



Wes-Kaapse Provinsiale Parlement
Western Cape Provincial Parliament
IPalamente yePhondo leNtshona Koloni

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COMMITTEE REPORT

Report of the Standing Committee on Health on its oversight visits to the health facilities in the West Coast region conducted on 28 and 29 October 2020

Report of the Standing Committee on Health on its oversight visits to the health facilities in the West Coast region conducted on 28 and 29 October 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)
Botha, LJ (DA)
Xego, M, (EFF)
Windvogel, R (ANC)

Additional Member

Bakubaku-Vos, NG (ANC)

Apology

Allen R (DA)

The following parliamentary official accompanied the delegation:

Ms N Jamce

Background

The Standing Committee on Health conducted unannounced oversight visits to the health facilities in West Coast. On Wednesday 28 October 2020, the Committee conducted unannounced visits to the Saldanha Clinic in Saldanha, Hanna Coetzee Clinic in Vredenburg, Vredenburg Hospital and Hopefield Clinic in Hopefield. The Committee also conducted unannounced visits to the Sandy Point Clinic in St Helena Bay, Paternoster Clinic in Paternoster and Langebaan Clinic in Langebaan on Thursday 29 October 2020.

The Committee resolved to conduct the unannounced visits in the West Coast following the Cluster A visit week which took place from 10 until 14 February 2020. During the cluster visit week, community members and councillors raised a lot of issues including poor customer service at these facilities. The visit to the health facilities in the West Coast region was also part of the Committee Programme for the 2020/21 financial year. The Committee resolved to visit these health facilities to assess services offered by these facilities to their communities and to scrutinise the alleged poor customer service at some of the facilities. The Committee also wanted to assess the service pressure experienced by these health facilities especially with the outbreak of the COVID-19 pandemic in South Africa.

1. Visit to the Saldanha Clinic in Saldanha Bay

The Committee visited the Saldanha Clinic in Saldanha Bay on Wednesday 28 October 2020. Sister Van Wyk, the Operations Manager at the Clinic welcomed the Standing Committee and gave a brief summary of the services offered by the facility, the service pressure that the Clinic was experiencing during the COVID-19 pandemic, the challenges and successes of the Clinic.

1.1 Tour of the facility

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

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

- 1.2.1 The Saldanha Clinic (the Clinic) is a Primary Health Care facility that operates from 07:30 to 16:00 from Monday to Friday.
- 1.2.2 The Clinic offers services such as mother and child health, chronic diseases care, women's health, HIV and TB care, men's health and acute services.
- 1.2.3 The Clinic attends to about 100-200 patients per day and all patients from the Diazville Clinic were being referred to the Saldanha Clinic until further notice.
- 1.2.4 On arrival, the Committee observed that the gate of the Clinic was locked and a security guard at the gate informed the Committee that Sister Van Wyk was the only person responsible for the screening of persons visiting the Clinic. The persons visiting the Clinic had to wait for Sister Van Wyk outside the facility before the security could allow patients and visitors inside the facility.
- 1.2.5 Sister Van Wyk informed the Committee that she was responsible for scanning people at the gate because the security guard was not medically trained to screen patients and visitors.
- 1.2.6 The Committee observed that there was no social distancing outside the parameters of the Clinic for the patients who were waiting to gain entry to the health facility.
- 1.2.7 During the visit, some of the patients were seated outside the clinic, due to insufficient space. It was reported that TB patients were prioritised to minimise the infection of TB.
- 1.2.8 The Committee was informed that due to the size of the facility, it was difficult for patients to keep the social distance when they visit the clinic, some of the patients have to wait outside before they could be assisted.
- 1.2.9 The Clinic had a total of 10 staff members that consists of two clinical nurse practitioners, one general nurse, one staff nurse, one pharmacist assistant, one clerk and one intern, two counsellors and one cleaner. A doctor visits the facility on Mondays, Tuesdays, and Thursdays for chronic patients and every 2nd week for HIV positive patients.
- 1.2.10 The Clinic reported that it had a total of five COVID-19 deaths of patients that had folders at the Clinic. It was reported that patients that presented COVID-19 symptoms were taken to an isolated room within the facility for testing and all patients who tested positive were referred to the Vredenburg Hospital for medical treatment.
- 1.2.11 The waiting times at the Clinic were reported as a challenge due to the lack of staff.
- 1.2.12 The Committee noted that there was no designated area for the medical waste at the Clinic. The Committee observed that the medical waste was kept in a corner next to the entrance of the reception and it was collected every Thursday.
- 1.2.13 There were no sanitising stations inside the Clinic, patients were only sanitised at the gate.

1.3 Recommendations

The Committee recommended that:

- 1.3.1 The Ward Councillor of the Saldanha Bay Municipality should attach at least two persons from the Expanded Public Works Programme (EPWP) to the Saldanha Clinic to assist the facility in insuring that patients keep the social distancing inside and outside the Clinic.
- 1.3.2 The Committee deemed the lack of social distancing at the gate of the Clinic as a concern that needed urgent attention by the Department of Health. It is recommended that the Department of Health should ensure that there are markings inside and outside the parameters of the Clinic for social distancing.

2. Visit to the Hanna Coetzee Clinic in Vredenburg

The Committee visited the Hanna Coetzee Clinic on Wednesday 28 October 2020. Sister Coraizin, the Operations Manager at the Clinic welcomed the Standing Committee and gave a brief summary of the services offered by the facility, the service pressure that the Clinic was experiencing during the COVID-19 pandemic, the challenges experienced by the Clinic.

- 2.1 The Hanna Coetzee 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.
- 2.2 It operates at Louwville in Vredenburg from Monday to Friday from 07:30 to 16:00.
- 2.3 It was reported that the Clinic provides health services to people from three wards, ward 2, 9, and 13 and attends to about 13 000-20 000 patients per month.
- 2.4 The Clinic has a total of 13 staff members that includes a security guard for the entire facility.
- 2.5 Sister Coraizin informed the Committee that the Clinic has a total of three Clinical Nurse Practitioners including herself. She was an Operations Manager and also a Clinical Nurse Practitioner, however, during the visit, she was the only Clinical Nurse on duty. She reported that the other two nurses were on leave and one of the two nurses has been on leave for over a month without a replacement.
- 2.6 The Committee noted that Sister Coraizin was working under severe pressure, the waiting room was full of patients who were waiting for her assistance, and some of the patients were waiting outside within the facility and some people were in a long queue outside the gate waiting to gain entry to the Clinic.
- 2.7 According to Sister Coraizin, the Clinic had an appointment system, however, patients start queuing in the early hours of the morning with the hope of getting help early. Unfortunately with only one Sister on duty, it was reported that some of the patients were turned back without getting assistance.
- 2.8 The Committee was informed that the Sister took at least one hour to help one patient due to language barriers. The majority of the patients who visits the facility were foreigners from the surrounding farms.
- 2.9 The Clinic had a total of 120 patients who were on ARVs. It was reported that the Clinic has only one Assistant Pharmacist and when she is on leave, the Operations Manager has to perform her duties in addition to her management responsibilities and also assist patients.
- 2.10 It was reported that staff shortage and office space were the major challenges at the Clinic.
- 2.11 The Committee noted that there was no privacy at the Clinic due to inadequate space. The Clinic only has one consultation room. The Operations Manager reported that she shares the consultation room with the Doctor when the Doctor visits the Clinic on Mondays and Thursdays.
- 2.12 Security was also reported as a challenge. There was only one security guard at the Clinic and it was mentioned that the security guard started working at the Clinic a week before the Committee visit.
- 2.13 The Committee was informed that vandalism was also a challenge at the Clinic. In most cases, staff vehicles were allegedly stretched by patients who were turned away by the Clinic. In addition, it was reported that there was no security at the Clinic after hours.
- 2.14 It was reported that psychiatric patients also present a major challenge at the Clinic. It was alleged that one Sister was almost killed by a psychiatric patient inside the Clinic and when the police are called they take long to arrive.
- 2.15 The Committee observed that there was no designated space for waste management at the Hanna Coetzee Clinic.
- 2.16 During the visit, the Committee noticed that the medical waste was kept in the toilet that was used by patients.

- 2.16 The patients' files at the Clinic were kept in the filing cabinets that were broken and not locked in the passage. The Committee raised this as a concern as there was no privacy for patients' files.
- 2.17 The Committee was further informed that it was an everyday battle to work at the Clinic. The officials mentioned that the Clinic had a lot of challenges which were communicated to the Senior Management of the Department of Health, however, there was no response and the challenges were not addressed.

2.2 Input by Mr. Thulani Khune, a Ward Councillor in the Saldanha Bay Municipality

During its visit to the Clinic, the Committee was joined by Mr. Khune, a Ward Councillor in the Saldanha Bay Municipality. He informed the Committee that he used to be an official at the Hanna Coetzee Clinic. He informed the Committee that the Clinic experienced many challenges for many years and the challenges were submitted to the Vredenburg Health District of the West Coast Region as far back as 2018, however, they had not been addressed. Mr. Khune highlighted that the size of the Clinic was inadequate for the people of Lowville and the surrounding areas, including farms. He informed the Committee that the Clinic assists approximately 20 000 patients per month and there were no mobile health services in the area.

According to Mr. Khune, absenteeism was very high at the Clinic. Officials were reported to be burnt-out due to the high number of patients and shortage of staff. He informed the Committee that staff members at the Clinic were not coping with the workload, resulting in some patients being turned away from the Clinic without getting medical help. He informed the Committee that during the peak of COVID-19, it was difficult for patients to comply with social distancing when visiting the Clinic. He mentioned that he visited the Clinic on many occasions to assist the Clinic in complying with social distancing amongst patients within the parameters of the Clinic. Mr. Khune urged the Committee to intervene.

2.3 Recommendation

The Committee recommends that the Ward Councillor of the Saldanha-Bay Municipality should attach at least two persons from the Expanded Public Works Programme (EPWP) to the Hanna Coetzee Clinic to assist the facility in insuring that patients keep to social distancing inside and outside the parameters of the Clinic.

2.4 Resolution

The Committee resolved to

- 2.4.1 Schedule a follow-up engagement with the officials of the Hanna Coetzee Clinic in 2021.
- 2.4.2 Invite health stakeholders from the area, the councillors and management of the Saldanha Bay Municipality and the officials of the Department of Health responsible for the West Coast District and share its findings on this visit.

2.5 Request for Information

The Committee REQUESTED the Department of Health to provide it with the following information by Friday 15 January 2021.

- 2.5.1 Copies of the correspondence that was sent to the Vredenburg Health District of the West Coast Region from 2008 highlighting the challenges faced by the Hanna Coetzee Clinic and requesting the departmental interventions.
- 2.5.2 A progress report on the appointment of the Clinic Committee for the Hanna Coetzee Clinic.

3. Visit to the Vredenburg District Hospital

The Committee visited the Vredenburg District Hospital in Vredenburg on Wednesday 28 October 2020. Sister Lester, the Operations Manager for the Casualty Unit at the hospital welcomed the Standing Committee and indicated that Dr Perez was attending a meeting outside the hospital. Sister Lester gave a brief summary of the services offered by the Casualty Unit, the service pressure that the Unit was experiencing during the COVID-19 pandemic, the challenges and successes of the Casualty Unit in the Vredenburg Hospital.

- 3.1 The Committee was informed that there were 10 beds in the Casualty Unit with a staff complement that consists of two Sisters, three nursing staff, and a doctor. During the visit, there were 35 patients that were admitted to the Casualty Unit.
- 3.2 Sister Lester indicated that there was a shortage of staff in the Casualty Unit and more staff, which includes the Medical staff, Marshals, and Porters, were urgently needed.
- 3.3 According to Sister Lester, the entire Vredenburg Hospital has two Porters who work until 16h00 and after-hours the medical staff have to push patients.
- 3.4 It was reported that there was also a shortage of security officers in the Hospital and there was a need for a security guard to be placed within the Casualty Unit to handle psychiatric patients.
- 3.5 The Committee was informed that the Unit had a triage system that was reported to be adequate.
- 3.6 It was reported that there was a shortage of beds within the Unit.
- 3.7 The Committee visited the resuscitation area and they were informed that patients who were critically ill were resuscitated and then transferred to the Tygerberg or Paarl Hospitals for admission to the ICU.
- 3.8 The Casualty Unit in the Hospital does not have an ICU Unit. The Committee was informed that critical patients were transported to the Hospitals in the Cape Metropolitan Area by ambulance or helicopter.
- 3.9 It was reported that sometimes the critically ill patients wait for more than six hours for the ambulances to transport them to the Hospitals. The long waiting time was due to the shortage of ambulances in the West Coast region.
- 3.10 The signage for the entire hospital was reported to be a challenge. It was reported that due to the size of the hospital patients get confused and lost.
- 3.11 It was further reported that the Vredenburg Hospital had a total of 42 COVID-19 deaths.

4. Visit to the Lalie Cleophas Clinic in Hopefield

The Committee visited the Lalie Cleophas Clinic (the Clinic) in Hopefield on Wednesday 28 October 2020. The Clinic operates in the Saldanha Bay Sub-District of the West Coast District. It provides health services to the community of Hopefield and the surrounding farms from Monday to Friday. Sister Bester, the Operations Manager at the Lalie Cleophas Clinic welcomed the Standing Committee and gave a brief summary of the services offered by the facility, the service pressure and the challenges and the successes of the Clinic.

4.1 Salient points that emanated from the unannounced visit to the Lalie Cleophas Clinic

- 4.1.1 The Lalie Cleophas 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.
- 4.1.2 The Clinic offers health services to about 8000 patients per month from the Hopefield communities and 34 surrounding farms.
- 4.1.3 Sister Bester informed the Committee that every Wednesday, a Sister from the Clinic visits five routes which consist of 17 farms through the Mobile Clinic services. However, when one of the Sisters is on leave, the remaining Sister cannot visit the farms due to the shortage of staff in the Clinic.
- 4.1.4 The chronic medication for patients in farm areas is distributed two months in advance.
- 4.1.5 It was reported that due to COVID-19, few patients visited the Clinic. The Clinic had an adequate appointment system, patients were visiting the Clinic on appointment to minimise the COVID-19 infections.
- 4.1.6 The staff compliment of the Clinic consist of two Clinical Nurses Practitioners, one Enrolled Nurse, one Counsellor, one Pharmacist Assistant, and one Cleaner. In addition, an Occupational Therapist from Vredenburg visits the Clinic once a month.
- 4.1.7 It was reported that one nurse has retired from the Clinic and the position has not been filled, due to the lack of interest from people to work in the rural areas. The Clinic had motivated for an additional Professional Nurse, however, the sub-district was reported to be struggling to get Clinical Nurses in rural areas.
- 4.1.8 The Clinic has two Community Based Carers. They assist in the waiting room to test the temperature of patients on arrival at the Clinic, ensure that patients adhere to social distancing and that patients wear their masks. Furthermore, the Community Base Carers assist with the distribution of chronic medication.
- 4.1.9 It was reported that a private doctor was visiting the Clinic for one hour every day to offer a second opinion to the patients of the Clinic.
- 4.1.10 It was reported that there were no ambulances in the Clinic, patients wait for more than two hours to be transported to the Vredenburg Hospital.
- 4.1.11 The Clinic did not have any patient that tested positive for COVID-19. There was only one staff member who tested positive and she has fully recovered.
- 4.1.12 It was reported that there was no Clinic Committee in the Lalie Cleophas Clinic.
- 4.1.13 Shortage of staff, inadequate office space and long waiting times for the Emergency Services were reported to be the major challenges at the Clinic.
- 4.1.14 Due to the shortage of space, the prepacked chronic medication was kept in boxes in the garage, the medical waste was also kept in the garage.
- 4.1.15 The Clinic was running a successful sanitary project, the Tracy Sanitary Project. The Clinic collects and contributes the sanitary towels to the young girls in various schools in the area.

4.2 Resolution

The Committee resolved to engage with the management of the EMS services in the West Coast region regarding the EMS services in Hopefield and the surrounding areas. This discussion will form part of the items for discussion during the planned engagement between the Committee, Saldanha Municipality and the Sub-District Health management of the West Coast region.

5. Visit to the Sandy Point Clinic in St Helena Bay

The Committee visited the Sandy Point Clinic in St Helena Bay on Thursday 29 October 2020. Sister Nel, the Operations Manager at the Sandy Point Clinic welcomed the Standing Committee and gave a summary of the services offered by the facility, the service pressure and the challenges and the successes of the Clinic.

5.1 Salient points that emanated from the visit to the Sandy Point Clinic

- 5.1.1 The Sandy Point Clinic (the Clinic) is a satellite Clinic that is operating from a Municipality building on Tuesdays, Thursdays and Fridays from 7:30 am to 4:30 pm.
- 5.1.2 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.
- 5.1.3 The Clinic is assisting more than 30 patients per day.
- 5.1.4 The Committee observed that office space was a major challenge at the Clinic, patients were queuing outside and the Committee was briefed outside the facility due to the lack of space in the Clinic.
- 5.1.5 It was reported that when a doctor visits the Clinic, the Sister has to attend to the patients and draw blood samples in the corridors also due to the lack of space.
- 5.1.6 A site to build a new Clinic was identified in Laingville, however, it is not clear when the building project will commence.
- 5.1.7 The Clinic only has three staff members. Sister Nel indicated that she was the only Clinical Nurse Practitioner responsible for all the patients and for the management of the facility.
- 5.1.8 A doctor visits the Clinic on Tuesdays and sometimes on Fridays and the Pharmacist only visits the Clinic on Fridays.
- 5.1.9 Community Care Workers assist the Clinic with the distribution of chronic medications, house screening, care for the severe wounds, and tracing the TB patients that were defaulting from TB treatment.
- 5.1.10 Inadequate office space, shortage of staff, and the waiting times for the EMS services were reported to be the challenges at the Clinic.

5.2 Resolution

The Committee RESOLVED that the challenge of office space at the Sandy Point Clinic should form part of the items for discussion during the planned follow-up Committee engagement with the Saldanha Bay Municipality, Vredenburg District Health and other relevant stakeholders.

5.3 Request for Information

The Committee REQUESTED the Department of Health to provide it with the following information by Friday 15 January 2021.

- 5.3.1 A report on the progress made by the Department in acquiring the site for the building of the new Sandy Point Clinic in St Helena Bay and the possibility of keeping the current clinic as a satellite clinic due to the distance from St Helena bay to Laingville.
- 5.3.2 Detailed information on the criteria the Department uses to allocate staff to health facilities in comparison with the population capacity.

6. Visit to the Paternoster Clinic in Saldanha Bay

The Committee visited the Paternoster Clinic in Saldanha Bay on Thursday 29 October 2020. The Paternoster Clinic is situated in Saldanha Bay in the Vredenburg Health District of the West Coast region.

On arrival, the Committee was informed that the Clinic was operating from the Saldanha Bay Municipality building due to the renovations in the Clinic. The Committee visited the Municipality building and was informed that officials of the Clinic were not available on the day of the unannounced visit. The Clinic was operating only on Mondays, Wednesdays and Fridays from 7:30am to 4:30pm.

6.1 Request for Information

The Committee REQUESTED that the Department of Health provides it with detailed information on the operations of the Paternoster Clinic and its staff capacity by Friday 15 January 2021.

The Committee departed from the Paternoster Clinic and drove to the Langebaan Clinic for an unannounced visit.

7. Visit to the Langebaan Clinic

The Committee visited the Langebaan Clinic (the Clinic) in Saldanha Bay Sub-District of the West Coast District on Thursday 29 October 2020. Sister Swart, the Operations Manager at the Langebaan Clinic welcomed the Standing Committee and gave a brief summary of the services offered by the facility, the service pressure and the challenges and the successes of the Clinic.

7.1 Salient points that emanated from the unannounced visit to the Langebaan Clinic

- 7.1.1 The Langebaan Clinic operates on weekdays from Monday to Friday from 07:30-16:30.
- 7.1.2 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
- 7.1.3 The Clinic has a total of five staff members. In addition, a Pharmacist visits the Clinic two days in a week.
- 7.1.4 It was reported that a Doctor visits the Clinic every Friday to attend to the chronic patients on appointments. Sister Swart indicated that an additional day for the Doctor's visit for chronic patients was needed due to the high number of patients that were presenting chronic illnesses.
- 7.1.5 It was reported that Dr. Engelbrecht, the former Head of the Department of Health was visiting the Langebaan Clinic every Wednesday to assist with acute patients.
- 7.1.6 The Clinic informed the Committee that it needs additional staff members.
- 7.1.7 Before the COVID-19 pandemic, the Clinic used to assist 170 people per day and due to the COVID pandemic, the numbers dropped to 70 a day, however, the Clinic provides outreach health services to various communities.
- 7.1.8 It was highlighted that there was an influx of people moving to the Langebaan communities due to employment opportunities in factories and farms in the area. Furthermore, it was reported that the majority of people were moving to Langebaan for retirement and some of these people present lifestyle diseases.
- 7.1.9 During the peak of COVID-19, the Clinic only assisted emergency patients due to the shortage of space and staff and patients with COVID-19 symptoms were referred to the Vredenburg Hospital for testing.
- 7.1.10 The Committee noted that there was no designated space for waste management at the Clinic.

- 7.1.11 Sister Swart suggested that the Clinic needed to be closed with a fence to prevent the public from having direct access to medical waste. She further accompanied the Committee to a walkabout outside the Clinic within the facility and pointed out a small space at the back of the Clinic that could be converted to a designated space for the medical waste for the Clinic.
- 7.1.12 There were no security issues at the Langebaan Clinic. It was reported that the Clinic had an alarm system. The Clinic also had a good partnership with the Municipality Law Enforcement and SAPS.
- 7.1.13 It was reported that there was a shortage of computers at the Clinic, the administration and pharmacists share one computer and this was a challenge. There was an urgent need for additional computers.
- 7.1.14 The filing storage at the Clinic was insufficient, more storage space for files was needed due to the influx of people to the area. In addition, office space was a challenge.

7.2 Recommendations

The Committee RECOMMENDS that the Department of Health should:

- 7.2.1 Assist the Langebaan Clinic to enclose with a fence the general waste space to prevent the public from having direct access to medical waste.
- 7.2.2 Assist the Clinic to build a space for the medical waste at the back of the Clinic within the facility.
- 7.2.3 Share information on the plans made to extend the dispensary area at the Langebaan Clinic.

The Committee successfully concluded its visits to the health facilities in the West Coast.

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MS WF PHILANDER, MPP
CHAIRPERSON: STANDING COMMITTEE ON HEALTH
WESTERN CAPE PROVINCIAL PARLIAMENT
DATE: