

EXECUTIVE STATEMENT ON THE USE OF THE HELICOPTER BY MEC FOR HEALTH DR.S.M.DHLOMO

Madam Speaker;
Honourable Premier;
Colleagues in the Executive Council;
Members of this esteemed House;
Staff, patriots, comrades and friends;

The purpose of this executive statement is to inform the Members of the Provincial Legislature on the matter regarding the use of one of the two contracted helicopters on 3rd November 2012, by the MEC for Health.

Use of the Helicopter on 03/11/2012

The matter regarding the use of a medical helicopter on 3rd November 2012, by the MEC for Health, has sparked a media storm with allegations against me, in terms of the validity of my trip to Hlabisa. In addition, I have been accused of commandeering a helicopter, which, it was alleged, could have been used in the emergency situation arising from the accident that involved the Maharaj family, leaving 3 of whom died on impact and one teenager who died later, in hospital.

Whilst there have been varying reports on this matter, and despite the press conference that was held by the Department, the media continued with their allegation and have also come up with more reports, which I feel I must explain to this House and put the facts as I know them .

Some Honourable members of this house have preferred to talk without any knowledge and also chose not to follow the normal processes we use in this house to get clarity. They have opportunistically used the tragedy of the Maharaj family wanting to portray a picture that an immoral and illegal action has been done by MEC.

I would like to thank the honourable members from my party (ANC), MF, COPE and 2 from IFP who have given their positive enquiry on the matter and preferred to wait for this report before casting a judgement on the matter. I wish I could say the same about the honourable members of DA in this house.

Since 1st April 2000, the Department of Health has utilised the services of the South African Red Cross Air Mercy Services (referred to as AMS) in line with a Service Level Agreement it concluded. Hence the matter must be premised on the 2000 contract whose provisions are to date, still applicable.

The contract provided for one fixed wing aircraft and two single engine helicopters. The current contract provides for the same number and types of aircraft however it also includes 30 hours of free flying time per month as well as use of the aircraft for other purposes, which are non-medical but still health related. This means that our arranged flights can be undertaken with no patient on board.

Today, I take this opportunity to put into context the issues around my use of one of the two helicopters assigned as per the contract with AMS and provide a factual explanation pertaining to this issue.

On the 26th October 2012, I received a call from His Worship the Mayor of Hlabisa municipality, councillor V F Hlabisa. He phoned me in his three capacities, as Mayor of Hlabisa Municipality, Principal of Somfula High School and as the Chairperson of the Hlabisa Hospital Board.

Based on the discussion that we had, a number of serious concerns were highlighted, that led to my decision to go to Hlabisa on Monday, 29th October 2012. We had to accommodate the Mayor's diary for that day and scheduled a 16h00 meeting. For the interests of the Honourable Members, we drove to Hlabisa and drove back again.

Present at the meeting, were the hospital management, mayor and councillors of Hlabisa municipality, members of the hospital board, the SAPS and the MEC. We had thought that we would keep the discussion of those meetings confidential due to the sensitive nature of the issues and because we had to protect the institution, protect the many health care professionals in the same institution, who had nothing to do with what happened in that hospital.

The meeting was briefed by the mayor on the real issue that was concerning the community. High school girls had been visiting the hospital carrying liquor and needing a safe place to sit and drink during school hours. Most of the parents as well the hospital management knew nothing about this. Some health care professionals who reside in the hospital would offer their residences to the students while they are at work to sit and drink. The sector of the community that was aware was concerned and was beginning to indicate that they were prepared not to have health care workers in their hospital than to have such who will assist and contribute to this anti-social behaviour of their children.

It was revealed at that meeting that there had been an arrest of one of the health care professionals, in relation to this incident.

In that meeting, we agreed and resolved many issues, one of which was that I will go and address the healthcare workers that resided within the hospital. I told them why we were there and indicated to them that if anyone of them was involved in this behaviour, they must call me as soon as they could. We finally left Hlabisa hospital at about 21h00 and drove to Durban.

As we drove and had been passing Mtubatuba, a health care worker from the hospital phoned me and indicated that he is the one of those who had provided his residence for the weekend to about 6 girls to sit and drink. He denied having sexually assaulted any girl. That matter is being handled internally and externally by appropriate bodies.

The next day I informed the Head of Department about this matter. I asked her to follow up on the matter, for the one who was already detained and the other who had spoken to me. Without interfering with the SAPS process, we agreed that it would be good to transfer the affected members to other districts while the investigation was being conducted.

During the course of the week, I was monitoring the developments in relation to this matter and assessing the situation. The reports that were coming up were not encouraging. The matter had been talked about by leaders and plans on how to resolve it was agreed upon but had not been communicated to the members of the public. Health care workers felt that there were not protected since the community around Hlabisa did not know who had done what and therefore anyone was a suspect. Those who were affected did not know whether or not to go to work while they await transfers. I continued to be in touch with the mayor on this matter. The situation was very uncertain and fears of attack to the hospital were rising

I came to know that on Saturday, 3rd November 2012, there would be a community gathering which will go on until 13h00 on the day, where many residents would attend. Having already planned meetings on that morning, the latest I could be out of Durban after the second meeting would be 10h30. Hence the department arranged for the helicopter to just drop me off at Hlabisa. It took 30 minutes to go to Hlabisa.

The following sms 's taken from my cellular phone indicates text messaging between my VIP protector Buhle Dlangisa and Cavin the pilot, where I was alerted that the chopa has arrived to pick me up to go to Kwa- Hlabisa

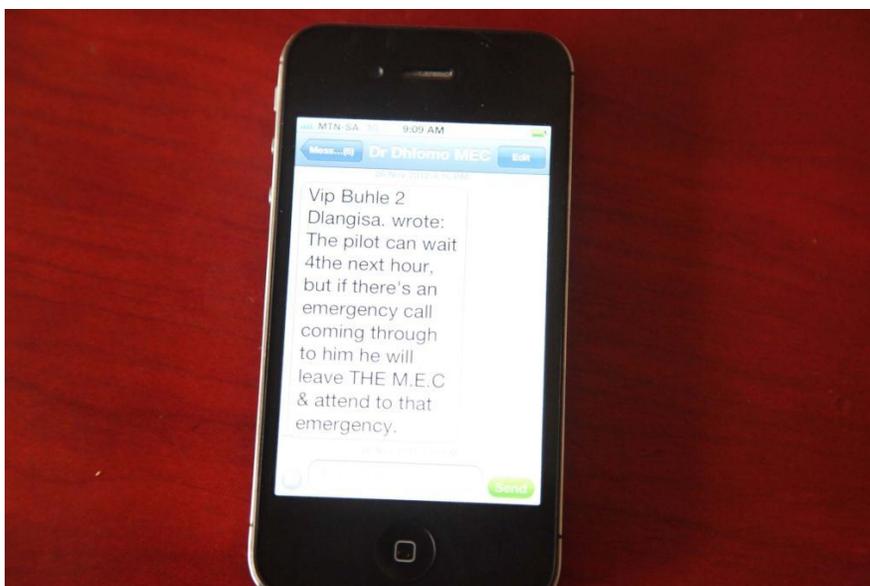
From VIP Buhle Dlangisa to MEC – 3/11/2012@10:56 – “Chopa has landed” – this was alerting the MEC that the helicopter had arrived to fly me to Hlabisa.

“3/11/2012@10:58 - second sms - message from the pilot (Cavin), relayed via VIP Buhle Dlangisa to MEC - “The pilot can wait 4 the next hour, but if there’s

an emergency call coming through the pilot will leave the M.E.C. and attend to that emergency.”

This clearly demonstrates that the pilot was aware of his duties and although he was waiting for the MEC, the MEC would have to be left should an emergency arises. The status of the MEC does not detract the pilot from what his duties and priorities are.

image of the actual sms is appended hereunder.



The latest newspaper report alleging that I went to the funeral of the late Mr Z Zungu, must be explained to this House. I want the Honourable Members to understand that we had a community that was getting very agitated about the incident that took place at Hlabisa Hospital and since this very same community was going to be present at the funeral venue, it was opportune to address the community at this venue. It was never my intention to fly to Hlabisa to attend the funeral of the late Mr Zungu. After the funeral proceedings had started I got to the venue, awaited my turn to speak and addressed the community mostly on this matter. It is amazing that the man of the cloak mentioned in one of the Sunday papers, could not remember the content of my speech. Sadly too, the media will take snippets of what they are told and report accordingly.

Honourable Members of this House have not heard any unrest, attacks or community uprisings at Hlabisa municipality following this incident and this can be attributed to, among other interventions, this meeting and addressing of the community on 3rd November 2012.

I want to assure the Honourable Members that at no time during the flight did the pilot get information or an instruction that we must return to the ground or to change course and fly to the area of the accident nor was there any refusal by the pilot to change course as a result of the instruction of the MEC.

As MEC for Health, I openly state that it was not the first time that I have used the helicopter. I have used it for, amongst other things, inspecting the poorly progressing health infrastructure projects, resulting in a plan of action to fast track the projects, to be implemented. One of the reasons why the KZN Department of Health is spending all its conditional grant on infrastructure, is related to the direct monitoring of these projects and taking such trips by helicopter to do so. The Department also utilises the aircraft, for the transporting of doctors during outreach programmes in the deep rural areas of the Province.

The Department of Health, KwaZulu-Natal has a partnership with the South African Red Cross Air Mercy Services for the use of the helicopter and this includes other use on occasion, in line with a contract that was awarded. Based on the contract a total of 30 hours of free flying time is also allowed and the flight made by me is usually in line with the free flying time and on this occasion, this was also the case. Due consideration is given to the availability of either one of the helicopters when a request is made to utilise the helicopter for non-medical reasons.

The Department did respond to the accident and did provide a service to the victims of the accident. It must also be noted that the Department's ambulances are equally equipped as the helicopter and the presence of Advanced Life Support personnel are critical in the pre-hospital treatment and this was afforded to the patient. The Department's ambulances as well as the private ambulance were in attendance at the scene.

- The driver of the truck who was conscious and therefore not an urgent emergency was taken by one of our ambulance to RK Khan Hospital.
- In addition, the 2 patients who were unconscious and therefore an urgent medical emergency were taken to Hillcrest hospital one taken by our ambulance and the other taken by a private sector ambulance.
- The patient in question (who was critical and a medical emergency) was taken by a private sector ambulance pass several hospitals to Inkosi Albert Luthuli Hospital.

The House is requested to note that the scene of the accident at Shongweni was 2.78km from the Hillcrest hospital .It is not common practice to get a helicopter to pick up a patient from a scene of accident within such a short distance. Maybe the Honourable members should be asking why the private ambulance which picked up the child from the scene of accident did not take the patient to Hillcrest hospital which was closer to the scene of accident but instead, preferred to drive for 28,54km to Inkosi Albert Luthuli Hospital, passing 6 hospitals some of which are at the level of Inkosi Albert Luthuli.

The use of a helicopter to transport a patient from an accident is reserved for areas in the KZN province which pose a topographic challenge, namely:

- If there are difficulties to access the scene by road thus causing delays (*this was not the case in this instance*);
- If the accident is too far from the most appropriate medical facility (*this was not the case in this instance*);
- In urban environment with short distances to medical facilities, the use of the helicopter is considered if there is heavy traffic that might delay the ambulance (*traffic did not pose any challenge for the transporting of the patient by road*)

Making an issue of an accident that happened less than 3km from the Hillcrest hospital, and even to suggest the need to use a helicopter for this distance, is an indication of an unfair judgement on the bereaved family and the MEC. It is regrettable, unfortunate and opportunistic to create an impression that whenever we have an accident a helicopter would be sent to the scene. For the accident in question, there was no justification for sending a helicopter.

The relevant question that this Sunday Tribune journalist (once a paramedic in the Private health sector) should be asking is, Why did this private ambulance carrying a critical patient ignored the following hospitals?

- Hillcrest hospital situated at **2.78km** from the scene of accident
- Crompton Hospital situated at **16.81km** from the scene of accident
- Westville Hospital situated at **23,32km** from the scene of accident

Instead chose to go to Inkosi Albert Luthuli Hospital which is situated at **28,54km** from the scene of accident. Honourable Members would note that Section 27 subsection 3 of the Bill of Rights of our Constitution states “***Nobody may be refused emergency medical attention***”. Somebody in this case contravened the prescripts of the Constitution of the Republic of South Africa. Despite this gross transgression this journalist chose to ignore that

This is part of what the NHI will reverse where health is not seen as ***Public good*** and is only accessed by those with resources because health is business to them. For the accident in question the use of a helicopter would not have been considered. As a

result, we sent a state of the art ambulance (ICU on the road) which is better equipped than a helicopter. This ICU equipped ambulance is displayed outside the House for the benefit of members to inspect and gain clarity.

In conclusion I want to emphasise that at no stage did I prevent a service to a patient nor held back the pilot to my service.

I thank you.

**DR SM DHLOMO
MEC FOR HEALTH
KWAZULU-NATAL**