

[Friday, 05 June 2026]

[No 9 – 2026] THIRD SESSION, SEVENTH PARLIAMENT

# PARLIAMENT OF THE PROVINCE OF THE WESTERN CAPE

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## QUESTIONS FOR WRITTEN REPLY

FRIDAY, 5 JUNE 2026

**Ms R Windvogel to ask Ms M M Wenger, Minister of Health and Wellness:**

- (1) What formal intergovernmental infrastructure planning framework exists between her Department and the City of Cape Town for the development of primary healthcare facilities in Khayelitsha;
- (2) whether her Department is aware that the City of Cape Town ceased building new clinics since 2021; if so, what interventions have been undertaken to address the resulting infrastructure gap;
- (3) what specific accountability mechanisms exist to prevent the duplication of responsibility gaps between provincial and municipal health infrastructure mandates;
- (4) whether the current governance arrangement has contributed to infrastructure stagnation; if so, what are the relevant details?

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## RESPONSE FROM THE DEPARTMENT OF HEALTH AND WELLNESS

(1) For the Khayelitsha area specifically, formal engagement with the City of Cape Town (CoCT) Health Services area management is coordinated through the WCDHW Metro Health Services Khayelitsha/Eastern Sub-structure (KESS) management team, under the leadership of the Director: District Health Services. Participation by representatives from the WCDHW Chief Directorate: Facilities and Infrastructure Management (FIM) team is on an ad hoc basis, depending on whether infrastructure-related matters are included in the agenda.

In addition, the FIM team engages formally with KESS management quarterly to review infrastructure priorities and monitor project progress. Ongoing communication is also maintained on a project-specific basis to ensure effective coordination and implementation.

(2) The WCDHW is aware that the CoCT ceased the construction of new or replacement clinic facilities in 2021. In response, and in collaboration with our Metro Health Services colleagues, the Department has actively engaged with the CoCT regarding the WCG assuming responsibility for the construction of several clinics that were previously planned by the CoCT across the Metro.

(3) WCDHW has established positive working relationships with both the Development Planning Directorate and the Health Services team in the CoCT. Engagements are held on a regular, basis to consider and review infrastructure-related matters.

These discussions include, among others, the planning for health service requirements in new development areas, and the replacement of CoCT clinic facilities as referenced above.

(4) No, delays in infrastructure projects have not been attributable to the governance arrangements between WCDHW and the CoCT.

**MINISTER OF HEALTH AND WELLNESS**

**DATE**