

**STATEMENT BY THE MEC FOR HEALTH FOLLOWING HIS UNANNOUNCED VISIT TO RK KHAN HOSPITAL IN CHATSWORTH, DURBAN**

16 March 2010

Colleagues in the media

In a few days from today, on the 21<sup>st</sup> of March to be exact, the country will commemorate the 50<sup>th</sup> Anniversary of the Sharpeville Massacre which was a watershed moment for our country. It was as a result of this day that the liberation movements were banned by the apartheid state, the first state of emergency was also declared and the politics of protest were replaced by the armed struggle.

After the country's first democratic election in 1994, March 21 was declared a Human Rights Day to be commemorated by all in remembering the price our people had to pay for freedom and democracy.

The values of our democratic government mean that our people will have access to health care not on the basis of where they live, what they look like or how much money they have. Providing quality health care is not just a nice to have, it is a **basic human rights**.

I would be falling short of that value promise when a majority of our 11 million people, in KwaZulu-Natal, do not have access to health-preserving and life saving care.

Health care is a basic human right! Without care, the health of individuals and communities are jeopardized. Without health, people can't support their families or contribute fully to our society. We need a health care system that works for everyone and it is for that reason that our government has committed itself to improving the quality of health care. It is for that reason that I am found criss crossing the province making unannounced visits to ensure that our people are not denied this human right.

Having done a walk about the hospital listened to a number of people (patients and non-patients alike) and met the management team of this institution; I wish to state as follows;

1. After listening to the discussions with the management team, I have been appraised on the reasons why there was confusion on the state of finances of the hospital. The hospital board will be informed of the correct state once I present the budget allocations for the R21 billion budget given to the Health Department.
2. On my visit to the pharmacy I was disturbed to see large numbers of people awaiting treatment whilst staffs are on lunch. This, as I stated to the Pharmacy manager, is unacceptable. I cannot understand why almost two thirds of staff complements goes for lunch at once leaving poor people having to spend the whole in a hospital. I have instructed the District Manager to do regular hospital visits so that they are abreast with people complain and attend to such systemic problems outright.
3. The story of Miss Hlengiwe Nkosi healing process after an operation is unfortunate but not unexpected. After listening to the patient, the hospital would make necessary interventions.
4. In KwaZulu-Natal, it is said, one woman dies trying to give birth. A confidential enquiry report into maternal deaths indicates that; (i) 20 – 25% of women do not attend Ante Natal Clinic up to 20 weeks of pregnancy, (ii) some die because of poor management in maternity clinics, and (iii) they die due to causes such as hypertension, haemorrhage, HIV related, etc. I have not been able to get the reasons for the maternal deaths that have taken place at this hospital but a report will be forwarded to me shortly.

ENDS

**ISSUED BY:**

**CHRIS MAXON**

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