MEDIA BRIEFING STATEMENT BY MINISTER OF HEALTH DR JOE PHAAHLA ON THE UNEMPLOYED MEDICAL DOCTORS AND OTHER HEALTH PROFESSIONALS

MONDAY, 05 FEBRUARY 2024

Good afternoon, ladies and gentlemen.

Thank you for making time to join us. Over the past month the department has been inundated with media and public enquires following a high publicised challenge of several young health professionals, especially medical doctors who completed statutory community service programme but are struggling to find employment.

I wish to state from the outset that it is the wish of government, and especially the Department of Health to employ as many health professionals as possible to play a meaningful role in the public health system of the country. This includes medical doctors either recently qualified or those who have acquired experience over a period of time. It is important to emphasise this because recently qualified doctors still need the support of those who have gained lot of practical experience.

The second point to emphasise is that healthcare service is delivered in health facilities by a team of health workers and medical doctors are an integral part of these teams. The issue of doctors who wish to stay in the public service employment is of major concern to us as the department, hence we are doing everything possible, working with the provincial health departments to mobilise resources to fund vacant posts, especially in health facilities in underserved communities.

Just to recap on how the training and deployment of medical doctors' work:

- All graduates from medical school have to do a two-year internship training in designated health facilities accredited by the HPCSA. Once they have completed their internship, they have to do a one year community service in facilities designated by the National Department of Health in consultation with Provincial Departments of Health. For community service, rural and township hospitals or marginalised areas are prioritised.
- As of now all those graduates who were eligible for placement to do internship have been placed. Equally all those who finished internship and were eligible to start community service have been

placed. Once a doctor has finished community service, they are registered with the HPCSA in the category of Medical Officer Independent Practice, meaning they can work on their own without supervision including as a single private practitioner.

We appreciate the fact that there are many medical officers who are now registered for independent practice who prefer to stay in the public service. Due to the fact that unlike internship and community service which are a statutory requirement and are subject to placement by the Dept of Health, independent practitioners have a individual choice of where to go, we are unable to know how many wish to stay in the public service until when the numbers are collated by the medical associations and unions.

However, at the beginning of January, the SA Medical Association Trade Union submitted a list of 825 medical doctors that were deemed to be unemployed as was the case in January 2023. The department checked the list against the PERSAL system, and it was found that out of the 825 doctors on the list, 694 had just completed their community service on 31 December 2023. Most of them have applied for medical officer posts in the various provinces. The provinces advertise posts in line with the employment guidelines as issued by the Department of Public Service and Administration. However, they place adverts at varying times depending on several factors, especially budget availability.

Some doctors on the list still needed to complete through their community service obligations. It is no secret that the cost of employment is extremely high – up to 65% of annual budgets in some instances. This therefore leaves little for goods and services to make public health facilities provide holistic care uninterrupted.

Given the fiscus challenges the country is facing as alluded by the Minister of Finance, the Departmnt has had several bilateral engagements with National Treasury to find creative ways to shield the healthcare service and the frontline workforce. Another challenge came with the 7.5% salary adjustment agreement at the Public Service Bargaining Council, which was not budgeted for, and meant that as Health, we must fund this general salary adjustment from within the available budgets. Minister of Finance in the MTBPS provided a 65% relief from the salary adjustment.

It is important for me to indicate that whilst the phenomenon of rising numbers of unemployed graduates is being experienced across many sectors, in the public health sector, the employment of health professionals has been on steady increase. The trend over the past five years shows an annual increase in the employment of medical doctors from 2018 Medical Interns appointed have been as 1472 (2018) 1879 (2019), 2315 (2020),2271 (2021) 2155 (2022), 2365 (2023) and 2210 (2024), and Community Service 1340 2020, 1541 (2021), 2063 (2022), 1965 (2023) and 2101 (2024) These increases over these years have happened despite the funding constraints.

I would be the first to concede that these numbers are inadequate when considering the vast health needs. The situation of need is no different for other health professions like nursing, physiotherapists, oral health hygienists, speech therapists and audiologists, and others.

In relation to the existing unemployment challenge raised by the medical doctors, the Provincial Departments of Health continue actively to engage their Provincial Treasuries to find ways of addressing the unemployment of health professionals, including medical doctors. Since October 2023 to date 564 medical officers' posts were filled, 239 posts are currently advertised in public media outlets and 375 will be advertised in the next six months.

It is important that I emphasise that doctors would need to apply like any other person wishing to join the public service. In addition, we are looking at a review of the current dispensation for employment of doctors especially medical officers and specialists. The intention is to check if there are areas where existing monies can be reassigned to enable the employment of more health professionals in the public health facilities. An increase in the number of those employed will benefit even those already in employment by reducing their workloads. These are just some of the efforts we are initiating whilst we continue to appeal to Minister of Finance to assist with better budget allocations.

Update on Cholera disease

On other unrelated matter, the country has recorded 46 suspected cholera cases and five laboratory-confirmed cases between 1st of January and 1st of February 2024, three of these cases (27 years-old man, 38 years-old woman and a 43 years-old) were imported from the neighbouring country of Zimbabwe which is currently battling the outbreak of this diarrheal disease.

The other two (11 years-old and 13 years-old) are siblings with no travel history to cholera outbreak areas, which suggests that the risk of contact

with a known cholera case. Four of these cases were detected in Limpopo hospitals (Musina and Helene Frans Hospital), and the other one was confirmed in Helen Joseph hospital in Gauteng.

The 3rd and 4th cases are from Blouberg Local Municipality in Limpopo are epidemiologically linked, and a cluster of 24 diarrhoeal disease cases was also identified during outbreak response activities at a primary and high school in the same municipal area on the 31^{st of} January 2024. The test results are still pending.

The local outbreak response teams have been activated to strengthen the investigation to conduct active case finding and contact tracing, to determine the source of infection where there is no travel history, and to institute control measures to avert further local transmission. All public and private health facilities are urged to remain vigilant due to potential high risk of cholera transmission.

There is no need for public to panic. However, the Department calls for more vigilance amongst members of the community, exercise caution and maintain proper personal hygiene practices especially amongst children at home and at schools.

The country remains on high alert for possible surge in cases at community level.

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