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Motsoaledi: A decade of austerity has crippled public healthcare

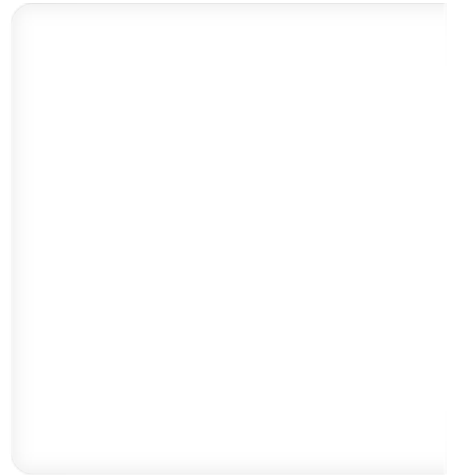
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Health Minister Dr Aaron Motsoaledi says more than a decade of austerity has contributed to staffing shortages, deteriorating infrastructure and systemic failures across South

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Africa's public healthcare system. Speaking after the release of the Health Ombud's report into the deaths of six KwaZulu-Natal healthcare workers, Motsoaledi said the investigation cleared hospitals of direct responsibility for the deaths but exposed persistent challenges in human resources, infrastructure, procurement and financial management.

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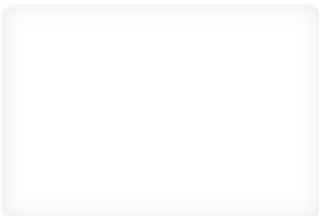
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Health Minister Dr Aaron Motsoaledi says more than a decade of austerity measures has contributed to the staffing shortages, deteriorating infrastructure and other systemic failures repeatedly identified in Health Ombud investigations, warning that the problems will persist unless funding for the public health sector improves.

Speaking after the release of the Health Ombud's report into the deaths of six KwaZulu-Natal healthcare workers on Wednesday, Motsoaledi said while the investigation found no evidence linking the deaths directly to workplace bullying, victimisation or adverse working conditions, it once again exposed longstanding weaknesses affecting the country's public healthcare system.

"The report concluded that there is no evidence

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establishing a direct causal link between the death under investigation and the allegations of workplace bullying, allegations of victimisation or adverse working conditions," he said.

Motsoaledi said the report also brought clarity to an issue that had generated widespread public concern and speculation.

"The findings released today provide clarity on matters that have generated significant public concern and unfortunately, in some instances, also widespread speculation, innuendos and sometimes even outright fabrications."

He said recurring investigations by the Health Ombud had consistently highlighted four major challenges affecting healthcare facilities.

"All of them are pointing to four things," he said.

"The issue of human resources in health. It's an issue of maintenance of buildings. It's an issue of financial management. And lastly, issues of procurement."

Motsoaledi argued that while these functions largely rested with provincial governments, years of budget cuts had made it increasingly difficult to address them.

"Healthcare has undergone very rough austerity over a period of 10 years. We have been presenting this issue of austerity to the Ministry of Finance because it has happened over a large number of years. Austerity, austerity, austerity."

He said austerity, like corruption, came at a cost to the public.

"Corruption that happens in the public service, which we are busy fighting every day, is not a victimless

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crime. But I must also state that austerity is also not a victimless occurrence. It victimises the public, especially those who use the public healthcare system."

According to the minister, provinces had for years been expected to absorb public sector wage increases without receiving additional funding from National Treasury, forcing health departments to divert money from goods and services.

"Over the years, when government sits and negotiate with unions about salaries, at the end of the negotiation period, whatever percentage is agreed on, Treasury has not been giving the money. They said provinces must sit to the finish."

INVESTIGATIVE INSIGHT

A decade of austerity: The pressure breaking public healthcare

Health Minister Dr Aaron Motsoaledi says prolonged budget pressure has contributed to staff shortages, deteriorating facilities and recurring failures across the public healthcare system.

THE FOUR RECURRING FAILURES



SYSTEM CRISIS



CARD 1: HUMAN RESOURCES

Staff shortages



Budget pressure and unfunded wage increases have forced provinces to redirect money away from essential services.



CARD 2: BUILDING MAINTENANCE

Deteriorating facilities



Years of constrained spending have left many public healthcare buildings poorly maintained.



CARD 3: FINANCIAL MANAGEMENT

Budgets under pressure



Funds intended for goods and services have increasingly been used to support staffing costs.



CARD 4: PROCUREMENT

Procurement failures



Weak procurement systems have contributed to shortages and poor service delivery.

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10+ years

Period of healthcare austerity

Motsoaledi said the sector had endured repeated budget pressure for more than a decade.

R20.9 billion

Treasury allocation over three years

The funding is intended to begin easing financial pressure, although the minister said more support would be needed.

16 experts

Appointed to review health staffing policies

The panel will examine human resource policies dating back to 1994.

HOW BUDGET CUTS

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3

Money diverted from goods and services



4

Staff, medicine, equipment and maintenance shortages



What happens next?

human resource review

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14.

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What is RWOPS?



What the investigation found

allegations of workplace bullying, victimisation or adverse working conditions.

"Austerity is also not a victimless occurrence. It victimises the public."

DR AARON MOTSOLEDI

Minister of Health, South Africa

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He said this had resulted in shortages across the health system.

"Over the past 10 years, they were spending money for goods and services to support human resources. And when you do that, you know what will happen. It becomes these shortages."

Motsoaledi welcomed Treasury's allocation of R20.9 billion over three years to begin easing financial pressure on the sector, although he said more funding would still be required.

funding would still be required.

"At least, we believe it was the beginning, that the Treasury gave a sum of R20.9 billion over the past three years to start moving away from this austerity. We don't know how long it will take, but the start has been made."

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As part of broader efforts to address the challenges facing public healthcare, Motsoaledi announced that he had appointed a 16-member panel of experts to review human resource policies dating back to 1994.

"I have appointed a team of 16 experts to review HR policies from the beginning of democracy because we are living in a different era, to find out what effect these policies have on some of these occurrences about shortages and all that. What policies have we put that need to be changed?"

The review will include the policy on Remunerative Work Outside the Public Service (RWOPS), which allows certain state-employed doctors to perform private work.

"It's the policy of RWOPS, Remunerative Work Outside the Public Service, whereby some very senior doctors leave the junior ones alone and go and work in the private sector.

"Should we still continue with the policy of RWOPS?" Motsoaledi said.

"I know it makes health professionals very angry, but I want those who are experts to review it. We can't run the healthcare system without confronting that," he said.

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