PARLIAMENT OF THE PROVINCE OF THE WESTERN CAPE

ANNOUNCEMENTS, TABLINGS AND COMMITTEE REPORTS

ANNOUNCEMENTS

The Speaker:

1. Assent of bill by the Premier

Western Cape Adjustments Appropriation Act, 2019 (Act 5 of 2019), assented to and signed by the Premier on 9 December 2019.

2. The Speaker

Policy on Parental Leave for Parliamentarians, adopted by the House on 3 December 2019.

3. Provincial Notice

Provincial Notice 122 of 2019, published in the *Provincial Gazette Extraordinary* 8184, dated 9 December 2019: Publication of the Western Cape Laws Repeal Bill [B 5–2019] for comment before or on 24 January 2019.

4. Referral of document to committee in terms of section 54(1) and (2) of the Financial Management of Parliament and Provincial Legislatures Act, 2009 (Act 10 of 2009), as amended:

Parliamentary Oversight Committee

Western Cape Provincial Parliament – Monthly financial statements (In-year Monitoring Report) for the period ended 30 November 2019.

TABLINGS

The Speaker:

1. Auditor-General Report

Report in terms of section 126(4) of the Local Government: Municipal Finance Management Act, 2003 (Act 56 of 2003): Reasons for the delay in completing the audit of Matzikama Municipality for the financial year ended 30 June 2019.

2. Tabling of document in terms of section 54(1) and (2) of the Financial Management of Parliament and Provincial Legislatures Act, 2009 (Act 10 of 2009), as amended:

Western Cape Provincial Parliament – Monthly financial statements (In-year Monitoring Report) for the period ended 30 November 2019.

COMMITTEE REPORTS

1. Report of the Standing Committee on Agriculture, Environmental Affairs and Development Planning on its oversight visit to the Elsenburg Agricultural Training Institute on Tuesday 27 August 2019 as follows:

Delegation

The delegation consisted of the following members:

Maseko, LM (DA) Mitchell, D (Alternate) (DA) Van Der Westhuizen, AP (Chairperson) (DA) Marran, P (DA)

Apologies were received from members Baartman, DM (DA) and Marais, PJ (FF Plus)

1. Introduction

The Standing Committee on Agriculture, Environmental Affairs and Development Planning undertook an oversight visit to the Elsenburg Agricultural Training Institute and was briefed by Ms H Rodkin, Chief Director and Dr H Swatson, Director of the Training Institute. The delegation further embarked on a tour of the Elsenburg farm and the Training Institute.

2. Overview of the visit

The visit commenced with a briefing at 14:00 in the SAET Conference Room. Officials of the Department of Agriculture were in attendance.

During the meeting the members were shown a video on the Training Institute and were provided with an overview of the Institute. A further presentation was made to the delegation on the various Agricultural Skills Development (ASD) Programmes.

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The Elsenburg Agricultural Training Institute (EATI) was established in 1898 and was the first centre for agricultural training in Africa. In the Republic of South Africa, the Institute has secured an eminent track record in agriculture and especially in the field of agricultural training. An important milestone was in 1976 with the establishment of the Diploma in Cellar Technology and many of South Africa's winemakers today, received their agricultural training at Elsenburg.

Since 2004 Elsenburg has been offering a B.Agric. Programme in association with the AgriScience Faculty at the University of Stellenbosch.

The delegation also met with the Chairperson and Vice President of the Student Representative Council, after which the delegation embarked on a tour of the Library, Lecture Rooms, Percheron Hall, Manor House, Agri Hub and the wool shed.

The oversight visit concluded with a tour of the cellar and a meeting with the wine-making lecturer and her students.

3. Findings and observations

During the discussions members of the delegation expressed concern at the phasing out of the Higher Certificate and One Year Diploma as of 31 December 2019. Of further concern to the Committee was that the EATI had not yet received accreditation to offer the new learning programmes registered under the Higher Education Qualifications Sub-Framework (HEQSF) that comes into effect in January 2020.

However, Elsenburg already received provisional accreditation and provided that certain requirements are complied with, the accreditation will be finalised and subsequently the registration at the South African Qualifications Authority (SAQA) and Department of Higher Education (DHET). The provisions as indicated by the Council on Higher Education (CHE) is currently in the process of being addressed.

Elsenburg is in contact with the CHE, the DHET and the SAQA in order to obtain the accreditation and registration timeously. It is envisaged that the process will be finalised during October 2019, in time for the roll out of the new Diploma in 2020.

4. **Resolutions/Actions**

The Committee RESOLVED to engage with the Department on the progress with regard to the accreditation of Elsenburg to offer the new learning programmes as from January 2020.

2. REPORT OF THE STANDING COMMITTEE ON HEALTH ON AN UNANNOUNCED OVERSIGHT VISIT TO THE GRASSY PARK COMMUNITY HEALTH CLINIC ON 2 OCTOBER 2019

Delegation

The delegation included the following Members:

Democratic Alliance (DA)

Philander, WF (Chairperson) Allen, RI Botha, LJ

African National Congress (ANC) Windvogel, R

Additional Members

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

Apology

Xego, M (EFF)

Ms N Jamce, Procedural Officer, accompanied the delegation.

1. Introduction

The Standing Committee resolved to embark on an unannounced oversight visit to the Grassy Park Community Health Clinic in Grassy Park as part of its oversight mandate over the Department of Health and in compliance with its programme.

2. Overview

The Grassy Park Community Health Clinic (the Clinic) was opened in 2014. The delegation visited the Grassy Park Community Clinic on Wednesday 2 October 2019. The objective of the visit was to experience the services first-hand and to assess the services offered by this health facility. The Standing Committee wanted specifically to learn about the challenges experienced by the Clinic, the successes achieved by the Clinic, and the impact that the Clinic has had on the community of Grassy Park and on the surrounding areas.

On arrival, the Committee was welcomed by Sister Levy. She informed the Committee that Mr Lingani, facility manager, was on leave and that Sister Mayor, acting facility manager, was in a meeting. Sister Levy led the Committee on a walkabout of the facility. The Grassy Park Community Clinic was built for an estimated 40 000 community members. However, over the years the community has grown and the Clinic is now providing health services to a total of 80 000 people mainly due to the growing informal area.

3. Findings

- 3.1 The Grassy Park Community Clinic operates five days a week from 07:30 to 16:00 and is closed on weekends and public holidays.
- 3.2 The Clinic renders a comprehensive healthcare package of care to the community of Grassy Park and the surrounding areas. It also provides chronic medication to a total of 1 800 patients per month. A pre-packaged medication system for chronic medication is in place at the Clinic.
- 3.3 The Clinic has an appointment system in place and also assists 50 unbooked patients per day.
- 3.4 The Clinic offers preventative and curative services with a special focus on children, women, HIV and Aids, and sexually transmitted infections (STIs). The Clinic does not offer ARV treatment on site. Patients who needs this treatment are referred to other health facilities.
- 3.5 The Clinic has a staff complement of 28 permanent members, including two medical doctors who are available at the facility every day. It was reported that Sassa has a

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doctor who visits the Clinic to assess the applicants for social grants and the renewal of social grants.

- 3.6 Staff shortage was reported as a challenge. The Clinic has four general workers who oversee the maintenance of the facility.
- 3.7 The Clinic reported that the shortage of some medication (especially the asthmatic pumps, anti-psychotic and depressants) is also a challenge.
- 3.8 The Clinic gets limited medical stock of some medication and the procurement processes are contributing to the shortage of medical supplies.
- 3.9 The filing system was reported as a challenge. The Clinic is still using a manual filling system after the original filling cabinet collapsed a year ago due to the increasing number of people making use of the facility. There is no electronic filing system at the Grassy Park Community Clinic. Only bookings are done electronically and the pharmacy has an electronic medical record of patients.
- 3.10 The Clinic reported that a Jack System Printout from the pharmacy was used when a patient's folder had been lost.
- 3.11 The safety of officials and patients was reported as a challenge at the Grassy Park Community Clinic. Vehicles of patients are broken into when they visit the facility.
- 3.12 The Clinic has a new security company that just started working at the facility. However, Mr Lewis, Chairperson of the Health Clinic Committee, alleged that the Health Clinic Committee was not informed about the appointment of a new security company and orientation had not taken place for the new security company.
- 3.13 Mr Lewis further reported that the responsibility of the new security company had not been clearly defined. Officials and members of the Health Clinic Committee were not sure whether the security personnel were able to assist wheelchair patients to gain access to the facility when they visit the Clinic.
- 3.14 The Clinic is urgently in need of a scanning machine at the entrance to prevent people carrying weapons from gaining access to the facility.
- 3.15 Mr Lewis informed the Committee that there was a lack of cooperation of the ward councillors. He reported that councillors were not always seen as present in the community and they were also not attending health-committee meetings as they frequently came up with excuses.
- 3.16 The Clinic Committee, together with members of the Community Policing Forum, offered sandwiches and coffee for free to the patients who visit the facility early in the morning. The funding for this initiative is through donations given by community members and by businesses in the community.
- 3.17 The plot where the Clinic has been built is small and there is no land for an extension. The only way in which the facility could be extended was by building up. The officials reported that there was a piece of land with an old building next to the facility that belong to the Department of Public Works. It would make a big difference if the old building could be demolished and the land be transferred to the Grassy Park Health Clinic for the building of a new much-needed health facility.
- 3.18 It was reported that students from the University of Cape Town (UCT) were no longer assisting at the Clinic as part of their community service in Physiotherapy due to a shortage of space.
- 3.19 The Clinic urgently needs X-rays, physiotherapy services and ARV treatment. Currently patients from the Grassy Park Community Clinic are referred to other facilities for these services.
- 3.20 Prefabricated buildings are required in order to meet the public's needs. These structures will be utilised as a filing storage, a baby room, a physiotherapy room, an ARV room, a treatment room for emergencies and blood tests and as a room for social workers.

- 3.21 The Committee was informed that staff need training and that the facility needs fridges, thermometers, audio-visual equipment and flat-screen televisions for the waiting areas and the baby clinic.
- 3.22 The officials mentioned that the facility had managed to build good relationships with the businesses in the area. The officials undertook to request the businesses in Grassy Park to donate TVs.

4. **Recommendations**

The Committee recommended that:

- 4.1 The Department of Health, together with the Department of Transport and Public Works, visits the facility and engage with the facility management about the infrastructure needs of the Clinic. The Department of Health must give feedback on the outcome of this visit to the Committee before the end of November 2019.
- 4.2 The Grassy Park Community Policing Forum engages with the Grassy Park Health Committee to assist with the Safety Plan of the Clinic.
- 4.3 The Department of Health considers installing prefabricated structures that could be utilised to store files and additional rooms will allow the facility to provide much-needed services.
- 4.4 The Department of Health considers installing television sets in the waiting areas of the Clinic.

5. Requested information

The Committee requested that the Department of Health by Friday 15 November 2019:

- 5.1 Detailed information and a time frame for the implementation of the electronic patient filing system at the Grassy Park Community Health Clinic.
- 5.2 A detailed report on the process followed in the appointment of the new security company at the Grassy Park Community Health Clinic.
- 5.3 A detailed report on the shortage of medication in the province and the reasons why it takes long to order certain types of medicine.

6. **Resolution**

The Committee resolved that the Chairperson of the Standing Committee on Health, by a motion in the House, applauds the staff of the facility for the manner in which the facility is being managed.

7. Acknowledgments

The Committee wishes to express its appreciation to the entire staff of the Grassy Park Community Health Clinic for their dedication and hard work in providing the communities of Grassy Park and the surrounding areas with good healthcare services. The Committee also noted with great gratitude the Grassy Park Community Health Clinic staff's cleanliness, positive attitude and excellent management skills.

8. Conclusion

The Committee successfully concluded the oversight visit to the Grassy Park Community Health Clinic.

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