduction

Section 114 (2)(b)(i) of the Constitution of the Republic of South Africa mandates provincial legislatures to provide for mechanisms to maintain oversight over the Provincial Executive Authority in the province. To this end the Standing Committee on Agriculture, Environmental Affairs and Development Planning undertook an oversight visit to the Overstrand Region on 1 and 2 September 2020. The purpose of the visit was to engage with industry specific stakeholders, the National Department of Environment, Forestry and Fisheries, the Overstrand Municipality and CapeNature on specific projects and programmes. The Committee visited Abagold Limited, the Milkwood Forest and the Kogelberg and Stony Point Nature Reserves.

2. Abagold Limited (Abagold)

2.1 Overview of the visit

The purpose of the visit to Abagold was to learn from AFASA (the Abalone Farmers Association of South Africa) members about the industry's contribution to the Western Cape's economy, the issues related to abalone poaching and their view on the handling of poached abalone. The visit took place on Tuesday morning, 1 September 2020, with a

briefing by the Marketing Manager of Abagold Limited where the delegation was provided with the industry history and background, the current state of the industry, an overview of the global abalone industry, the effects of illegal abalone poaching, the risks associated with confiscated and smuggled abalone and proposals regarding abalone stock enhancement and decriminalisation.

The Committee then proceeded to the adjacent abalone hatchery to observe the operation and the different stages involved in abalone farming.

2.2 Findings

- 2.2.1 Abagold has an abalone hatchery, four grow-out farms and a canning and processing facility which was commissioned in August 2016. The facility is managed with the help of a comprehensive Quality Management System, which includes Hazard Analysis and Critical Control Point (HACCP) compliance, a standard for reducing the risk of safety hazards in food.
- 2.2.2 Abalone farms are the primary employers in many of the coastal communities creating in excess of 1 500 direct jobs. The Overstrand Region contributes 80% towards the farming of abalone in the industry and over R1 billion in primary export revenue.
- 2.2.3 Illegal abalone poaching is of huge concern to the industry. Between 5 000 and 10 000 people are involved in this illegal industry. As a result, the quality and size of abalone has been compromised.
- 2.2.4 Anti-poaching initiatives have failed. There has been no progress in this regard for the past 20 years while abalone stocks are on the brink of permanent collapse. Entire coastal communities have become the breeding ground for secondary crimes as the socio-economic impact of poaching escalated. Possible solutions to this scourge includes public-private enterprise and government collaboration, de-criminalising the Illegal industry and enhancing abalone stock through spat plantings and ranching. This will ensure job creation, sustainability as well as market and price stability.
- 2.2.5 Abalone is the only confiscated food product, world-wide, that is sold for human consumption. There are no health certificates required in South Africa for the sale of dried abalone. However, health certificates are required for the farming of abalone. Dried abalone is mostly exported to East Asian countries. The distinction is not always made between the farming and illegal sale of abalone and, as a result, abalone farms are associated with the illegal traders of abalone. The sale of illegal abalone could be avoided if better controls were in place. This would allow the market to be more aware of the health issues related to illegal abalone. It would also give abalone farms the opportunity to engage with international authorities and show them that there are farms that produce abalone legally with a health certificate. This would then deter the international authorities to import illegal and the confiscated abalone.
- 2.2.6 There are global seafood initiatives around sustainability, thus making restaurant owners and consumers more aware of the origin of the product that is purchased or consumed. If this mindset is upheld through the sustainable initiatives in the market, countries like China will clamp down on food safety. If this happens then approximately 10 000 people, who are currently living off an illegal harvest of a

non-sustainable resource, will become unemployed. Illegal poachers contribute nearly R5 million to the economy of the Overstrand Region. The industry is of the opinion that government has therefore been reluctant to really clamp down and stop poaching because it would take livelihoods away from communities.

- 2.2.7 Abalone poaching and diving for abalone falls within the auspice of the national sphere of government, but abalone is mostly a Western Cape species. A national operation in this regard is called Operation PAKISA that focuses on unlocking the economic potential of South Africa's oceans. With regard to aquaculture, this operation only deals with enforcement.
- 2.2.8 There are not many opportunities for young people in the Hermanus area. Focused job creation is needed. Abalone ranches could generate employment opportunities for young people and provide them with a sustainable career path.
- 2.2.9 There are opportunities for the establishment of abalone ranches in the Overstrand Region. Two sites have been identified, one in Hawston and the other in Betty's Bay. An advertisement in this regard was published by the National Department of Environment, Forestry and Fisheries approximately five years ago. Many people applied but experienced difficulty in completing the paperwork due to low literacy levels. This in turn put a hold on these projects.

2.3 Concerns

The Committee expressed the following regarding confiscated and illegal abalone:

- 2.3.1 The fact that confiscated abalone will never be subject to a health certificate because its origin is unknown and therefore renders the product untraceable;
- 2.3.2 This illegal product is hampering and destroying the reputation of South Africa;
- 2.3.3 If the number of abalone farms increase, there might be a migratory effect that would necessitate the need to expand social services; and
- 2.3.4 Market access of aquaculture products to Europe and Brexit countries are excluded due to compliance issues in South Africa.

2.4 Resolution

- 2.4.1 The Committee RESOLVED that, before it can make any recommendations on the matter of abalone farms and the issues associated with illegal poaching, the illegal sale of abalone, the associated criminal activity and health concerns relating to the sale of dried abalone, CapeNature should provide it with:
 - 2.4.1.1 A report on the status of the industry at present;
 - 2.4.1.2 An indication of where the blockages are that would hamper the thriving of the abalone industry; and
 - 2.4.1.3 Recommendations on how to alleviate this.

3. Milkwood Forest

3.1 Overview of the visit

The purpose of the visit to the Milkwood Forest was to observe the impact of deforestation and related challenges, ascertain the status thereof in terms of legislative protection as well

as the biological importance thereof. The Committee visited the site of what was formerly a Milkwood Forest in Schulphoek on Tuesday afternoon, 1 September 2020. The Committee was taken to two sites to have a look at, what once was, a forest.

3.2 Findings

- 3.2.1 Very little was left of the Milkwood Forest on the piece of land as land invasion has taken place. The informal settlement now situated in Schulphoek has grown and is still growing. There now exists a total number of approximately 400 shacks situated along the coast line.
- 3.2.2 From a biodiversity and ecological point of view, most of the milkwood trees are gone and the few trees remaining will not survive for very long. Milkwood trees are slow-growing. Before the land invasion started, the Milkwood Forest was considered to be of high biodiversity importance as the milkwood tree is an endangered species. The Overstrand Municipality approached CapeNature about the possibility of conserving the site but the land invasions occurred before this possibility could be explored. The Forest has become difficult to manage due to the land invasion and this had a ripple effect on the existing ecosystem. It was accepted that, due to the extent of the damage to the Forest, it was impossible to be restored.
- 3.2.3 The officials, both from the National Department of Environment, Forestry and Fisheries and CapeNature, were of the opinion that a fence to protect some of the remaining milkwood trees would not be a long-term solution, until the community accepts responsibility for the conservation of the trees.
- 3.2.4 The Overstrand Municipality has provided water to the site. Problems with the community were also encountered. Municipal officials were often denied access to the site by the community. Presently, the site does not have electricity, but it is serviced in terms of refuse removal.

3.3 Request for information

The Committee REQUESTED CapeNature to provide it with a report on the prospects of conservation, the extent of deforestation and land invasion as well as its encroachment on the environment, so that the report can be considered in order for recommendations to be made to the Standing Committee on Human Settlements for further oversight and investigation.

4. Kogelberg Nature Reserve

4.1 Overview

The purpose of the visit to the Kogelberg Nature Reserve was to observe and experience the investment in expanded tourism overnight facilities and its potential to generate a return on investment as well as to observe the eco-friendly design principles, hospitality and related services offered to guests. The Committee visited the Reserve, a renowned heritage site on Wednesday morning, 2 September 2020. The visit commenced with an overview of the Reserve in terms of its location, amenities and biodiversity and was followed by a tour of the Reserve that included the newly built chalets.

4.2 Findings

- 4.2.1 The glass fronted eco-cabins afford occupants breath-taking views of the Reserve. Each of the five Oudebosch eco-cabins at the reserve sleeps four people and consists of two bedrooms, one bathroom, one en-suite, and a spacious kitchen, lounge and dining area. The sixth cabin is the new 2-sleeper, Palmiet Honeymoon Suite consisting of an open plan bedroom, lounge, dining and kitchen area with one bathroom.
- 4.2.2 Phase 1 of the Oudebosch Project opened to the public in February 2012 and boasts green design and water saving features. Sustainable features include waterless toilets. The cabins are linked by wooden walkways and constructed with renewable materials. Each cabin has a planted roof with modular trays for planting indigenous vegetation. Chandeliers and lights are finished off with recycled bottles. The central eco-pool has no chemicals and the shallow section has aquatic plants that assist in the cleaning and regeneration process.
- 4.2.3 Oudebosch has received international recognition in the form of the coveted Holcim award for sustainable construction with architectural excellence which was awarded to the company Architecture Coop. GVK Siya Zama Building Contractors won the AfriSam Innovation Award for Sustainable Construction of the Oudebosch Cabins. The building work was meticulously planned using green building technology. For the interior décor of the units completed just before the visit, CapeNature partnered with the Craft and Design Institute (CDI).
- 4.2.4 The Reserve boasts an occupancy rate of 85-90% year on year. Approximately 4 500 individuals are accommodated every year.
- 4.2.5 The construction of Phase 2 of the Oudebosch Project has been completed. This encompasses five new 2-sleeper and three new 6-sleeper cabins, a new eco-pool and green design principles and universal access features. This will increase the staff complement from 13 employees to 32 employees.

5. Stony Point Nature Reserve

5.1 Overview

The purpose of the visit to the Stony Point Reserve was to gain an understanding of the biodiversity and conservation issues linked to the Reserve. The Committee also received a brief lecture on the importance of estuary management. The Committee visited the Reserve on Wednesday afternoon, 2 September 2020. Stony Point is situated within the Betty's Bay Marine Protected Area and the objectives of activities at the Reserve are to protect flora and fauna, to facilitate fishery management and to diminish any conflict that may arise from competing users in the area.

5.2 Findings

5.2.1 Stony Point

- 5.2.1.1 The Reserve employs four full time staff members and 14 contracted staff members that form part of the Extended Public Works Programme against an operational budget of R3.9 million.

- 5.2.1.2 The main focus of the reserve, is the conservation of the unique breeding colony of African penguins. The challenges experienced within the Reserve include poaching, high unemployment and ecological damage caused by invader plants and wild fires.
- 5.2.1.3 The opportunities created in the area include community awareness, job creation and responsible tourism development.
- 5.2.1.4 The Reserve also boasts a restaurant called “On the Edge Restaurant” that is managed by the Mooi Uitsig Community Trust. The Mooi Uitsig Community Trust Project was an initiative of the Department of Tourism in partnership with the Overstrand Municipality and Casidra. The Project started in 2007 and the Mooi Uitsig Community Trust was established in 2012. The aim of the Trust is to utilise the resources and property of the Trust for the social and economic benefit of the beneficiaries and to identify and support community development projects.
- 5.2.1.5 On the Edge Restaurant opened its doors in December 2014. CapeNature took over the management of Stony Point from 1 July 2014. The restaurant was officially launched and handed over to the community on 10 April 2015.
- 5.2.1.6 Challenges with this initiative included the fact that trustees were general workers at the municipality, gardeners and domestic workers and therefore did not have any experience in managing a business, the community wanted to see immediate results, there was poor attendance at meetings, there was distrust over money matters and employees refused to sign employment contracts as they saw themselves as co-owners and not employees.

On the Edge Restaurant entered the Premier’s Entrepreneurship Recognition Awards in 2017. The youth and community members also participate in environmental education activities.

- 5.2.1.7 Other projects flowing from the Trust are the establishment of a vegetable garden that supports the restaurant, the Penguin Kidz Crèche and the Mooi Uitsig Community Arts and Culture Project which assists young people to develop their skills.

5.2.2 Estuary Management and Rooisand Reserve

- 5.2.2.1 Estuaries are home to some of South Africa’s most iconic species and CapeNature works to protect and conserve the biodiversity found within them as many species of fish rely on these systems.
- 5.2.2.2 Estuaries are often thought of as part of a river and is the link between the salty ocean and the fresh rivers upstream. A river becomes an estuary as soon as salt can be measured in the water. Some estuaries are very short (a few hundred metres) and others very long.
- 5.2.2.3 Species diversity is very high in the bigger estuaries. These estuaries are a complex system because of the interchange of fresh water coming down the catchment areas and the sea water coming into the catchment areas. Each estuary is managed individually and has its own Mouth Management Plan.
- 5.2.2.4 The Rooisand Reserve functions as an outdoor classroom. CapeNature has capacitated stakeholder learning within the reserve in order to demonstrate the importance of the estuary and the ecosystem and its relevance to what is happening in the specific water catchments areas.

5.2.2.5 CapeNature has ensured successful protected area expansion by engagements with state entities, community trusts and private entities to be better custodians of land. CapeNature has adopted an integrated catchment management approach in this regard.

6. Acknowledgements

The Committee wishes to express its heartfelt appreciation to the Overstrand Municipality, specifically its Deputy Mayor and Ward Councillors who accompanied the Committee on all the visits as well as to the officials from CapeNature and the National Department of Environment, Forestry and Fisheries. A note of appreciation is also extended to the Management team of Abagold Limited as well as the Members of AFASA for taking the time to meet with the Committee.

3. Report of the Standing Committee on Health on the oversight visits to the Klappmuts Clinic in Stellenbosch and the TC Newman Community Day Care Centre in Paarl conducted on 9 September 2020 as follows.

The Delegation

The delegation of the Standing Committee on Health included the following Members:

Philander, WF (DA) (Chairperson and leader of the delegation)
 Allen R (DA)
 Botha, LJ (DA)
 Windvogel, R (ANC)

Additional Members

Bakubaku-Vos, NG (ANC)
 Bans, AP (ANC)

Apology

Xego, M (EFF)

The following parliamentary official accompanied the delegation:

Ms N Jamce

Background

The Standing Committee on Health conducted unannounced oversight visits to the Klappmuts Clinic in Stellenbosch and the TC Newman Community Day Care Centre in Paarl. The purpose of the visits was to assess services offered by the two facilities to their communities. The Committee resolved to visit the Klappmuts Clinic due to the challenge of the lack of space that was reported to the Committee. The Committee also decided to visit the TC Newman Community Day Care Centre in Paarl to assess the service pressure that the centre was experiencing during the COVID-19 pandemic.

1. Visit to the Klapmuts Clinic

Sister Mntyedwa, Acting Operations Manager at the Klapmuts Clinic, welcomed the Standing Committee and informed the Committee that she was acting because the Operations Manager of the Clinic was on leave. Sister Mntyedwa gave a brief summary of the services offered by the Clinic, the service pressure, the challenges and the successes of the Klapmuts Clinic.

1.1 Tour of the facility

The Committee conducted a brief tour of the facility. The areas visited included the waiting room outside the facility, the waiting room inside the building, the reception area, the pharmacy, and the consultation rooms.

1.2 Salient points that emanated from the unannounced visit to the Klapmuts Clinic

- 1.2.1 The Klapmuts Clinic (the Clinic) is a Primary Health Care facility that offers services such as mother and child health, chronic diseases care, women's' health, HIV and TB care, men's health and acute services.
- 1.2.2 The Clinic operates on week-days from 07:30 to 16:00
- 1.2.3 It was reported that the Clinic attends to a lot of patients per day, however, the number of patients that visit the Clinic per day could not be verified during the visit. Sister Mntyedwa indicated that she was not responsible for compiling the statistics, the Operations Manager that was on leave during the visit was the one who compiles statistics for the Clinic.
- 1.2.4 The Committee noted that office space was a major challenge at the Clinic and it was reported that patients queue outside the premises even during the winter season.
- 1.2.5 It was reported that during rainy days, the majority of patients do not visit the Clinic due to the shortage of space, and therefore only patients with appointments visit the Clinic.
- 1.2.6 The Committee was informed that the size of the facility was very small compared to the size of the community. The Clinic was still the same size, although the population of the surrounding communities has increased.
- 1.2.7 During the visit, patients were waiting outside complaining about the waiting time and the appointment system. The patients mentioned that there was no admission system for patients at the Clinic like in other health facilities. The appointment system was not functional.
- 1.2.8 The majority of patients that were waiting outside informed the Committee that most of the time people are turned away without getting the medical help they need.
- 1.2.9 The Committee noted that due to the shortage of space at the Clinic, there was no compliance to social distancing among patients in terms of the COVID-19 regulations.
- 1.2.10 The Committee was informed that the Clinic was waiting for the prefab structure from the provincial Department of Health, however, it was not known when the structure would be erected.
- 1.2.11 The Clinic has a partnership with the Right To Know NGO. The NGO is helping the Clinic during the COVID-19 pandemic. The NGO officials assist in checking

the temperature of patients visiting the Clinic, assist patients with their chronic medication, conduct home visits and collect TB sputum.

- 1.2.12 The officials from the Right To Know NGO indicated that they work in high-risk areas, they conduct home visits, especially during COVID-19, and are only paid R3 500 per month. The officials from the Right To Know NGO pleaded with the Committee to be absorbed by the Department when there are open vacancies in the Department of Health.
- 1.2.13 The Committee noted that there were no telephone numbers of patients in the incoming register of patients at the Clinic. This was a concern to the Committee, as this would make it difficult for the Clinic to trace patients in case of a COVID-19 infection.
- 1.2.14 The Committee also noted that there was a communication gap between the management and staff at the Clinic. Staff members did not know what was happening at the Clinic.
- 1.2.15 The Committee further noted that there was poor communication between staff and patients.
- 1.2.16 The Committee observed that the filing system was manual at the Clinic.

1.3 Committee resolution

The Committee resolved to visit the Klapmuts Clinic again on a later date and the senior management of the Clinic would be requested to be available to answer questions.

1.4 Request for Information

The Committee requested the Department of Health to submit the following information by Friday 30 October 2020:

- 1.4.1 Detailed information on the plans to expand the Klapmuts Clinic and information on the plan to install the prefab structure for the time being as a waiting area.
- 1.4.2 Detailed information on the Standard Operating Procedures of the Clinic.
- 1.4.3 Detailed information on the default rate and numbers of chronic patients during the peak of the COVID-19 pandemic in the province.
- 1.4.4 A status update on the Clinic Committee of the Klapmuts Clinic.
- 1.4.5 Detailed information on how the Department was taking care of the stressed staff members at the Klapmuts Clinic.
- 1.4.6 Detailed information on the challenges that the Clinic has communicated to the Department and what the progress made by the Department was in addressing these challenges.
- 1.4.7 Detailed information on how the Department ensured that the staff at the Clinic provides proper customer service to the patients.
- 1.4.8 Information on when the Klapmuts Clinic will move from the manual filing system to the e-filing system.
- 1.4.9 Detailed information on the staff complement of the Clinic, if there are any vacancies, if the current staff compliment is sufficient to serve the number of patients that visit the clinic.

2. Visit to the TC Newman Community Day Care Centre in Paarl

Sister Bridgens, General Operations Manager, Sister Vermeulen and Ms Bosch welcomed the Committee and accompanied the delegation during the walkabout of the facility.

2.1 Salient points that emanated from the unannounced visit to the TC Newman Community Day Care Centre

- 2.1.1 The TC Newman Community Day Care Centre (the Centre) operates on weekdays from 07:30- 16:00.
- 2.1.2 The Centre has a total of 42 beds and offers services such as Mother and Child Health, Chronic Diseases Care, Women's' Health, HIV and TB Care, Men's Health, Acute Services, Allied Health Care Physiotherapy, Mental Health Services and Oral Health Dentistry.
- 2.1.3 The Committee was informed that the whole structure, in terms of the daily operations at the Centre, had to change due to COVID-19.
- 2.1.4 The Committee was informed that to reduce the service pressure from the Paarl Provincial Hospital, the Centre had a total of 18 beds that were converted into a 24-hour field hospital as a response to the COVID-19 pandemic.
- 2.1.5 It was reported that the average length of stay at the Centre, by patients from the Paarl Provincial Hospital, was a week.
- 2.1.6 The Committee was informed that before COVID-19, the Centre assisted approximately 600 patients per day and with COVID-19 the numbers have decreased. The Centre only attends to urgent cases.
- 2.1.7 The Committee was informed that patients with chronic conditions were slowly returning to the hospital and were seen on an appointment basis. However, during the peak of the COVID-19, the Rusthof NGO, contracted to the hospital, delivered the pre-packed chronic medication to patients.
- 2.1.8 The Centre has a triage and appointment system. It was reported that the elderly and people living with disabilities were assisted first and the appointments were scheduled on an hourly basis.
- 2.1.9 The Committee conducted a walkabout of the facility and inspected the rehabilitation, speech, physiotherapy and psychiatric sections, and the section for the psychologist.
- 2.1.10 The Committee was informed that to manage COVID-19 infections, the hospital was trying to reduce the number of people that were accompanying the patients. The only accompanying persons allowed in the building, were those who accompanied babies and people with disabilities.
- 2.1.11 It was reported that the total turnaround for the visit at the Centre was 2 hours, which included the time the person took to enter the facility, get medical assistance and exiting the building, and this was much better than the national norm of 3 hours for primary health care.
- 2.1.12 The Committee was informed that the Centre was in urgent need of wheelchairs. It was reported that the lack of usable wheelchairs was caused by patients who visited the hospital in their old wheelchairs, change the wheelchairs and leave their old ones at the hospital, taking the new wheelchairs that belong to the hospital.
- 2.1.13 It was reported that the Centre has a functioning Hospital Board.

3. Committee Resolution

The Committee resolved to extend its sincere gratitude to the entire staff of the TC Newman Day Care Centre in Paarl for their hard work during the COVID-19 pandemic and commended the way the hospital was managed.

4. Report of the Standing Committee on Health on the oversight visit to the Red Cross Children's Hospital on 16 September 2020 as follows:

The Delegation

The delegation of the Standing Committee on Health included the following Members:

Philander, WF (DA) (Chairperson and leader of the delegation)

Bosman, G (DA) (alternate)

Windvogel, R (ANC)

Additional Members

Bans, AP (ANC)

Apologies

Allen R (DA)

Botha, LJ (DA)

Xego, M (EFF)

The following parliamentary official accompanied the delegation:

Ms N Jamce

Background

The Standing Committee on Health conducted an oversight visit to the Red Cross Children's Hospital in Rondebosch. The aim of the visit was to assess services offered by the Red Cross Children's Hospital. The hospital also admits children from all over the country and from neighbouring countries. The Committee resolved to visit the Red Cross Children's Hospital as part of its programme for the 2020/2021 financial year. The Committee also visited the Red Cross Children's Hospital to assess the service pressure that the hospital was experiencing during the COVID-19 pandemic.

Dr Mukosi, the Chief Executive Officer for the Red Cross Children's Hospital, Dr Parbhoo, Manager for the Medical Services, and other senior managers of the hospital welcomed the standing committee and gave a brief summary of the services offered by the hospital, the service pressure, the challenges and the successes of the hospital.

1.2 Tour of the facilities

The Committee conducted a brief tour of the facility. The areas visited included the newly built emergency center, dialysis section, high care facility and burns unit.

1.2. Salient points that emanated from the oversight visit to the Red Cross Children's Hospital

- 1.2.1 The Committee was informed that the vision of the Red Cross Children's Hospital (the hospital) was "to be the leading specialised healthcare provider for Children in Africa."
- 1.2.2 It was reported that the Hospital provides an important service in the Western Cape, to other provinces, especially the Eastern Cape and Northern Cape, and other African countries. The hospital also plays a vital role as the 'end of the referral chain' for large areas of the country.
- 1.2.3 The hospital is a unique training facility for all categories of child health professionals to well establish academic links, namely, the University of Cape Town School of Child and Adolescent Health, University of the Western Cape Dental School and Allied Professions, University of Stellenbosch and the Cape Peninsula University of Technology and others.
- 1.2.4 The hospital offers services such as medical, surgical, allied health services and unique single site services.
- 1.2.5 The Red Cross Children's Hospital was reported as the only dedicated paediatric hospital in South Africa that offers comprehensive paediatric services, quaternary (National centre for paediatric liver transplants), tertiary (Provincial centre for paediatric cardiac care) and secondary care for children.
- 1.2.6 It was reported that the hospital had 272 beds allocated, of which 22 were allocated to the ICU section, 19 490 admissions, 3 896 day patients, 73 856 inpatients, 7 250 operations, 118 325 for outpatient visits, 42 328 trauma & emergency patients and 51 500 allied health visits.
- 1.2.7 The key stakeholders of the hospital includes amongst others, the Children's Hospital Trust (CHT) an official fundraising arm of the hospital for capital works projects; RX Radio, a hospital radio station by children (patients) for children (patients); the Hospital Facility Board, an advisory board that accepts and administers donations and bequests on behalf of the hospital and raise funds for amenities for staff and patients; the UCT Faculty of Health Sciences, a part of the faculty's campus extends from the hospital which provides a platform for teaching in the hospital environment and ChildSafe that updates and analyses available statistics on accidental death and injuries.
- 1.2.8 It was reported that the Children's Hospital Trust was a major donor for the hospital and had contributed 50% towards the renovations and building of the new emergency centre and the other 50 % was funded by the provincial Department of Health.
- 1.2.9 The children's services that are offered by the *Groote Schuur* Hospital would be moved to the Red Cross Children's Hospital once the renovations for the section for clinical services are completed.
- 1.2.10 Due to the infrastructure challenges at the Red Cross Children's Hospital, the section for the mental health services was closed in 2019. It was reported that the services were offered offsite and the section was under renovation.
- 1.2.11 The Committee was informed that due to COVID-19, the ChildSafe NGO that works closely with the burns unit lost donors and the hospital had to accommodate the NGO within the hospital premises.

- 1.2.12 During the visit, the Committee was informed that there was no child protection unit within the hospital and once the renovations and the new building was completed, space will be assigned to the child protection services. The child protection services within the Red Cross Children's Hospital was a collaboration between the hospital and the Department of Social Development.
- 1.2.13 The extent of child abuse in communities was reported to be a major challenge. The hospital management suggested that the Department of Social Development should work closely with the Department of Health on child protection services and absorb the child protection unit to be one of the components of the Department of Social Development.
- 1.2.14 It was reported that some of the beds at the Red Cross Children's Hospital reserved for terminally ill children were occupied by abused children.

2. The impact of COVID-19 on the Red Cross Children's Hospital.

- 2.1 Due to the COVID-19 pandemic, the Red Cross Children's Hospital had to reduce the number of entrances to the hospital to reduce the number of people entering the hospital and the pedestrian entrance has since been closed.
- 2.2. A queue marshal was placed at the entrance of the emergency centre to screen patients and families. The hospital had to limit the number of caregivers and visitors.
- 2.3 The social distancing at the hospital significantly reduced all elective surgery and outpatient appointments. The plan was to create capacity in order to free up staff to work in other areas that have been created and to create additional capacity to take on additional paediatric patients from all over the province.
- 2.4 The Committee was informed that due to COVID-19, the hospital erected tents to create more physical space to separate possible COVID-19 patients from other patients with non-COVID-19 related illnesses.
- 2.5 The hospital continued with only urgent, emergency surgery and outpatient appointments.
- 2.6 The hospital was planning the re-escalation of services as there were backlogs in most services. It was reported that the hospital received donor funding to assist with catching-up on backlogs.
- 2.7 The Committee was informed that there were some positives for the hospital that came out of the COVID-19 era. The positives include stronger connections between different parts and departments within the hospital, connections between provincial networks, the public, and the City of Cape Town. The learning collaborations across the province, the Spacer project led by Prof Mike Levin. The spacer project has been rolled out to all facilities across the province (including adults), and Prof Levin was extending the project across South Africa.

3. The Committee noted the following challenges during the visit

- 3.1 Adolescent health services were reported as a gap within the health services.
- 3.2 The child and adolescent Psychiatry Unit had infrastructural issues, however, the issues were attended to and the unit was reopened.
- 3.3 There was an increasing need for additional theatre equipment.
- 3.4 The hospital reported an increase in the number of all types of child abuse.
- 3.5 Children with gunshot injuries were admitted to the hospital in alarming numbers.

- 3.6 The hospital reported that children awaiting placement by the Department of Social Development were blocking the acute beds at the hospital.
- 3.7 The hospital reported that road accidents were the major cause of mortalities amongst children and resources were needed for prevention.
- 3.8 The hospital reported that approximately 50% of children in the Western Cape died of injuries.

4. Request for Information

The Committee requested the Department of Health to provide it with a detailed report on its collaboration with the Department of Social Development on how both departments were dealing with cases of abused children that are admitted at the Red Cross Children's Hospital by Friday 30 October 2020.

5 Resolution

The Committee resolved to table a motion in the House to express its gratitude to the entire staff of the Red Cross Children's Hospital for their dedication to providing outstanding health services to the children of South Africa and beyond the South African borders. Furthermore, the motion will also highlight the excellent manner in which the Red Cross Children's Hospital was managed.

5. Annual Activity Report of the Standing Committee on Education for the 2019/20 financial year as follows:

Members

The Committee comprised of the following Members:

Botha, LJ (DA) (Chairperson)
 Allen, RI (DA)
 Bosman, G (DA)
 Christians, FC (ACDP)
 Sayed, MK (ANC)

Alternate members:

Brinkhuis, G (Al Jama-ah)
 Kama, M (ANC)
 Mackenzie, RD (DA))
 Makamba-Botya, N (EFF)
 Philander, WF (DA)
 Wenger, MM (DA)

1. Introduction

The mandate of the Committee is to:

- 1.1 Maintain oversight over the Western Cape Education Department, the way in which the Department performs its responsibilities, including the implementation of legislation and holding the Executive Authority accountable.
- 1.2 Consider and report on legislation, the Annual Reports and matters referred to it by the Speaker.

In fulfilment of its mandate the Committee must:

- 1.3 Facilitate public participation and involvement in the legislative and other processes of the Committee.
- 1.4 Conduct its business in a fair, open and transparent manner.
- 1.5 Promote co-operative governance.
- 1.6 Report regularly to the House.

2. Reporting Department

- 2.1. Western Cape Education Department

3. Overview of Committee's activities

Number of Committee Meetings	14
Number of Public Hearings	2
Number of Oversight Visits	2
Number of Visit Weeks	3
Number of Provincial Bills considered	0

4. Oversight activities

- 4.1. The 2019/20 financial year commenced with the National and Provincial elections, which saw the 6th Parliament elected into the Western Cape Provincial Parliament. In its first meeting, the Committee elected Member LJ Botha as the Chairperson of the standing committee on Education.
- 4.2. On 16 July 2019, the Committee scheduled a briefing by the Western Cape Education Department (WCED) on its Annual Performance Plan for the 2019/20 financial year. The purpose of the briefing was to familiarise Members with the programmes and strategies of the WCED.
- 4.3. In August 2019, the Committee was briefed by the WCED on the school safety measures that included Provincial Joints and all subcommittees linked to the Provincial Joints. The presentation included strategies in place to address the safety of learners in schools. Following this meeting, the Committee undertook an oversight visit to the Mondale High School in Mitchells Plain. This school is situated within a "Red Zone Area" because of gang violence.
- 4.4. In August 2019, the Committee was invited to the West Coast Education District Visual Arts Celebration. The event showcased the incredible work of young talented learners of the West Coast Education District.

- 4.5. On 27 to 29 August 2019, the Committee was part of the Social Cluster Visit Week to Laingsburg. The cluster visited the Laingsburg High School as part of its programme.
- 4.6. In October 2019, the Committee was briefed by the WCED on the Special Needs Strategy, its impact on learners with special needs and how the E-learning Strategy would assist those learners.
- 4.7. In January 2020, the Standing Committee on Education conducted its own visit week to the Eden District. During this visit week, the Committee visited the following schools in the region: Plettenbergbaai Sekondêr Skool, Sunridge Primary School, Thembelitsha Primary School, Percy Mdala High School, Van Kervel Spesiale Skool (Special Needs School), Thembaletu Primary School, Park Laerskool Mosselbaai, and Hillcrest Sekondêr Skool. As part of this visit week programme, the Department of Basic Education and the WCED also briefed the Committee on the Comprehensive Sexually Education as part of Life Skills Education.
- 4.8. In November 2019, the committee conducted an oversight visit to the first Collaboration Agricultural School in the Province, Jakes Gerwel Technical School. The school is a collaboration school with the JGE Funding Trust and the WCED.
- 4.9. In February 2019, the Committee conducted an oversight visit to the walking bus project to Springdale Primary School in Mitchells Plain.
- 4.10. The Committee was part of the Social Cluster Visit Week to the West Coast region. The Cluster visited Riebeeck Valley Special Needs School in Riebeeck West and Velddrif High School in Velddrif.

Legislation

During the 2019/20 financial year, the Committee dealt with the following items of legislation:

5. Provincial Bills

- 5.1. Vote 5 – Education in the schedule to the Western Cape Adjustments Appropriation Bill [B 6–2019].
- 5.2. Vote 5 – Education in the schedule to the Western Cape Appropriation Bill [B 3–2020].

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 two public hearings on the deliberations on the Provincial Money Bills, and the Annual Report of the Western Cape Education Department. The dates for the hearings were advertised in the mainstream and community newspapers in the Western Cape.

7. Financial particulars

The Standing Committee was allocated a budget of R101 900. At the close of the 2019/20 financial year, expenditure attributed to the activities of the Committee was R136 600. There was an over expenditure of R34 700.